Subnational Comparative Social Policy: A Review of the Literature on India

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NB. DRAFT WORKING PAPER

Comparative social policy at the sub-national level is probably one of the youngest arenas of research. While there has been some research in other federations, especially in Latin America not much attention has been paid to this issue in the case of India. Nevertheless, in terms of quantity there is a lot of literature on social policies given the activist role of the state and the continuing agenda of social development. This note attempts to lay out the existing state of research on social policy in general and comparative social policy in particular in the context of India.

Social policy here includes publicly funded programmes which provide goods and services. There are many ways of analysing social policy including a focus on specific activities, groups, level of government and nature of policy. In terms of activities it includes the provision of services such as housing, social security, health, food, education and employment. These policies may address or target specific groups such as women, the elderly, rural communities, Scheduled Castes, Scheduled Tribes and so on. Such policies can be pursued at different levels of government-i.e. central or state government. They can be distributive, redistributive or regulatory in nature or intent.

A review of literature on social policy analysis in India reveals that it is still in an elementary stage. Most works are rarely informed by a specific theoretical concern or analytical framework and are primarily of a descriptive type. The focus on existing research on comparing social policies at the subnational level in India also reveals that there is not so much on creation of social policy. Much of the work has focused on how states have implemented these policies and how they have performed. Given the absence of analytical frameworks, it is often difficult to draw conclusions regarding the differences and similarities between different states. No such thing as a “policy style” in a particular state or political regime has been identified in any study. At the same time, the cases as well as the comparisons often do less than they might to illuminate the broader aspects of the policy process itself.

Economists have been prominent in the area of social policy analysis in India. This is primarily because of the issue of data availability. The type of questions they have raised and the output of these studies are frequently based on the analysis of expenditure patterns. The data for this work is more readily available as compared to the data required by other social sciences. These studies usually focus on examining the impact of public policies or evaluating the scope of programmes. Mooij and Vos’s observation on the gaps in policy analysis in India with regard to issues of

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1 This is not intended to be an exhaustive list of available literature. If you are the author of a relevant study which is not currently included in the list, please do get in touch (kailashkk@gmail.com).
“why policies are formulated and designed in particular ways in the first place, and the political shaping of policies ‘on the ground’” continue to hold good in study of social policies in India.4

At the same time, there is substantial literature that examines particular policies from different perspectives including evaluating their aims, goals and effectiveness. The following issues have most often been given attention in policy studies in India: a) analysis of overall outcomes in particular policy area b) evaluation of the impact of policy on specific groups c) evaluation of programmes for particular core issues - education, health, poverty and so on. These evaluative studies have also identified key limitations of specific programmes and also suggested improvements. A similar logic has also been used to examine the working of particular policies at the state level.

It follows from the nature of issues addressed that a large number of these studies do not necessarily explain but are more focussed on prescription i.e. stating how things should or ought to be done. Some of them are influenced by the technical logic of costs-benefit analysis more suited to the questions raised in public administration and are addressed primarily to policy makers. There is very little in these studies on why particular policies were chosen/made and why they were implemented in a particular way. The main limitation of these studies that should concern us is that this sort of analysis does not get us to understand the politics of policies.

What we have therefore is a lot of studies, which have used different approaches and methods and yet we do not have anything like an Esping-Andersen type of comparative study.5 It is also difficult to delineate the emergence of a more cumulative understanding. Studies of social policy in the Indian context ask different questions, use varied methods and frequently do not position themselves with regard to broader literatures.

The federal dimension has clearly not been exploited in social policy analysis in India. Despite the multi-level governmental framework and the fact that many of the social policy programmes are centrally sponsored, there has been very little attention as to how the centre or national policy makers influence states to take up particular policy agendas. In the case of other federations it has been found that national policy makers directed states using various mechanisms including financial incentives, grants and even punishments and sanctions among others. Similarly, horizontal influences and policy innovation diffusion across states has also not been well examined.

This note focuses primarily on social policies in the 1990s. The focus of our project on Comparative State Politics and Public Policy is to capture the activities of state welfare in the era of liberalisation. While earlier social welfare programmes took place in the context of an expanding state, these social policy programmes are formulated and implemented in an era when the state is partially (but only partially) withdrawing. In this context, there has been a move in

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some areas from universal programmes to new experiments of targeting and directing welfare to specific groups.

The following annotated bibliography clusters existing literature according to approach and focus. It mostly reproduces the author(s)’ own abstract for each reference. The first cluster examines studies that either focus on a particular policy or offer a commentary on social-policy measures in a particular area of concern such as employment, health or education.
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Cluster I: Case Studies/Policy Evaluation of Particular Sectors (all-India)


It is not possible to realise the massive potential of the National, Rural Employment Guarantee Act if we deploy the same ossified structure of implementation that has deeply institutionalised corruption, inefficiency and non-accountability into the very fabric of Indian democracy. On the other hand, if the reforms suggested in this paper are put into place, NREGA holds out the prospect of transforming the livelihoods of the poorest and heralding a revolution in rural governance in India.


The total expenditure on central schemes for the poor and on the major subsidies exceeds the states' share of central taxes. These schemes are chronic bad performers due to a culture of immunity in public administration and weakened local governments. Arguing that the poor should be trusted to use these resources better than the state, a radical redirection with substantial direct transfers to individuals and complementary decentralisation to local governments is proposed. The benefits, risks and associated reinforcement or institutions and accountability are outlined.


The Rashtriya Swasthya Bima Yojana (RSBY) scheme is a health insurance model currently being implemented by the Indian government. It is a model, however, still in nascent state, subject to tensions and value testing. Very few studies have hitherto assessed the scheme’s implementation and whether the stated objectives of the government initiative are being fulfilled. This short study undertaken in the Durg district of Chhattisgarh reveals that RSBY fails to cover the population living Below the Poverty Line (BPL). Likewise there is discrepancy in the consistency of information and knowledge regarding the scheme among the beneficiaries who are themselves continuing to incur high out-of-pocket expenses.

There are thus severe issues in transparency and accountability within the RSBY scheme. Unless the public health delivery system is strengthened and the private sector regulated and indeed monitored, the scheme will not yield the desired results, and the cost of healthcare will further escalate for the poor. In the absence of regulated health services there needs to be more debate, and indeed greater research, on the implementation and the design of RSBY.

Ever since its inception in November 2000, the Sarva Shiksha Abhiyan has made impressive strides in seeking to ensure universal elementary education. However, its progress has varied across states and the objective of ensuring gender parity remains elusive, especially for the more backward states. Monitoring of SSA funds can be assured by setting disaggregated targets for every state, wherein programmes and timelines could be designed according to the needs of individual states.


It is widely accepted that the right to food forms one of the basic economic and social rights essential to achieve 'economic democracy' in India. This right is nowhere near realisation in India, where undernutrition levels are among the lowest in the world. The right to food moreover, does not easily translate into well-defined entitlements and responsibilities. Though serious difficulties are involved in making the right to food fully justiciable, new interventions are possible in at least three ways - through legal action, through democratic practice and through changing public perceptions. More importantly, the right to food needs to be linked to other economic and social rights relating to education, work, health and information, which together hold the promise of radical change in public priorities and democratic politics.


The National Rural Employment Guarantee Act is into its second year of implementation. It is easy to criticise the Act and its execution. However, even as we recognise its shortcomings and the scope for correction, we must consider what it has achieved so far and the promise it continues to offer.


Even as we celebrate 60 years of Indian democracy, with millions of our people hungry, cynical and insecure, and living under the barrel of the gun (of the State or the extremists), we need to worry about the reach and quality of our political process. The National Rural Employment Guarantee Act has the potential to provide a "big push" in India's regions of distress. For NREGA to be able to realise its potential, the role of civil society organisations is critical. But this calls for a new self-critical politics of fortitude, balance and restraint.

This paper provides a critical appraisal of the major poverty alleviation programmes like the Integrated Rural Development Programme (IRDP), the National Rural Employment Programme (NREP) and the Rural Landless Employment Guarantee Programme (RLEG). In order to make these programmes more effective, the author recommends linking them with a programme of land reforms, planning and implementation at the grassroots level and a major role for organisations of the rural poor.


As we move to the next century we face the cruel paradox that despite growing prosperity and spectacular technological advances, the task of ensuring health and well-being for the citizens of the world is becoming even more difficult and expensive and complicated than ever before. To be sure, we have conquered some old 'enemies' to public health, but new challenges-some even more formidable and imponderable than earlier ones-have cropped up. These will demand even greater national vigilance and increased international co-operation for their solution.


The draft report of the Comptroller and Auditor General on the working of the National Rural Employment Guarantee Act was used by many sections of the media to strongly criticise this employment programme. Much of the coverage sensationalised the findings of the report. What did the CAG actually say? Where did the CAG fall short in its investigations? And what can we learn from the CAG to improve the functioning of the NREGA?


The payment of wages into bank accounts for work carried out under the National Rural Employment Guarantee Act has been suggested as a way to prevent embezzlement of funds. The practice has already begun in a few districts. Is this a foolproof system to control corruption? The early experience from a few blocks in Orissa suggests that this process is not free from its own problems.


Since our country is anticipating a further breakthrough in fertility and mortality front, the proportion of elderly is likely to go up in the coming years and so will the problems related to it. We need to evolve programmes to deal with these emerging 'grey' problems.
Vol. 36, No. 8 (Feb. 24 - Mar. 2, 2001), pp. 613-617

The National Social Assistance Scheme and its components where they have been effectively introduced has gone a long way towards improving the lot of the poor elderly. However, there are several problems in the implementation of the schemes such as accurate identification of the beneficiaries and therefore a correct assessment of the financial burden on the governments. The scheme needs some urgent revamp.


In the context of the state's withdrawal from the social sector, this paper makes a case for the increasing need to ensure social security for older people, especially women. It touches upon some problems in implementing social security legislation, locating elderly women - including widows - the deserted and the destitute women as a vulnerable group. The gender implications of the various policies and schemes of assistance for older people, including the National Policy for Older Persons, are also discussed. The manner of implementation of the schemes is situated in the overall context of the vulnerability of older women in India.


Much of the recent growth of India's elderly population is expected to comprise persons with adverse life course experiences, clouded by excessive socio-economic backwardness. Such an ageing process suggests the need for a multi-pillared income security system. The analysis of this paper that focuses on three major income security plans for the aged reveals that the government is instead working to dilute much of its responsibilities. This study strongly argues for (i) strengthening of the social assistance programme for older persons and modification of the ceiling formula used for capping the size of its beneficiaries; (ii) providing a guarantee against diminution of investments in the reformed pension policy, and (iii) devising long-term old age savings instruments with higher terminal yield.


The pumping of extra funds into the backward areas under the Jawahar Rojgar Yojana provides a new opportunity for tackling unemployment and underemployment in these areas, provided supporting systems are shored up.

The efficiency of any information system depends on a correct assessment of data requirements based on an appraisal of the demands made by individual users and on the methodologies adopted in collection of data. Health is a resultant of a multiplicity of factors and these put great demands on the information system that could be visualised for the health sector. It not only implies a wide base of information with inter-sectoral linkages, but a close monitoring of the progress made in the improvement of the health status. The paper outlines a framework of an information system for assessing and monitoring the level of health.


If the poor have no money to purchase foodgrains, the public distribution system (PDS) loses all relevance for them. It would serve the poor far better if the huge sums spent on the government's procurement operations and the PDS were devoted to water conservation programmes and pension schemes.


Public distribution of foodgrains in India has resulted in some redistribution of income. Since the small farmers were left out from the levy obligations, whatever this category's marketed surplus, it could get the benefit of a higher open market price. Because of the subsidy element, the food deficit areas have received an indirect income transfer from the Central government. Further, consumers depending on open market purchases (very often the quality conscious higher income groups), have contributed partially towards the ration income of consumers who purchase foodgrains from the fair price shops. While in the long run a lasting solution for poverty is to provide increased employment and income opportunities for the poor, in the short run a consumer-oriented food subsidy system could be a viable approach for increasing the nutritional status of the poor. Even within this framework, effective management of purchases, sales, imports and stocks could reduce the government subsidy.


A number of official and non-official bodies have been working on issues relating to security of unorganised workers. The NCEUS has, however, gone ahead with making its recommendations without waiting for these processes to be completed. The commission has also separated the legislation for conditions of work from social security, when the two should have been dealt with in an integrated manner. One is surprised as well at the timidity even in the matter of providing social security.

For the first time in India a comprehensive social security scheme for the unorganised sector has been proposed. The proposal by the National Commission for Enterprises in the Unorganised Sector seeks to develop a healthy workforce that in turn will have a positive impact on national income and economic growth. The scheme aims to cover sickness, maternity, old age and death and proposes a participatory system with some contributions from the workers.


Policy-makers need to recognise the primacy of good health as an essential component of human development in India. It is also important to view health more holistically, and understand how social, cultural, political, economic and other factors interact to constrain people's access and contribute to human deprivation. The inter-connections are often complex and policy interventions need to be more people-focused, broad-based and multi-pronged.

23. Santosh Mehrotra NREG Two Years on: Where Do We Go from Here? Economic and Political Weekly Vol. 43, No. 31 (Aug. 2-8, 2008), pp. 27-35

This article examines the performance of the National Rural Employment Guarantee programme since its launch in mid-2005. It first provides a summary of progress in certain areas and then highlights specific weaknesses. Finally, it describes the challenges that lie ahead and suggests how these can be overcome.


Household nutrition security in the 21st century must come to mean a lot more than avoidance of starvation. Foods for families must be adequate; that is, not just meet the bare energy needs for survival, but provide all the nutrients essential for normal development. The changing nutrition scene is influenced directly and indirectly by several interrelated factors. There is a need to evolve nutritional-orientation of food production programmes; examine and reverse the mistakes of the past and use new knowledge and technologies to evolve new strategies for combating under-nutrition.


Has budget 2008-09 been able to fulfil its commitments to the National Common Minimum Programme? This article analyses the allocations made to the social sector, investigating spending on education, health, employment generation and the Bharat Nirman programme.

The National Rural Employment Guarantee Scheme has so far posed no problem for the budget. Its allocation is only marginally higher than what was spent in the past by the government on various rural employment programmes. It is a demand-driven scheme and it has fallen far short of meeting demand in some states. The fund utilisation ratio also varies widely across states.


In the context of the state's withdrawal from the social sector, this paper makes a case for the increasing need to ensure social security for older people, especially women. It touches upon some problems in implementing social security legislation, locating elderly women - including widows - the deserted and the destitute women as a vulnerable group. The gender implications of the various policies and schemes of assistance for older people, including the National Policy for Older Persons, are also discussed. The manner of implementation of the schemes is situated in the overall context of the vulnerability of older women in India.


The experience of the last 15 years has been that GDP growth has not been accompanied by a commensurate increase in employment. This article examines current policies and programmes for employment generation, along with an analysis of the trends and challenges. It also discusses direct employment programmes, including social security for unorganised workers.


This article looks at the National Employment Guarantee Act and related programmes from the perspective of responding to sudden (and rapid) onset of events like economic crises and natural and man-made disasters. It advocates using the NREGA as part of the rapid response to crises and disasters. Particular attention is focused on the aggregate impact of localised disasters/crises, which may be large and need to be addressed in disaster management strategies in India.
It is evident that whilst globalisation has contributed to increased social and economic polarisation in India, it has not completely constrained the autonomy of the state to adopt counter-measures like the NREGS to deal with abject poverty and growing income inequality. Under the country’s democratic system of governance, pressures from various sources, including those denied the benefits of economic liberalisation and globalisation, ensured that the government responded with plans to directly address the problems of rural poverty and unemployment. To that extent, the forces of globalisation acting on India have not undermined its democratic traditions. The UPA government’s response, it could be argued, attests to the strength of the country’s democratic institutions.

Our earlier wage employment programmes failed due to the common problems of ineffective targeting, leakages and poor quality asset creation, etc. Hence, while developing rules and guidelines for implementation of the National Rural Employment Guarantee Act 2005, more attention should be paid to the lessons we have learnt from past experiences. Because this act has the potential not only to strengthen social security in India, but also to strengthen community mobilisation, ensure better responsiveness of local governments to community needs and priorities, and most of all enhance governance outcomes. This article is an attempt to articulate some key design principles that can strengthen the effectiveness of the new act.

It is feasible to have an employment guarantee programme covering all rural households and offering work to all persons, on all the required days, in all districts right from the beginning at a cost lower than the one being projected for a restricted programme. A universal programme will be closer to the spirit of a guarantee and reduce the bureaucratic problems in administering a restricted programme.

The proposed employment guarantee programme will generate work for the poorest; it is also an opportunity to revive public investment in agriculture, tackle the prevailing environmental crisis that is gripping rural India and galvanise the panchayat raj institutions. The proposed legislation should not put in place a weak and diluted jobs programme.
Instead of different ministries taking initiatives to provide health insurance coverage for the areas or populations that are under their jurisdiction, it is important for planners to understand that parallel schemes run on public money can only introduce inefficiencies and wastage into the system. It is necessary to plan the spread of health insurance on a national scale and to set up an apex body that would be in charge of implementing health insurance in the country.

The author discusses the extent to which appeals to personalities and identities have given way to issues of development in campaigns in Indian electoral democracy. She reviews recent literature on the topic and includes results from her research to suggest that cultural nationalist appeals by politicians coincide in some instances with promises of better governance for development. Also, a focus on development by political elites does not exclude a continuing role for relations of patronage in rural localities.

This paper focuses on the interactions of power as analysed through the formulation story of a recently enacted social policy, the National Rural Employment Guarantee Act (NREGA), India. It explains the various drivers that led to the passing of this policy, with a view to analysing the extent and nature of power as was played out in the making of this policy. The paper sets out the way in which social policy formulation can be understood to be arising from interactions and linkages between individual actors, who together make up policy coalitions and networks. These interactions are described through a four-fold classification of processes (parliamentary, executive, party political and civil society) into which the actions and contributions of these actors feed, giving rise to an iterative, messy and complex reality. Power in the policy formulation network is shown as multi-sited as well as relational. The paper concludes with an endorsement for reconfiguring the geographies of power in the form of a kaleidoscope of actors and events, within and through which power flows and is exercised.
price of food. On the demand side, it is not just the level of income but also its distribution that matters. Cast in a complementary role, policies/programmes designed to enhance the incomes of the poorest and the public distribution of food (PDS) are thus vital for enhancing access to food. Although PDS has had a price stabilising role, it continues to be inequitable. Short of drastic reforms, its cost-effectiveness is unlikely to improve.

38. Raghav Gaiha and Vani Kulkarni Policy reforms, institutions and the poor in rural India Contemporary South Asia Volume 8, Issue 1, 1999 7-28

Structural adjustment in India was a response to the macro-economic crisis of early 1991. Anticipating unfavourable short-term effects of the policy reforms on the poor, outlays on anti-poverty programmes were stepped up, and in 1992, the landmark 73rd Constitutional (Amendment) Act restructured local government councils, or panchayats. Whether this restructuring made any difference through the better design and implementation of anti-poverty programmes is the focus of the present study.


The mid-day meal scheme, which has overcome many of the teething problems that besieged it since its launch in 1995, has become an almost universal scheme, feeding primary school children all over the country. This review of the MDMS traces its development and examines its achievements to date. The review addresses the challenges still faced by the scheme and suggests possible remedies.

40. Jean Drèze, Aparajita Goyal EPW, Nov 1, 2003 4673-4683

Spurred by a recent Supreme Court order, many Indian states have introduced cooked mid-day meals in primary schools. This article reports the findings of a recent survey which suggests that this initiative could have a major impact on child nutrition, school attendance and social equity. However, quality issues need urgent attention if mid-day meal programmes are to realise their full potential. Universal and nutritious mid-day meals would be a significant step towards the realisation of the right to food.


42. Reetika Khera Right to Food Act: Beyond Cheap Promises July 18, 2009 vol xliv no 29 EPW Economic and Political Weekly 40-44

This article attempts to flag some of the issues that are likely to come up in the debate on the Right to Food Act in the coming months. It is important to ensure that this debate focuses on the...
substantive issues. In the run-up to the enactment of the National Rural Employment Guarantee Act, the debate was somewhat derailed by a loud anti-NREGA lobby, particularly vocal in the business press. Hopefully, the debate on the RTF Act will be more productive. Politically, the main challenge is to ensure that the Act is not trivialised, by reducing it to the electoral promise of “25 kgs at Rs 3/kg for BPL households”. The ultimate shape of the RTF Act will depend on whether the government merely seeks to gain “political capital” from it, or whether it is guided by its responsibility to the people of this country.


An important feature of the new framework being proposed for rural primary education is the village-level education committee. While such measures seeking to involve local structures, organisations and the people in the education process are welcome, there is a need to understand the ground realities which may influence the viability of such initiatives.


Inclusive growth is regarded as the new mantra of development. This paper critically looks at the approach to the development of education outlined in the Approach to the Eleventh Five-Year Plan, some of the new and not-so-new strategies proposed, a few controversial proposals, the assumptions that underlie them, the issues conveniently ignored and highlights the weaknesses and the continuation of the big policy vacuum.


State intervention in the foodgrain market has to be considered in the light of the overall objectives of structural adjustment and economic liberalisation as also the impressive trends in cereal production. Public distribution of foodgrain should be singly directed only for securing food to the poor at low prices. For this purpose targeting of PDS should be area specific and group specific. Allocation for welfare schemes such as the mid-day meals scheme and for payment of wages in kind to labourers in rural employment schemes should continue. An increased role for the private sector in the foodgrain market will provide the right signals to farmers in deciding their cropping patterns in line with the emerging demand for different agricultural commodities. As for relative foodgrain price stability, it is more sustainable and less costly to seek to achieve it through expansion of irrigation and technology, especially to the less developed regions. PDS is not the instrument for this purpose.
Ever since its inception in November 2000, the Sarva Shiksha Abhiyan has made impressive strides in seeking to ensure universal elementary education. However, its progress has varied across states and the objective of ensuring gender parity remains elusive, especially for the more backward states. Monitoring of SSA funds can be assured by setting disaggregated targets for every state, wherein programmes and timelines could be designed according to the needs of individual states.

The announcement of the National Rural Health Mission and the commitment in the recent budget to increase allocations for health are necessary steps in the right direction to correct India's shockingly poor health record. As national and state level strategies unfold over the coming months, a vigorous and informed public discussion is needed to create a national consensus for dramatically increasing investments in health with concurrent improvements in accountability and management of the healthcare system. Equally important is induction of a cadre of village-based health activists, all women, who will link communities to an upgraded public health system. These women should emerge as the missionaries dedicated to advancing health in India. Money, medicines and medical facilities will be meaningless without these missionaries. Finally, flexibility, innovation, focus, inclusion and openness must become essential features of the functioning of the National Rural Health Mission in its endeavour to provide good quality healthcare for all.

It is well known that our planning and economic policies have failed to produce inclusive growth to enable substantial parts of the country to get the benefits of development. This article suggests a set of innovative policies, specifically for accelerating growth in the backward states.
of planning, budgeting and technical supervision, should involve local governments and be responsive to the needs of the poorest. It may be difficult to replicate the same political commitment in the India of 2005. Yet, the case for an employment guarantee remains strong because it is unacceptable that despite the country approaching middle-income status there are 250-300 million people desperate for work and better livelihood.


The failure of decentralisation, the lack of inter-sectoral coordination, and the undermining of traditional health support are the reasons why the National Rural Health Mission has not delivered what it had set out to achieve.


The National Rural Health Mission (NRHM) is based on questionable premises. The union ministry of health and family welfare and its advisors doggedly seem to refuse to learn from the many experiences of the past, both from sincere efforts to develop endogenous mechanisms and from the imposition of ill-conceived, badly formulated, techno-centric vertical programmes.

52. Sapna Desai Keeping the ‘Health’ in Health Insurance Economic and Political Weekly September 19, 2009 vol xliv no 38

The Rashtriya Swasthya Bima Yojna and National Rural Health Mission have the potential to transform the health and financial security of poor households. The experience of VimoSEWA indicates that health insurance must be firmly linked to an effective public health system. A high percentage of claims for preventable illness, unnecessary expenditure on medicines, increasing hysterectomies and inequitable claims patterns are four trends that are likely to be seen in the implementation of RSBY. To ensure that health insurance plays its intended role, appropriate investment in prevention, particularly in water and sanitation, as also, community involvement and a strengthened public sector are essential.


An appropriate scheme of health insurance must respond to clients' priorities, yet cover a finite and affordable benefit package. A variety of methods have been developed so far to engage the public in prioritising services. This paper deals with a plan that allows variably educated populations who are inexperienced with health insurance to pick health benefits. The decision exercise reported here enhances popular understanding (1) that even within a limited premium
there is a choice of different package compositions; and (2) that the level of the premium
determines the expectation of coverage by health insurance.

54. K. Srinivasan, Chander Shekhar and P. Arokiasamy Reviewing Reproductive and Child
Health Programmes in India, Economic and Political Weekly Vol. 42, No. 27/28 (Jul.
14-20, 2007), pp. 2931-2935+2937-2939

Since the early 1990s, "decentralisation" and "integration" seem to be the buzz words underlying
the implementation of various social development programmes in India, especially the
reproductive and child health programme. Analysis reveals that the state-level effects of various
RCH services are significantly higher than those at the district level. The pace of annual progress
after 1998 in many RCH indicators is slower than before and a few indicators (e.g., child-
immunisation) have worsened, despite the expenditure on the programme being doubled.
Decentralisation and integration of basic healthcare services may not be effective unless
monitored centrally and backed by full time health (medical/paramedical) professionals at the
delivery level.

55. David E. Bloom, Ajay Mahal, Larry Rosenberg, Jaypee Sevilla Economic security
arrangements in the context of population ageing in India International Social Security
Review Special Issue: Social security and the challenge of demographic change Volume
63, Issue 3-4, pages 59–89, July 2010

The rapid ageing of India's population, in conjunction with migration out of rural areas and the
continued concentration of the working population in the informal sector, has highlighted the
need for better economic security arrangements for the elderly. Traditional family ties that have
been key to ensuring a modicum of such security are beginning to fray, and increased longevity
is making care of the elderly more expensive. As a result, the elderly are at increased risk of
being poor or falling into poverty. In parallel with its efforts to address this issue, the
Government of India and some of the Indian states have initiated an array of programmes for
providing some level of access to health care or health insurance to the great majority of Indians
who lack sufficient access. Formal-sector workers have greater social security than those in the
informal sector, but they only represent a small share of the workforce. Women are particularly
vulnerable to economic insecurity. India's experience offers some lessons for other countries.
Although there is space for private initiatives in the social security arena, it is clear that most
such efforts will need to be tax-financed. The role that private providers can play is substantial,
even when most funding comes from public sources, but such activity will face greater
challenges as more individuals seek benefits. India has also shown that implementation can often
be carried out well by states using central government funds, with a set of advantages and
disadvantages that such decentralization brings. Finally, India's experience with implementation
can offer guidance on issues such as targeting, the use of information technology in social
security systems, and human resource management.

The experiment in restructuring the healthcare sector through the Aarogyasri community health insurance scheme in Andhra Pradesh has received wide attention across the country, prompting several states governments to replicate this “innovative” model, especially because it supposedly generates rich electoral dividends. However, after a critical scrutiny of this neo-liberal model of healthcare delivery, this paper concludes that the scheme is only the construction of a new system that supplants the severely underfunded state healthcare system. It is also a classic example of promoting the interests of the corporate health industry through tertiary hospitals in the public and private sectors.


Despite India’s impressive economic performance after the introduction of economic reforms in the 1990s, progress in advancing the health status of Indians has been slow and uneven. Large inequities in health and access to health services continue to persist and have even widened across states, between rural and urban areas, and within communities. Three forms of inequities have dominated India’s health sector. Historical inequities that have their roots in the policies and practices of British colonial India, many of which continued to be pursued well after independence; socio-economic inequities manifest in caste, class and gender differentials; and inequities in the availability, utilisation and affordability of health services. Of these, critical to ensuring health for all in the immediate future will be the effectiveness with which India addresses inequities in provisioning of health services and assurance of quality care.


Most developing countries have pursued formal health care system strategies which give primacy to government roles in financing and delivering health services. Despite decades of plans and investments based on this norm, the actual health care systems in many countries are quite different than what was intended or desired. Yet policies and plans continue to emphasize a statist approach. This paper argues that, given the current situation in many countries, this long-term strategy to develop a “national health service”-type model of health care provision is misguided and wasteful. The current and potential role of non-government health care providers in achieving high levels of access to basic services is highlighted, using data from an extensive analysis of health care financing and delivery in India. Major problems related to quality of care and the financial burden of unregulated fee-for-service medicine are also documented. India and many other countries need to rethink their health care system development strategies to acknowledge and build upon the opportunities offered by the already extensive non-government health care sector, rather than to view non-government services simply as a constraint to successful public programs. The paper provides specific recommendations as to how this might be done.
59. D Narayana Review of the Rashtriya Swasthya Bima Yojana *Economic and Political Weekly* EPW July 17, 2010 vol xlv no 29

The enrolment of the poor in the flagship health insurance scheme, the Rashtriya Swasthya Bima Yojana in its third year of operation does not show any sign of it covering all the poor by 2012. This article estimates the proportion of the eligible below the poverty line families enrolled for the scheme and the fraction of those hospitalised who are covered.


This paper provides a historical perspective on the political culture of public health in India. It examines the genesis of the state's commitment to provide for the health of the people, but argues that in that original commitment lay numerous contradictions and fractures that help to explain the state's relative ineffectiveness in the field of public health. It argues that the nationalist movement's initial commitment to the state provision of welfare arose from a complex combination of motives - a concern with democracy and equity as well as concerns about the "quality" and "quantity" of population. The depth of ambition for public health was unmatched by infrastructure and resources; as a result, the state relied heavily on narrowly targeted, technocentric programmes assisted by foreign aid. The paper also examines the malaria eradication programme as a case study which reveals the limitations and weaknesses of that approach; the ultimate failure of malaria eradication left a huge dent in the state's commitment to public health.
Cluster II

Case studies: One Unit

The studies listed below focus on a particular policy programme in a particular unit, which could be a region, state, district or village.


Despite an accentuation of consumption inequality in recent years in Kerala, development in the social sector has been more or less equitable across districts. Kerala’s achievements in human development have been primarily due to the active intervention of the government in the social sector. The high priority to social sector spending has posed serious challenges to the state in terms of upkeep and also in tackling second generation problems of its model of development. It has also contributed to a large fiscal imbalance. Decentralisation is a step that was introduced in the mid-1990s to sustain the path of Kerala’s development through local-level planning incorporating local needs and preferences.


Various non-political outfits were involved in the introduction of Maharashtra's Employment Guarantee Scheme. Once introduced, these organisations understood the potentialities of EGS as a means to address various issues relating to the marginalised sections of society, including dalits, women, tribals and the landless, among others. This paper analyses how these groups engaged with the state in defining the scope and reach of EGS and how over time this definition of EGS was enlarged by these same groups to ensure the empowerment of the poor.

The National Health Insurance Scheme – Rashtriya Swasthya Bima Yojana – aims to improve poor people’s access to quality healthcare. This paper looks at the implementation of the scheme in Karnataka, drawing on a large survey of eligible households and interviews with empanelled hospitals in the state. Six months after initiation in early 2010, an impressive 85% of eligible households in the sample were aware of the scheme, and 68% had been enrolled. However, the scheme was hardly operational and utilisation was virtually zero. A large proportion of beneficiaries were yet to receive their cards, and many did not know how and where to obtain treatment under the scheme. Moreover, hospitals were not ready to treat RSBY patients. Surveyed hospitals complained of a lack of training and delays in the reimbursement of their expenses. Many were refusing to treat patients until the issues were resolved, and others were asking cardholders to pay cash. As is typical for the implementation of a government scheme, many of the problems can be related to a misalignment of incentives.

6. Jyotsna Jain and Mihir Shah Antyodaya Anna Yojana and Mid-Day Meals in MP


This first-ever report, based on a survey in Madhya Pradesh, on the functioning of the Antyodaya Anna Yojana reveals that the scheme has made a significant contribution to the survival of families on the verge of destitution. However, with the poor outreach of the public distribution system in the tribal areas and the insufficient coverage of the AAY within each village, the yojana fails to make the difference it potentially can to the food security of the poorest of the poor. This article also evaluates the "ruchikar" (relishing) mid-day meal programme of the MP government as a result of which enrolment in schools has dramatically increased despite the poor meal quality and inadequate infrastructure. But the absence of a separate administration for meal management has placed an enormous burden on teachers, which poses a danger of further compromising the already very poor quality of primary education.

7. Anuradha Thakur Care of Senior Citizens and the Role of the State

Economic and Political Weekly
Vol. 43, No. 17 (Apr. 26 - May 2, 2008), pp. 11-13

An analysis of the implementation of the Himachal Pradesh Maintenance of Parents and Dependants Act, 2001 on which is based the centre's Maintenance and Welfare of Parents and Senior Citizens Act, 2007 shows that the complexity of care for the aged needs a mix of fiscal measures for social security and healthcare, along with appropriate legislation.


Economic and Political Weekly EPW SEPTEMBER 29, 2012 vol xlvii no 39

A study conducted of the Rashtriya Swasthya Bima Yojana in 2009-10 in Amaravati district of Maharashtra shows that there are critical concerns in the very design and implementation of the
Comparative State Politics and Public Policy (CSPPP) Working Paper 2, February 2013 (King’s India Institute, King’s College London and Lokniti, Centre for Study of Developing Societies)

programme that may make it challenging for RSBY to reach its target of below the poverty line population. Thus, the poor in the more remote blocks and villages may be ignored for easier to reach potential enrollees as the premia paid for all are the same. Empanelled hospitals tend to be placed near district headquarters, raising costs of access for the poor beyond that covered in the programme and packages do not recognise treatment and care uncertainties that incentivise hospitals to treat simpler and less complicated diseases. Additionally, a lack of adequate planning for change in insurance providers creates breaks in service that are avoidable. In spite of these shortcomings users rate this programme highly and this underlies the importance of providing access to a functional healthcare system to the poor.


Maharashtra's Employment Guarantee Scheme has been a subject of much research. Unfortunately, much of the deliberations and contestations for and against the introduction of this scheme remained untouched. This paper attempts to examine how at disparate time frames and contexts the elite managed to maintain their support base and reinforce its legitimacy by supporting a poverty alleviation programme - the EGS.

10. Jishnu Das, Jessica Leino Evaluating the RSBY: Lessons from an Experimental Information Campaign August 6, 2011 Economic and Political Weekly vol xlvi no 32 85-93

Launched in 2008, the Rashtriya Swasthya Bima Yojana provides financial protection from health shocks for poor households. This paper discusses findings from an experimental information and education campaign and household survey carried out in the first year of the programme in Delhi. First, the iec had no impact on enrolment, but households who were part of the household survey sample and therefore received information closer to the enrolment period were 60% more likely to enrol. Second, there is little evidence that the insurance company selectively enrolled healthier households. Instead, hospital claims were lower for households who received the iec and for households who received both the survey and the iec, suggesting that the marginal household enrolled was in fact healthier. Implications for the programme and its evaluation are discussed in the light of these findings


Popular participation and mass involvement which elevated the Total Literacy Programme in Kerala to the level of a mass social movement in its first phase may be undermined because of the politically motivated actions of the Congress government in the state. THE Total Literacy Programme (TLP) in Ernakulam district and its extension to the rest of the districts in Kerala in February 1990 ushered in a new era in the struggle against mass illiteracy in the country. The model of literacy campaign experimented in Kerala has now become widely accepted as the most effective way of achieving mass literacy. It is in the light of Kerala's experience that states like
Goa, Pondicherry and selected districts in West Bengal, Bihar, Uttar Pradesh, Madhya Pradesh, Rajasthan and Tamil Nadu have launched their total literacy programmes. But, while the message of Kerala

12. Biplab Dasgupta Institutional Reforms and Poverty Alleviation in West Bengal 

West Bengal, a very poor and very rural state, has vastly improved its relative position on a broad range of economic, social and rural indicators. Land reforms, the development of panchayats and implementation of poverty alleviation programmes through them, and political mobilisation of the rural poor, are the distinguishing features of development since 1977 which account for this progress. However, the state continues to be backward on certain fronts such as co-operatives and PDS development.

13. S. Mahendra Dev Alleviating Poverty: Maharashtra Employment Guarantee Scheme

In spite of the limitations in its design and implementation the EGS has made positive impact on the levels of living of the rural poor in Maharashtra. However, the EGS alone cannot remove the poverty in rural areas of the state. And any replication of the scheme in other states should involve prior establishment of decentralised district planning and implementing body, and assurance of adequate funds through additional taxation.

14. K. P. Kannan Declining Incidence of Rural Poverty in Kerala 

In Kerala, the incidence of rural poverty has declined in the 1980s in spite of the slow rate of growth of the economy. The explanation for this is that various state intervention programmes, especially the public distribution system, have had a positive impact on poverty. The experience of Kerala shows that, with or without growth, it is possible to alleviate poverty through well designed and implemented programmes, and that social protection for the most vulnerable groups should be a necessary component of development policy.

15. S. Gulati and Leela Gulati Social Security for Widows: Experience in Kerala

In practically all the states there have been in existence schemes addressing the destitute old and widows since the early 1960s. During the 1980s several states extended social security arrangements to physically and mentally handicapped persons and to agricultural workers.
Kerala is one of these states. This paper discusses these schemes in Kerala from the standpoint of the social security they provide to widows in the state.

16. Leela Gulati Agricultural Workers' Pension in Kerala: An Experiment in Social Assistance
   *Economic and Political Weekly* Vol. 25, No. 6 (Feb. 10, 1990), pp. 339-343

Against the background of the demographic trend in Kerala and its impact on the age structure of the state's population, this paper examines the principal features of the pension scheme for agricultural workers in Kerala, the first Indian state to experiment with such a scheme. The author discusses, among other things, the impact of the scheme on an agricultural worker household and the future of the scheme in the light of the likely changes in the population's age structure.

17. Shantanu Nagpal Food Security in Hindukush Himalaya
   *Economic and Political Weekly* Vol. 34, No. 38 (Sep. 18-24, 1999), pp. 2717-2720

The people of the Hindukush Himalayas have given up their traditional environment-friendly agricultural practices in favour of market-oriented cash crops. As a result, while population has grown, agricultural productivity has not increased and resources have been degraded. Food availability has declined. A way out is to commercially use the biophysical features unique to the areas while protecting the environment.

18. Gordon R. Hopper Changing Food Production and Quality of Diet in India, 1947-98
   *Population and Development Review* Vol. 25, No. 3 (Sep., 1999), pp. 443-477

Systematic and critical evaluation, using food balance sheets, census population data, government surveys, food composition statistics, and estimates of the population's biological requirements, shows that the realized improvements in food supplies in India of the past five decades, while beneficial, have been insufficient to meet the nutritional needs of the average person in a population that grew from less than 350 million to nearly one billion during this period. The improvements also fall significantly short of meeting the needs of the clinically malnourished. Present per capita dietary energy intakes range from as high as 95 percent to as low as 50 percent of daily requirements. Additionally, comparison of past and present diets shows that as the composition of the diet has changed with time, its nutritional quality for many has deteriorated despite an apparent increase in overall food quantity. This has come about from changes in the production system that have emphasized wheat and rice crops at the expense of more nutritional pulses and coarse grains, and from widespread poverty that leaves high-quality animal foods beyond the means of most.

The work of a small and unusual activist group in the north Indian state of Rajasthan has raised a series of practical and theoretical issues concerning the best means for combating specific instances of corruption, and for promoting accountability more generally.
A recent survey in two districts of Jharkhand found many serious flaws in the implementation of the new National Rural Employment Guarantee Scheme. Some of them could be explained as teething problems. As the experience of Rajasthan shows, there is scope for better implementation. All said and done, NREGA has created a sense of hope amongst the rural poor. This sense of hope can be further strengthened if people understand that the act gives them employment as a matter of right, and that claiming this right is within the realm of possibility.

The Mazdoor Kisan Shakti Sangathan (MKSS)—literally—'Workers' and Farmers' Power Organisation—has waged a campaign to secure the right of ordinary people to gain access to information held by government officials. In the process of experimenting with methods of compiling, sharing and verifying expenditure data at very local levels—thus far, in the absence of a statutory entitlement to such information—the MKSS has developed a radical interpretation of the notion that citizens have a right both to know how they are governed and to participate actively in the process of auditing their representatives. This article examines the process by which this campaign emerged and the means by which it pursues its goals. It then analyses the implications of the MKSS experience, and the larger movement it has spawned, for contemporary debates in three areas: human rights, participatory development and, of course, anti-corruption.

Recent interest in poverty and poverty relief has included debates that have moved beyond narrow concerns of consumption and income generation. Sen's research on entitlements and capabilities revolutionized approaches to poverty in the 1980s, and his work has itself been open to critical appraisals that have stressed empowerment and vulnerability as issues of equal importance. Some of these theoretical debates are briefly reviewed here, after which the frameworks for analysis that they suggest are applied to the study of rural poverty in West Bengal. The two tasks that the paper then sets itself are to illustrate the empirical value of broader conceptualizations of poverty, and to highlight the methodological difficulties that they raise.

This study examines the role of 'public action' within a democratic political framework in placing pressure on government to implement effective policy to alleviate hunger. Drawing on fieldwork evidence conducted by the author in the highly publicised Kalahandi and Naupada districts of western Orissa, the article questions the extent to which public action through India's liberal democratic framework has translated into government commitment to improve the quality of its relief and welfare administration. It suggests that successive governments in Orissa have adopted a range of alternative strategies, both within and outside the sphere of parliamentary electoral politics, to maintain electoral support and to offset public criticism before they have acted to improve administration of food security support. In doing so, it argues for the need to broaden the focus of debates surrounding the relationship between public action and hunger alleviation.


The acute poverty situation of Bihar can be traced to the economic backwardness of both the agricultural and industrial sectors. While natural or technological factors such as floods, poor development of infrastructure and high population density play their part, the state's backwardness is related more to the inequitous and exploitative socio-economic structure, lack of political leadership and almost total collapse of the administrative and law and order machinery - to the point where it is said that in Bihar 'the state has withered away'. These conditions have created a milieu of non-development in which even large-scale poverty eradication programmes have had little impact. The only ray of hope is the increasing awareness and mobilisation of the rural poor, whose potential can be harnessed to improve the management of such schemes and to pressurise the state into making structural changes.


A social audit in Tamil Nadu finds that the National Rural Employment Guarantee Act has brought about major changes in the lives of women. However, the act overlooks the fact that childcare is a problem for many of the working women, especially for young mothers.


Self-help groups, the major form of delivery of microfinance in India, have brought about dramatic changes in the lives of lakhs of women. In Andhra Pradesh, which has the largest...
network of SHGs and where the government has been a strong supporter, they have gone beyond provision of credit and assumed many nontraditional responsibilities. The Andhra model is one that other states should consider replicating.


This article offers explanations for why the National Rural Employment Guarantee Scheme has failed to take off in Maharashtra.


The National Rural Employment Guarantee Act as implemented by the Orissa government has resulted in grandiose claims of expenditure but very little to show in reality.


A recent survey in two districts of Jharkhand found many serious flaws in the implementation of the new National Rural Employment Guarantee Scheme. Some of them could be explained as teething problems. As the experience of Rajasthan shows, there is scope for better implementation. All said and done, NREGA has created a sense of hope amongst the rural poor. This sense of hope can be further strengthened if people understand that the act gives them employment as a matter of right, and that claiming this right is within the realm of possibility.


The social audit of the National Rural Employment Guarantee Programme conducted in Dungarpur district of Rajasthan brought out the administrative preparedness for the scheme and the benefits for women workers. Some problems remain, most importantly the lack of childcare facilities.


Social audit - a transparent, participatory and active evaluatory process - has the potential to attack the corruption that plagues anti-poverty programmes. A report from Andhra Pradesh on the use of the audit in the employment guarantee scheme.

The studies presented in this collection analyse Maharashtra's Employment Guarantee Scheme from a sociological and a political perspective. They investigate the variety of ways in which the political mobilisation of the oppressed takes place and simultaneously examine the manipulations by the ruling Maratha landed caste to disempower and eventually co-opt such struggles in order to perpetuate its own political dominance. This research analyses the contestations that have emerged in the context of this programme in the last three decades as groups and classes have confronted each other in using the EGS to further their own respective interests.

32. Dr Glyn Williams, Dr Binitha V Thampi, Prof D Narayana, Dr Sailaja Nandigama, Dr Dwaipayan Bhattacharyya The Politics of Defining Poverty and Its Alleviation: questioning state strategies through grassroots voices in Kerala

Any attempt to define poverty, or to produce policy interventions for its alleviation, is necessarily both partial and political. The dominant mode of ‘seeing’ poverty currently adopted by the Indian state is that poverty pertains to households (or individuals), and can be captured by certain indicators whose presence (belonging to a Scheduled community) or absence (such as land ownership) is amenable to social verification. This is to some degree both innovative and progressive, in that it recognises the multi-dimensional nature of poverty, and potentially democratises the process of labelling households as ‘BPL’ (below poverty line). It is, however, problematic in that it fails to recognise the relational nature of poverty, and also bolsters a set of poverty alleviation strategies that take ‘capacity impaired households’ as naturalised objects for intervention (c.f. Tilly, 2007).

This paper uses evidence from two Districts in Kerala to question this current framing of poverty, and its alleviation through strategies important at the national level (the National Rural Employment Guarantee Act) and within the State (Kudumbashree, Kerala’s innovative anti-poverty mission, and its Ashraya programme for dealing with ‘destitute’ households). In doing so it draws on the perspectives of respondents traditionally seen as poor, such as landless labourers and Scheduled communities, and the ‘new’ poor, including farming households affected by the collapse of prices for Kerala’s key cash crops.

The argument put forward here is that these programmes are well-attuned to the local state’s own capacities for intervention, and put in play a particular mode of poverty alleviation which is potentially open to popular scrutiny and participation. What they ignore, however, is a deeper
politics of the production of poverty, in which the local state is seen as helpless in the face of ‘market forces’ to address underlying issues around the production of secure livelihoods.


Drawing on ethnographic material from West Bengal (India), the article investigates the practice of corruption. Several points are made on the relevance of ethnographic investigation to an understanding of the practice of corruption. Networking is an everyday coping strategy that does not distinguish between the private and public roles of the individual. Although such distinctions may be well known, practices such as networking and the moral weight of reciprocal obligation ensure that the dividing line is still crossed. A certain heroism attached to the daring and successful player adds to this. Different and partially opposing values create a situation of innovative and contesting interpretations that in part maintain a level of corruption and in part represent a dynamic field for possible opposition.


Public health systems in India have weakened since the 1950s, after central decisions to amalgamate the medical and public health services, and to focus public health work largely on single-issue programs—instead of on strengthening public health systems’ broad capacity to reduce exposure to disease. Over time, most state health departments de-prioritized their public health systems. This paper describes how the public health system works in Tamil Nadu, a rare example of a state that chose not to amalgamate its medical and public health services. It describes the key ingredients of the system, which are a separate Directorate of Public Health—staffed by a cadre of professional public health managers with deep firsthand experience of working in both rural and urban areas, and complemented with non-medical specialists with its own budget, and with legislative underpinning. The authors illustrate how this helps Tamil Nadu to conduct long-term planning to avert outbreaks, manage endemic diseases, prevent disease resurgence, manage disasters and emergencies, and support local bodies to protect public health in rural and urban areas. They also discuss the system’s shortfalls. Tamil Nadu’s public health system is replicable, offering lessons on better management of existing resources. It is also affordable: compared with the national averages, Tamil Nadu spends less per capita on health while achieving far better health outcomes. There is much that other states in India, and other developing countries, can learn from this to revitalize their public health systems and better protect their people’s health.

This first-ever report, based on a survey in Madhya Pradesh, on the functioning of the Antyodaya Anna Yojana reveals that the scheme has made a significant contribution to the survival of families on the verge of destitution. However, with the poor outreach of the public distribution system in the tribal areas and the insufficient coverage of the AAY within each village, the yojana fails to make the difference it potentially can to the food security of the poorest of the poor. This article also evaluates the "ruchikar" (relishing) mid-day meal programme of the MP government as a result of which enrolment in schools has dramatically increased despite the poor meal quality and inadequate infrastructure. But the absence of a separate administration for meal management has placed an enormous burden on teachers, which poses a danger of further compromising the already very poor quality of primary education.


The objective of the present study is to use data in the Evaluation to assess JRY targeting. We will also examine the extent to which unsatisfactory targeting is a reflection of the weak and ineffective functioning of the gram panchayats that have direct responsibility for implementing the scheme. Such aspects of panchayats as their representativeness, financial autonomy, and accountability provide a general sense of the panchayats' strengths and limitations. However, the indicators used in the Evaluation are not sufficiently detailed to obtain insights into the process by which influential persons "capture" panchayats and divert JRY funds to their own purposes. The analysis of the Evaluation is therefore supplemented by a small field survey of panchayats, district and village officials, and households in three districts of Uttar Pradesh (U.P.). This detailed analysis reveals some glaring weaknesses in the new panchayat system, as established under the 73rd Constitutional (Amendment) Act, 1992, that make it easier for some influential persons or groups to capture them for their personal advantage.


The mid-day meal scheme for school children was introduced in Tamil Nadu in 1956 for the first time in India. Its primary objective was to reduce drop-out rates at the primary level, promote universal education and improve the nutritional status of children. This study attempts to analyse the impact of the programme on primary education in terms of enrolment, attendance and drop-out on the basis of primary data from Nagercoil education district.


A reduction of food subsidies by means of targeting a select group is an important way of lowering government spending within the framework of an orthodox structural adjustment
programme. Targeted food subsidy schemes, however, have costs, which are ignored or not fully accounted for by policy-makers. This article focuses on costs arising out of the two types of targeting errors - errors of exclusion and errors of inclusion - in the system of public distribution of food in India or the PDS. Using primary data from a village in Maharashtra, at two subsequent surveys, the authors show that errors of wrong inclusion decreased while errors of wrong exclusion increased with a shift from universal to targeted coverage. The article also demonstrates the pitfalls of identifying a target group based on an income indicator.


This article examines the government of India’s 1997 criteria for selection of households for below poverty line ration cards. The main conceptual problems are that the criteria are static and uniform across the entire country. Using primary data (collected in 2002) from 400 randomly selected households from eight villages of Rajasthan, the exercise here calculates the proportion of “wrongly excluded” (i.e., who qualify according to government criteria but did not get a BPL card) and “wrongly included” households. Of the one-third of sample households that were classified as BPL, nearly a quarter have been wrongly included. Besides, 44 per cent of the households which should have been counted as BPL were wrongly excluded. However, one must consider the appropriateness of the selection criteria along with these large selection errors.


This article offers a menu of options for reform of Uttar Pradesh's public health system. Though some actions have been taken after the introduction of the National Rural Health Mission in late 2005, a large number of very serious problems remain. Unless they are addressed, the monitorable targets of the Eleventh Five-Year Plan in regard to health and nutrition in India will not be met, since UP has such a large weight in the unmet needs of public health in the country.


This paper attempts a sub-state level analysis of health system efficiency, focusing on West Bengal, a low income Indian state. Using a stochastic frontier model, it provides an idealized yardstick for evaluation. Our results suggest that overall efficiency of the public health delivery system remains low due to considerable disparities across districts. This is owing to differentials in availability and utilization of inputs such as the per capita availability of hospitals, beds, and
manpower, and adversely affects life expectancy. Overcoming these factoral disparities may help
the deficient districts to improve life expectancy. It may require a considerable increase in
medical and public health expenditure in rural areas in the state and especially calls for resource
mobilization to improve infrastructure facilities and maintain essential supplies at primary health
centers. This could be attempted partly through funds from the National Rural Health Mission
(NRHM) and by improving rural sanitation in poorer districts.

42. Nath Bhola, Kumari R, and Tanu Nidha Utilization of the Health Care Delivery System
December, 2008, pp. 147-153

Background: India has one of the most extensive health infrastructures- a three-tier hierarchical
referral system- for the provision of effective and efficient health services to the majority of its
population. In this study we have tried to evaluate the utilization of such a wide health
infrastructure and the various factors affecting it. We have also tried to find the factors that
motivated the patients to visit the present health facility and the key persons who motivated them
to do so.

Methods:  Time bound cross-sectional study.
Setting: Three types of referral health facilities in Lucknow District
Participants: A total of 1265 patients were interviewed during the four months of the period of
survey from these three types of referral health facilities.
Results: The present study revealed that majority of the patients coming to all the three referral
centres were the new patients (89%), about two-thirds of whom had come there directly. Overall,
only one tenth of the patients attending the secondary and tertiary level public health facilities
were referred by someone. Most of the indirect patients had self referred themselves. About eight
and nine percent of the indirect and referred patients could reach the present siteof treatment only
after more than two years of rummaging and about 13% and 11% had spent more than ten
thousand rupees respectively, which in some cases even amounted to lakh rupees.

Conclusions: The utilization of the referral system of the health care delivery in India needs to be
augmented. Before planning future reforms such as decentralization, incorporation of the Indian
system of Medicine, and other steps we need to develop mechanisms to see that the plans are
materialized.

43. G. Krishna Reddy New Populism and Liberalisation: Regime Shift under Chandrababu
Naidu in AP *Economic and Political Weekly* Vol. 37, No. 9 (Mar. 2-8, 2002), pp. 871-
883

Political compulsions faced by a government in times of liberalisation often have an impact on
economic reforms. This paper examines Chandrababu Naidu’s regime in Andhra Pradesh and the
task it has cut out for itself in carrying forward the liberalisation agenda while tackling popular
compulsions. It also examines the character of the regime shift in seeking to incorporate different societal sections into its fold by carving out new political and social constituencies for its liberalisation reforms.


This paper challenges the conventional wisdom that ethnic diversity negatively influences public goods provision through a longitudinal study of the Indian state of Kerala, which has attained exceptional levels of social development despite high fragmentation along religious and caste lines. This paper argues that it is not objective diversity but a subjective sense of “we-ness,” which is the key determinant of the level of public goods provision and social development. A historical analysis of Kerala illustrates how a cohesive subnational community generates progressive social policy as well as societal monitoring of schools and clinics, which together give rise to relatively high levels of education and health outcomes.
Cluster III: Expenditure-based Studies

Expenditure-based studies are frequently clearer as to what they are trying to explain, although not always useful for understanding the politics of policy-making. These studies have been able to identify a series of variables and examine their impact on policy effectiveness or explain why some particular outcomes take place.

Expenditure based studies


This paper presents trends in public expenditures on social sector and poverty alleviation programmes from 1990-91. A considerable proportion of these expenditures is undertaken by the states but the central share seems to be increasing over time. This paper analyses trends in state expenditure, expenditure by the central government and central and state adjusted combined expenditures. Overall, expenditure on social sector schemes is increasing in real terms but mainly through increased expenditure of the central government. The state governments seem to be easing out of their constitutional commitment to sustain programmes in the social sectors, which is a matter of concern. Secondly, there are large inter-sectoral reallocations of funds in the poverty alleviation sectors. One major development has been that large funds that were allocated to employment generation have now been diverted to the rural road construction programme. This reallocation may have serious implications for employment generation.


An exclusive focus on deficit reduction has had the adverse fallout for public spending on health and education in several states, forcing a shrinkage of the public sector's involvement in the social sector. Policy-makers are now seeking an escape route by getting the fiscal and revenue deficit targets relaxed. While there can be valid arguments against inflexible targets, abandoning the discipline underlying fiscal responsibility legislation, as has been suggested, is questionable. For, at base, the fiscal problems of democracies have their origin in the short time horizon of governments and their penchant for promising the moon to the electorate while showing an extreme reluctance to tax.

Budgeting for Health: Some Considerations

The economic crisis of 1990s was precipitated mainly by the growth of public expenditure in the 1980s. An attempt was made to resolve this crisis through the introduction of stabilisation and structural adjustment programmes. One of the important planks of the stabilisation measures was the compression of public expenditure. This has brought to the forefront the issue of “transitional social costs” of stabilisation. This paper attempts to analyse the social sector outlays of the central and the state governments in the pre-reform and post-reform period and assesses the impact these had on the social sector in India.


Has budget 2008-09 been able to fulfil its commitments to the National Common Minimum Programme? This article analyses the allocations made to the social sector, investigating spending on education, health, employment generation and the Bharat Nirman programme.


Although the government of India has set a goal of increasing government health spending to 2-3 per cent of gross domestic product over the next five years, even with optimistic assumptions, it cannot meet the stated goal. After analysing the recent trends in government health spending by the centre and states, this paper notes that sound fiscal targets for health spending should be based on goals for outcomes and the resources needed to achieve them, which are largely lacking. It suggests that large and sustainable increases in government health spending will require more focus on the states' own spending as well as improving the capacities of states and districts to use resources for health effectively.

6. S. Mahendra Dev and Jos Mooij Social Sector Expenditures in the 1990s: Analysis of Central and State Budgets *Economic and Political Weekly* Vol. 37, No. 9 (Mar. 2-8, 2002), pp. 853-866

This paper focuses on social sector expenditure in the 1990s, and looks at several aspects, including overall levels of allocation, expenditure on health and education and interstate disparities. India's social sector expenditure in the 1990s was lower than that in the 1980s and also less than that of most other developing countries. With India ranking 115th in the Human Development Index, there is an obvious need to step up social sector expenditure and improve fund utilisation.

This paper examines the factors that are affecting low public expenditure on health across states in India while the health related outcomes are far below than the MDGs target levels. In spite of massive economic growth, public spending on health for centre and states combined remains less than 1 per cent of gross domestic product. This paper observed that in majority of the states most of the existing own revenues are used up in meeting their committed liabilities which leaves very little room for the states to spend on health. This makes centre to step in and provide additional financial resources to enhance public expenditure on health. Towards complete equalization across the states, the effectiveness of finance commission grants is also discussed.


Increasingly the governments are facing pressures to increase budgetary allocations to social sectors. Recently there has been suggestion to increase the government budget allocations to health sector and increase it to 3 per cent of GDP. Is this feasible goal and in what time-frame? Health being State subject in India and much depends on the ability of the State governments to allocate higher budgetary support to health sector. This inter alia depends on what are current levels of spending, what target spending as per cent of income the States assume to spend on health and given fundamental relationship between income levels and public expenditures, how fast expenditures can respond to rising income levels. We present analysis of public expenditures on health using state level public health expenditure data to provide preliminary analysis on these issues. The findings suggest that at state level governments have target of allocating only about 0.43 per cent of SGDP to health and medical care. This does not include the allocations received under central sponsored programmes such as family welfare. Given this level of spending at current levels and fiscal position of state governments the goal of spending 2 to 3 per cent of GDP on health looks very ambitious task. The analysis also suggests that elasticity of health expenditure when SGDP changes in only 0.68 which suggest that for every one percent increase in state per capita income the per capita public healthcare expenditure has increased by around 0.68 per cent.


By preventing erosion of their already low incomes, a health insurance plan is also indirectly an income protection plan for the poor. This note proposes a hospitalisation insurance plan for persons below the poverty line.
Cluster IV: Large N comparison: Expenditure, NSS, NFHS, Aggregate data

   NSS Data Economic and Political Weekly Vol. 41, No. 6 (Feb. 11-17, 2006), pp. 497+499-506

The 1999-2000 National Sample Survey data indicates that a large majority of children in India
from poorer households did not have access to the meal schemes operational in the country. The
only exception to this was Tamil Nadu where the schemes seemed to work the best in rural areas
in the age group of seven to nine-year olds, without any discernible gender gap and was well
targeted among the needy households. Further, among the poorer children, literacy rate and
educational attainment were clearly higher when they had access to school meals perhaps
implying that school enrolment and attendance improve in the presence of such schemes. This
data however showed rather low coverage of Integrated Child Development Scheme among pre-
school children across all states indicating problems of under-reporting or under-recording.

2. Charu C Garg, and Anup K Karan Reducing out-of-pocket expenditures to reduce
   poverty: a disaggregated analysis at rural-urban and state level in India Health Policy

Out-of-pocket (OOP) expenditure on health care has significant implications for poverty in many
developing countries. This paper aims to assess the differential impact of OOP expenditure and
its components, such as expenditure on inpatient care, outpatient care and on drugs, across
different income quintiles, between developed and less developed regions in India. It also
attempts to measure poverty at disaggregated rural-urban and state levels.

Based on Consumer Expenditure Survey (CES) data from the National Sample Survey (NSS),
conducted in 1999–2000, the share of households’ expenditure on health services and drugs was
calculated. The number of individuals below the state-specific rural and urban poverty line in 17
major states, with and without netting out OOP expenditure, was determined. This also enabled
the calculation of the poverty gap or poverty deepening in each region.

Estimates show that OOP expenditure is about 5% of total household expenditure (ranging from
about 2% in Assam to almost 7% in Kerala) with a higher proportion being recorded in rural areas and affluent states. Purchase of drugs constitutes 70% of the total OOP expenditure. Approximately 32.5 million persons fell below the poverty line in 1999–2000 through OOP payments, implying that the overall poverty increase after accounting for OOP expenditure is 3.2% (as against a rise of 2.2% shown in earlier literature). Also, the poverty headcount increase and poverty deepening is much higher in poorer states and rural areas compared with affluent states and urban areas, except in the case of Maharashtra. High OOP payment share in total health expenditures did not always imply a high poverty headcount; state-specific economic and social factors played a role.
The paper argues for better methods of capturing drugs expenditure in household surveys and recommends that special attention be paid to expenditures on drugs, in particular for the poor. Targeted policies in just five poor states to reduce OOP expenditure could help to prevent almost 60% of the poverty headcount increase through OOP payments.


This paper examines the performance of four southern states in various economic and social sectors during the past decade, comparing and contrasting them with each other and the average all-India figures in these sectors. Andhra Pradesh and Karnataka have done the most to initiate reforms in recent years. Kerala is moving in this direction too, after initial delays, as is Tamil Nadu. As the four states face several individual and common challenges in the coming years, they need to deepen reforms and tailor strategies in keeping with their particular circumstances, in their quest for growth.

4. F Ram, S K Mohanty, and Usha Ram Understanding the Distribution of BPL Cards: All-India and Selected States Economic and Political Weekly Vol - XLIV No. 07, February 14, 2009

Using the recent National Family and Health Survey-3 data, this paper examines the distribution of below poverty line cards. The possession of bpl cards by the households in various economic and social settings index is analysed. The findings suggest that about two-fifths of the bpl cards in India are with the non-poor households. On the other hand, in many of the states a majority of households in abject deprived groups do not possess a bpl card. The extent of misuse is higher in Andhra Pradesh, Karnataka and Kerala, while it is lower in Tamil Nadu. In economically weaker states like Orissa and Bihar, a higher proportion of non-poor households possess a bpl card.


Using a panel of 15 major states from India, this paper examines patterns and changes in the allocation of government funds for education, particularly higher education, over a span of two decades, before and after the introduction of the new economic policies. State real per capita income, with elasticity less than one, is found to significantly enhance educational expenditure at the aggregate, elementary, secondary and higher levels. Moreover, contrary to general perceptions, education expenditure at all levels has been significantly lower after liberalisation vis-à-vis the pre-economic reform era. This is particularly detrimental for the vulnerable sections of the population, i.e., for females and backward social groups. It is evident that even after controlling for the economic reform process, privatisation exerts a negative significant impact on expenditure on higher education.
6. Richard Damania and Arnab Gupta The Political Economy of Resources and Development in India

The development process in India is marked by states that have made rapid strides towards development and others that have stagnated. There is a growing consensus that this diverging pattern of progress is a consequence of policy choices, suggesting the need to examine the political and economic incentives of policy makers at the state level. This paper seeks to fill this gap in the literature by investigating the link between appropriable resource rents in a state and the consequent policy choices of state governments. The analysis predicts that political accountability plays a key role in determining the structure and efficiency of institutions and policy choices. States with high resource rents and low levels of political accountability are predicted to have weaker institutions and experience lower levels of development. The empirical tests strongly substantiate these conclusions.


The National Family Health Survey-3 data shows disturbing trends for children and women in the reproductive age, especially in the "sick" states of Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh. Significantly, Himachal Pradesh is progressive on several indicators and comparable to Kerala, while West Bengal is showing signs of joining the ailing states.


This paper analyses the intra-state disparities in government expenditure in six states, Bihar, Uttar Pradesh, Jharkhand, Chhattisgarh, Madhya Pradesh and West Bengal, based on the actual treasury data on government expenditure made in the social sectors of education, health and supply of drinking water, captured from the databases of the accountants general of these states. The disparities that it finds within most of these states are shocking, to say the least.


The 1999-2000 National Sample Survey data indicates that a large majority of children in India from poorer households did not have access to the meal schemes operational in the country. The only exception to this was Tamil Nadu where the schemes seemed to work the best in rural areas in the age group of seven to nine-year olds, without any discernible gender gap and was well targeted among the needy households. Further, among the poorer children, literacy rate and educational attainment were clearly higher when they had access to school meals perhaps implying that school enrolment and attendance improve in the presence of such schemes. This data however showed rather low coverage of Integrated Child Development Scheme among pre-school children across all states indicating problems of under-reporting or under-recording.

The object of this paper is to analyse differences in poverty levels across states in rural India during the period 1983-2000. In doing so, it seeks to focus on inter-state differences in economic growth as an explanation. It also attempts to analyse the effect of policies and institutions on the poverty-reducing impact of growth. In a panel data study for India's 15 major states, we find that economic growth is a crucial determinant of poverty reduction, but it does not provide a complete explanation. Public expenditure on anti-poverty programmes has a significant impact on rural poverty, as does greater gender equality and increased democratic decentralisation. Rates of inflation and differences in initial conditions also matter.


India exhibits a large reliance on targeted transfer payments and subsidies, and significant underprovision of social services such as education. These are puzzling outcomes because the poor in India, who vote in large numbers, would benefit most from more of the latter and less of the former. This paper argues that inadequate social services and excessive targeted transfers can be explained as a consequence of the incomplete information of voters, lack of credibility of political promises, and social polarisation.


This paper assesses the state of public services in India from a user perspective and offers a set of benchmarks for future comparisons. Five services, namely, drinking water, health care, PDS, public transport and primary education are covered by the study. Each service is assessed in terms of four dimensions, viz, access, use, reliability and user satisfaction. State level data are used to compare the performance of different states with reference to these attributes. The paper also examines the experience of poor households and the less developed states with these services.


The determinants of government responsiveness to its citizens are a key issue in political economy. Here, we develop a model based on the solution of political agency problems. Having a more informed and politically active electorate strengthens incentives for governments to be responsive. This suggests that there is a role for both democratic institutions and mass media in ensuring that the preferences of citizens are reflected in policy. The ideas behind the model are
tested on panel data from India. We show that state governments are more responsive to falls in food production and crop flood damage via public food distribution and calamity relief expenditure where newspaper circulation is higher and electoral accountability greater.


There does not appear to be consensus on the importance of public investments as productive factors in the economic development process. In an era of increasing regional identities, there is need to understand the determinants of regional economic growth. A critical examination of the relationship between public policies and regional economic growth is provided in this paper. The main lesson that emerges from the review of regional development literature is that a single incentive or development activity cannot lead to programme or project success. The empirical analysis tests the efficacy of public infrastructure investments in the development process of 15 Indian states. The empirical analysis highlights that investments in social infrastructure have the closest linkage with economic growth across lagging, intermediate, and leading states. The empirical research suggests that the composition of public investments is important in facilitating growth, and public investment is a necessary but not sufficient condition for regional economic growth. Sensitivity towards scale and spatial issues, model specification and development of conceptual linkages should be central to future work on infrastructure productivity.


This study uses Indian unit record data from expenditure and employment surveys, in conjunction with state level indicators to (a) investigate whether the backward classes and female headed households face higher poverty rates than others; and (b) examine the impact of poverty, along with a host of individual, family, socio-economic and state characteristics, on child labour and child schooling. Special attention is paid to the gender issue, and to the employment and schooling of children from the backward classes and female headed households. The logit regression results point to the positive role that the state governments can play in improving child welfare.


The findings of a survey in select states conducted in 2003 expose the patterns of exclusion and caste discrimination that afflict the government's mid-day meal scheme and public distribution system. This article investigates dalit participation in these programmes and also measures aspects of physical access, participatory empowerment and community-level access.
17. C Ravi and R Radhakrishna Malnutrition in India *Economic and Political Weekly* Vol - XXXIX No. 07, February 14, 2004

This paper analyses trends in malnutrition over the past two decades and shows that improvements in nutritional status have not kept pace with the reduction in poverty and the current level of malnutrition is unacceptably high. About half of the pre-school children are malnourished and are exposed to the risk of functional impairments. Malnutrition levels are uneven across states. Some middle income states such as Kerala and Tamil Nadu have comparatively better nutritional achievements than higher income states like Maharashtra and Gujarat. North-eastern states are comparatively better performing states and some of them have even out-performed Kerala.


This is relating to the recent debate on the so-called “rigorous evaluation-based robust findings” based on the National Sample Survey Office (NSSO) consumer expenditure survey (CES) data available for 2004-05 and 2009-10 (Selvaraj and Karan 2012a), on the inability of publicly-financed health insurance schemes to reduce out-of-pocket expenditures in India.


Literacy rates continue to be strikingly low among women and low caste population compared to the general population not only in any Indian state, but more so in the worst performing ones. The present paper offers an explanation of this disparate development in terms of the hypothesis of elite dominance that discriminates against women and low-caste people and systematically under-invests in mass education. We experiment with various indirect economic and political measures of elite dominance. Results based on the Indian state-level data for the period 1960-92 suggest that higher share of land held by the top 5% of the population (a) lowers spending on education as well as total developmental spending and (b) increases total non-developmental spending. (c) Greater proportion of minority representations (female and low caste members) in the ruling government however fails to have any perceptible impact on both development (including education) and non-development spending in our sample. (d) While underinvestment in education by the elite is supported by the lack of demand for education from the poorer population (who are often the marginalised people), greater initiatives of the state to enact land reform legislations enhance the spending on education.

We construct a model of redistributive politics where the central government is opportunistic and uses its discretion to make transfers to state governments on the basis of political considerations. These considerations are the alignment between the incumbent parties at the central and state levels and whether a state is a swing state or not. A testable prediction from the model is that a state that is both swing and aligned with the central government is especially likely to receive higher transfers. We test this prediction using Indian data for 14 states from 1974-75 to 1996-97. We find that a state which is both aligned and swing in the last state election is estimated to receive 16% higher transfers than a state which is unaligned and non-swing.

Cluster V
Comparative framework

1. James Manor, 2006 Successful Governance Reforms in Two Indian States: Karnataka and Andhra Pradesh, IDS DISCUSSION PAPER 385

This study analyses governance reforms in two southern states in India’s federal system, Karnataka and Andhra Pradesh. Two reforms are considered in each state: one rural and one urban. In Karnataka, we examine the Bhoomi programme, which used information technology to provide farmers with land documents, and the Bangalore Agenda Task Force, which changed the operations of several municipal agencies. In Andhra Pradesh, we examine the reform of Metro Water, the body that oversees the provision of water to the state capital, Hyderabad, and the Development of Women and Children in Rural Areas (DWCRA) programme, which sought to provide rural women with credit in order to gain greater skills, confidence and autonomy.

The first three initiatives achieved a substantial degree of success. The fourth, DWCRA, met with significant problems, but entailed enough change for the better to qualify as a partial success. The first three programmes were mainly intended to improve service delivery, but also had positive impacts in other areas, such as strengthening the capacity of state agencies. All were designed to avoid undermining fiscal stability.

The four initiatives varied in their breadth (that is, the number of sectors or agencies they were intended to affect), and in the degree of change they sought to induce within them. Two of the four programmes examined – those from Karnataka – were entirely new initiatives, which other state governments are now considering replicating. The other two cases, from Andhra Pradesh, saw the state government pumping new energy and resources into pre-existing programmes. Three of the four initiatives (the exception being Bhoomi) entailed, to varying degrees, attempts to catalyse modest or substantial participation by ordinary people and demands from them upon government.

All four initiatives qualify as programmes rather than sweeping macro-systemic policies for reform, and they entailed incremental rather than radical changes; both these factors made them comparatively easy to pursue.

This paper provides early and robust evidence on the impact of publicly-financed health insurance schemes on financial risk protection in India's health sector. It conclusively demonstrates that the poorer sections of households in intervention districts of the Rashtriya Swasthya Bima Yojna, Rajiv Aarogyasri of Andhra Pradesh, and Tamil Nadu Health Insurance schemes experienced a rise in real per capita healthcare expenditure, particularly on hospitalisation, and an increase in catastrophic headcount - conclusive proof that RSBY and other state government-based interventions failed to provide financial risk protection. Therefore, the policy that is needed would aim to achieve universal health coverage of the population, moving away from the current trend of piecemeal, fragmented approaches, to providing a thrust for primary health care.


It is a methodological flaw to conclude from data which shows a rise in the incidence of out-of-pocket medical expenses that the Rashtriya Swasthya Bima Yojana is ineffective. A response to Sakthivel Selvaraj, Anup K Karan, “Why Publicly- Financed Health Insurance Schemes Are Ineffective in Providing Financial Risk Protection” (EPW, 17 March 2012).


The public distribution system (PDS) is one of the most important and costly welfare programmes in India. Till 1997 the PDS was a more or less universal programme, which distributed food to rich and poor cardholders alike. This universal set-up changed in 1997, when the government of India introduced targeting. The implementation of targeting proved, however, difficult. Based on fieldwork in two Indian states, Karnataka and Bihar, the paper discusses some of these difficulties. In particular, it focuses on some misconceptions and wrong assumptions underlying the introduction of the targeted PDS. Politicians and policy-makers have overlooked vested interests and institutional constraints, which often make it impossible or at least very difficult to implement the policies as they were meant to be implemented. The paper argues that policy discussions are insufficiently grounded in the day-to-day political and bureaucratic realities at the state and local level, and that this is, in part, related to the institutional organisation of the policy-making process itself.

The great emphasis on the Public Distribution System (PDS) as a safety net to deal with the problems of poverty, partially induced or aggravated by structural adjustment, begs the question of the extent to which the PDS can fulfil these expectations. Are the assumptions realistic, or is there some unfounded over-optimism about the possibilities of the PDS. How does the PDS work in reality? Is it viable? And who profits from the food subsidy? This paper discusses these questions about the viability and spread of the benefits of the PDS against the background of its actual working in Karnataka and Kerala.


Public distribution of foodgrains in India is a national policy, which exists in all states. In some states, however, the public distribution system (PDS) works much better than in other states. The undivided state of Bihar (now the new Bihar and Jharkhand) is one of the states in which the policy works poorly. It is important to understand why this is the case. Generally, policy changes and recommendations do not take the specificities of particular states into account. Yet, for the PDS performance to improve in Bihar and Jharkhand, it is absolutely necessary to understand why it works as it does, what the main bottlenecks are and where there are possibilities for improvement, if any. This paper makes such an attempt: it describes the PDS in Bihar and Jharkhand, not only in terms of how it fails and what it does not accomplish, but also in terms of what it is and what it does. It is shown that while many people do benefit from the present set-up, there are also people within almost all categories of stakeholders who are dissatisfied with the large-scale misappropriation of foodgrains. It is argued that there is scope for change, but change requires strategic political manoeuvring and initially a low-key approach in order not to awaken and antagonise strong vested interests.


This article discusses the nature and characteristics of monitoring the National Rural Employment Guarantee Scheme's implementation with a focus on the community control mechanisms existing in the two pioneering states of Rajasthan and Andhra Pradesh. These two states represent two relatively diverse models. Elements of both models need to be incorporated in order to make the process of community control of public programmes effective and sustainable.


The safety net programmes, which are designed with three main purposes, protection (ex post), insurance (ex ante) and poverty alleviation, offer help to households during a period of crisis.
This article evaluates the efficiency, awareness, participation, targeting and distributive outcomes of these programmes, based on household/village-level surveys conducted in Orissa, Madhya Pradesh and Karnataka. In addition, the article pays special attention to the functioning of village-level institutions and social capital. Besides giving an overview of the risks and shocks faced by households in these states, the article shows that the current safety net programmes do not seriously address the health risk.


This paper presents results on the participation of rural workers in the National Rural Employment Guarantee Programme based on a pilot survey of three villages in the Chittoor district, Andhra Pradesh (AP), India. These villages are Kaligiri, Obulayyapale and Reddivaripalle, and they were surveyed in December 2007. In contrast to an earlier study of ours on Rajasthan, Scheduled Castes (SCs) and Scheduled Tribes (STs) participated in higher numbers in AP, but in both states these groups participated for slightly lower spells than the residual group of ‘Others’. We find that AP performed better than Rajasthan in terms of targeting poorer caste and income groups such as SCs, STs and landless households. The number of days worked on average was much higher than suggested by other assessments. Our econometric analysis further reinforces the view that disadvantaged groups are not only more likely to participate but also for longer spells. Thus the performance of the National Rural Employment Guarantee Programme has been far from dismal.


The ineffective utilisation of available finances sanctioned by the central government to the states results in the denial of the ICDS scheme to vast numbers of children, women and adolescent girls. This article exposes the apathy of the state governments of Bihar and Jharkhand towards this scheme, particularly in terms of coverage, financial procedures and practices adopted in the appointment of personnel.


This paper discusses the findings of a wide-ranging study of health behaviour in nineteen villages spread over eight states and covering a time-span of fifteen years. The study, which has provided a range of information on rural social, cultural and economic transformation on the one hand and changes in health behaviour on the other, highlights the close correlation between the two and brings out that change of health behaviour can be considered as one of the indices of the degree of rural transformation.

This paper compares the demographic consequences of the food crises in Bihar in 1966-67 and Maharashtra in 1970-73 in the light of recent writings by Jean Dreze and Amartya Sen. It argues that while the available data show little sign of excess mortality in Bihar, we probably cannot exclude this possibility. Certainly, mortality appears to have risen in the districts of southern Bihar, which were also those most affected by production failure. However, there is no doubt that there was substantial excess mortality during the Maharashtra drought—at the very least 70,000 excess deaths, and perhaps many more. The most interesting feature of the Maharashtra experience is that mortality rose most in those districts which were arguably least affected by production failures. The paper suggests some possible explanations for these very different experiences of Bihar and Maharashtra apropos the observed relationships between mortality increases and output declines. It expresses surprise that the available demographic material on these two significant crises have generally been neglected.


As the case of Maharashtra and Jammu and Kashmir discussed below shows, subsidies are eating deeply into Plan resources and are severely undermining development. But the political and administrative will to address the problem is missing. Can the Inter-State Council, set up in 1990 but hibernating ever since, be activated to review and rationalise all subsidies, the centre's and the states’?


The enormity of human deprivation among the vulnerable and destitute is overwhelming. This paper describes the experience of living with hunger as recounted by persons from intensely insecure social groups from eight villages in Orissa, Rajasthan and Andhra Pradesh. Although the state has reached people in remote locations occasionally making a crucial difference in the lives of the destitute, this intervention is usually meagre, uncertain and ridden with corruption. However, the grim stories described here are illuminated by dignity, courage and resilience.


JRY and IRDP latter, specifically, examining the variation in such shortfalls and the underlying factors. Both financial and physical targets of these two major antipoverty interventions are
analyzed, based mainly on data for the period 1988 to 1991 obtained from annual reports and other publications of India's Ministry of Rural Development (MRD).

An attempt is then made to demonstrate that, while development matters, decentralization matters just as much, if not more, in effective implementation of these programs. Section three draws together the main findings from a policy perspective. As the focus of the larger study of which the present analysis is a part is on three states in the semiarid region (Maharashtra, Karnataka, and Andhra Pradesh), some specific comments on these states are made.


This paper opens a window on the local state in eastern India. It studies the ways in which government officers in five districts of Bihar and West Bengal re-shaped one of India's major poverty alleviation programmes, the Employment Assurance Scheme (EAS). District and Block-level officials in Bihar converted a participatory programme of employment generation into a scheme for the construction of durable assets. Many poorer men and women obtained no work under the EAS. Outside Midnapore District, West Bengal, members of the rural poor were unaware of their right to demand work from the state. The acts of translation that we document were largely inspired by a fear of corruption on the part of junior officials. District and Block-level officials in Bihar worried that labour-intensive schemes would increase opportunities for rent-seeking and simple looting. That principals sought to constrain the actions of agents in this way suggests a weakness in the model of rent-seeking behaviour favoured by some economists. That the EAS was re-worked by well-educated, English-speaking government officials--and not by their subordinates--also suggests the need for refinement of a body of work on the 'vernacular' nature of the local state. No sharp distinction between elite and vernacular lifeworlds is evident in the field area.


This thesis investigates the role of politics in implementing educational reform in India during the period 1994 to 2011. Much of the recent research on politics and educational reform has been dominated by the analytical framework of formal political economy, but this framework has not been able to explain how reforms are successfully adopted. Also, the main focus has been on the negative role of politics, controlled by powerful interest groups and biased institutions, in constraining changes likely to benefit poor people. I focus instead on understanding the political dynamics in cases of success. In particular, why do political leaders and public officials support educational reform even though this does not suit their political calculations, and is likely to encounter resistance from teacher unions and educational bureaucracies? To understand these dynamics, I use the framework of comparative institutionalism, and examine the contested interaction of ideas, interests, and institutions, leading to success or failure.
To analyse the process of reform implementation, I have selected two Indian states—Andhra Pradesh and Bihar. Both were educationally backward at the beginning of the 1990s and were confronted with a common agenda for reform established by the federal government. However, they pursued divergent trajectories over the next decade, with the former state achieving higher levels and reduced disparities in primary school participation. I compare the political dynamics in three important arenas: the management of teacher interests and their unions, educational decentralisation, and the daily interactions between poor households, schools, and the local state. I find that political strategies are important in determining variations in outcomes. In Andhra Pradesh, the political leadership found an alignment between the new opportunities provided by the federal government and its own agenda for development; it created new allies for change by reducing discretion in teacher policies, playing on interunion rivalries, and creating a local cadre of party loyalists. However, a wider agenda of development was missing in Bihar, and even successfully designed school decentralisation policies could not be implemented due to weak support from political leaders, and because of local elite capture. In both the states, however, the interaction of the poor with schools and the local state was a process of struggle, indicative of the challenges that lie ahead.


The increased availability of information technologies marks an important opportunity for Indian politicians to improve the quality of public service delivery. The central government has promoted these efforts through the National eGovernment Plan (NeGP). However, state-level experiences with eGovernment since the late 1990s display significant variations in the ability of governments to successfully adopt these technologies to provide benefits to citizens. In this article, I evaluate state efforts to implement one-stop, computerized citizen service centers. I show that policy outcomes are not correlated with measures of established explanations for reform, such as economic development. Instead, I argue that variations in policies result from the extent to which incumbent politicians expect reforms to affect the economic resources underlying their current and future electoral status—in particular, the availability of corrupt income from the process of service delivery. I show that levels of petty corruption—the extent to which citizens pay bribes to obtain services—are highly correlated with the characteristics of reform, with more corrupt state governments implementing policies later and in a less comprehensive manner than their less corrupt peers. These outcomes are magnified in coalition led states, where politicians anticipate economic benefits from their participation in government. Analysis of four states, Chhattisgarh, Tamil Nadu, Kerala, and Uttar Pradesh, illustrates these dynamics and highlights the ways in which politicians simultaneously use service reforms to target benefits to their preferred constituents. These findings have important implications for understanding state efforts to implement the National eGovernment Plan.

Do public service reforms improve citizen services? Over the last two decades both public private partnerships and information and communication technologies have been promoted as tools for reforming service delivery in developing countries, with the goal of providing both economic and political benefits to citizens. However, observational studies of policies intended to promote these reform models are hindered by selection bias. Experimental evaluations, on the other hand, can be limited in the potential for generalization to broader populations. In this study, I adopt a combined experimental and observational approach to evaluate the independent effects of privatization and computerization in an initiative to improve citizen services in the south Indian state of Karnataka. Through the use of a large citizen survey and field experiment, I show that privatization of service delivery has a larger positive effect on a number of service quality measures than computerization, most important of which is the reduced demand for, and size of, bribes from citizens. While private, computerized centers do not improve all facets of service delivery and, interestingly, do not engender higher levels of satisfaction from citizens, their effect on corruption in the service delivery process is marked.


Political parties and politicians distribute patronage for electoral gains. Many scholars have argued that political parties find it more efficacious to target the poor for patronage than the rich.2 Decentralization and competitive local elections extend this logic of patronage politics to subnational levels. Through the devolution of governance, decentralization opens avenues for local politicians to distribute particularistic benefits on their own, not merely as agents of central party leaders. This distribution of patronage is shaped by the nature of electoral competition that local politicians face. Central party leaders, aware that local elections may generate incentives for local politicians to act independently, may rely on the information local elections reveal to identify and target patronage to key constituents. When such distributions of patronage are aggregated, more decentralized states will have more extensive distribution of patronage than less decentralized states. To explore how decentralization contributes to patronage politics, this article sketches a theoretical framework and advances three hypotheses relating decentralization to the distribution of patronage. These hypotheses are examined within the context of poverty in Indian states and villages to show how the devolution of governance and local elections contribute to patronage politics. This article also addresses some of the informational limitations in the literature on clientelistic politics.


The state in its efforts to meet the needs of the poor has four major functions of governance - developmental, empowererntal, protective and disciplinary. This paper, based on fieldwork
across the rural areas in three states, probes the Employment Assurance Scheme to understand the state's performance on these parameters as well as aspects of participation, governance and political society. What is revealed is the complexity and divergence of state action - conflicts within and between different agencies of the state, as also the challenges posed to these agencies by civil and political society groups. Also clear is that the participation of the poor in development programmes cannot easily be stepped up in the absence of supporting actors in political society. Part I of the paper presents the initial findings as they relate to the development and empowerment functions of the state. Part II, to be published next week, will develop the argument further through discussion of an 'action research' project that followed on from the authors' 'academic' research.

22. Stuart Corbridge, Glyn Williams, Rene Veron and Manoj Srivastava Making Social Science Matter - II: How the Rural Poor See the State in Bihar, Jharkhand and West Bengal Economic and Political Weekly Vol. 38, No. 25 (Jun. 21-27, 2003), pp. 2561-2569

Part I of this paper, which appeared last week, described the patterns of participation of the rural poor in state-sponsored schemes and the characteristics of political society in each of the blocks and districts studied. It also provided evidence on the scale and significance of rent-seeking behaviour, and a preliminary mapping of what has been called 'the anthropology of the everyday state'. We turn now to a discussion of an 'action research' project that followed on from our 'academic' research. This project involved the research team in a prolonged dialogue with different groups of actors in Malda and Bhojpur districts that we had identified as 'failing' districts from the point of view of effective pro-poor governance. We comment briefly on the background to this research and describe how we organised the action research process before proceeding to present the main findings of the workshops that we held in these two districts. These findings speak of the ways in which different groups of stakeholders, and members of the rural poor most especially, see the state in Bhojpur and Malda and how they would like to see certain practices of the state abolished, extended or reformed.


Kerala's mortality level has been lower than West Bengal's at least since the early 20th century. The difference became sharper in the 1970s. Environmental and hygienic conditions are more favourable in Kerala, but the difference does not seem to be great enough to explain a significant part of the mortality differential. The empirical evidence from various surveys shows that the differences between the states in nutritional standard, per capita income, distribution of income and assets, industrialisation and urbanisation, cannot explain the lower mortality level in Kerala. The wider distribution of health facilities in the rural areas of Kerala and their greater utilisation are found to be significant factors. Two important reasons why the health facilities are used more in Kerala have been identified. First, the proportion of literates, particularly among females, is much higher in Kerala. Historically there has always been greater emphasis in Kerala on
education and public health. Secondly, the rural poor in Kerala are more aware of their rights to use health and other public facilities than those in West Bengal. The differential awareness can be traced to the historical difference in the social and political movements in the two states. In general, West Bengal has always been characterised by a higher level of economic development and Kerala by a higher level of social development. The lower mortality level in Kerala can be attributed mostly to its higher social development and partly to its favourable environmental and hygienic conditions.


This article, based on a desk review of the District Primary Education Programme (DPEP) and qualitative micro studies in six states - Madhya Pradesh, Chhattisgarh, Andhra Pradesh, Haryana and Tamil Nadu - attempts to capture the impact of primary education programmes on the ground. Introducing the emergent concept of 'hierarchies of access' to describe the new segregation occurring in primary education, the article focuses on the micro studies documenting the tangible and intangible dimensions of gender and social equity that frame the implementation of DPEP at the village and panchayat level. On the basis of the findings of the desk review and the micro studies, the authors discuss ways to reverse the trend of segregation so as to make universal primary education a substantive reality.


While a large number of primary health centres and subcentres have been created as part of the government's 'Health for All' programme, surveys such as NFHS 1 and 2 reveal that health services either do not reach disadvantaged sections or are not accessed by them. This paper assesses the extent of inequalities in health care and nutritional status across states with a focus on caste and tribe. It examines how far these inequalities are a result of caste/tribe per se or whether they can be attributed to differential economic and educational conditions of individuals belonging to different caste/tribe categories.

26. Shayla Brush 2011 Political Participation Contrasted in India: A Contextual Comparison between Kerala and Bihar Thesis submitted to the Faculty of Graduate and Postdoctoral Studies In partial fulfillment of the requirements for the degree of MA in Political Science School of Political Studies Faculty of Graduate and Postdoctoral Studies University of Ottawa

State processes and programs are often constructed and implemented with the intention to ameliorate the lives of the inhabitants living within those borders. However, in order for citizens to benefit from these programs and processes, for example, anti-poverty programs and
decentralization projects, their participation is a necessity. But societal contexts in which citizen participation occurs vary to great extents. It is important then to investigate these differences so as to further our understanding of the workings of participation. This research conducts a comparative analysis between two states in India, Kerala and Bihar, of contextual factors impacting participation. It shows that both trust in the state as well as formal education affect the level of participation of the population. This research engages with and attempts to add to the literature of participatory development by analyzing and explaining some of the impact that context has on participation of inhabitants.

27. Radhika Iyengar and Sharmi Surianarain Education Policy and Practice: Case Studies from Delhi and Mumbai *Economic and Political Weekly* Vol. 43, No. 38 (Sep. 20 - 26, 2008), pp. 63-65, 67-69

The policy goals of the Sarva Shiksha Abhiyan (education for all) programme focus on access and quality education. Using indicators like access and overcrowding, achievement, mainstreaming, fund utilisation and retention of children, this field survey of municipal schools in Mumbai and Delhi provides a comparative analysis of each city's progress towards the stated goal.


The Eleventh Schedule added to the Constitution by the 73rd amendment lists 29 functions devolvable by states to rural local bodies. States were free to set the speed and design of their approach to decentralisation under the general framework of the Constitutional mandate. Fourteen years on, a quantitative measure is attempted in this paper of the extent to which functional transfers have been achieved through the budgetary transfer of funds, with respect to the fiscal year 2006-07, in four states: Madhya Pradesh, Chhattisgarh, Rajasthan and Orissa. The approach taken here is thus radically different from that in official documents, where functional transfer to rural local bodies is dealt with in a purely qualitative manner, based on administrative notifications. Without an associated budgetary provision these do not carry any operational significance.


The National Family Health Survey-3 data shows disturbing trends for children and women in the reproductive age, especially in the "sick" states of Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh. Significantly, Himachal Pradesh is progressive on several indicators and comparable to Kerala, while West Bengal is showing signs of joining the ailing states.
This paper seeks to evaluate quantity and quality of service delivery in rural public health facilities under NRHM. On appropriate and feasible measures, the former is assessed on the static and dynamic condition of physical infrastructure; by the numbers of paramedical, technician and medical staff employed, as well as figures for attendance and gender breakdown; by the supply, quality and range of drugs; by availability and usage of decentralised untied and maintenance funding of centres; and by actual availability of laboratory, diagnostic and service facilities. Quality is defined in relation to the condition of the above tangibles, as also supplemented by subjective data on intangibles, such as patient satisfaction, gathered from the exit interviews.

The micro-findings across four states, which have resulted in rankings in individual sections of the study, suggest disparate situations at various levels of centres and on different components, reflecting context-specific underlying driving factors, some complex by nature. Based on these findings, one could easily rank the states on ‘overall performance of service delivery under NRHM’, but to do so would be irresponsible, meaningless and defeat the very purpose of this evaluation, which was to highlight the micro-components of features that are important to this Mission’s capacity to deliver services, how states are faring on implementing these various strands, and what factors might be causing problems where implementation is less than desirable.

The NRHM has put rural public health care firmly on the agenda, and is on the right track with the institutional changes it has wrought within the health system. True, there are problems in implementation, so that delivery is far from what it ought to be. On physical infrastructure, medicines and funding, processual problems might be more easily scaled with time (in some instances, they already appear to have been overcome), whereas on human resources, and to the extent these impact actual availability of services, structural issues of some complexity need careful resolving with a definite long term investment in the training and education of paramedical and medical staff, especially women, and close monitoring of attendance. However, the parameters of the question this study seeks to answer are very much within the ambit of how to better performance under the NRHM, and not whether the Mission ought to have been undertaken in the first place, of which there can be no doubt.

Examining the poverty and food security problem in Maharashtra and West Bengal, the article argues that the wider reach of the PDS makes it more effective than the EGS. Further, proper targeting and improved delivery system in rural areas will make the PDS more efficient. Nevertheless, not PDS alone, but a mix of policies involving effective implementation of anti-poverty programmes, controlling inflation, improving health facilities, will be needed to solve the food security problem in India.

This paper compares the public distribution of food in Andhra Pradesh and Maharashtra. Based on the 50th round of National Sample Survey (NSS) household consumption survey data, the authors examine differences in utilisation, extent of targeting, magnitude of income transfers and the cost-effectiveness of food subsidies. The findings suggest policy reforms in favour of self-targeting and greater operational efficiency.


This paper studies the pattern and correlates of utilisation of antenatal care services and assistance received during delivery in these three recently formed states, which have distinct geographical and topographical characteristics. The study throws up results specific to the particular features of the three states. It is necessary for the reproductive and child health programme to evolve a strategy giving due consideration to the geographical and socio-economic factors.

34. Jennifer L. Bussell Corruption and Policy Outcomes in Indian States

The emergence of new information technologies in the 1990s sheds new light on a fundamental, but often flawed, role of government: the provision of public services to citizens. Low-cost, digital technologies offered prospects for increasing the effectiveness and transparency of government. However, policies to reform service delivery using new technologies differ both across and within countries, and the timing of policy initiation in particular has varied dramatically. Drawing on a new data set of technology policies in Indian states, the author uses event history analysis to show that political calculations drive variation in the timing of technology policy initiation. The character of the ruling government’s constituency and the level of corruption in a state are found to be the best predictors of when states implement policies promoting computer-enabled services.

**Cluster VI Others**

This paper assesses the state of public services in India from a user perspective and offers a set of benchmarks for future comparisons. Five services, namely, drinking water, health care, PDS, public transport and primary education are covered by the study. Each service is assessed in terms of four dimensions, viz, access, use, reliability and user satisfaction. State level data are used to compare the performance of different states with reference to these attributes. The paper also examines the experience of poor households and the less developed states with these services.


In the heavily dualistic system of healthcare existing in India with inadequate and inefficient public health services on the one hand and a corporatised medical system using high-end medical technology and state-of-the-art infrastructure on the other, the promotion of medical tourism will accentuate the divide between the haves and the have-nots in healthcare.


This paper attempts to define the common people of India in terms of levels of consumption and examines their socio-economic profile in different periods of time since the early 1990s with a view to assessing how the economic growth process has impacted on their lives. The findings should worry everyone. Despite high growth, more than three-fourths of Indians are poor and vulnerable with a level of consumption not more than twice the official poverty line. This proportion of the population which can be categorised as the "common people" is much higher among certain social groups, especially for scheduled castes and scheduled tribes. There is also evidence to suggest that inequality is widening between the common people and the better-off sections of society.


The concept of governance though of recent origin encompasses much more than mere rule or administration - it represents a commitment to democratic institutions, processes and values in order to ensure economic, political and social security. It involves the civil society and the people as partners with the government working in collective interest. This paper attempts a look at the quality of governance in a 'peripheral' region of India - the northeast - by seeking an objective understanding of how democracy and its institutions function in this region. The linkages between governance and the functioning of democracy are studied here in the limited, albeit vital context of electoral processes in the last two decades.

Using post-colonial political history in India as a case study, the author presents an argument about the relationship between high degrees of social segmentation in a society of low levels of consumption and the emergence of highly personalised, context-sensitive state and national politics. The author argues that the case of India shows that the introduction of elections is not a quick and sure solution, bringing an end to violence or corruption in politics. She maintains that accommodation to elections in India has occurred with the emergence of a multiplicity of parties of cultural nationalism. However, universal franchise has existed in India for a relatively short time and the process of accommodation is a dynamic one. There are signs from recent elections that an emphasis on development competes successfully with culturally nationalist appeals.


This paper tries to show that the central methodology of Robert Putnam's *Making Democracy Work* can be fruitfully applied to the study of the Indian states. It reports some of the results of the author's replication of Putnam's Italian study for the states. While a clear relationship can be demonstrated between state government performance in development and levels of civic engagement, it is harder to replicate Putnam's findings concerning the crucial role of social capital. In the Indian context, levels of education are more important and the implications of this unexpected result are addressed.


Is it meaningful and illuminating to describe the state in India as ‘particularistic’ or ‘soft’? In two recent works my earlier studies (1988, 1992) of the Indian state have been questioned; explicitly by Ella Ghosh (1994) in relation to administration in Rajasthan, and implicitly by Cedric Pugh (1990) in relation to housing in India and Madras. Adhering to Harry Eckstein's call for cumulativeness, the article discusses the arguments against the ‘particularistic state’ by closely scrutinising the empirical evidence. Four important kinds of evidence—macro-studies of Indian economy and politics, Indian opinion polls, the character of housing politics in Madras, and micro-studies of politics in Madras—all give support to my argument that the state and public administration in India is best understood as ‘particularistic’. The discussion is also related to new research on policy implementation and ‘rent-seeking’, showing that this institutional pattern is found in many other Third World settings as well.