



# **Social exclusion: concepts, findings and implications for the MDGs**

A report for



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## art 1. Conceptualizing Social Exclusion

### 1. Introduction: the 'value-added' of social exclusion

The concept of 'social exclusion' is of relatively recent origin. It gained currency in the European context in response to rising unemployment and income inequalities which characterized the closing decades of the 20<sup>th</sup> century, a period of considerable economic and social dislocation as countries sought to deal with the challenges of globalization on their labour markets, welfare states and prevailing ideas about citizenship. 'Social exclusion' was seen, as the following definition offered by the European Foundation suggests, to represent the other end of the spectrum to 'full participation':

*"Social exclusion is the process through which individuals or groups are wholly or partially excluded from full participation in the society in which they live."*

Since the Social Summit in 1994, there has been increasing attention paid to the usefulness of the concept to concerns with poverty, inequality and social justice in the developing country context by, among others, the Institute of International Labour Studies, the Asian Development Bank, the Inter-American Development Bank and the World Bank.

However, the transferability to the different, and increasingly differentiated, context of developing countries was not immediately clear. There were question marks about the relevance of a concept formulated to describe the persistence of poverty in contexts characterized by general prosperity to contexts where the majority, or a significant minority were poor. There were also concerns that the concept would be imported thoughtlessly to simply re-label long-standing, locally developed approaches to social problem.

Consequently, the value-added of the concept of social exclusion had to be demonstrated before it was incorporated into the lexicon of development policy. What would it add to the understanding of poverty, given that the characterization of poverty had progressed considerably from earlier income-based approaches to a greater recognition of its multi-dimensionality (QLI)? How would it contribute to the analysis of inequality, now increasingly recognized as a critical factor in the translation of economic growth into poverty reduction? And if the poverty-reduction agenda was concerned with meeting basic needs, and the inequality agenda with the distribution of the means to meet basic needs, did they not suffice to ensure a concern with social justice?

Amarthya Sen in his analysis in the paper written for ADB argues, *"Income may be the most prominent means for a good life without deprivation, but it is not the only influence on the lives we can lead. If our paramount interest is in the lives that people can lead the freedom they have to lead minimally decent lives—then it cannot but be a mistake to concentrate exclusively only on one or other of the means to such freedom. We must look at impoverished lives, and not just at depleted wallets."*

This paper argues that the primary value-added of a social exclusion perspective for development policy lies not so much in the 'naming' of a new problem, as it appears to have done in northern social policy studies, but in

offering an integrated way of looking at different forms of disadvantage which have tended to be dealt separately in the development literature. In particular, it captures the experience of the certain groups and categories in a society of being somehow 'set apart' from others, of being 'locked-out' or 'left behind' in a way that the existing frameworks for poverty analysis had failed to capture (*two evidence based studies are being undertaken – Persons with Disability and Tribal & backward classes as excluded group*). Consequently, it has insights to offer such analysis beyond those offered by these frameworks. It also allows a bridge between the concept of poverty, which focuses on absolute levels of deprivation, and that of inequality, which is concerned with distributional issues. Social exclusion helps to highlight inequalities in the distribution of deprivation of the poor.

The approach paper is in three parts: firstly, a conceptualization of social exclusion, secondly, the empirical exploration of its relevance to the key MDGS related to poverty, health and education, and thirdly response to policy implications for linking poverty reduction strategies to the challenge of building more inclusive societies.

## **1.2. The 'Social Exclusion'- multiple and overlapping disadvantage**

A useful starting point for the conceptualization of 'social exclusion' is to consider the different ways in which 'disadvantage' operates to circumscribe the opportunities and life chances of individuals and groups in a given society. Economic theories have focused primarily on resource-based paradigms of disadvantage, generally taking the individual, or the individual household, as their unit of analysis. This, for instance, was the approach which influenced earlier conceptualizations of poverty within development studies which equated it with income or expenditure shortfalls. Even now, when poverty has come to be increasingly recognized to be a multi-dimensional phenomenon, encompassing income, assets, education, health, dignity and voice, it nevertheless continues to be *causally* understood in economic terms, (a never ending debate between Social policy and Economic policy strongholds). The poor within this paradigm are believed to have little or no voice in determining resource allocations and institutional arrangements within a society *because they are poor*; they are rarely seen to be poor *because they have little or no voice* in determining resource allocations and social arrangements.

As Stewart (ref) points out, this has given rise to a 'vertical' model of inequality, which ranks individuals or households by their income or assets and measures the inequality across this hierarchy. The Gini co-efficient is an example of widely used measure of inequality, primarily in relation to income distribution, but also to measure the distribution of individual education or health outcomes.

Sociologists, on the other hand, have paid greater attention to *identity-based* forms of disadvantage, disadvantage that reflects the cultural devaluation of groups and categories of people in a society by virtue of *who they are*, or rather, who they are perceived to be. The identity in question may relate to a distinct and bounded *group* of people who are defined by their distinct cultural practices and shared way of life. Caste, ethnicity and religion are examples of such group identities. Alternatively, it may relate to an unbounded *category* of people who are defined by a single shared characteristic (e.g. gender, disability or HIV-positive status). Members of such categories may share very little in common, aside from the discrimination they face.

Processes of cultural devaluation occur through out the construction of the members of these groups or categories by dominant sections of society as persons of lesser worth through beliefs, values, attitudes and behaviour which disparage, stigmatize, stereotype, invisibles and discriminate. These processes are effective because they draw on discourses which have legitimacy within a society (such as religion or 'tradition') or which speak to its fears (of 'the other' or of 'the unknown'). They can have profound effects on the sense of selfhood and social identity of those who are defined in this way, on their capacity for agency and on the terms on which they are permitted to exercise this agency.

Group-based disadvantages give rise to what Francis Stewart calls a 'horizontal' model of inequality where the inequalities in question cut across economically defined strata and differentiate the ability of different groups and categories within society to access valued resources and opportunities.

The two paradigms thus focus on quite distinct understandings of disadvantage: one relating to lack of resources ('what you have') and the other to identity-based discrimination ('who you are'). It is possible to be poor without facing cultural devaluation ('the deserving poor') just as it is possible to be discriminated against without being poor (most women face gender-based discrimination without necessarily being poor). A 'social exclusion' perspective draws attention to the overlap between these different experiences of disadvantage, in other words, to the experience of those individuals and groups who, in addition to their poverty, face discrimination by virtue of their identity, undermining their capacity to participate in the economic, social and political functioning of their society on equal terms.

There is one other dimension to social exclusion which may not be fully captured by the interplay between economic deprivation and social discrimination, which is the **spatial** one (*where you are*). Spatial disadvantage may lie in the remoteness and isolation of a location which makes it physically difficult for its inhabitants to participate in broader socio-economic processes or it may operate through the segregation of urban environments and the 'sub-cultures' of violence, criminality, drug dependence and squalor which often characterize the territorially excluded neighborhoods (Beall, 2002) A typical example are the *Abujh Maria* and *Pahari Korwa* in Chhattisgarh..

The spatial dimension of exclusion is not entirely divorced from its resource and identity dimensions since it is usually culturally devalued and economically impoverished groups that inhabit physically deprived spaces. Consequently, in certain contexts, it may be possible to capture the causes and consequences of social exclusion through a two-dimensional model of social exclusion based on the intersection of deprivation and discrimination. In others, we may need a three dimensional model because location exercises an independent effect, over and above, those associated with economic or cultural disadvantage.

The analytical 'value-added' of this approach to social exclusion is that it allows insights from the literature on group identity, cultural devaluation and social discrimination to be applied to the analysis of economic deprivation. Thus we find that in many contexts, the extreme or the chronic poor are not 'just like' the rest of the poor, only poorer or poor for longer, but are additionally disadvantaged by 'who they are', 'what they have' and 'where they are' aspects

of their identity which set them apart from the rest of the poor. It also helps to make sense of why some sections of the poor find it harder than others to transform the resources at their disposal, including their labour, into the satisfaction of basic needs. While this 'transformation problem' may sometimes reflect differences in individual efficiency, when it is systematically experienced by distinct groups in a society, and when these groups occupy a distinctly disadvantaged position within the social hierarchy, it is likely to be a consequence of their socially excluded status.

### 1.3. Mechanisms of social exclusion

The explanation of social exclusion cannot be reduced to the idiosyncratic preferences or aberrational behaviour on the part of some individuals towards others. It has to be seen as an institutionalized form of inequality, the failure of a society to extend to all sections of its population the economic resources and social recognition which they need in order to participate fully in the collective life of the community. The analysis of social exclusion is thus concerned with institutional rules, relationships and processes through which resources are distributed and value is assigned in a society, focusing particularly on the mechanisms by which 'access' and recognition is granted or denied. In this section we consider some of the ways in which this works.

Economic theory suggests the important distinction between 'open' and 'closed' groups as one way of understanding access and exclusion. Open groups (such as political parties, social movements) are those, which achieve their objectives by expanding their membership because the benefits they seek increase with increased membership and outweigh the recruiting bringing new members. Closed groups (trade unions, cartels, professional associations), on the other hand, achieve their objectives by restricting their membership on the basis of some agreed set of rules. Olsen's work on 'distributional coalitions', for instance, draws attention to the use of restricted membership as a means by which certain groups seek to capture the 'rents' arising out of their agreement to simultaneously restrain competition between themselves while excluding non-members from the benefits.

The use of membership rules to limit access to valued goods in a society is clearly likely to be an important mechanism in determining the distribution of advantage and disadvantage in a society. However, economic theories provide a largely *individualistic* and voluntaristic explanation of such group formation. They do not address group inequalities, which are not necessarily generated by the conscious cost-benefit calculus of individuals but by forces beyond their control. Structuralist approaches, on the other hand, highlight the *systemic* nature of the processes, which classify people into groups, categories and networks, privileging some at the expense of others. While such classifications may promote the material interests of those who are thus privileged, sociological analysis draws attention to power of social identity, of shared perceptions of 'us' and 'them', in helping to draw up and legitimate these classifications and to reproduce them over time. Indeed, identities based on such social affiliations may over-ride considerations of economic interest.

Folbre's distinction between 'given' and 'chosen' groups is one way to disaggregate the distinction between open and closed groups in order to incorporate a more structuralist analysis of the processes of closure. While chosen

groups are obviously ones which individuals join of their own accord, and which they are also able to exit of their own accord, they are not all equally 'open'. For instance, while the associational life of civil society is largely made up of 'chosen' forms of membership, a consideration of some concrete examples of such associations - such as OXFAM, the Self Employed Women's Association, the Confederation of Indian Industries, the All India trade union congress, Confederation of Indian trade Union etc. - suffice to show that they vary considerably in how open they are and to whom.

'Given' groups, on the other hand, are by definition closed groups with the additional feature that they are less easy to join and less easy to abandon. The socially ascribed character of certain group identities and memberships, which given them the appearance of being 'given' and unchangeable, reminds us that there are group-based constraints on individual choice and that not all such constraints are economic in nature. People are not always in a position to choose who they are, where they belong and how they wish to be perceived for reasons which have little to do with what they own or earn.

At the same time, however, it should be borne in mind that the boundaries between 'chosen' and 'given' are not always clear-cut nor are they always necessarily stable. A 'given' racial identity which is stigmatized by society may be embraced by members of that racial group over time and transformed into a source of pride. There are also 'conjectural' forms of social exclusion which occur because of changes in the actual or perceived situation of individual member in the course of their life time. As Harris-White points out in her study of destitute groups in India, changes to the body as result of addiction, illness or disability often acts as a trigger for the exclusion of the individual from familial and community networks as does transgression of certain norms of inclusion - 'of pure clean practices, healthy states, normal sexuality and compliant behaviour'.

'Conjectural' forms of social exclusion also occur in times of crisis. When families start to slide into greater poverty, cultural rules and categorizations come into play to determine who will be expelled from its support system. Certain categories of members - women, the elderly, the very young, the disabled - face socially-enforced restrictions into the range and types of economic activities they are able to do, rendering them dependent to a greater degree on other more advantaged members. These categories are most likely to become socially excluded when the family economy starts to deteriorate. Furthermore, because of restrictions on their ability to provide for themselves, the loss through death, desertion and abandonment of those who were meant to provide for them, can act as a mechanism for social exclusion.

The existence of conjectural forms of social exclusion suggests that the relationship between identity and exclusion is not necessarily defined over the lifetime of the individual but may occur as the result of particular events. The distinction suggested by Ashwani Seth<sup>1</sup> between 'mutable' and 'immutable' identities reminds us that some forms of identity are harder to shed than others. 'Mutable' forms of social exclusion relate to temporary phenomenon such as the situation faced by migrants spending a limited period of time in an alien environment or to identities which can be transformed with relative ease, for instance, through religious conversion or acquiring formal citizenship. 'Immutable' identities, by contrast, refer to identities and affiliations which have evolved over an extended period of

time, appear almost primordial in nature and do not lend themselves easily to change. They tend to be associated with enduring forms of social exclusion, lasting over the life time of an individual or over several generations.

The ease with which individuals are able to opt into or out of, group membership, the 'switchability' of certain kinds of group identity (Stewart) has an important influence in determining the experience of group membership for its members. In particular, the possibility of movement out of devalued group status or up the social ladder will help to determine the extent to which different groups in a society 'think' and 'act' like citizens with a collective faith in the justice of its institutional arrangements and a collective stake in its future.

To sum up therefore, social exclusion as it has been conceptualized does not entail a dual model distinguishing between those who are 'in' and those who are 'out', but refers instead to the disadvantaged terms on which socially excluded groups and categories participate in the economic, social and political functioning of their society. Such disadvantage is manifested in a myriad ways and in all arenas of life. For instance, it may operate through:

- High levels of exploitation so that socially excluded groups are to be found working in the worst paid jobs in the harshest working conditions and in the most insecure margins of the informal economy
- Asymmetrical patron-client relationships in which members of excluded groups exchange their labour, loyalty and independence in return for protection and security from more powerful sections of society
- Resort to criminal, illegal or stigmatized activities in the face of the barriers faced by excluded groups in accessing socially recognized forms of livelihood.
- Hard-core forms of social exclusion produced by the "destructive synergies" between the extreme versions of disadvantage (Gore and Figueiredo, 1997, p. 43). Thus Harriss-White's analysis of destitution in the Indian context found that, along with poverty and assetlessness, the destitute were characterized by 'stigmatized' identities (mentally ill, leprosy or AIDS-affected, addicts of various kinds, orphaned and abused children, the abandoned elderly and disabled), by the precariousness of their place in the community (many were homeless and lived on the streets) and by the demeaning nature of their livelihood activities which entailed either extreme levels of exploitation by others (as in bonded labour), extreme forms of self-exploitation (the marketing of the body, as in sex work, or sale of body parts) or uncertain forms of charity (begging is commonly associated with destitution),

#### **1.4 Socially excluded groups and categories**

Some examples of social exclusion from different parts of the world will serve to illustrate the variety of forms they take as well as the difference between socially excluded groups and categories. Ethnicity, caste and race constitute the most empirically documented examples of *group-based* exclusion in the development literature, although their significance varies by context. Religion is also an important axis of differentiation and takes on an exclusionary character in particular contexts or at particular times. One of the recent survey under taken by Govt. of India by NSSO has given the statistics that the education, employment and health indicators amongst Muslim in India is



lower than that of the general population. This also calls for policy review where it becomes necessary to analyze the Programme designs in retrospect as to why such a thing has happened to the minority religion given that the constitution guarantees equal rights and opportunities to all citizens. While not all members of religious minorities in the Indian context are necessarily poor, those that are have to deal with the multiple disadvantages associated with economic deprivation and social discrimination.

The Indian caste system in many ways exemplifies the model of social exclusion sketched out in the preceding section. Divisions between different caste groups have evolved over time into increasingly entrenched and closed hierarchies based on rules of marriage endogamy, occupational restriction, limited social interaction and segregated residential patterns. While there is considerable variation in the actual configuration of castes across the region, and in the rigidity with which the rules of caste are observed, the lowest position within each local caste hierarchy is occupied by the 'untouchable' castes or dalits. Historically excluded from the ownership of land and key productive assets, dalits have been incorporated into the social system as providers of various kinds of labour and services that were considered to be polluting. It was members of these castes who had to carry out the removal of night soil and carcasses of dead animals. They continue to predominate in sweeping, leatherwork, manual scavenging and forced prostitution, all activities which are looked down upon by the rest of society.

Ethnicity is another form of group identity which has served as a basis of social exclusion across the world. 'Indigenous' ethnic minorities are often located in difficult or remote geographical areas which has allowed their way of life to be preserved - or to be bypassed - through major periods of transformation. For instance, the entire tribe society in India face discrimination due to geographical isolation.

While indigenous ethnic groups in the Indian context are by no means homogenous, they are, or were, isolated from the rest of society, distanced not only by their distinct worldviews and way of life, but also the remoteness of their physical location or by their nomadic way of life (Pant & Majumdar). They generally tend to be concentrated in a limited number of geographical areas, rather than being spread across the country, like the scheduled castes. They are more likely to own some land than scheduled caste groups but their land is generally in difficult and unproductive terrain and hence many must seek wage labour in order to survive.

*During the study conducted in the district of Amravati and Yavatmal, it was noted that admissions were denied to tribal children in the regular Zillah Parishad schools with the plea that they should go to Ashram schools which is specifically meant for tribals. In Dharni block of Amravati district the study also found that the land owned by the villagers were non-irrigated and programmes related to Agricultural Extension was virtually non-existent.*

A study conducted by a team that was constituted in 2003 by UN to review the progress of MDG made a distinct remark that states "categorical forms of exclusion revolve around specific attributes of people who may share little in common apart from the discrimination they face. These again will clearly vary in different contexts, but age, gender, migration, illness and disability and stigmatized occupations recur frequently in the literature dealing with excluded categories. In sub-Saharan Africa, where access to land and other critical resources under customary law depends on membership of groups defined by common descent, common residence or some combination of

the two, different categories of members have different – and tiered – sets of claims. Primary claimants, usually married male household heads, have direct access while women and unmarried men gain secondary access through the head. While ‘strangers’, those who do not belong to a locality, do not have the same rights of access to land as ‘insiders’, there are mechanisms through which they can acquire some access”.

Illness and disability offer other examples of categorical forms of social exclusion. Leprosy in particular has had near-mythical status as synonym for social exclusion of an extreme kind (Rao, 1996; Silla, 1998). A detailed study of *Disability & Social Exclusion* in Maharashtra suggest that the Persons with Disability (PwD) face multi dimensional form of exclusion prevalent both in urban and rural areas equally. They stem from individual to group, from attitude to action and from policy to programme. As a poor informant from Ghana interviewed as part of the World Bank’s consultations with the poor remarked: ‘It is neither leprosy nor poverty that kills the leper but loneliness’ (Narayan et al., 1999. p. 37). In many parts of the world, leprosy was associated with the out casting of affected individuals by their families and communities and their decline into poverty and destitution. More recently, HIV/AIDS has emerged as a new form of stigma-related social exclusion. As Piot noted in the plenary session of the World Conference against Racism in 2001: ‘HIV stigma comes from the powerful combination of shame and fear...Responding to AIDS with blame or abuse for people living with AIDS forces the epidemic underground, creating the ideal conditions for HIV to spread’. There are in fact strong similarities between the stigma-related discrimination evoked by AIDS and that associated with leprosy.

Finally, gender constitutes a specific form of categorical exclusion in conditions of poverty. While gender is a widespread basis of social discrimination, the intersection of gender inequality and economic deprivation means that women from poor household represent a particular category of the multiple-disadvantaged. Often, although not always, women and girls are at a disadvantage to men and boys in relation to literacy, education, earnings and employment while in some parts of the world, it also extends to physical well-being and life expectancy.

Gender is also emerging as a dimension of extreme poverty in certain parts of the world. Analyzing the characteristics of the poorest 15-20% of households in rural areas of Asia and increasingly Africa documented in a number of studies, Sender suggests that such households are likely to contain a high ratio of adult females to males and that many are unlikely to have had any access to the income of an adult male for several years because they are divorced, abandoned, widowed or because they live with males who are unhealthy, disabled or unable to earn or remit income for other reasons. The women in these households are likely have little or no education, many have had children very early in their lives and report high levels of infant mortality.

### **Social exclusion and health outcomes**

As might be expected, the greater poverty of socially excluded groups translates into poorer levels of health, particularly when their poverty is combined with locational disadvantages of remoteness and lack of infrastructure and social services. However, one unexpected finding from the Indian context relates to *gender inequalities* in mortality rates among socially excluded groups. Several studies have shown that gender inequalities are lower among ST groups across India and in some areas, also lower for SC group. Some recent evidence of this comes

from Agnihotri (2000), using district level data from the 1981 and 1991 census. He reports low, 'sometimes alarmingly low', female-to-male ratios in the 0-6 age group among upper and middle castes in the northern regions of India. Using a more finely-grained analysis than had hitherto been carried out, he found that the highly masculine sex ratios were concentrated in the north-western region. More favourable ratios prevailed in the northern mountainous states of India (Himachal Pradesh and Manipur) and in its south-eastern states. The pattern for the scheduled castes was similarly differentiated by region, with evidence of gender discrimination greater among scheduled castes in northern India. By contrast, ratios for the scheduled tribes, the poorest social groups in India, were the most balanced. Murthy et al found that the higher the proportion of ST in a district, the lower the anti-female bias.

However, while gender inequalities in child survival rates may be lower for STs, they are disadvantaged in other aspects of health outcomes. Maternal mortality rates in India is highest in tribal areas. Infant and child mortality is around 83 and 126.6 per 1000 births compared to 62 and 83 for the general population. About 80% of tribal children are anemic, 50% are underweight and only 26% receive all vaccines (Xaxa..). 65% of women are anemic compared to 48% for the general population. 43% do not receive any ante-natal checkup compared to 28% for the general population. 17% of mothers have institutional deliveries and 15% are assisted by doctors compared to 40% and 37% in the general population.

Other studies suggest that 54% of children aged 3 or less were underweight for their age among SC groups and 56% among ST groups compared to 44% for the rest of the population 47% of SDC children and 34% of ST children had measles immunization compared to 54% of the rest of the population; IMRs were 83, 84 and 68 per 1000 live births respectively while under child mortality was 119, 126 and 92. 36% of births to SC groups and 23% to ST groups were assisted compared to 47% for the rest of the population. In Orissa, 37% of scheduled caste women receive no ante-natal check up compared to 15% of women from non-deprived groups and rates of immunization for scheduled tribe children are about half of that of non-deprived groups (Orissa HDR, cited in de Haan 2004).

Betancourt and Gleason (2000) used district level data from a number of different sources to explore some of the determinants of health and educational provision by the state as captured by the number of state provided doctors, nurses and teachers per 10 persons in rural areas of the district. They found the most important source of variation at the district level related to religion and caste: the higher the percentage of rural scheduled caste and Muslims in the district population, the lower the provision of medical and educational services. Bharat et al provide qualitative evidence that helps to explain the relationship between social exclusion and health outcomes. They note that along with lack of respect for poorer patients, particularly women, public health service providers hold strong stereotypes of population groups which fuel the blaming of specific social groups for non-achievement of contraceptive targets. Acts of discrimination against dalits were reported in the public health services in both poor and well performing states. The avoidance by health workers, particularly paramedic and nursing staff, of physical contact with dalits has been noted by Health Watch Trust (1999) while the reluctance to visit dalit households

explains some of the incomplete immunisation coverage of dalit children. Both real and anticipated discriminatory behaviour and attitudes on the part of health workers deters dalits from using health providers, public and private, particularly for services which involve physical contact, such as giving birth.

### **2.3 Social exclusion and educational outcomes**

Recent publications by international agencies draw attention to the magnitude of the problem of getting all children to school and suggest that South Asia represents the biggest challenge in terms of sheer numbers as well as degree of gender inequality. According to UNICEF's 1999 report on the State of the World's Children : "...over 130 million children of school age in the developing world are growing up without access to basic education, while millions of others languish in sub-standard learning situations where little learning takes place. Girls crowd these ranks disproportionately, representing nearly two of every three children in the developing world who do not receive a primary education." Nearly fifty percent of these out of school children were in South Asia.

According to UNESCO's report on Education for all in 2000, despite progress on the goal of universal primary education, 'more than a 100 million children in the world are still deprived of access to primary education...Nearly all out-of-school children live in developing countries and a majority of them are girls' (p.44)..

More detailed in-country analysis suggest that socially excluded groups account for a disproportionate share of educational shortfalls and confirm the relevance of the gender dimension. For instance, using 1998 LSMS data from UP and Bihar, Lucas estimates that scheduled caste/tribes in the relevant age groups were 1.7 times (1.9 for males and 1.6 for females) as likely not to be in attendance at primary school, a gap of 21 percentage points (20 for males and 23 for females). They were 1.7 times as likely to be illiterate (2.0 for males and 1.6 for females), a literacy gap of 24 percentage points (18 for males and 30 for females).

Analyzing NFHS data (1998-99) in India, Nambisan (2004) notes that the proportion of school-going children from Dalit families communities had increased significantly in the 1990s but non-attendance continued to be higher among Dalit children: 20% in the 6-10 age group compared to 16% more generally and 29% in the 11-14 age group compared to 23% more generally. Moreover, only 43% of Dalit children completed primary schooling compared to 58% of other castes and only 42% completed middle schooling compared to 63% of other caste children in the respective age groups. World Bank estimates of primary school completion of rates of children aged 12-16 years shows considerable variation for Dalit children from a high of 96% in Kerala compared to 100% for other castes to 30% in Uttar Pradesh and only 19% in West Bengal. There are thus clear caste gaps in educational attainment, but they vary considerably by state.

As noted earlier, the greater geographical concentration of STs mean that national level estimates provide a misleading idea of the extent of their disadvantage. In Orissa, for instance, which has one of the highest concentrations of scheduled tribe populations in India, 27% of the not-deprived population in the better-off rural coastal areas were illiterate (and 17% in urban areas) but around 82% of the scheduled tribe population in the southern areas were illiterate (cited in de Haan, 2004). According to the NFHS-2 (2001, cited in De Haan) 88% of the female tribal population, 73% of scheduled caste women, 56% of other backward caste women and 34% of the rest of the female population were illiterate.

In 2000, the drop-out rate at primary level was 42% for all children in Orissa (similar for boys and girls), 52% for SC (substantially higher for girls) and 63% for ST (Orissa Human Development Report: tables 4.19). Micro-level survey of 556 households in Koratpur, one of the poorest districts of Orissa with a largely tribal population, found much higher rates of illiteracy among girls in the age group 6-14 than boys: 31% compare to 18% (Dash and Kabeer, 2004).

There are various factors behind the poor educational outcomes of ST and SC children. One set relates to the extreme nature of their poverty. 64% of the scheduled caste labour force, and 50% of the scheduled tribe labour force, in rural areas worked in agricultural waged labour, one of the poorest paid occupations in the economy, compared to just 30% of 'other' groups. Both the former groups were also disproportionately represented among bonded labourers: according to government survey data, 66% of bonded labourers belonged to the scheduled castes and a further 18% to scheduled tribes (cited in Burra , 1995). According to a report published by the Anti-Slavery Society (2000), the overwhelming majority of approximately 3 million mine and quarry workers in the Indian state of Rajasthan belong to scheduled castes and tribal groups, many trapped in debt bondage.

Not surprisingly, such groups also account for disproportionate share of child labourers as well as of children out of school. Using 1993-94 NSS data, Thorat (1999) found that the proportion of child labour was 2-3 times higher among scheduled caste and scheduled tribe groups than the rest of the population. Doraisamy (1997) found that higher levels of SC/ST groups within the population of a state significantly increased child labour force participation rates. Since debt bondage can trap marginalized tribal households for generations, its implications on children's ability to go to school are significant. Nayak (2001) found that among Bondo households in Orissa, children whose fathers die when they are young are particularly vulnerable since they have to take on responsibility for fathers' debts.

The gender dimensions of child labor and educational exclusion tend to be obscured by conceptual and methodological limitations in data collection. These have given rise to a category dubbed the 'nowhere' children (Chaudhri, 1997a), ie. children who were neither at school (and hence excluded from enrolment data) nor at work (and hence excluded from labour force data). According to the 1991 census, there were 92 million of such children. Closer investigation suggests that they were often engaged in forms of productive work which are not counted as 'economic activity' by formal data collection efforts (eg. fuel collection, rag picking, paid and unpaid domestic work) or else in socially stigmatised forms of occupations (prostitutes, beggars, vagabonds etc) which tend to go unreported (Chaudhri, 1997a).

The gender bias of these omissions are pointed to by Doraisamy (1997) who estimated that nearly half of girls in the school-going age are engaged in such work and hence get excluded from both work and educational statistics. Micro-level studies also suggest that there are many children, often girls, who are indeed neither at work nor in school (Bhatti, 1998 ). There is a high rate of abduction of Adivasi girls for sexual trafficking (Rao, 2000) while a study of trafficking in girls for prostitution from Nepal, shows a high presence of ethnic minority groups.

A study based on household data from two slum neighbourhoods in Calcutta found Muslim children were more likely to be at work, particularly if they were Hindi speaking (ie. migrants from outside W.Bengal, often Bihar), compared to Hindu children (Kabeer and Mahmud, 2004). However, among Hindus, Scheduled caste children were more likely to be working than other castes. Despite the introduction of other explanatory variables, including household income, assets, mother's education and membership of a samity (organisation), all of which exercised a positive effect on the likelihood of children going to school, and female headship and reliance on casual labour, which exercised a negative effect, Muslims and Hindi speaking migrants, remained significantly less likely than the rest of the population to send their children to school and more likely to send them to work. However, the scheduled caste effect disappeared once female headship was factored into the analysis because of the much higher incidence of female headship among scheduled caste households.

In her review of the factors which explain the poor educational outcomes among SC children, Nambissan points to some of the ways in which caste identity plays a role. Teachers are predominantly upper caste and bring their own understandings of the legitimacy of caste relations into the class room. Dalit children are expected to run errands and are assigned menial tasks such as sweeping and cleaning the classrooms. A higher rate of teacher absenteeism was reported when children were mainly from scheduled caste and tribal communities. In New Delhi it was found to be 65% in such schools compared to 33% elsewhere. Such treatment has particularly negative effects for children who are likely to be first generation learners.

# **Social Exclusion**

## **Field based Study of Selected Tribes**

**of**

**Dharni block (Amrawati) and Zhari-Jamni (Yavatmal)**

## **Qualitative Tool for Measuring Social Exclusion**

### **(Guidelines for Focus group discussions)**

Considering the constitution of India which is one of the most progressive in the world, recognize Social Exclusion as an inherent problem in the Indian society. Keeping this in view, the provision of positive discrimination has already been included as an integral part of the constitutional framework. Accordingly it is mandatory to reserve a stipulated percentage of benefit targeting the most socially under privileged sections of the society. However inspite of the systematized and responsive policy formulation Social Exclusion is glaringly visible in Indian society both in rural and urban areas. It can be noticed in various realms of the society be it rich or poor, be it rural or urban. Reviewing the global literature on Social Exclusion, it is seen that Social Exclusion defined in the Western context and the problem perceived are mostly related to discrimination in employment of the ethnic minority. However in Indian perspective the dilemma of definition is highly contextual, where Social Exclusion is seen in its different forms of existence. This demands that the academicians and field practioners to come together to undertake series of action research project so that adequate theories are generated in order to enrich the lexicon of development of the under privileged who are almost invisible.

When contemplating the study of Social Exclusion, some of the concerns that surrounded the thought process were series of questions that became pre-requisite as a starting point. They were

- When do we say that an individual/community is socially excluded?
- What is the level of social exclusion in a
  - Country?
  - State?
  - Community?
- Can we say that social exclusion in community 'A' is less / more than that in community 'B'?
- Given the level of social exclusion in a society, which subgroups of the population, separated according to ethnic, caste, sex, geographic, or any other socioeconomic characteristic, contribute, more to aggregate social exclusion?
- What are the issues related to policy, programming, implementation and administration?
- Do participatory and empowerment processes contribute positively / negatively to Social Exclusion?

Answering these questions required probing at a primary level and also observe Social Exclusion from a close quarter. However there was no readily available tool /instrument that could be used directly in the field for gathering of either qualitative or quantitative data. It was conceded best that multiple instrument be used to capture learning of Social Exclusion. Accordingly it was decided that case study, focus group discussion,



qualitative and quantitative questionnaire be administered on a pre - selected community in order to test the suitability of these instruments and then make necessary changes so as to standardize them.

The first set is of 18 guiding questions prepared for focus group discussions, meant for mixed group some specifically targeting to the under privileged section. These were lead questions for the FGD and by no way barring the freedom and probing capability of the facilitator. The second set of instrument is a qualitative questionnaire of 10 questions, specifically targeting the discriminated community. The third set is a quantitative questionnaire having 18 closed ended variables. This set of 18 questions will give us the idea of the extent of isolated feeling amongst the target population within the community. These variables are meant for heterogeneous population though the sampling method expected is purposive.

The experience of FGD that was undertaken in 9 villages viz. Chourakund, Ranguveli, Harisal and Feldhana in Melghat; Muchhi & Rudha in Zhari – Jamni; Pahapaud & Daghadipaud in Pandharkawda and Yeoti in Nangaon - Khandeshwar is being given briefly against each guiding questions:

**Q1. Some people say that the benefits of GOVT/ZILLA PARISHAD are not being shared equally between all sections of the community. They assert that there is a tendency for the GOVT/ZILLA PARISHAD to cater primarily for the needs of 'mainstream' groups, which creates a risk that these groups will benefit more from GOVT/ZILLA PARISHAD programs than more disadvantaged groups. To what extent do you agree or disagree that the continuing this trend in GOVT/ZILLA PARISHAD are likely to increase this inequality? (Lead the discussion step by step )**

*We felt that this question was being interpreted as per the convenience of the dominant group. The tendency was to designate themselves as disadvantaged in relative term. The benefit accrued was perceived in comparison to some one else who has been benefited more from a scheme, within the village or from the neighboring village. Also when addressing 'benefit', the perception was that of programmes related to livelihood and infrastructure followed by drinking water problems. Non of the issues related to education, health, nutrition and sanitation ever found a place in the list of 'benefits'. The subject of the disadvantaged within their own village did not surface at all in any of the villages by itself. We realized that the topic have to be deliberately infused during the course of discussion. Being one of the most important aspect of Programme reach out, it is suggested that sufficient time be given to deliberate on this. Also the facilitator may like to subdivide the guiding questions in to parts and reintroduce during later course of discussion as per convenience.*

**Q2. What future developments programs are you aware of that could potentially improve the lives of people living in your area? (Please be as imaginative as possible while probing as the likelihood of comments may be stereo typical of a few socially excluded groups – long wish list).**

*Exploring for any development Programme that may be in the pipe line did not seem to be a practice in any of the villages. However what kind of programmes will help them generates sufficient discussion where by they not only give their suggestions regarding type of programmes but also on the procedural convenience. There was noticeable difference in attitude of the villagers from Pandharkawda Block who thought that it was their duty to remain informed and gather information from the Govt. authorities regarding any future schemes.*

**Q3. TV, Newspaper, Radio and your local media (name the media) are active method of connecting people to each other and to services. In your experience, how have the various depts. of ZP and Village Panchayat used these media to impact positively on disadvantaged groups and what future role could they play in reducing inequality? (Lead a discussion – do not rush)**

*Lack of information was one of the major areas of concern in all the places. In some of the discussions we realized how information regarding different scheme is misconstrued to benefit the influential group. Wherever the village planning process has taken place, the volunteers can become a major agent of change by keeping the community appropriately informed. The Govt. media was almost absent so far as awareness generation regarding schemes are concerned.*

*This question, we realized does not generate discussion and can become dead very soon. However one has to lead discussion very consciously by examples from every day viewing of TV advertisements of consumer goods and the changes they have seen in their own lives. We also realized that in addition to sensationalizing issues, media need to play much bigger role in development so as to reach people.*

**Q4. What developments in GOVT/ZILLA PARISHAD are you aware of that could address the needs of people who move frequently for search of work?**

**Q5. (With migrating parents) what can ZP do to help your child to continue visiting**

- a) School?
- b) Anganwadi?

*The above two questions were specifically designed to address the issue of migration which is very common in different parts of Maharashtra. We wanted to gauge the extent of problem they feel regarding their children's*

*education, health etc. the discussion generally leads to different and multifarious problems they face which includes from economic to sexual exploitation. It can give vivid indication of flaws in the Programme and where changes can be brought.*

**Q6. Poor basic skills and low educational level are key barriers to entering the work force and to full participation in society. How could GOVT/ZILLA PARISHAD help to address the needs of young people and others with poor basic skills or few/no academic qualifications? (Probe the knowledge as well as access to poverty alleviation programs including EGS)**

*There was a clear divide in villages which had mixed group. While in Yeoti, Pahapaud and Daghadipaud the youth group were not looking forward to employment under EGS, it was a serious concern in other villages of Melghat and Zhari – Jamni where the education level is very low. We also experienced the strikingly indifferent attitude amongst the educated youth who neither gave importance nor allowed sufficient discussion on EGS. It is felt that this question has the potential of extracting the livelihood aspect of Social Exclusion i.e. popularizing of type of scheme that would suite a particular section of the community.*

**Q7. Some groups fare consistently poorly across a range of indicators. For example, some groups significantly underachieve at school, or have low health & hygiene status and also do not come to Gram Sabha.. How could GOVT/ZILLA PARISHAD help to address such differences?**

*This was one of the most direct questions that the group did not take much time to relate who was this targeted to. Almost in all villages the group directed their views towards the Dalits stating that they are culturally not inclined towards education and health & hygiene. They also like to stay aloof and never take interest in the Gram Sabha. However the story that we heard in Feldhana in Dharni and Rudhapaud in Zhari–Jamni was different who told us that they are never informed of Gram Sabha and also many a times refuse admission in the school.*

**Q8. Those who are most disadvantaged and furthest from the District/Block headquarters often find it difficult to take advantage of programs meant for them. Can you suggest how GOVT/ZILLA PARISHAD could address this issue?**

*Geographical distance from the district and block headquarters was mention as major problem by all the groups. In addition it was realized that in most of the cases the paud and padas suffer the most. This question generates good discussion and attributes of geographical isolation are well captured. However, the question also encourages the*

*villagers to complain regarding the Govt. authority's communication pattern. The facilitator need to be cautious not to drag the session of complain to over power other prime issues.*

**Q9. Some groups feel that their voice is seldom heard and are consequently cut off from participation in and interaction with the community. Why do you think this happens?**

*This is a sensitive question to be put forward in the mixed group. There is by and large denial on this subject and the groups that we interacted with have told us that every one gets fair chance to speak and give their opinion – nobody is stopped from speaking. Contrary to this fact we noticed that only certain people were speaking and answering all questions even after we tried to make others speak. During the discussion in Harisal, Jhanak Durve and two others were keen to talk but were not allowed to do so, stating that they were drunk, until such time we asked them to speak. The sensitivity can increase when the community has factional political groups. This can generate tensions with increased arguments. This happen with us in Daghadipaud at Pandharkawda, where we had to change the topic of discussion while drinking tea.*

**Q10. When do you feel like participating in the community meeting? Do you feel free to discuss your problems in the community?**

*This question is targeted towards the community who do not participate in village meeting. One is able to get very good feedback from the community as we realized in case of Feldhana and Muchhi. In the mixed group we found this question as redundant.*

**Q11. Have you heard of Micro Planning? Did you take part in it. ( Probe in details if not participated).**

*Asking regarding micro planning is a common question that can be asked in both homogenous as well as heterogeneous group. The second part of the question should be asked with sufficient probing.*

**Q12. What kind of difference did you observe in the attitude of your community towards you after the Micro Planning? (Probe in details of his experience during MP)**

**Q13. Was the group open in giving you any village responsibility? (If yes, how do you think this happened?)**

*The above two are again questions that demand in-depth probing. Let the respondent narrate his /her detail experience of the process. The facilitator should further explore for differences in the behavioral aspect in the community as well as at the home front. These questions can bring out the attitude of the community towards the*

*Dalits and other differentiated groups. With higher levels of village responsibilities being given to the discriminated group the community will score positively in the yardstick of social justice.*

#### **Q14. Is there anything else you would like to tell us?**

*This is an open-ended question to be put in all communities. We experienced very good discussions especially from the community facing isolation. This is also question that can continue with the conclusion of the discussion more informally while preparing to leave the village. We did this while walking out of the village when a good number of 8-10 youth were walking with us and discussing. The facilitator may choose his own convenient method.*

Discussion was lead in Harisal Village of Dharani Block of Melghat Region in Amrawati Distt. On 1<sup>st</sup> of Nov. 06. The village falls in the range of forest village and situated in the Melghat Tiger Reserve. In accordance to the forest definition the village is situated in the Multiple Use Area of the Tiger Reserve, where restricted commercial activities are allowed. Harisal gives the picture of semi-urban look with several pucca houses. The Gram Panchayat is situated on the main road connecting the Block HQ of Dharani. The Panchayat Bhawan is a double storied multi purpose building with commercial rental in the ground floor and the Panchayat Office including the meeting hall in the upper floor. The *Sarpanch* of the village is a woman, the post being under reserved quota. The meeting was earlier scheduled on the previous evening. However the *up-Sarpanch* who is more influential then the *Sarpanch* was out to a distant neighboring village that happens to be geographically located in the State of M.P. Hence the meeting was rescheduled for the subsequent day i.e. 1<sup>st</sup> of November'06.

1. With the ice breaking general discussion regarding SHG's and their functioning, the question was posed to them regarding various Govt. schemes, their effectiveness and distributive pattern. On probing regarding the schemes not reaching the poorest the discussion took a turn towards their basic problem of livelihood. The main issue was that the Forest Deptt. was unable to provide sustainable employment. Although most of the villagers who attended the meeting seemed from relatively privileged categories, they still maintain that people who have money are able to gain more from the Govt. Schemes.

**Comments:** *Those who were present in the meeting were mostly the people who had small land holding outside the project Tiger. They also seemed relatively more influential and had regular contacts with the ZP functionaries. An important point to be noted is the fact that the meeting was postponed on the plea that the Sarpanch was out of the village and no one mentioned that actually he was the up-Sarpanch. The villagers including the Gram Sevak did not feel it important to call the (Mahila) Sarpanch for the meeting until he was specifically told to do so.*

2. As far as future development Programme was concerned they were neither aware nor imaginative enough to comment on. The problem of livelihood was so apparent and dominating that all other issues such as education, health, nutrition etc. took a back seat. The only imagination that they could talk about was that the Forest Deptt. either should provide them with sustainable livelihood or at least let their cattle graze in the forest area.

**Comments:** *This village has not gone thru the process. The concern towards social issues seemed distant from their scheme of thinking. Availability of drinking water was a definite concern. It will be highly beneficial to organize the process here in order to draw attention of the villagers on software issues.*

3. The information regarding various schemes of the Govt. is very hard to come by. While the Gram-Sewak stated that all information is given, the villagers vehemently disagreed and stated that there is a serious lack of information as well as clearly explaining the schemes. However they all stated that using of any of the local media would be of great help since the information will reach to the poorest person of the village who will be then able to reap the benefit from the schemes. Some of them also pointed out that they have been hearing regarding the schemes in the radio as well as watching in the TV, they all remain at the higher level and seldom come to village level.

**Comments:** *It is very important to work on innovative methods of Programme communication. Communication needs to demystify itself to reach to people with greater local interface. Today the print media has gone local from erstwhile-centralized focus, but more for commercial reasons. It is time that a media alliance is encouraged to be formed that could include sub-regional and local media so as to concentrate on development issues at a local level on a sustainable basis.*

4. Migrating in search of job is a common phenomenon where the whole family migrates to other Distt. and States. Normally they migrate for 5-6 months in a year. During this period their children do not go to school since there is no body to look after them when they are out. This creates serious problem in the children's education as well as nutrition etc. Due to their struggle for survival they feel they have no other options but to leave the village and go. From the discussion with the Gram-Sewak it was evident that there were no solutions with the Govt. for checking this trend. It was taken for granted that this practice of migrating to other places was inevitable and is part of their culture.

**Comments:** *The migration is bound to continue due to severe shortage of livelihood options. However, the Govt.'s rule of temporary TC allotment to children for admission in the school where they migrate (if migrated within Maharashtra) is totally unheard by the villagers. The school headmaster though has heard about this, took a casual*

*approach by stating that he had seen such a circular, but none of the parent's approached him for this. Even if this scheme is implemented in all earnest, the basic problem of the child being out of school for long period gets solved. With the child being in the school, the legitimacy for using other Govt. services is increased.*

5. Considerable discussions took place regarding the BPL Schemes as well as EGS. The villagers mentioned that there are seven SHG's out of which only three are functional. On an average there are 11-15 members in each group. The three groups which came for the meeting were all from the same mohalla of the village and most of them were from Gavli community who are the influential sector of the village. The SHG's took advantage of the loan facilities given by DRDA which was used for goat rearing. Some still have the goats while others sold them off. All the villagers present were registered for EGS since Feb.'06 but have never got any work nor have they got any money in lieu of work as per law.

**Comments:** *There was a clear divide between the women from Gavli community (most of who formed the SHG) and the others. The other members of SHG hailed from SC community were economically better off. The responsive Gavli community also holds more political power hence majority of the Panchayat members are from this community while the rest belong to SCs'. Overall here the political economy of the community though in transition, made a clear divide than the sociological factor as is commonly believed.*

6. The point regarding participation in Gram Sabha was discussed to which most of them stated that Gram Sabhas are seldom held and whenever they are; the villagers don't come to know about it. When discussed further with the women's group, they stated that nobody calls them for the meeting and even if a few of them who go to Gram Sabha do not speak. However all the women stated that they all are comfortable in participating in their SHG meetings. Mahila Gram Sabha is unheard of and has never taken place. On asking why certain people persistently fair low in different indicators, they stated that they (Bellur community) do not understand anything about village development and never show any concern. A few of them stated that they remain hygienically very dirty. As such no one wants to include them in the group. They also stated that culturally they like to remain within themselves.

**Comments:** *The debate evoked the multiplicity of the disadvantage in the area and exclusion could be seen running parallel to the concept. With fewer chances of social mobility for the Bellur, the third generation development seemed a distant dream for the entire community. Functionally, deprivation was integrated into the fabric of their lives with no compatible hardware seemed responsive enough. It reminds me of the pessimistic theory floated by the mid 70's economist Frank, who stated that there are layers of exploitations in the society that moves in incremental order. One can truly experience this here, when one geographically deprived community is consciously excluding the other. The policy options need to synchronize the*

programming keeping such situations in mind. Do we still need to debate people's empowerment and whither participatory planning?

7. The disadvantage of being geographically away from the Block and Distt. HQ was aired quite strongly, and the feeling was that most of the benefits go to the people who live closer to both Block and Distt. HQ. The major disadvantage stated was very much similar to the point of view of Chourakund Villagers who said that constant follow up with the Govt. authorities are a must which requires frequent visit to Block Office. This is expensive as well as time consuming for them. Thus they are always deprived of the benefits.

**Comments:** It almost sounded like being in Indian corporate world where many a times it pays off to be near the boss and be his Golf partner than actual performer. The one who is nearer to the bosses of District and block headquarter gets the larger share of the cake. With the excellent service delivery structure of the Govt., which is ever expanding, their integrated management capability draws a huge exclamation mark. It also brings home the point that the Panchayati Raj system is unable to exert sufficient power so as to draw the benefits from the schemes for the remote villages. The member of the Panchayat mostly hobnob at the Panchayat Samiti office thus not paying sufficient attention to the village matters and concentrating on their political aspirations. As individuals the villagers find it extremely difficult to balance their work and phase out time for the other software necessities of life. With a non-responsive Panchayat as well as disinterested Govt. functionaries it is inevitable that there would be basic feeling of alienation among the villagers. Social exclusion in such a condition is a systematically forced situation.

8. The group felt that the Govt does not hear their voice. When the same question was reframed to ask regarding their voice being heard in the Gram Sabha, they all stated that they are able to air their problems and feelings when Gram Sabha is held. However they also mention that every thing is agreed upon when the Gram Sabha is held but no decision finally gets implemented.

**Comments:** Two most important aspects to be noted which has also been stated earlier that women very rarely go to gram sabha. In addition, Mahila gram sabha has never taken place nor have the women heard of it. The gram sabha are hijacked by the power center of the village who ultimately minute only those matters that benefit them. The discussions on issue such as education, health, child nutrition, sanitation etc. are never discussed. Thus matters only related to subsidies, Indira Awas Yojana and other livelihood related schemes get in to the agenda of the gram sabha. Without an exception, similar to all other Panchayat under the reserved quota for women, the male dominance continues and the show is generally run by the up-Sarpanch who is again a male. There seem to be clear role definition for men and women with least expectation from the women towards their right to political participation.



Discussion was lead in Yeoti Village of Nandgaon-Khandeshwar Block of Amrawati Distt. on 2<sup>nd</sup> of Nov. 06. Yeoti is the bordering village to Yavatmal Distt. As such it is farthest from both Distt. as well as Block HQ. The village has mixed population with 34.6% SC. There is no ST population as per census 2001, however the villagers mentioned that there were approximately 10-12 households who belong to the Banjara Community. The village has undergone the 5 day process of microplanning, which resulted in the increase of SHG's to 19. Subsequent to microplanning, formation of Youth and Kishori Group has also taken place. The youth group formed currently consist of 11 members. Similarly the kishori group consist of 36 members. There are altogether 3 volunteers (all female) who the villagers selected during the process. When the process was underway, the village was under the epidemic of "Chikun-Gunia". The epidemic was so strong that it struck to every single population of the village. It was also followed by "Dengue Fever" which took one life. The surrounding of the village was extremely unhygienic with water logging street and potholes near the houses. More then 75% families own lands which ranged from 5-15 acres. Soya bean, Cotton, Orange Orchids and Tur are main crops. Approximately 85% of the villagers have cattle. Most of the houses keep their cattle within the premise of their house due to which hygiene conditions are further threatened. There is a stream separating two sides of the village- one where the Rajputs and caste Hindus live, while the other side the SCs, Gond, Banjara and other lower caste live.

1. When discussed regarding reaching equal benefits of the development programmes to all sections of the community the group stated that this happens due to lack of information. Whenever new schemes are launched, negative criticism is spread in the village. Due to this the villagers do not take much interest in knowing further or availing of the scheme. Thus most of the time the members of the Panchayat and a handful influential people reap these benefits.

**Comments:** *This was an interesting phenomena stated by the villagers that the Panchayat members deliberately float negative propaganda against the Govt. schemes either by stating procedural complications or by bringing wrong economic calculations. This discourage the villagers from taking interest right from the initial stage. Thus the members of Panchayat reap the benefit amongst themselves in connivance with the block authorities. Another point came to our notice that the group who were participating in the discussion were mostly youth group majority of them were studying in the Senior Secondary School or in the collages. Though caste wise it was a mixed group nobody from the Banjara or other dalit community were present.*

2. There is a seldom use of any media for information or propagation of schemes by ZP or the Panchayat. This brings more divide in the village between the influential people and the rest.

**Comments:** *Although we uniformly experienced the lack of awareness arising out of non-availability of appropriate information regarding the Govt. schemes, there is seldom using of any media for optimum reach out. Information is power, which is being denied to people due to basic fabric of programming.*

3. The group had fairly good knowledge regarding poverty alleviation Programme who also had availed of loans etc. However their knowledge on the right regarding EGS was incomplete and also did not bother to know more about it. The group who came for the discussion was all from APL Category.

**Comments:** *Most of them being from the privileged household had knowledge regarding different available bank loans, their interest regarding EGS or other poverty alleviation Programme was very low.*

4. On the point regarding some groups not fairing well in range of indicators generated a healthy discussion with most of them agreeing to the fact that there are a few household who consistently show poor health and education achievements. After the micro planning process, the youth as well as kishori groups visit the families to motivate them regarding school, health and hygiene. However they feel that more persuasion is required for convincing them. Gram Sabha is held in the way when most of the villagers do not participate. Normally the announcement is done and time fixed during the peak working hours when villagers are unable to attend. Due to lack of quorum the Gram Sabha is adjourned and held subsequent day without any intimation and matters decided by the Panchayat Members along with few influential people who mostly meddle with village politics.

**Comments:** *Again we observed the same problem regarding the conduct of Gram Sabha. The fruit of democratic decentralization seems to be missing and the whole process of corruption seems to have been substituted from the district to village level. The only difference being the quantum of resources that was earlier being distributed amongst fewer people at district level is now being decentralized to fewer influential groups at village level. Hence statistically there are a larger number of people who get the share of money. The social and distributive justice is still on paper.*

5. Everybody unanimously felt that being away from Distt. and Block HQ is of great disadvantage and is always out of the sight of the Administrative Authority. The village was even not visited by any Distt. authority even during the flood as well as epidemic of “Chikun-Gunia”.

**Comments:** *Distance from the district and block head quarters was definitely a concern expressed by their group. The communication system not functioning appropriately due to non-committal Gram Sewak as well as an indifferent Panchayat makes it even worst.*

6. Microplanning was conducted in the village during the last six months. Participation could not be done in full due to the epidemic of “Chikun-Gunia”. However there was more attendance on the last day of the process.

**Comments:** *The five days process was initiated at a time when the epidemic of the Chikun – Gunia was spread out in the village. As per the villagers, it was one of the worst type that affected the village and every single person of every house hold was affected. Under such circumstances one fails to understand why was it necessary to proceed with the process during such a time. The villagers though stated that only on the last day the attendance increased. In such a situation the purpose of the process is defeated and remains more ritualistic in nature.*

7. The process brought forth the community together to discuss on village problems and the major difference that can be noticed is at the Anganwadi Center as well as substantial difference in reducing alcoholism. New groups have also been formed who now take active part in village development.

**Comments:** *The volunteers were found to be very active and motivated. All the three of them have passed their SSC and are keen to be involved in community work. Though the process was not conducted in manner it should have been, it still made an impact in the community. It was visibly noticed in the behaviour of the lactating mothers as well as interest of the women to come together for formation of SHGs. We visited a few households after the meeting and discussed directly with the women who stated that they would also be forming groups for monitoring the Anganwadi as well as the school. However the unity was observed more with the caste Hindus and nobody discussed regarding involving the Banjaras and SCs specially the one who were scavengers and sweepers.*

Discussion was lead in Chourakund Village of Dharani Block of Melghat Region in Amrawati Distt. On 31<sup>st</sup> of Oct.06. The village falls in the range of forest village and situated in the Melghat Tiger Reserve. In accordance to the forest definition the village is situated in the Multiple Use Area of the Tiger Reserve, where restricted commercial activities are allowed.

1. A focus group discussion was lead on the basis of certain pre set guidelines to understand social exclusion from its multiple angles. The first discussion point was aiming at understanding the way and means of the benefits from various Govt. development programmes, its reach out and its effectiveness to deliver the benefits to the poorest. While agreeing to the fact that benefits are accrued by influential members of the community, it happens so because there inability to follow up with the Block and Distt. Authority. The Block HQ is Dharani which is 40 kms from the village with a very limited transportation facilities. In addition their extreme poor economic conditions prohibit their visit to Block offices for continuous follow up.

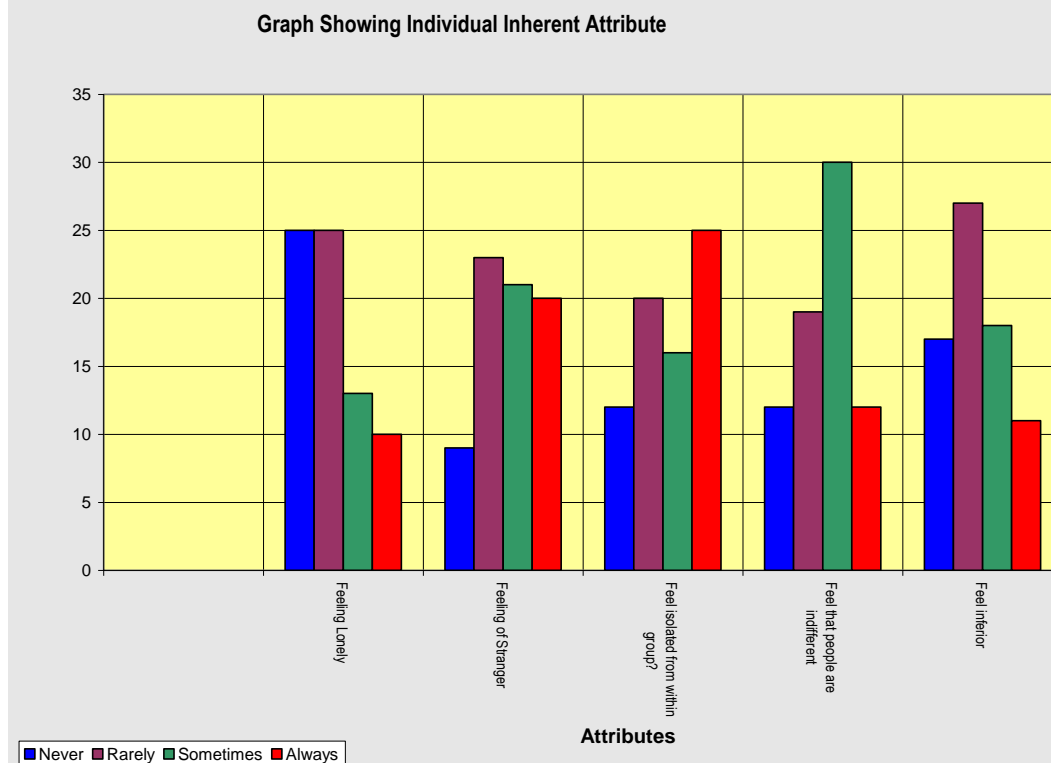
**Comments:** *The enactment of 73<sup>rd</sup> and 74<sup>th</sup> amendment guarantees decentralized governance so that the plan could be generated on the basis of peoples demand. This plan would then be dealt at Panchayat level with the set priorities of the villages under its jurisdiction. However the devolution of power has not taken place as it should have been. The villagers expressed that in two occasions the Gram Sabha passed the resolution for construction of road and the same has been sent to Panchayat Samiti. However 4 years have passed since then yet no action has been taken. This clearly states that the power of deciding and executing by the Village Panchayat does not hold sufficient weightage.*

2. Another point of discussion was lead to gauge their ideas and knowledge on any future development programmes of the Govt. that may be beneficial to the people living in their area. It was realized that 95% of the people were unaware of the wide spread Programme of ZP. Inspite of provoking them for discussion they could only think of the Forest Dept. providing them with works such as preparation of plantation pits and internal construction of roads in the forest area. It was also interesting to know that inspite of developmental facilities provided by ZP, their affiliation and expectations were from the Forest Dept. It was also noted that the Ashram Shala which was run by the Dept. of Tribal Welfare has not been functioning for last several months, and most of the children now go to the ZP school. The parents do not have much feeling about the ZP school.

**Comments:** *There seems to be far reaching gap between the Distt. Development Administration and the Village. This needs to be reduced. This perhaps could be done through regular visits of the Gram Sewak and established the links.*

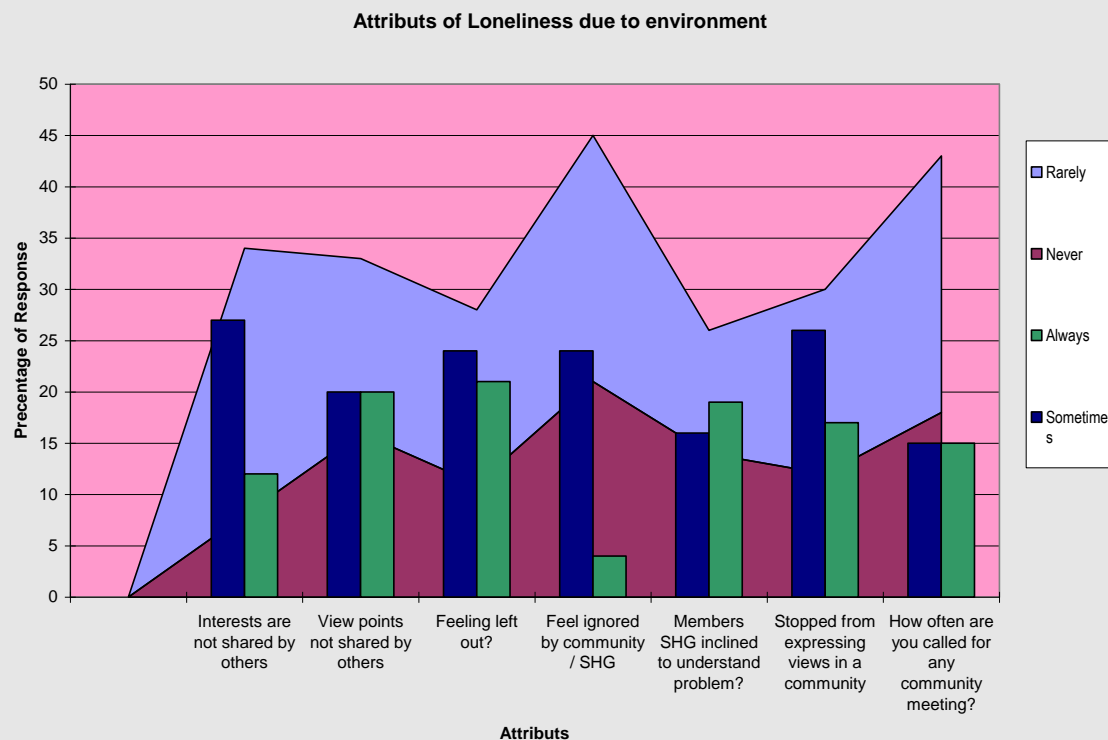
In addition to FGDs and qualitative interviews, a set of 18 quantitative questions were designed to understand the levels of Social Exclusion that existed in villages . A total of 73 respondents were selected through a stratified sampling technique in 2 villages of Amravati and Yavatmal district. The villagers were from Yeoti and Muchhi , both being common from FGDs. While the main objective was testing of the tool, also the responses brought out could give further support in understanding Social Exclusion when looking it in combination with the qualitative data.

The variables can be divided in to two sections - the first is a set of five questions that intends to understand the individual inherent attitude that can encourage exclusion. The second are set of seven questions that intends to analyze the environmental factor leading to exclusion.



From the above table it may be noted that substantial number of respondents have expressed negative feeling concerning their community relationship. Except for the variable of feeling loneliness where a total of 31.5% of the respondent have given negative ranking, all other variables have negative ranking expressed by above 40% of respondent. On the question of feeling isolated from the community, it may be noted that a total of 34.25% of the respondents have expressed extreme form of isolation and stated that they always feel isolated. As much as 56.5% of the respondents have expressed that they feel people are indifferent towards them.

The above table expressed peoples feeling that can also be attributed to individual inherent personality trait that may be a dominant factor. Let us look at the table below:



Taking the variables together i.e. sharing of interest and sharing of view points by other villagers, we find that in both the set of variables, negative response is above 50%. While in the factor of interest not being shared, 37% of the response is towards the milder side of the negative scale where as on sharing of view points, the respondents have expressed their feeling equally on both side of the negative scale thus making a total of 54.8% of the respondents feeling pessimistic. Further clubbing up the variables on feeling left out as well as being ignored by community, we find a very high percentage as in the negative trend. Over 60% felt left out and approximately 38% feel that the community ignores them. As high as 58.91% of the respondents expressed that they are stopped from expressing their views in the meeting and 41% of respondents stated that they are never called for the meetings.

The overall distribution of response level was 52% in the positive and 48% in the negative side.

Name	Tru	'Total SC Population'	'Total ST Population'	'Sex ratio 06Years'	'Sex ratio SC'	'Sex ratio ST'	'Percentage SC'	'Percentage ST'	'Male SC Population'	'Male ST Population'	'Female SC Population'	'Female ST Population'
Maharashtra	Total	9881656	8577276	913	952	973	10.2	8.9	5063062	4347754	4818594	4229522
	Rural	7263149	7581947	916	957	978	10.9	13.4	3711134	3832393	3552015	3749554
	Urban	4024707	1116294	904	942	931	9.2	2.7	2072038	578126	1952669	538168
Amravati	Total	446623	356533	941	936	957	17.1	13.7	230641	182217	215982	174316
	Rural	318152	322622	946	935	959	18.6	18.9	164452	164656	153700	157966
	Urban	128471	33911	932	941	931	14.3	3.8	66189	17561	62282	16350
Yavatmal	Total	252802	473370	933	952	960	10.3	19.3	129482	241500	123320	231870
	Rural	200888	441399	937	947	961	10	22.1	103201	225082	97687	216317
	Urban	51914	31971	911	975	947	11.4	7	26281	16418	25633	15553

The testing of the tool was under taken in two Vidharva district of Maharashtra viz. Amrawati and Yavatmal. Yavatmal is amongst lowest five districts having very low HDI according to the 2002 Human Development Report. The above table gives a comparative picture of the basic demographical details of the two districts in comparison to the state average.

Amrawati has a total of 17.1% SC population and 13.7% ST population, which is 6.9% and 4.8% respectively higher than the state average of SC-ST population. The over all sex ratio of the state for 0-6 years age group is 913 per thousand population with the rural average being 916 and urban average being 904. Both Amrawati and Yavatmal have higher sex ratio amongst 0-6 populations with an average of 941 and 933 per thousand respectively. However the urban sex ratio in Yavatmal is 22 point lower as compared to the average where as Amrawati is 9 point lower than the average. This may be possible due to higher rate of foeticide in the urban area of Yavatmal as compared to Amrawati. Wani is a coal belt in Yavatmal, which also has one of the highest cash flow. The incidences of HIV / AIDS is extremely high and also has one of the highest rate of abortions in the state according to a study conducted by UNFPA in 2002. Amrawati has an average of 17.1% of its population who are SCs and 13.7% as STs which makes a total of 30.8% of its population who are socially deprived. Similarly Yavatmal has 10.3% as SCs and 19.3% as STs making it a total of 29.6% who are in the under privileged category. Taking these two districts together it can be concluded that 1/3<sup>rd</sup> of its population face the danger of being socially excluded.

The study was particularly located in Dharni block of Amrawati and Zhari – Jamni block of Yavatmal. These two blocks according to the district authority are the most challenging blocks from both administrative as well as developmental point of view. While Dharni happens to be amongst old development blocks, Zhari – Jamni is a newly carved out block since 1998. While doing the study it was realized that the challenges posed by each of the block was different as compared to other.

Dharni is located in the Melghat region which is situated on the Satpura mountain range and is fully forest covered. With an extremely difficult terrain the survival fight of the people here are between human beings and wild life on one hand and between forest management and development agency (who work in complete transverse with one another) on the other. The lack of convergence of the two agencies creates conflict of every one's responsibility and no one's responsibility – the situation remains unchanged and the villagers are left to themselves.

## General Demography

Name	'Total Population'	'Total Population 06Years'	%age of Total; Ppln	'Male Population'	'Male Population 06Years'	%age of male total; Ppln	'Female Population 06Years'	'Female Population'	%age of Female total; Ppln
Dharni	147086	30699	20.87	74967	15770	21.04	14929	72119	20.700509

From the above table it can be seen that Dharni has a total population of 1,47,086 of which 74,967 are male and 72,119 are female. A total of 30,699 belong to age group of 0-6 years, which is 20.87% of the total population. The male population of 0-6 years is 21.04% where as the female is 20.70% thus making a marginal gender gap. One of the important point need to be noted here that the sex ratio of the block is 962 which is though higher than the state average but is lower than the average of tribal belts such as Nandurbar, Gadchiroli and Gondia which has sex ratio of 970.

## Comparative Education Indicator

The is table

Name		'Total Population'	'Total Literates'	Literacy rate	'Male Population'	'Male Literates'	%age of male Literacy	'Female Population'	'Female Literates'	%age of Female Literacy
Dharni	Total	147086	72357	49.19	74967	44147	58.89	72119	28210	39.12
Dharni	Rural	147086	72357	49.19	74967	44147	58.89	72119	28210	39.12
Amrawati	Total	678192	523837	88.2	351067	284803	81.12	327125	239034	73.07
Amrawati	Rural	128682	91250	81.8	66820	51257	76.71	61862	39993	64.65
Amrawati	Urban	549510	432587	89.7	284247	233546	82.16	265263	199041	75.04

above

showing comparative literacy status in the district. As it can be noted that the average literacy rate of the district is 88.2% with 81.8% being the rural average. As compared to the district the block average is only 49.19% .The average male literacy in Dharni is 58.89% which is 17.82% lower than the district rural average literacy of 76.71% . There is a substantial gender gap in the literacy rate where the female literacy is 39.12 leaving a clear gap of



19.77% within the block and 25.53% within the district. Thus the variation of female literacy is a frightful figure of 49.08% lower than the district average. This clearly depicts the extent of exclusion taking place due to programme not reaching the area and need strategy to be revised.

Though consolidated data was not available specifically for Dharni block as such, some supportive data has been compiled to understand the status of health in the district. The data has been extracted from the census 2001 as well as from the Reproductive Child Health National Survey (RCHNS) – 2002. Some supportive data also have been extracted from 1999 National Health Survey.

### **Complete immunization - (Comparative figure)**

#### ***Amravati & Yavatmal***

Area Name	Time	Total 12-36 months Complete immunization
India	2001	49.8
India	2002	56.6
Maharashtra	2001	85.6
Maharashtra	2002	84.7
Amravati	2002	71.5
Yavatmal	2002	74.3

The above table shows comparative immunization status of two districts, which were the part of study. The complete immunization for children of age group 12 – 36 months shows that in 2001 the complete immunization for overall country was 49.8% which witnessed a growth of 6.8% increase in 2002 where as Maharashtra witnessed an overall decline of 0.9%. During the same period i.e. 2002, the data shows Amravati with 71.5% and Yavatmal with 74.3% as complete immunization. Thus Amravati is 13.2% and Yavatmal is 10.5% lower than the state average. During the visit to four villages in Dharni block we also experienced that most of the children were not fully immunized. However due to the pulse polio campaign, most of the children were given polio doses but other vaccines such as BCG, DPT, measles etc. were all missing. During FGD all mothers complained of ANM not visiting the village regularly. It is possible that data showing low level of immunization in Amravati may have been influenced by the figure from Dharni and Chikhaldhara block both of them being tribal blocks.

## Health Indicators - (Comparative figure)

### Amravati & Yavatmal

Area Name	Antenatal care (full) Total 1998	Contraceptive prevalence rate Modern Method 1998	Contraceptive prevalence rate Modern Method 1999	Households visited by auxiliary-nurse-midwives or health worker	Institutional deliveries Total 1998	Safe deliveries Total 1998
Amravati	Not available	Not available	63	15.3	52.9	74.4
Yavatmal	53.2	59.2	Not available	50.1	37.1	64.8

Coming to the other aspects of health indicators, no figure was available for antenatal care nor we could get the contraceptive prevalence rate for Amravati. However the 1999 NHS data show that 63% of the eligible couples were using modern method of contraceptive. The regular household visit of ANM was only 15.3% that goes to explain poor pre & antenatal care and further substantiated the complaint made by the mothers during the FGD. The district average of institutional delivery was 52.9% with 74.4% as safe deliveries. The study in Dharni block found that as high as 85% are non-institutional deliveries. In addition to their culture of home delivery the fact also remains that there is insufficient facilities for institutional delivery in the block. This increases the chances of complications during childbirth with no proper facility where they can address their problems.

Zhari – Jamni in Yavatmal depicts a different story of development disorder. Even after 8 years of its existence as a block headquarters, the office does not have a proper building and is operating from a Godown. There is no bank, no MSEB office, no P & T office and no bus terminus. Due to lack of basic facilities in the block, the development functionaries are extremely reluctant to join their postings to this block headquarters. Those who are working, preferred to remain on long leave and also very erratic in their attendance. There is a shortage of basic working staff to carry on the development work. Zhari – Jamni is a case of gross neglect by the political and bureaucratic system. The two villages that were part of our study indicated the lack of facilities that compounded the problem of people living there. In one of the villages (Muchhi), the community was encouraged to start an Anganwadi with the contribution and support from the community itself. There is an extensive inequality in land holding and ownership pattern where majority of the villagers are landless labourers. While work was available in the farming land of large farmers, the over all work participation rate is still very low. purely because the block has very high rate of alcoholism and gambling. Due to this habit the number of wage earning days get affected. There was also lack of cohesiveness in the village with frequent friction and conflicts retarding the growth potential.

The table below give the demographic details of four blocks of Yavatmal district. They are Yavatmal which is also a district head-quarter, Ghatanji, Zhari-Jamni and Wani. While Ghatanji and Zhari-Jamni are the two most developmentally deprived blocks, Wani is the industrialized block that has the coal field operated by Western coal fields limited –a public sector undertaking. From the table it is evident that the urban sex ratio is substantially lower

### Demographic Details of Yavatmal

Name	Tru	'Total Population'	'Total Population 06Years'	'Total SC Population'	'Total ST Population'	Sex ratio	'Sex ratio 06Years'	'Male Population'	'Male Population 06Years'	%age of 'Male Population 06Years'	'Female Population'	'Female Population 06Years'	'%age of Female Population 06Years'
Yavatmal	Total	335967	46088	38414	63070	933	913	173774	24096	13.87	162193	21992	13.56
	Rural	157069	24566	14819	49659	931	928	81359	12741	15.66	75710	11825	15.62
	Urban	178898	21522	23595	13411	936	895	92415	11355	12.29	86483	10167	11.76
Ghatanji	Total	125214	18075	10658	38259	949	949	64249	9273	14.43	60965	8802	14.44
	Rural	105867	15631	8328	36037	957	963	54099	7962	14.72	51768	7669	14.81
	Urban	19347	2444	2330	2222	906	864	10150	1311	12.92	9197	1133	12.32
Zari-Jamani	Total	72239	10445	4202	29383	972	943	36639	5377	14.68	35600	5068	14.24
	Rural	72239	10445	4202	29383	972	943	36639	5377	14.68	35600	5068	14.24
	Urban	0	0	0	0	0	0	0	0	0.00	0	0	0.00
Wani	Total	193713	25706	17136	26576	940	927	99846	13343	13.36	93867	12363	13.17
	Rural	129204	17248	9312	21338	938	926	66669	8956	13.43	62535	8292	13.26
	Urban	64509	8458	7824	5238	944	928	33177	4387	13.22	31332	4071	12.99

than that of the rural in Yavatmal and Ghatanji. However in Wani the urban sex ratio is higher than the rural. This could be attributed to the better health care facilities available to the coalmine employees and thus the child survival chances are more than that in the rural areas. The table also depicts the distressed situation of the sex ratio in the age group of 0-6 years. In this category Yavatmal shows the worst condition with 913 as the average sex ratio. Ghatanji has the better sex ratio in this category i.e. 949 and 963 as the rural average. Zhari-Jamni shows 14.68% of the population in the age group of 0-6 which is highest amongst the four blocks.

From the health service statistics given in the table below it cane noted that Zhari-Jamni does not have a Govt. Hospital nor does it have Dispensary or Maternity home. It has 3 PHCs and 18 sub-centers. It has only 6 doctors all of them being posted in the PHCs.

### Block wise Details of Health Services in Yavatmal (2004)

Name of Block	Hospital	Dispensary	Maternity Home	PHC	Sub centre	Doctor / RMP	No. of ANM	RURAL		URBAN		Total
								Male	Female	Male	Female	
YAVATMAL	4	4	1	5	24	122	286	82305	75992	93509	87652	339458
GHATANGI	1	0	1	4	24	10	44	54041	51779	10150	9197	125167
ZHARI-JAMNI	0	0	0	3	18	6	30	36606	35549	0	0	72155
WANI	1	4	1	4	24	12	44	66665	62521	33170	31321	193677
Total	6	8	3	16	90	150	404	239617	225841	136829	128170	730457

### Literacy Details in Selected blocks of Yavatmal

Name	Tru	Total Population	'Total Literates'	Sex ratio	'Sexratio 06Years'	'Literacy Rate'	'Male Literates'	%age of 'Male Literates'	'Female Literates'	%age of 'Female Literates'
Yavatmal	Total	335967	237404	933	913	81.9	133162	39.64	104242	31.03
	Rural	157069	96519	931	928	72.8	56680	36.09	39839	25.36
	Urban	178898	140885	936	895	89.5	76482	42.75	64403	36.00
Ghatanji	Total	125214	76369	949	949	71.3	45262	36.15	31107	24.84
	Rural	105867	62073	957	963	68.8	37207	35.15	24866	23.49
	Urban	19347	14296	906	864	84.6	8055	41.63	6241	32.26
Zari-Jamani	Total	72239	40410	972	943	65.4	24236	33.55	16174	22.39
	Rural	72239	40410	972	943	65.4	24236	33.55	16174	22.39
	Urban	0	0	0	0	0	0	#DIV/0!	0	#DIV/0!
Wani	Total	193713	132021	940	927	78.6	75217	38.83	56804	29.32
	Rural	129204	85122	938	926	76	49133	38.03	35989	27.85
	Urban	64509	46899	944	928	83.7	26084	40.43	20815	32.27

The literacy figure particularly show very low literacy in Zhari- Jamni in comparison to the district average. The block average is 65.4% as against 81.9% average literacy thus making a difference of 16.5% lower than the district average. The gender discrepancy within the literate population in Zhari-Jamni is 19.96% which goes to explain that one in five girls have a chance of getting educated. Similar trend is seen across the district where female education gets less importance as compared to male. The multi-layer exclusion can be observed here i.e. Zhari-Jamni itself is 16.5% lower than the district average and the women have further reduced chances of acquiring education then their male counterpart.

## Reproductive & Child Health Indicators

Area Name	Unit	Babies weighed Total 1999	Complete immunization Total 12-36 month 1999	Contraceptive prevalence rate Modern Method 1999	Delivery at home attended by doctor, nurse or trained birth atte	Exclusive breastfeeding rate Total 1999
Amravati	Per cent	55	71.5	63	21.4	30.4
Chandrapur	Per cent	49.9	92.7	65.5	34	98.7
Latur	Per cent	36.2	89.3	59.3	6	15.3
Yavatmal	Per cent	36.7	74.3	59.2	27.7	97.7

The figures available from NFHS 1999, shows the comparative status of four districts. The percentage of babies weighed on regular basis in Amravati was 55%, Chandrapur was 49.9%, Latur was 36.2% and Yavatmal was 36.7%. The irregularity in weighing of the babies also give rise to the question on proper functioning of the Anganwadi and facilities there of. The improper monitoring the growth of child leads to malnutrition and thus retards the chances of the baby to grow healthy both physically as well as cognitively. The complete immunization record show Chandrapur at 92.7% Latur as 89.3% Yavatmal at 74.3% and Amravati at 71.5% in the order of ranking. Chandrapur, Yavatmal and followed by Latur has undergone substantial social inputs particularly in the area of community mobilization. Chandrapur and Yavatmal have been CCA districts that emphasize on women's empowerment the result of the social inputs have translated in to better immunization coverage. This can also be seen from the figure of 98.7% and 97.7% of the mothers in Chandrapur and Yavatmal have done exclusive breastfeeding to their child. The median value of contraceptive prevalence rate in all the four districts is 61% which predicts that almost 40% of the women do not have a choice on their pregnancy and the median value of 37% of the marriages happening below 18 years, raise the alarm bell to the policy makers. The problem can be further compounded with low levels of institutional deliveries thus increasing the chances of birth complication and so on.

## Reproductive & Child Health Indicators

Area Name	Unit	Females married before age 18 Total 1999	Households visited by auxiliary- nurse-midwives or health worker	Infant deaths Total 1999	Institutional deliveries Total 1999	Low birth weight Total 1999
Amravati	Per cent	10.2	15.3	16	52.9	9.6
Chandrapur	Per cent	25.7	70.9	7	41	50.6
Latur	Per cent	58.1	15.8	11	40.7	2.5
Yavatmal	Per cent	27.1	50.1	9	37.1	41.7

The early marriage trend of girls show that only 10.2% of the marriages in Amravati district were below 18 years of age. Latur amongst the four districts recorded highest of 58.1% while Chandrapur and Yavatmal recorded 25.7% and 27.1% respectively. As far as Amravati is concern, the study in Dharni block shows that more than 60% of the marriages of girls are done by the age between 13-15 years. The scenario in Chikhaldhara block was no different as majority were from Korku tribes and culturally they were similar. Mothers nutritional problem is seen highest in Chandrapur with 50.6% low birth weight babies which is followed by Yavatmal with 41.7%. The survey recorded with Latur as 2.5% and Amravati as 9.6%. However the highest infant death recorded was 16% in Amravati, 11% in Latur, 9% in Yavatmal and 7% in Chandrapur.

#### Water & Sanitation Indicators

Area Name	Main source of drinking water Hand pump 1999	Main source of drinking water Others 1999	Main source of drinking water Tap 1999	Main source of drinking water Well 1999	Malaria cases Total 1999
Amravati	9.6	0.1	81	9.2	137
Chandrapur	33	0.7	37.3	28.8	283
Latur	34.7	0.1	58.6	6.4	103
Yavatmal	36.8	1.2	40.8	21	472

The drinking water facilities as per survey conducted under sector reform project, the district of Amravati show 81% dependence on tap water which is followed by Latur with the figure of 58.6%. The highest number of water utilization from hand pump of 36.8% is in Yavatmal followed by Latur at 34.7% and Chandrapur at 33%. The recorded figure for Malaria cases in the district seen to be an under estimation with Yavatmal showing 472 cases. In large number of time Malaria goes unrecorded and otherwise treatment is taken from the private sources. The figures for hand washing practice as well as use of soak pits were not available.

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# **Social Exclusion**

**Field based Study of Persons with Disability**

**of**

**Maharashtra and Selected District**

The definition accepted by UNICEF in its 2006 report “Excluded & Invisible” considers exclusion as multi dimensional including deprivations of economic, social, gender, cultural and political rights making exclusion as a broader concept than material poverty. It considers Relativity (comparing circumstances of individuals & communities relative to others at a given place & time), Agency (act of an agent. Focus on the agency can help identify the cause of exclusion) and Dynamics (based on bleak future prospects and not on just current circumstances) as the three basic elements for exclusion.

Disability fits into all the three elements of exclusion stated above. If one observes the general condition of the disabled population that consists almost 10% of the world’s population, then one realizes that this population is excluded from essential services and goods such as food, clothing, basic education and health care, employment opportunities and such other aspects which ultimately affect their participation in mainstream society. One also observes that this population is at risk of violence, abuse and exploitation and misses out on protection of their rights. Such population becomes invisible as if denied of their very existence.

The failure to provide early detection, identification and intervention to infants and young children with disabilities and support to their parents and caretakers results in secondary disabling conditions which further limit their capacity to benefit from educational opportunities. Exclusion of children and youth with disabilities from education results in their exclusion from opportunities for further development, particularly diminishing their access to vocational training, employment, income generation and business development. Failure to access education and training prevents the achievement of economic and social independence and increases vulnerability to poverty in what can become a self-perpetuating, inter-generational cycle.

The Draft Biwako Millennium Framework for Action Towards an Inclusive, Barrier-Free and Rights-Based Society for Persons with Disabilities in Asia and the Pacific has spelt out the need and areas of focus on persons with disabilities in order to achieve the Millennium Development Goals. India being a signatory to this has full responsibility to ensure that persons with disabilities are not excluded.

However, the reality is different. There are many national programs in India wherein the disabled population is invisible and excluded thus deprived of their basic rights of equality of opportunity for all information, services and rights as Indian citizens. Even in specific disability related programs where there are provisions, the implementation status paints a poor picture calling for urgent attention.

It is very crucial therefore to undertake evidence-based study of major national programs with specific attention to exclusion of persons with disability so as to bring home the point of corrective measures that need to be taken urgently for achieving the MDGs.

Three areas undertaken in this study are – education, poverty reduction programs and HIV/AIDS.

It is hoped that by bringing out the evidences of discrimination and disadvantages, one would be able to reinforce the strong focus required on the correction of the processes and agents behind the deprivation to guarantee inclusion and equality of opportunity and protection of rights of the disabled population.

## 1.2 SCOPE AND OBJECTIVES



The scope of the study is limited to the state of Maharashtra. The three areas under review are restricted to Education, poverty reduction and HIV/ AIDS. All the categories of disabled persons as mentioned in PwD act, 1995 are included, though the representation is not equally distributed during data collection.

The main objectives of the study are two folds-

1. To review the current situation of persons with disability with specific focus on exclusion in the three areas of national policies and program implementations –Education, Poverty reduction and HIV/AIDS
2. To identify gaps in the abovementioned policies and programs allowing exclusion of persons with disabilities and to put forth suggestions for inclusion of persons with disabilities in these policies and programs.

### 1.3 METHODOLOGY

In order to support the study primary data collection as well as secondary data was utilized. Primary data by way of case studies as well as data gathered through individual and/ or focus group discussions, interviews of stakeholders including beneficiaries' and/ or government/ NGO functionaries. Secondary data was gathered through government data from state headquarters as well as from one of the districts regarding basic service delivery aspects and implementation status of the provisions.

## 2. THE BACKDROP

### DISABILITY STATUS IN MAHARASHTRA

Disabled persons constitute 2.13 per cent of India's population. In absolute numbers this adds up to just below 2.2 crore people, according to data released by the Directorate of Census Operations.

Of this figure, almost half, or 10.6 million have a disability in sight while more than a quarter (6.1 million) have disability in movement. One in 10 among the disabled, or 2.3 million have mental disability, 1.6 million have speech disability and 1.3 million have hearing disability.

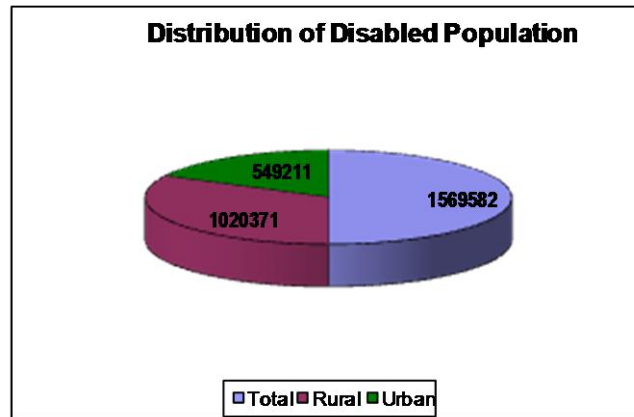
The State with the highest proportion of disabled population is Sikkim with 3.77 per cent of its population under this category while the lowest proportion of disabled population is Goa with 1.17 per cent disabled.

Maharashtra state has a total disabled population 15,69,582.

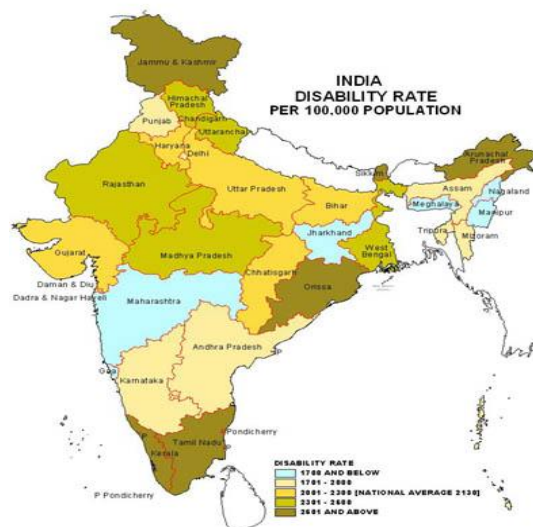
Out of the total disabled population 10,20,371 live in rural area and 5,49,211 are from urban area. Total number of people having problems in seeing is highest - 5,80,930 followed by total number of people having problems in movement which is - 5,69,945. There are 7,73,971 males and 6,35,715 females with disabilities.<sup>1</sup>

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<sup>1</sup> [www.census.org](http://www.census.org)



As per the NSSO,2002,



	Sex	Total	Rural	Urban
Maharashtra	Persons	1,569,582	1,020,371	549,211
	Males	933,867	600,603	333,264
	Females	635,715	419,768	215,947

### Category wise statistics of PwDs as per census 2001

State/UT	Visual disability	Speech disability	Hearing disability	Locomotor disability	Mental disability	Total		
						Rural	Urban	Total
Jammu & Kashmir	208,713	16956	14,157	37,965	24,879	18,959	5,920	302,670
Himachal Pradesh	64,122	12,762	15,239	46,512	17,315	15,975	1,340	155,950
Punjab	170,853	22,756	17,348	149,758	63,808	43,016	20,792	424,523
Chandigarh	8,422	882	607	3,828	1,799	163	1,636	15,538
Uttaranchal	85,668	16,749	15,990	56,474	19,888	15,082	4,806	194,769
Haryana	201,358	24,920	27,682	151,485	49,595	34,309	15,286	455,040
Delhi	120,712	15,505	8,741	64,885	26,043	1,543	24,500	235,886
Rajasthan	753,962	73,147	75,235	400,577	109,058	80,019	29,039	1,411,979
Uttar Pradesh	1852071	255951	128303	930580	286464	211463	75001	3453369
Bihar	1,005,605	130,471	73,970	512,246	165,319	145,153	20,166	1,887,611
Sikkim	10,790	3,174	3,432	2,172	799	715	84	20,367
Arunachal Pradesh	23,079	2,429	3,072	3,474	1,261	1,068	193	33,315
Nagaland	9,968	4,398	5,245	4,258	2,630	2,330	300	26,499
Manipur	11,713	2,769	2,994	6,177	4,723	3,190	1,533	28,376
Mizoram	6,257	2,006	2,421	2,476	2,851	1,655	1,196	16,011
Tripura	27,505	5,105	5,699	13,970	6,661	5,470	1,191	58,940
Meghalaya	13,381	3,431	3,668	5,127	3,196	2,604	592	28,803
Assam	282,056	56,974	51,825	91,970	47,475	41,309	6,166	530,300
West Bengal	862,073	170,022	131,579	412,658	270,842	181,981	88,861	1,847,174
Jharkhand	186,216	39,683	28,233	138,323	55,922	41,442	14,480	448,377
Orissa	514,104	68,673	84,115	250,851	103,592	87,319	16,273	1,021,335
Chhattisgarh	160,131	30,438	34,093	151,611	43,614	34,301	9,313	419,887
Gujarat	494,624	66,534	70,321	310,765	103,221	65,433	37,788	1,045,465
Daman & Diu	1,898	189	120	690	274	138	136	3,171
Dadra & Nagar Haveli	2346	295	337	795	275	222	53	4048
<b>Maharashtra</b>	<b>580,930</b>	<b>113,043</b>	<b>92,390</b>	<b>569,945</b>	<b>213,274</b>	<b>124,748</b>	<b>88,526</b>	<b>1,569,582</b>
Madhya Pradesh	636,214	75,825	85,354	495,878	115,257	78,280	36,977	1,408,528
Andhra Pradesh	581,587	138,974	73,373	415,848	155,199	116,909	38,290	1,364,981
Karnataka	440,875	90,717	49,861	266,559	92,631	62,325	30,306	940,643
Goa	4,393	1,868	1,000	4,910	3,578	1,972	1,606	15,749
Lakshadweep	603	207	147	505	216	126	90	1678
Kerala	334,622	67,066	79,713	237,707	141,686	105,842	35,844	860,794
Tamil Nadu	964,063	124,479	72,636	353,798	127,521	67,483	60,038	1,642,497
Pondicherry	10,646	1,818	2,277	8,830	2,286	736	1,550	25,857
Andman & Nicobar	3,321	652	545	1,870	669	497	172	7,057
								21,906,769

## 2.2 REVIEW OF CURRENT SITUATION

The landmark legislation for the disabled, viz., the **Persons with Disabilities (equal opportunities, protection of rights and full participation) Act, 1995** (PWD Act) provides a comprehensive national mandate for the elimination of discrimination against PWD in the area of education, employment, public transportation and access to public buildings and services in all walks of life. However, a recent CAG report provides interesting information on the implementation of the PwD act in Maharashtra.

Section 25 of the PWD Act provides that in order to prevent the occurrence of disabilities, the appropriate Governments (Appropriate government means Union Government or the State Government, as the case may be.) and the local authorities will (a) undertake surveys, investigations and research concerning the cause of occurrence of disabilities, (b) promote various methods of preventing disabilities, (c) screen all children at least once in a year for the purpose of identifying 'at risk' cases; (d) provide facilities for training to the staff at the primary health centers (PHCs), (e) sponsor awareness campaigns and disseminate information for general hygiene and (f) take measures for pre-natal, perinatal and post-natal care of mother and child.

The Ministry of Health and Family Welfare is responsible for - (a) prevention of disabilities through programmes like leprosy eradication, blindness control, immunization etc., (b) training of PHC workers. However, the Ministry of Health and Family Welfare has no ready information on number of trained PHC workers.

The Department of Women and Child Development is responsible for- (a) supplementing nutrition through ICDS, and (b) conducting training courses for anganwadi workers for early detection and timely prevention. However, the Department informed audit that it was not implementing the PWD Act.

CAG Audit observed that in the States of **Arunachal Pradesh, Assam, Delhi, Jharkhand, Himachal Pradesh, Maharashtra, Meghalaya, Sikkim, Tripura** and **West Bengal**, no action had been taken for conducting surveys, investigations and research work concerning the cause of occurrence of disabilities, identification of 'at risk' cases and training to staff at PHCs for prevention and early detection of disabilities.

Sections 44 to 47 of the PWD Act stipulate that the appropriate Governments and local authorities will take appropriate steps for non-discrimination in transport, on the road, in the built environment and in Government employment. The Ministry of Urban Development which is responsible for providing for non-discrimination in the built environment, circulated in September 1998 model building bye-laws, containing provisions for barrier free built environment to all the State Governments and UTs for adoption.

The CAG report has also mentioned that no action for implementing these provisions had been taken in **Arunachal Pradesh, Assam, Jharkhand, Maharashtra, Mizoram, Sikkim, Tripura, West Bengal** and the **Union Territory of Pondicherry**.

Section 68 of the PWD Act stipulates payment of unemployment allowance by the appropriate government to PWD registered with SEEs for over two years. The Ministry stated (May 2003) that **Andhra Pradesh, Karnataka, Kerala, Himachal Pradesh, Manipur, Tamil Nadu** and the Union Territory of **Lakshdweep** provided unemployment allowances to PWD. However, audit noticed from the records of Governments of **Himachal Pradesh, Karnataka**

and **Manipur** that while they were not paying such allowance to PWD, the States of **Haryana** and **Punjab** were paying such allowance to PWD. The Ministry again informed audit (December 2003) that **Andhra Pradesh, Haryana, Kerala, Maharashtra, Mizoram, Meghalaya, Punjab, Sikkim, Tamil Nadu** and UTs of **Andaman & Nicobar, Chandigarh, Daman & Diu** and **Pondicherry** were paying unemployment allowances. This information was also incorrect since audit of the records of States of **Maharashtra** and **Sikkim** revealed that unemployment allowance was not being paid in these States.

### 3. EDUCATION AND PERSONS WITH DISABILITIES

#### 3.1 SARVA SHIKSHA ABIYAN(SSA)

The 93rd Constitutional Amendment, which guarantees eight years of schooling to every child aged 6 to 14 years, is now a fundamental right.

Sarv Shiksha does ensure that every child with special needs, irrespective of the kind, category and degree of disability, is provided education in an appropriate environment. SSA adopts 'zero rejection' policy so that no child is left out of the education system.

#### INTERVENTIONS FOR CHILDREN WITH SPECIAL NEEDS

SSA will ensure that every child with special needs, irrespective of the kind, category and degree of disability, is provided education in an appropriate environment. SSA will adopt 'zero rejection' policy so that no child is left out of the education system. Approaches and Options: The thrust of SSA will be on providing integrated and inclusive education to all children with special needs in general schools. It will also support a wide range of approaches, options and strategies for education of children with special needs. This includes education through open learning system and open schools, non formal and alternative schooling, distance education and learning, special schools, wherever necessary, home based education, itinerant teacher model, remedial teaching, part time classes, community based rehabilitations (CBR) and vocational education and cooperative programmes. Components: The following activities could form components of the programme:

- a. Early detection and identification: A concerted drive to detect children with special needs at an early age should be undertaken through PHCs, ICDS, ECCE centres and other school readiness programmes. Identification of children with special needs should become an integral part of the micro-planning and household surveys.
- b. Functional and formal assessment of each identified child should be carried out. A team should be constituted at every block to carry out this assessment and recommend most appropriate placement for every child with special needs.
- c. Educational Placement: As far as possible, every child with special needs should be placed in regular schools, with needed support services.

- d. Aids and appliances: All children requiring assistive devices should be provided with aids and appliances, obtained as far as possible through convergence with the Ministry of Social Justice and Empowerment, State Welfare Departments, National Institutions or NGOs.
- e. Support services: Support services like physical access, resource rooms at cluster level, special equipment, reading material, special educational techniques, remedial teaching, curricular adaptation or adapted teaching strategies could be provided.
- f. Teacher training: Intensive teacher training should be undertaken to sensitize regular teachers on effective classroom management of children with special needs. This training should be recurrent at block/cluster levels and integrated with the on-going in-service teacher training schedules in SSA. All training modules at SCERT, DIET and BRC level should include a suitable component on education of children with special needs.
- g. Resource support: Resource support could be given by teachers working in special schools. Where necessary, specially trained resource teachers should be appointed, particularly for teaching special skills to children with special needs. Wherever this option is not feasible, long term training of regular teachers should be undertaken.
- h. Individualized Educational Plan (IEP): An IEP should be prepared by the teacher for every child with special needs in consultation with parents and experts. Its implementation should be monitored from time to time. The programme should test the effectiveness of various strategies and models by measuring the learning achievement of children with special needs periodically, after developing indicators.
- i. Parental training and community mobilization: Parents of children with disabilities should receive counselling and training on how to bring them up and teach them basic survival skills. Strong advocacy and awareness programmes should form a part of strategy to educate every child with special needs. A component on disability should be included in all the modules for parents, VEC and community.
- j. Planning and management: Resource groups should be constituted at state, district levels to undertake effective planning and management of the programmes in collaboration with PRIs and NGOs. An apex level resource group at the national level to provide guidance, technical and academic support to children with special needs under SSA may be constituted.
- k. Strengthening of special schools: Wherever necessary, special schools may be strengthened to obtain their resource support, in convergence with departments and agencies working in that area.
- l. Removal of Architectural barriers: Architectural barriers in schools will be removed for easy access. Efforts will be taken to provide disable-friendly facilities in schools and educational institutions. Development of innovative designs for schools to provide an enabling environment for children with special needs should also be a part of the programme.
- m. Research: SSA will encourage research in all areas of education of children with special needs including research for designing and developing new assistive devices, teaching aids, special teaching material and other items necessary to give a child with disability equal opportunities in education.

- n. Monitoring and evaluation: On-going monitoring and evaluation should be carried out to refine the programme from time to time. For this, appropriate monitoring mechanisms should be devised at every level and field tested at regular intervals.

Girls with disabilities: Special emphasis must be given to education of girls with disabilities.

#### Comparative enrolment ratio of PwDs and others

Sl. no	District name	Total enrolment	Total disabled students	% of disabled students
1	AHMEDNAGAR	590789	2181	0.38
2	AKOLA	242663	5758	2.37
3	AMRAVATI	395490	4425	1.12
4	AURANGABAD	395556	1117	0.28
5	BEED	350322	1238	0.35
6	BHANDARA	152419	783	0.51
7	BULDHANA	368381	2142	0.58
8	CHANDRAPUR	299428	1369	0.46
9	DHULE	274830	1005	0.37
10	GADCHIROLI	151107	573	0.38
11	GONDIA	151929	605	0.4
12	HINGOLI	187808	1340	0.71
13	JALGAON	570188	1921	0.34
14	JALNA	276623	974	0.35
15	KOLHAPUR	485468	2105	0.43
16	LATUR	405157	1794	0.44
17	MUMBAI	905223	1673	0.18
18	MUMBAI(SUB)	410502	338	0.08
19	NAGPUR	583454	7198	1.23
20	NANDED	506874	1189	0.23
21	NANURBAR	154475	337	0.22
22	NASHIK	772109	3516	0.46
23	OSMANABAD	239310	1263	0.53
24	PARBHANI	276558	1290	0.47
25	PUNE	794462	2739	0.34
26	RAIGAD	326235	984	0.3
27	RATNAGIRI	244738	1139	0.47
28	SANGLI	372891	911	0.24
29	SATARA	374588	1365	0.36
30	SINDHUDURG	107823	347	0.32
31	SOLAPUR	571746	17745	3.1
32	THANE	1062141	4084	0.38
33	WARDHA	166843	960	0.58
34	WASHIM	160069	980	0.61
35	YAVATMAL	384947	6187	1.61
36	TOTAL	13700766	83575	0.745

From the above table it is imperative that very little or no attention have been given to the educational needs of the PwDs in Maharashtra. Except for Sholapur, nowhere the 3% quota criteria has been fulfilled.

To look at some specific figures let us now see the districts where special inputs have been given by UNICEF

### Comparative Enrolment Ratio of PwDs and Others

Area Name	Female 5-14 yr Child Population (5-14 years)	Disabled Female 5-14 yr Child Population (5-14 years)	Male 5-14 yr Child Population (5-14 years)	Disabled Male 5-14 yr Child Population (5-14 years)	Total 5-14 yr Child Population (5-14 years)	Total Enrolment as per record	Percentage of Enrolment as per population	Total Disabled 5-14 yr Child Population (5-14 years)	Total Enrolment of PwDs as per record	Percentage of Enrolment of PwDs as per population
Maharashtra	10319082	309572	11248450	337454	21567532	13700766	63.52	647026	83575	12.92
Chandrapur	221247	6637	231064	6932	452311	299428	66.20	13569	1369	10.09
Yavatmal	277841	8335	298716	8961	576557	384947	66.77	17297	6187	35.77
Nandurbar	165807	4974	179051	5372	344858	154475	44.79	10346	337	3.26
Latur	252016	7560	275737	8272	527753	405157	76.77	15833	1794	11.33
Data Source: Office of the Project Director SSA, Mumbai and Devinfo India										

From the above table it can be inferred that the state average of enrolment is only 12.92% for PwDs of school going age as compared to 63.52% of general population. Further we see that the three integrated districts i.e. Chandrapur, Latur and Nandurbar the enrolment ratio is 10.09%, 11.33% and 3.26% respectively which even lower than the state average. Only Yavatmal though below the general enrolment average, it is actually much higher than the state average with 35.77% in PwD's enrolment.

-A closer look at the SSA indicates the following.

1. While SSA does deal with children with disabilities, it takes a vague, non-committal stance on their inclusion in mainstream education. It leaves the decision on whether a challenged child should be in mainstream or special school to a Basic Education Authority. Thus it sidesteps the need for a clear articulation of the right of the challenged child to access the 'normal' school system and the mechanism for making such access possible.
2. What those who work with the challenged youngsters are craving and proposing, is the supplementation of the Bill with a provision that proposes a mechanism for the Authority to aggressively seek children with disability in its catchment's area, identify their number and varied needs, and define the manner and mechanism with which they



are to be assimilated within the regular school infrastructure, along with the necessary support system for such assimilation.

3. Post Independence, the Kothari Commission reiterated the inclusion principle in its own report and Plan of Action (1964). But the recommendation was never implemented. Through its National Policy on Education (NPE) and Plan of Action (POA) adopted in 1992, the Government of India continues to endorse the vision of “one special school at each district headquarters.” This vision per se is not unworthy. However, the number of special schools in relation to what is needed is abysmally low. A UNISED document (1999) notes there are about 3,000 special schools — 900 for the hearing, 400 for the visually, 1,000 for the mentally, and 700 for the physically impaired. The actual numbers may be more, as many schools run by NGOs are not captured who are not getting grant from the Govt. in the above figures. Even so, their combined number cannot adequately serve the estimated 25 million challenged children under 18. Clearly the government has to move away from the special school culture towards inclusive schooling and also encourage, even require private sector schools to do the same.

## **5. POVERTY REDUCTION AND PERSONS WITH DISABILITIES**

### **5.1 POVERTY REDUCTION PROGRAMS**

***‘Poverty is not simply the consequence of a lack of resources. Some people are unable to access existing resources because of who they are, what they believe or where they live. Such discrimination is a form of exclusion and a cause of poverty’. (DFID 2000e).***

***‘Because disability and poverty are inextricably linked, poverty can never be eradicated until disabled people enjoy equal rights with non-disabled people’.***

***(Lee, 1999)***

Disabled people are estimated to make up approximately 10% of any population (WHO) and a higher proportion of those living in chronic poverty. There has recently been a call for more information relating to disability and chronic poverty. This is due to the realization that disabled people are disproportionately amongst the poorest of the poor in all parts of the world, and that international development targets are unlikely to be met without including disabled people

Poverty and disability are intertwined; both are a cause and consequence of the other. When people face poverty, the risk of acquiring a disability increases due to poor health and labor conditions; lack of education and related situations. When disability appears in a context of poverty, the scope of vulnerability, social exclusion and marginalization is expanded.

The relationship between poverty, disability and social exclusion remains today an issue with little completed systematic research, rarely found in a language other than English and seldom discussed, or included, in the various poverty reduction strategies to promote development. Although the causes and consequences of disability

are exacerbated when poverty is present, disability remains to be seen as a “specialist” subject and many topics, including how disability aggravates the vulnerability of women, persons with HIV-AIDS, street children, the elderly, indigenous persons, victims of trafficking, etc., are often overlooked.

Disabled people are so severely excluded from all areas of society that there is not even comparable or reliable data on incidence, distribution and trends of disability, let alone the extent of disabled people’s poverty.

a) Disabled people are so excluded as not to be considered even worthy of research. Where research has been done, it has often been done by Northern non-disabled academics.

b) What research has been done uses different definitions of disability and impairment and therefore makes comparison difficult.

c) The UN Disability Statistic’s Compendium (DISTAT) notes that disability rates are not comparable across the world because of differences in survey design, definitions, concepts and methods. Furthermore there are cultural variations on what types of impairment lead to marginalization and exclusion. Not all impairments cause disability. For example, short-sightedness is an impairment, however in societies where glasses are easily available and socially acceptable, being short-sighted does not lead to exclusion and therefore not to disability.

d) As disabled people are frequently excluded from all manner of social, economic and political interactions they have generally not been powerful enough to exert an influence on policy makers. Gathering reliable data on disability has never been a high priority amongst policy makers.

e) The very marginalization that disabled people face makes it difficult for outside researchers to find them and to communicate with them even if the researchers want to.

f) Methods of research often exclude people with many forms of impairment.

Participatory Rural Appraisal is becoming an increasingly popular research method. However it tends to be very visual and therefore excludes people with visual impairments. Radio is inappropriate for deaf people. Many disabled people have been excluded from all formal education and therefore rates of illiteracy are even higher than among the wider group of those living in chronic poverty.

g) Disability is often considered a specialist issue separate from mainstream development issues. Many mainstream development NGOs still say that they are not ‘specialists’ and therefore do not consider disability issues. However, most disability issues are important to all development: equality, empowerment, human rights, poverty and marginalization (Lee, 1999).

### 5.3 REVIEW OF CURRENT SITUATION

#### UNEMPLOYMENT AMONG THE DISABLED PEOPLE

The exact number of unemployed disabled people is not available from govt. sources. What is available is the registration at special employment exchanges & related figures which are as given below.

Approx. 50,000 unemployed disabled have registered with the special employment exchange & 217 have got employment during 2005 which is about 2%.

About 65-70 lakh able bodied persons are currently employed in Govt., semi- govt. & corporate sector & approx. 5000 disabled people are employed in the abovementioned sectors.

Out of the 52 govt. departments where 3% reservation is for disabled people, only 22 departments have selected 39 disabled people for the reservation quota.

The exact number of vacancies in govt. sector and implementation of 3% reservation for the disabled people has become a matter of dispute. However the recent High court order to the state to fill up the quota has brought about some urgency and things have started moving. How far they move is yet to be seen.

Lack of coordination between the technical requirements of the labor market & the vocational training institutes or workshops has become an important issue because job oriented training facilities are not really available for the disabled people to make them appropriately qualified for the market demand.

#### SELF-EMPLOYMENT OF DISABLED PEOPLE

Handicapped Development Corporation of the state of Maharashtra was established under the companies act on 27.3.2002 and the actual working started from Dec. 2002 with its head office at Mumbai.

Total applications received till date was 11,200 out of which 4692 have been stationed. 6508 applicants had to be excluded for the lack of required budgetary provisions & guarantee which has to be given by the govt. of India.

Another important factor is the no administrative infrastructure is available at district level and currently the corporation it is working through the offices of other backward classes (OBC)

The available data till date from the corporation is as given below

Sl.no	Total no. of proposals sanctioned	Districts covered
1	Above 500	Aurangabad
2	401-500	Solapur, mumbai, ahmednagar, jalna, beed
3	300-400	Nasik, dhule, kolhapur
4	201-300	Raigad, jalgaon, pune, satara, sangli, Parthian, handed, later
5	101-200	Raigad, ranger, sindhudurg, nandurbar, hingoli, ossmanabad, akola, buldhana, washim, yavatmal, wardha, nagpur, amravati
6	Below 100	

The details of the sanctioned cases district wise is as given below

Serial no.	Name of District	Total no. of proposals sanctioned
1	Mumbai	300
2	Thane	124
3	Raigad	86
4	Ratnagiri	22
5	Sindhudurg	7
6	Nasik	299
7	Dhule	2235
8	Nandurbar	34
9	Jalgaon	179
10	Ahmednagar	312
11	Pune	199
12	Satara	143
13	Sangli	106
14	Solapur	429
15	Kolhapur	212
16	Aurangabad	556
17	Jalna	317
18	Parbhani	136
19	Hingoli	33
20	Beed	309
21	Nanded	109
22	Osmanabad	93
23	Latur	146
24	Buldhana	63
25	Akola	49
26	Washim	37
27	Amarawati	41
28	Yavatmal	58
29	Wardha	6
30	Nagpur	22
31	Bhandara	3
32	Gondia	0
33	Chandrapur	15
34	Gadchiroli	12
	Total	4692

As can be observed from the data, the gap between the received applications & sanctioned ones is growing larger by every year. On an average 2200 applications are received every year & 940 have been sanctioned. Approx. 1260 applications have been rejected for the lack of funding which is something that needs to be looked into by state and central bodies of NHFDC. The good observation is that the recovery is much better compared to the other corporations of under the social justice ministry.

#### INDIRA AWAS YOJANA

Housing is one of the basic requirements for human survival. For a normal citizen owning a house provides significant economic security and status in society. For a shelter less person, a house brings about a profound social change in his existence, endowing him with an identity, thus integrating him with his immediate social milieu.

The genesis of the Indira Awas Yojana can be traced to the programmes of rural employment which began in the early 1980s. Construction of houses was one of the major activities under the National Rural Employment Programme (NREP) which began in 1980 and the Rural Landless Employment Guarantee Programme (RLEGP) which began in 1983. There was, however, no uniform policy for rural housing in the states. For instance some states permitted only part of the construction cost to be borne from NREP/ RLEGP funds and the balance was to be met by beneficiaries from their savings or loans obtained by them. On the other hand others permitted the entire expenditure to be borne from NREP/ RLEGP funds. While some states allowed construction of only new dwelling others permitted renovation of existing houses of beneficiaries.

As per announcement made by Government in June 1985, a part of RLEGP fund was earmarked for the construction of SCs/ STs and freed bonded laborers. As a result, Indira Awaas Yojana (IAY) was launched during 1985-86 as a sub-scheme of RLEGP. IAY thereafter continued as a sub-scheme of [Jawahar Rozgar Yojana \(JRY\)](#) since its launching in April, 1989. 6% of the total JRY funds were allocated for implementation of IAY. From the year 1993-94 the scope of IAY was extended to cover Non Scheduled Castes/ Scheduled Tribes below the poverty line families in the rural areas. Simultaneously, the allocation of funds for implementing the scheme was raised from 6% to 10% of the total resources available under JRY at national level, subject to the condition that the benefits to Non-Scheduled Castes/ Scheduled Tribes poor should not exceed 4% of the total JRY allocation. IAY has now been de-linked from JRY and has been made an independent scheme with effect from 1<sup>st</sup> January 1996.

**The objective is to provide financial assistance for shelter to the BPL rural households belonging to SC, ST and freed bonded labourers categories. The houses are allotted in the name of female member or jointly in the names of husband and wife. IAY does not provide separate earmarking of provision and physical target for women.**

#### Objective

The objective of Indira Awaas Yojana is primarily to help construction of dwelling units by members of Scheduled Castes/ Schedule Tribes, freed bonded laborers and also non- SC/ST rural poor below the poverty line by providing them with grant-in-aid.

#### Target group

The target group for houses under Indira Awaas Yojana is people below poverty line living in rural areas belonging to Scheduled Castes/ Scheduled Tribes, freed bonded laborers and non- SC/ST Categories. A maximum of 40% of the total IAY allocation during a financial year can be utilized for construction of dwelling units for non-SC/ST BPL categories.

Funds to the tune of 3% are earmarked for the benefit of disabled persons below poverty line. This reservation of 3% under IAY for disabled persons below the poverty line would be horizontal reservation i.e., disabled persons belonging to sections like SCs, STs and Others would fall in their respective categories.

The data from Yavatmal district provides the following information

#### **Disabled Beneficiaries under IAY –**

##### **Yavatmal district -2006**

Year	Total	No. of houses given to PwDs	Amt. of grant
04-05	2854	86	28,500/- for each house
05-06	2378	71	
Data source: Zillah Parishad Yavatmal			

#### **AREAS of EXCLUSION**

1. As can be seen from the above-mentioned facts, the Yojana mentions only PwDs people as part of the target group and excludes all other categories mentioned in the Persons with disabilities act, 1995.
2. The figures during 2003-04 indicate that out of the total dwelling units 979071 under IAY, PwDs were 8233 .e. 0.84% which is less than 1%.

#### **SWARNJAYANTI GRAM SWAROZGAR YOJANA - [SGSY]**

##### Swarnjayanti Gram Swarozgar Yojana (SGSY)

(This scheme is a major on going program for the self employment of rural poor with an objective to bring the assisted poor families above the Poverty Line by providing them income generating assets through a mix of bank credit and government subsidy. The program aims at establishing a large number of micro enterprises in rural areas based on the ability of the poor and potential of each area.)

#### **OBJECTIVES:**

To enable poor selected families (swarozgaris) in the rural areas to cross the poverty line.

#### **STRATEGY:**

To provide income generating assets and inputs to the target groups through a package of assistance consisting of subsidy and bank loan.

#### **TARGET GROUPS:**

Small farmers, marginal farmers, agricultural laborers, non-agricultural laborers and rural artisans whose annual family income is less than Rs. 13000/- from 1999-2000.

Small farmers are those having land holding from 2.5 to 5.0 acres dry land in non DPAP areas or 3.75 to 7.5 acres dry land in DPAP areas or half the limits in case of wet land.

Marginal farmers are those having land holding up to 2.5 acres in non DPAP areas or 3.75 acres in DPAP areas in terms of dry land or half the limits in case of wet lands.

### **SAFEGUARDS**

For SCs & STs: Assistance both in physical and financial terms to the extent of.

a) Government of India norm - 50% for SCs & STs put together

b) State norm - 50% for SCs, 10% for STs (16% for STs in ITDA areas), for Women - 40%, for PwDs - 3%, Minorities - 3%

### **FORUM FOR IDENTIFICATION OF BENEFICIARIES:**

Grama sabha attended by prospective beneficiaries, representatives of bank, DRDA, Mandal officials, non-officials and village elders.

### **SIZE OF INVESTMENT (PERCAPITA) DURING**

Subsidy - Rs.7500, Credit - Rs.17500, Minimum Investment - Rs.25, 000

### **RATES OF SUBSIDY:**

Small farmer 30% of Project Cost subject to Maximum of Rs.7500/-

Others 50% Project Cost subject to Maximum of Rs.10, 000

### **SCs,STs and PwDs - 50%**

Community minor irrigation works - There is no monetary limit on subsidy for irrigation projects.

### **INDIVIDUAL MAXIMUM SUBSIDY:**

Non DPAP areas - Rs.7500

DPAP areas - Rs.7500

### **SCs,STs and PwDs - Rs.10000**

Minor Irrigation Sector - No monetary limit on subsidy

### **GROUP LOANING UNDER SGSY – GUIDELINES**

#### **TARGET GROUP:**

The target group for group loans would be below poverty line (B.P.L) families (Group of Swarajgaris).

The group loans are entitled to 50% subsidy subject to a limit of Rs.1.25 lakhs

### **FINANCIAL CEILING ON TOTAL OUTLAY FOR GROUP VENTURES**

A maximum limit of 70% of the total allocation of funds to each District Rural Development Agency (DRDA) is permitted to be utilized as subsidy under group ventures with no such ceiling on the quantum of credit.

### **NUMBER OF PERSONS IN A GROUP**

The number of borrowers in a group may vary from 10 to 20. In case of minor irrigation and disabled the number may be minimum of 5.

#### **IDENTIFICATION OF BENEFICIARIES:**

The list of BPL households identified through BPL census, duly approved by the Grama Sabha will form the basis for identification of families for assistance under SGSY . The Self Help Groups should also be drawn from the BPL list approved by Gram Sabha.

NGOs may also be allowed to help in the formation of groups.

Here the signature of members in their individual capacity only should be obtained, signature for and on behalf of the group/firm should not be obtained.

#### **SWARNJAYANTI GRAM SWAROZGAR YOJANA [SGSY] [TRAINING]**

**( 10% of SGSY allocation)**

#### **OBJECTIVES:**

To upgrade the capacity of Swarozgaris both individual as well as group oriented activities.

#### **TARGET GROUPS:**

Those between 18-35 years from the families below the poverty line. The age limit is relaxed to 16 years in case of the in-mates of orphanages and to 45 years in case of freed bonded laborers, ex-convicts, leprosy cured patients, liberated scavengers etc.

#### **QUALIFICATIONS:**

No educational qualifications are prescribed.

#### **SAFEGUARDS**

For SCs & STs: Assistance both in physical and financial terms to the extent of.

a) Government of India norm - 50% for SCs & STs put together

b) State norm - 50% for SCs, 10% for STs (16% for STs in ITDA areas).

For Women - 40%

**For PwDs - 3%**

#### **STRATEGY:**

Training in any institution or with master crafts man and provide subsidy by DRDA and credit from banks under SGSY for acquisition of income generating assets after completion of training.

#### **DURATION:**

Two types of training are contemplated under SGSY

#### **1. BASIC ORIENTATION PROGRAMME**

Swarozgaris may put through a basic orientation programme to acquire the skills

after the loan is sanctioned and before distribution training should not be more than two days. Training expenses like training material, honorarium to resource persons, travel and food expenses of Swarozgaris can be met from SGSY training fund. No stipend is admissible.

#### **2. SKILL DEVELOPMENT TRAINING**



Swarozgaris who need additional skill development /up gradation of skill appropriate training may be identified and organized. Under this Swarozgaris will be entitled for financial assistance if they require to undergo training for more than a week. The bank will give this money to the Swarozgaris as a soft loan.

DRDAs are entitled to meet the expenses incurred by the training institutions . The expenses should not exceed Rs.15/- per trainee per day..

### **Areas of Exclusion**

**1.The program stipulates that at least 3% of the total beneficiaries would be persons with disabilities but as per the figures for 2003-04, out of the total 254615 individual beneficiaries only 3593 were persons with disabilities, which is 1.41% much lower than the stipulated 3%.**

2.The total members of SHGs under this program were 453006 out of which 2020 were by persons with disabilities which means again it is 0.45% less than one percent vis-à-vis stipulated 3%

3.Similar story is with the figures of total assistance given. During 2003-04, total assistance given was 709149 out of which the assistance given to PwDs was only 5694 which comes to 0.80% again less than 1%

4.The safeguards mention 3% for PwDs but exclude all other categories under the PwD Act.

### **Sampoorna Grameen Rozgar Yojana (SGRY)**

SGRY is a wage employment scheme, which is self targeting, with wages paid partly in cash and partly in food grains, with minimum quantity of 5 kilograms per man-day. SGRY, which has earmarked 30% of employment opportunities generated by the program for women, has only been able to reach a low 12%. The evaluation results published (concurrent evaluation was done in 2003-04) do not throw much light on the type of durable community assets that have been created. It has pointed out many lacunae in its implementation like non-payment of minimum wages mandated in the program or non-distribution of food grains in some places. Also where food grains have been distributed the extent to which food security of families has been met is not known..

### **SGRY - Areas of Exclusion**

1.The program assures that the rural poor in need of wages would get employment and that persons with disabilities would get preference. However, 2003-04 figures indicate that 3503.95 lakh man days were created out of which 206.76 lakh man days was for persons with disabilities. This means 5.90%

2.A total number of works completed during 2003-04 were 1028259 whereas the total works completed by persons with disabilities is 4805 i.e. 0.6% again less than 1%

3.The program does not mention persons with disabilities specifically either in objective or in the target group thus, making it easier to forget and exclude them from this program

4.The section on safeguards for weaker section and women of the country also misses out to include the category of persons with disability, thus not providing any special mention.

5.The general 3% reservation is not mentioned anywhere in the program.

## **HIV/AIDS & DISABILITY**

An extensive work has been done to substantiate this section of the report. The research and its findings in its entirety are being submitted as a separate report. However, a synopsis is being included underneath.

### **SYNOPSIS**

Disability and HIV, both are surrounded by a lot of stigma, misconceptions and prejudices. Though HIV has been the disease of this century and much research is undertaken on various aspects of this epidemic, not much attention has been provided to already disabled people and HIV; due to various reasons. Sexual and reproductive health issues are closely linked with HIV/ AIDS. There are also some myths surrounding the sexuality of disabled people. It is generally thought that disabled people do not have sexual desires and are not sexually active. All such myths result in intentional or unintentional exclusion of disabled people from sexual health information, services and rights that are so very crucial to HIV/ AIDS. It was therefore felt essential to study the issue of sexuality of disabled people and its linkage to HIV/ AIDS with special focus on disabled people in the state of Maharashtra and assess their exclusion from HIV/ AIDS programming.

The evidence based study was aimed at exploring the existing situation of persons with disability with regards to the access to information, services, and rights related to sexual & reproductive health as well as HIV/ AIDS and to put forth the gaps in knowledge and database that need to be looked into for further policy making and programming.

The study included major stakeholders including adolescents & young adults with disability, Parents groups, National and state level NGOs working in the field of HIV/ AIDS as well as Disability, Chief functionaries at Govt., professionals in various service centers of Govt. of Maharashtra such as PPTCT and ART centers, Private Practitioners in the HIV /AIDS field.

The methodology for the study included Focus group discussions with groups & NGOs, Interviews with individuals with disability, Related case studies and Existing database, if any, available on the topic.

The study revealed that situation of disabled people with regards to HIV / AIDS leaves far from desired. The awareness level among the disabled population is limited to the words – HIV/ AIDS rather than the understanding of risks. The vulnerability of disabled people, especially disabled girls and women is quite high due to violence, exploitation and abuse. Hardly any disabled friendly IEC material is available. Attitudes of health care professionals, especially in terms of confidentiality need major orientation. The current HIV/ AIDS programs hardly have anything to offer to persons with disability. Neither the current training content nor IEC/ BCC materials cater to the special needs and requirements of disabled people. Whatever awareness material has been adapted does not reach the needy population. There is hardly any information among the disabled population on VCTC, ART, and PPTCT. Current condom promotion activities exclude disabled people. Information on STI or its relevance to HIV is very poor among disabled population. In the context of rampant sexual abuse, this is definitely not good news. Disabled people also are not exception and they also view HIV status as a stigma and need a lot of education regarding relevant issues. Contrary to the belief, disabled people are found to be sexually active, as individuals, as commercial sex workers and as customers of CSWs. Knowingly or unknowingly these people are instrumental in

spreading the disease either at giving or at receiving end. The AIDS epidemic can never end if this population is not included in the efforts of prevention & care.

Most importantly, the inclusion of disabled people into HIV programming is their human right to health care and mainstreaming.

To modify the current situation, which most definitely is a violation of rights of disabled population, some action points have been suggested, such as building data base, appropriate service delivery, research, advocacy, capacity building, and a multi sectoral approach.

It is hoped that as always the marginalized of the marginalized group does not remain excluded any longer and urgent actions are taken for their inclusion for their inclusion in HIV/ AIDS programming.

In the endeavor to gather information, the researcher had put forth the subject as “query” in the [aids-se@solutionexchange-un.net.in](mailto:aids-se@solutionexchange-un.net.in) related to HIV/AIDS so that as much knowledge could be accrued as possible. The summary of the response to the query is mentioned underneath:

### **Consolidated Reply: PLHIV with Disabilities in India, from Shodhana Consultancy, (Experiences; Examples)**

#### **Summary of Responses**

A recent survey of World Bank and Yale University says that disabled are at equal or higher risk for HIV than the general population. The query wanted a database of PLHIV with disability including organisations working in this field as well as experiences both from disabled PLHIV and from members working with them.

Deliberating on conditions of the disabled, discussants said that negative social stereotypes and absence of socio-economic opportunities, keep them out of the social mainstream and their access to reliable information of any kind is extremely limited. Urbanization, industrialization, and migration with the resultant modernization of families have posed new challenges.

Disabled are usually not included in HIV prevention effort because of the assumption that they are not sexually active and are at little or no risk for HIV infection. However, on examining the survey of [Yale University and the World Bank](#), members stated that the likelihood of individuals with disability to engage in behaviours such as unprotected sex, intravenous drug injection, or use of alcohol is the same as normal population. In addition, discussants realized that the disabled are even more likely to be victims of violence or rape and less likely to be able to obtain police intervention, legal protection, or prophylactic care.

Respondents felt that being a disabled woman is an additional risk factor. Social and economic factors make women with disability hard to reach with HIV messages and reduce their ability to negotiate safer sex. Other discussants added that women have heightened risk of gender-based violence, lack of access to health services and low awareness of mother-to-child HIV transmission.

Subscribers also deliberated on the issue of HIV being a disability by itself. Some members proposed the term, ~~◆~~ifferently-abled~~◆~~ to address the disabled as calling a PLHIV disabled would add to their stigma. However, other responders stated that HIV itself was a debilitating disease. These supporters quoted a case wherein the High

Court directed the employer to pay ~~disability~~ pension to a former HIV positive employee. Similarly, research used terms such as ~~disability~~ Adjusted Life Years (~~ADALY~~) to estimate the years lost due to HIV infection. Hence, to be in congruence with research and law, responders recommended retaining the term ~~disability~~.

The discussion also brought out a large number of organisations working for the disabled. [St Paul's Trust](#) provides medical and physical aids to the disabled. [Handicap International](#), [Action on Disability and Development India](#), [Prayas](#), and other organisations discussed mentioned, are working not only to provide methods of physical support to the disabled but also to integrate them into the social mainstream.

Reaching disabled individuals with HIV messages, clinical care, and reproductive health services, members revealed, presents unique challenges. HIV messages and communication are often inaccessible to people who are blind or deaf. Additionally, health service facilities are often not accessible to people with physical disabilities.

Members came up with the following suggestions to address the issue of checking the spread of HIV among the disabled:

- Working on the attitudinal and cultural barriers to mainstreaming, without which none of the other barriers will go
- Moving HIV programmes and services to accessible places and promoting use of ramps
- Ensuring that HIV information is disseminated in a variety of formats including radio and billboards to ensure that specific groups are not missed
- Adapting existing IEC materials to disability-specific ones, use of sign language interpretation as well as more verbal presentation and demonstration for blind
- Establishing target schools, institutions and organizations serving the disabled population
- Training HIV educators in disability issues and involve disabled in these efforts
- Promoting volunteers to work for the disabled

Though the 2001 census included the disabled population, members hardly found any data on either PLHIV with disabilities or on the impact of HIV on disabled populations. The fact that disabled people amount to over 22 million justified the focus of both policy and programmatic interventions for this group. Therefore, discussants highlighted the need to undertake various studies regarding sexual health in disabled population on various facets of HIV. This is necessary to create awareness, carry out risk assessment as well as curtail HIV infection, members emphasized.

In a meeting with Lawyer's Collective, Mumbai, it was understood that DFID India had instituted a similar countrywide study. Subsequently, a meeting was organized with the DFID researcher to exchange learning. Both the researchers appreciated that findings were more or less identical revealing low awareness, marginal participation of PwDs in HIV / AIDS Programme as well as low priority given by the authorities to include PwDs.

## **Social exclusion-Impact on children**

Exclusion leads to Impoverishment due to exclusion from adequate income or resources, Labour market exclusion thus compelling to work in under employment situation; Service exclusion leading to denial of basic services and facilities in the rights perspective, Exclusion from social relations and social groups leading to feeling of loneliness thus retarding the chances of socialization and developing appropriate social fabric. All the above have strong inter-linkages with ultimate manifestation on the one who is most vulnerable in the family – the **Child**. Drawing from the experience of two evidence based study and also integrating the learning from various literature review the subsequent section will examine how children's life is impacted due to exclusion factor.

In accordance with Child Rights Convention, Child Development is characterized with 6 basic uniqueness:

1. **To encourage exploration-** Exploration is a phenomenon that a Child does from the time of its birth. S/He starts exploring the environment around and the brain development begins. Providing and acquiring optimum opportunity is the right and every Child must get it.
2. **Mentoring development of basic skills-** The Child must get full opportunity to develop his/her cognitive and motor skills including the fine motors in tandem with the general developmental mile-stone.
3. **Celebrating developmental advances of children-** The development mile-stone of a child should be further augmented with fitting atmosphere that includes appropriate playing, educative and exploratory environment. This provides the child with much needed life skills experience to grow to its full potential.
4. **Encourage to develop spontaneous attitude-** Through the process of socialization the child learns different behaviour. They are the method of one to one interaction, interacting in small and large groups, the art of listening, affirmative behaviour, copying with rejections etc. The child also observes and reflects on different think that comes across in every day life. It is imperative to provide the child with atmosphere to develop positive attitude in life.
5. **Providing protection- the protective** concept acknowledges that every child has 'un-evolved' capacities and thereby have rights to protection on the part of parents, community and the State from abuse and participation in activities likely to cause them harm – it imposes obligations on States to **protect** these rights.
6. **Provide responsive environment for learning-** The constitution of India guarantees Right to education in every child up to the age of 14. Accordingly it is not only important to provide school education to children but also guarantee the child's physical well being by providing appropriate nutrition. Thus the creation of

learning atmosphere starts from the Anganwadi where pre-school education must be given equal weightage.

### **Social Patterning in Early Child Development**

Clyde Hertzman's study on Social Patterning in Early Child Development (2003) brings out the aspects of socio-economic disadvantage that translate into developmental risk. The study says that to understand this, it is important to return to the notion of the developing brain as an environmental organ. As mentioned before, stimulation, support and nurturing play a role in brain development analogous to air quality in lung development. Spending one's early years in a relatively un-stimulating, emotionally and physically unsupportive environment will limit the growth of the developing brain and lead to cognitive, social and behavioural delays that, in turn, will affect subsequent life chances.

The period from conception to school age is a critically important time in human development. Developing fetuses create new brain cells at a rate of tens of millions each week such that, by the time babies are born, they have virtually all the brain cells they will ever have. Fetal development is an issue in social exclusion because it is socially patterned in India. Consider, for example, babies born "small for gestational age." These are babies whose birth weight is in the bottom 10 per cent of the population, after taking into account the number of weeks they were in the womb (gestational age). Being small for gestational age is influenced by the quality of the environment within the uterus, placenta, and womb during pregnancy. This, in turn, is influenced by nutrition, stress and drudgery. After birth, being small for gestational age carries with it an increased risk of developmental delay. A research carried out in by Institute of Child Health London, shows that there is a five-fold difference in the proportion of children born small for gestational age from one side of town to another. In the affluent neighbourhoods on the east end of town, the study showed that approximately 3.5 per cent of babies were born small for gestational age in 1996. In working class neighbourhoods this figure rose above 10 per cent, and rose again to over 18 per cent in the impoverished downtown east side. Thus, a five-fold gradient for subsequent developmental risk was evident across the socioeconomic spectrum by the time of birth. The newborn's brain, whether small or normal for gestational age, does not look like an adult brain, in that the cell-to-cell connections that characterize a mature brain have not yet been developed. In the first several years of life, a rapid process of brain "sculpting" takes place, during which time networks of cell-to cell connections are created at the anatomical and biochemical level. This is important because, ultimately, human consciousness is an "emergent property" of these connections.

A well-sculpted brain is one with dense networks of cell-to-cell connections within and between various regions of the brain. Brain development is an issue in social exclusion because human experience is a crucial influence in this process of sculpting. To be more specific, the brain sculpts itself in response to two influences. The first is the wide range of stimuli in the immediate environment of the newborn: visual, verbal, emotional, physical, touch, smell and taste.

The second influence is biological: the existence of pre-programmed “critical (or sensitive) periods” in brain development, during which specific areas of the brain turn on and become ready to receive environmental stimuli. During critical periods, cell-to-cell connections are sculpted that, in turn, engender specific developmental competencies: cognitive (language and quantitative), sensory, muscular, emotional, behavioural and social. In the light of the above let us now see how each element affect the child development and future growth.

The far-reaching consequences of exclusion are directly manifested in the lives of the children. Putting together the experience of the study as well as from the literature review, the following factors can be inferred as detrimental to children and their development:

1. **Inappropriate programme Design** - Due to inappropriate programme design, the services seldom reach the deprived section of the society particularly the excluded group. Thus there is lack of social inputs given to the mothers and families who should be practicing appropriate feeding and care giving to children. Thus the child in the family directly affected in the growth pattern. This was noticed in Muchhi village of Yavatmal where no Anganwadi service was available.
2. **Social differentiation** - In general families and caregivers practicing positive infant and young child feeding and caring, influence other caregivers within the community. The chances of excluded group are highly reduced from learning such behaviour since they are not made part of the community. A case that we saw in Feldhana where the entire Hamlet was excluded from participating in the SHG Programme of the main village Harisal.
3. **Lack of Access** - Both the Child Rights Convention as well as the National Policy for Children guarantee every child/ women the access to quality services. Here emphasis needs to be laid to the three most important word i.e. **access, quality and service**. All the three components are missing as far as the excluded groups are concerned. Thus the children grow unhealthy due to improper health and nutrition services, improperly educated due to lack of educational services and lastly get in to the cycle of Child Labor and under – employment. Several cases noted in the Melghat region of Amravati district
4. **Distance a major factor** - The Govt. of India has launched several programmes related to women’s empowerment that directly influence the care of pregnant women and children. Convergent Community Action was one of them. The Programme has immensely benefited in the districts wherever it was initiated. One of the best examples is the Pandharkawda block of Yavatmal. However on our visit to Pahapaud and Daghadipaud in the same block, we observed that the benefit of the same programme which otherwise a success story, has not been able to translate itself to the need of the people simply because both the villages are distant hamlet and thus facing geographical exclusion.

5. **Lack of Social Input** - From the official statistics though the incidences of reported early marriage was not very high except that for Latur, in reality early marriages of girls is very rampant. The geographical exclusion coupled with ineffective Govt's. social input programme, the education level of girls is low. There is a lack of Programme initiative for adolescent girls to teach them on personal hygiene, teenage pregnancy & related matters, safe motherhood etc. We have already noted in the preceding paragraph that there is lack of access to basic services to the excluded population. With high percentage of early marriage and pregnancy, the chances of under nourished mother and child, incidences of maternal morbidity and child mortality as well as malnutrition is very high. Taking the incidences of Zhari-Jamni, the total percentage of children in the malnourished category was as high as 79%. Hence we see that the chances of children growing normally amongst the excluded groups is further reduced unless special effort is made.
6. **Implementing the programme with its spirit** - For the healthy growth it is imperative that every child is supported by an enabling family environment. This demands that the family where the child is living has access to rudimentary services which is provided by the state. A developing nation such as India, providing of the basic services is the responsibility of the state. This study as well as the literature review suggests that best of intentions do not translate in to best of policies, good policies always do not render in to good programmes and good programmes do not convert in to best implementing strategies. Both policy wise and programmatically it is a well known world wide that Integrated Child Development Scheme is best designed ECCD programme in the world and so is Sarva Shiksha Abhiyan. However we have noted from the experience of our study that these Programme still do not reach certain population who face Social Exclusion for one reason or other.
7. **Structural Lacunae** - Exclusion is not always due to geographical or social reasons. For example the state of Kerala according to census as well as Govt. of India is a state that has 100% literacy rate. However while counting literacy the entire disabled population has been ignored and not taken in to account. This is basic violation of both human rights and constitution of India where every child should have access to a primary and upper primary education. While Sarva Shiksha Abhiyan has special provision for the education of PwDs, practically it is limited only to building of ramp in the schools and to some extent teacher sensitization Programme. The entire aspect of special education is absent from the concept. From the evidence based study on Social Exclusion and disability it can be noted that none of the Block Resource Centers visited in the district of Yavatmal, Chandrapur, Latur, Pune and Amravati were equipped with any materials related to the education of PwDs. This is basic lacunae in the structure of the Programme that excludes 4% of the children who are in the school going age.



8. **Myopic Vision in policy formulation** - HIV/AIDS is a burning problem of today. Studies have confirmed the inter-linkages and the fact that this deadly disease is not limited to urban areas but fairly prevalent in the rural areas as well. Seasonal migration is a common occurrence in Maharashtra. Due to indulgence in multiple sex partners there is increased risk of spread of HIV/AIDS in rural areas. This has also increased the risk and incidences of Parent to Child Transmission of HIV/ AIDS virus to the child. Two most striking factor came in to the light from the two evidence based studies. While in the tribal areas particularly in Dharni block where migration is so high due to insufficient availability of livelihood options, the knowledge on HIV/AIDS was extremely poor. A study on prevalence rate of both sexually transmitted disease as well as HIV/AIDS may be a worth while exercise. The second study on disability revealed that the PwDs have altogether been excluded right from the policy level. Neither the base document of National AIDS Control Organization (NACO) nor the document released by Maharashtra AIDS control society (MSACS) has any provision addressing the needs of PwDs. Thus the adolescent groups both in the tribal areas as well as PwDs irrespective of their geographical location are excluded from the Programme.
9. **Rigidity of approach** - Every child's right to individuality & participation needs to be respected by creating enabling environment with access to priority services. Social Exclusion is denial of this very right to a child. Its multi dimension nature where problems are interwoven in both vertical as well as horizontal layers, the programme planning should be done taking in to consideration these layers and how to address them one by one. For this, the planners will have to consciously resort to the rights based approach and not go by arithmetic approach of counting the critical mass.

### **Part 3: Responding to social exclusion**

We have used the concept of social exclusion in this paper to draw attention to one way in which poverty is linked to inequality: the concentrated nature of disadvantage among certain sections of the poor. The challenges presented by social exclusion to present policy concerns with poverty reduction, investment in human capabilities and the promotion of social justice suggest that the 'business as usual' approach to development has not proved adequate in the past and is unlikely to do so in the future. Socially excluded groups have been invisibilized in 'normal' forms of data collection which tend to define 'the poor' simply by their assets and income. The absence of disaggregated data has helped to invisibilize the problem of social exclusion. This report has tended to cite data from certain districts far more than others, not because the problem is worse in these districts but because UNICEF has been working in these districts for sometimes now and the data is more likely to be available due to long standing rapport with the district authorities.

*Socially excluded groups are less likely than the rest of the poor to benefit from the 'normal' processes of economic growth because not only do they own fewer resources of various kinds than other sections of the poor, but they also find it harder to translate their resources into income because of the discrimination they face in markets for labour and commodities.*

*As the two evidence based studies suggest that Socially excluded groups are likely to be denied access to 'normal' forms of social provisioning, whether these are provided through private provision or by the state. They are unlikely to have the means necessary to purchase these services in the market place while, as the examples cited here show, the discriminatory attitudes prevalent in society at large are often reproduced by state officials responsible for service provision.*

Finally, socially excluded groups are generally less likely to participate in 'normal' models of democracy. Particularly where they constitute a minority, there is no incentive for political parties competing for power to take their interest in to account since they neither represent enough votes nor enough organisational clout to exercise a great deal of influence. Nor are they likely to have the resources necessary to compete for political office. The cases of Feldhana, Rudha, Muchhi, Pahapaud etc. are examples in themselves that clearly depicts their abysmal disinterest to participate in the democratic system of their village.

Policy responses to social exclusion therefore need to address the multiple and overlapping disadvantage that it represents. Multiplicity of disadvantage requires a multi-pronged approach to address, among other things, the cultural norms and values which underpin discrimination against excluded groups, to formulate policies which will address the intransigent nature of their poverty and to strengthen their capacity to exercise 'voice', not simply in the political domain but across the different processes of collective decision-making which impinge on their lives.

The availability of statistics is clearly essential for a better estimate of the extent to which the socially excluded among the poor systematically report lower levels of income and capabilities than others while more detailed qualitative research can help to uncover the mechanisms by which exclusion is reproduced over time. The agencies responsible for collecting data at both national and international levels may need greater desegregation of the poor than has hitherto been the case.

Cultural norms and values which lead to the persistent discrimination against excluded groups can be changed through the educational system, the media, public campaigns and setting up a legal framework which discourages discriminatory behaviour and strengthens the civil and political rights of excluded groups. The content of the educational curriculum, the language in which it is taught and the extent to which teachers are drawn from, or at least sympathetic to, social excluded groups will all help to determine the extent to which education promotes or challenges the reproduction of social exclusion. The media plays an increasingly powerful role in shaping everyday perceptions about difference and diversity within a society and can be mobilized to educate, inform and entertain in ways, which break down some of barriers, which separate socially, excluded groups from the rest of society.

The legal framework though available in India, its adequate and appropriate implementation can help to ensure that discrimination on the grounds of caste, ethnicity, disability, gender or age are rendered unacceptable within a society. It can also ensure that rights of excluded groups to land, credit, employment and benefits are secured, given the greater vulnerability of these groups. However, a legal approach to social exclusion necessitates that attention is paid to the systems through which people obtain justice. Strengthening the rule of law for the poor and marginalized means strengthening the judicial system at the level at which everyday justice is dispensed. There is now sufficient evidence to suggest that the institutions that represent the administration of justice in a society – the

police, the law courts, the judges, lawyers – all of these infringe on the lives of poor and socially excluded in ways which threaten their lives and their livelihoods.

Policies to address social exclusion may need to incorporate special provisions to address the multiple disadvantage associated with social exclusion and to break the inter-generational transmission of poverty that it has often entailed. Such provisions may entail special attention to geographical or group targeting. It may entail targeting the children of excluded groups to ensure that they face that limited life chances which their parents faced. It may also need addressing gender inequalities within excluded groups so that promoting respect for hitherto marginalized cultures does not necessarily promote the internal inequalities, which such cultures may embody.

It may require the tailoring of social protection policies to address the particular forms of vulnerability of socially excluded groups. Given that the vast majority of such groups are to be found in the most exploitative forms of work in the informal economy, it is unlikely that forms of social protection devised with the full-time formal sector worker in mind is likely to be appropriate. Some form of basic security may be essential if those who are dependent on the personalized forms of clienteles or highly insecure forms of employment for their survival are to have the capacity to organize for their rights.

Addressing social exclusion will require changing the attitudes of those responsible for policy delivery, tailoring policy design to the pace at which change takes place in conditions of intransigent poverty, earmarking the resources necessary to ensure these provisions are implemented and, above all, creating mechanisms which allow those who have a stake in the success of these efforts to participate in their design.

Strengthening the voice of the socially excluded in policy and political processes may mean changing the way that these processes are done. The strengthening of the Panchayati Raj structures with genuine devolution of power would appear to be an essential element of this change. How decentralization is carried out, what powers and responsibilities are devolved may vary by context but bringing the power of the state within the reach of actors who cannot access more remote centralized structures of power must be an important precondition for building participation and accountability. Above all, safe guarding the PRI structure from any kind of degeneration is a must and this can only happen when the participatory process at the most rudimentary place is ensured where exclusion nests.

At the same time, given that a great deal of social exclusion is reproduced through local level hierarchies, the state is still seen by many as the only institution which has the capacity, however imperfect, to sidestep or bulldoze disempowering relations of both market but also custom and tradition. To that extent, the role of a central state that is not closely entangled from local power structures and is more likely to be able to challenge them remains relevant.

Finally, promoting civil society networks which help to mobilise socially excluded groups and which build their alliances with other organisations fighting for rights and social justice provides a bottom-up way of strengthening their capacity to exercise voice and to ensure their claims are addressed by policy and political processes. As we have tried to demonstrate in this paper, it is the marginalisation of socially excluded groups, their inability to

influence the processes of decision-making in their society, which partly explains why they remain poor over extended periods of time.

The challenge, of course, is how prioritizing socially excluded groups as a part of an agenda to meet the MDGs can be promoted by a multi-lateral donors like UNICEF. It has been noted that the Millennium Declaration expressed far greater commitment to the principles of equality, freedom and rights than is evident in the MDGs. Agencies like UNICEF could do a great deal to ensure that the principles of the Declaration infuse the interpretation and implementation of the MDGs. They could also ensure that these principles are built into their policy dialogues with government while designing the country and state program of cooperation.

## Feldhana - A Case study

Melghat region is a gift of nature in terms of flora and fauna. It is majestically located in the mountain range of Satpura that connects the state of Maharashtra and Madhya Pradesh. With lush green vegetation the forest is a habitat for wide variety of wild animals, birds, trees, shrubs and herbs. The region also has designated core area with in tiger habitat. It has four sanctuaries viz. Melghat, Wan, Nemnala and Ambabarua. The tiger reserve is a national park known as Googamal. The entire region is spread over 1597 sq.kms which also has 69 forest villages. There are five rivulets all are the tributaries of the river Tapi.

The village Harisal is amongst one of the 69 forest villages within the Googamal national park. In the midcourse of our discussion in Harisal, I observed an impatient looking person, constantly trying to draw our attention towards him. He very much wanted to be the part of the focus group discussion. By feature he was very wiry and his personal hygiene was extremely poor and was wearing worn out clothes. Many a times he wanted to make his points in the FGD, but he was not allow to do so. He was either snubbed and asked to keep silence or totally ignored. On my intervening, the gram sewak stated that most of the time he remains drunk and talks negative about villagers and village affairs. After the discussion was over we sat down for a cup of tea in one of the roadside hotels. I invited him to join a few villagers and us along with the gram Sewak. I observed that he was very reluctant to sit with us and preferred to remain standing and have his tea. The awkwardness of the other members present was distinctly visible. The body language was clear enough that it is never a custom to allow him to be part of the group especially when outside guest has come to their village.

Soon we finished our tea and every one dispersed except one. "What is your name"? I asked. "Janak Dhurve, sahib". "What you heard in the discussion just now is not the entire truth. The gram sabha is never held and whenever they are held, the timing does not suit most of the people. Even the Panchayat meetings have the same fate. It is done in such a way that only a few influential people manage the meeting in such a way that meets their interest. Since I am the cleaner of the Panchayat hall, I come to know of all the discussions."

He requested us to visit his village, which was approximately  $\frac{3}{4}$ <sup>th</sup> km from the main Harisal village. Personally I was in two minds and debating whether to accede to his request due to paucity of time since I was committed to visit another village which was 100km away. However I decided to go with him since he was insisting for a long time.

Feldhana is the name of the village, which is more like a Basti. The bank of the river Sipna and very next to the weekly market place situates it. It is just out side the second gate of the tiger project. Jhanak took us to his village via the market, which had every thing to offer including a curious torch. My curiosity compelled me to stop over and make a closer look at the structure of the torch, which I thought was real example of appropriate technology. It was built in small plastic tobacco box which was rectangular in shape, the dimension being 3"/1.5". It is fitted with two

small white bulb in narrower side of the box connected to a solar battery with the help of simple gem clips. The cost of each being Rs.20 only. However I managed to get for Rs.18 each since I bought 10 of them. Once more I was convinced that scarcity and necessity are breeding grounds for innovations. After completing my purchase we proceeded to Feldhana along with Jhanak.

There are all together 20 households. Each household has a large family size with 6-7 children. Every house was kuchha made out of leaf, grass and bamboos. I went inside Jhanak's house. It has only one room which is approximately 80sqft. One corner of the room has a cooking place –a mud *chulah*. The room was nicely brushed up with cow dung and was generally clean. Jhanak lives with his wife, mother and four children. He is temporarily employed as sweeper cum messenger at the Panchayat office, which pays him Rs.650 per month. Soon after my reaching along with two other colleagues, a large number of men and women came out to meet. Amongst them was a lady named Chagal Sukram Dhurve who happened to be an erstwhile member of Harisal Panchayat. She told us that she has hardly been able to attend any Panchayat meeting due to lack of intimations. Whenever she has attended during her tenure, she has tried her level best to put forward the basic requirement of the village. Unfortunately it never met with any success. The village does not have even drinking water facilities. They use the water from river Sipna for both drinking and bathing purpose. Almost all children we came across were severely malnourished. Most men, women and children had skin disease. Our attention was also drawn on one of the villagers named Sukhram who had fractured his hand due to fall from a tree. He was in extreme pain and was using some kind of local massage oil. On asking why he was not taking the help from the PHC, his wife stated that the doctor gave only some pain killer tablets and said that he had fractured his hand for which plastering was required and the PHC does not have the facility for that. He also advised that they could use some local medicine if they knew or go to Dharni for treatment. Sukhram did not go to Dharni due to lack of money and preferred to continue with local medicine. He had been doing this for last 17 days(at the time of visit), and by the physical appearance of the limb which was in extreme swollen condition, the prospect looked very non promising. He also had fever the day we met which might have been due to trauma. Although the general health condition seemed extremely poor, the visit of ANM is very seldom. The children do not go to Anganwadi as the Anganwadi tai does not allow their children in her center with the plea that it was already over crowded. The women from the village were very keen to become member of the SHG that was formed by the Anganwadi Tai and had deposited the first installment of money. Though the money was collected initially, it was return back to them after two months giving the reason that other women in the group were not agreeing to their membership.

The basti can be labeled as 100% illiterate. Out of the total of 47 children of school going age, only 11 were going to school on a regular basis in Ashram school. On asking why all children did not go to school they said that except for one house the rest of 19 families leave the village and migrate to other districts in search of work. They normally go immediately after the Diwali and return a day before Holi. Again they leave by middle of May and return by mid

September. In effect they are in their village only for 3-4 months and as such the teacher refused to allow them to sit in the class. Thus almost all the children are denied of education as well as nutrition.

Livelihood is one of the leading problems in Melghat region where the general pattern of employment availability is between 40-50 days per year. For rest of the period families migrate to different parts of the state for employment in varied pattern. The average availability of employment for the villagers in Feldhana is between 20-25 days only. No Govt. officials including Gram sewak ever visit their village. There has been no NGOs visit as well. The general occupation of men folk are fishing and also mending of utensils, while the women normally engage themselves in stitching and making small mats out of rags commonly known as *Godadis*. They can barely make their living from their earning. None of the families own land. Each family is entitled to receive money under Antyodaya Scheme, which does not reach them regularly, and the money received is always inconsistent. All families are designated under BPL category and also have been provided with the BPL card. Conversely, the entire village has not been registered under EGS, while in case of the parent village Harisal, every one has been registered.

On the point of formation of SHG, I explored with them the possibility of starting of their own group to form an SHG. With some amount of initial discussion I was able to bring a consensus for them to start saving with whatever comfortable amount they thought would suit them. They agreed to start with Rs.15 per month as their contribution. It was also agreed that Jhanak along with Chagan will meet the Sarpanch and then the BDO for further assistance towards linkage with the bank.

Another perceptible point that compounded their problem was early marriage and early pregnancy. When the children gathered to meet us, we noticed that a few girls who were between the ages of 9-12 were in sarees. We were told that all the girls in saree were ready for marriage. It is a widespread practice that the girls are married within one year of their attaining puberty. In most of the cases, girls are married at age of 11 at the lower end and 15 years at the higher end. We could observe this since there were several girls who perhaps must be in their mid to late teens, were already mothering children. On probing, they said that due to their compulsion of migration, the girls often become victim of abuse. As a result they find marriage an easy and acceptable solution to their problems. The custom of early marriage further complicates and the cycle of early pregnancy and thus giving rise to low birth weight babies, supplements the vicious cycle of malnutrition.

Observing multifaceted problems that each of the families in Feldhana was facing, I returned with added heaviness in my heart. The every day problem that was incremental in nature is a way of life with them. Many question arise in mind. Can our planning system integrate a synchronized compatible programme that would be responsive to the needs of the communities living in such sub-human conditions? Do the psychological theory of self esteem and self confidence hold any good to them or are these theories only believe in a basic pre- determined starting point where the poor have no place? Would these children who we met have dreams of making it big and if so what would be

their definition of being big? All the houses that looked so dilapidated definitely qualified reconstructing under the Indira Awas Yojana, seldom find a place in the priority list of the Gram sabha, which is hijacked by the better off people in the village. While preparing for writing the concept paper on social exclusion, I was keen to understand the dictionary meaning of the phrase 'social exclusion'. From the Webster Universal dictionary (Unabridged international edition) the meaning explained is as mentioned below:

*"Exclusion means- the act or process of excluding, state of being excluded, shutting out, to remove, to separate, to prevent".*

Exclusion according to Oxford reference dictionary reads as follows:

*"Exclusion is to shut or keep out from a place, group or privilege, to remove from consideration, to make it impossible, to preclude".*

In a manner of speaking, both the above dictionaries give us the meaning suggesting that the onus is on conscious behaviour. From the stated connotation, as well as from the above case study it is evident that Social Exclusion is not only a phenomenon led by economic deprivation alone but also a combination of different factors, which are embedded, in a socio cultural milieu. The social differentiation observed between Harisal and Feldhana in terms of cast and economic equation logically takes us to the theoretical context of horizontal group differentiation. Prof. Amartya Sen, while discussing on Social Exclusion had put forward a rudimentary question; whether the exploration of Social Exclusion will contribute to the understanding of the implication of poverty and enrich the lexicon of development. I do have a feeling, yes it will. The focus group discussion that I have participated in nine villages of two districts, though is too small a sample to be generative enough to substantiate in theoretical context, but certainly is a way forward towards content generation scoping for a consorted research in this field.

Social Exclusion leads to impoverishment, or exclusion from adequate income and resources, from labour market, from services, and also exclusion from social relations and social groups. The village Harisal and Yeoti in example depicts this where in we see that both the Berul tribe in Feldhana and the Banjaras in Yeoti were excluded from the both social and economic services of the Govt. being not able to access any of the schemes appropriately. All the above have strong inter-linkages with ultimate manifestation on the one who is most vulnerable in the family – the child. The children's chances and future prospects are heavily dependent on their parents. With parents migrating on a regular basis it is imperative that the mothers chances to take the child to the Anganwadi, visit to the health center as well as their chances for going to school on a regular basis is substantially reduced. This also increases the probability of young children especially the girl child being engaged in child labour when they migrate to the urban places in the districts. In case of boys, either they move around aimlessly or are engaged in tea stalls etc. we



found this in case of Jhanak Dhurve from Feldhana whose son was only 11 years old and working in a small road side restaurant at Paratwada which is 65 kms down hill from Feldhana.

## **Researchable Area**

The following learning, which needs to be further probed and as area of research are:

- I. What are the factors influencing the social mobility with change in the political economy of a village?
- II. What is the stage wise threshold of horizontal differentiation in the caste system within a region or a defined geographical area?
- III. In effort towards community empowerment when targeting the vulnerable sections, what are the possible conflict situations in a typically socio political context?
- IV. In the current environment of globalization and market dictated economy, the political aspiration is in rise for power. The trend of the local leader is to aspire for a higher position in district, state and then to national. With such migrating leadership what kind of political transformation need to be promoted at the village level so that the PRIs can be strengthened to enhance the bargaining power for a rural bias plan?
- V. Caste – class – social vulnerability: what are the intricate relationship amongst these three so as to bring about equity and social justice.
- VI. What practices and capacity building components can be designed to make a participatory process pro vulnerable group.
- XII. Without underestimating the vertical theory put forth by the economist, one needs to understand the relationship between the vertical and horizontal theory of Exclusion when examined together. To my understanding, either of the two does not exist in itself. For example the upward (vertical) mobility due to enhancement in economic condition does not necessarily bring in total inclusion particularly the social integration. In this case inclusion need to be seen more as relative rather than an absolute term. On the other hand there are many examples in rural Marathwada that I have come across of perfect inclusion of persons with disabilities who otherwise are excluded in many angles (as we have seen in the evidence based studies), being part of peer group (horizontal inclusion) in the village. Hence, one need to critically explore how, when and why exclusion happens, given the fact that Social Exclusion includes economic, social and political aspects of life, that implies deprivation in a wide range of indicators.

# **Understanding the deprivation and agency of single and deserted women and the implications of these on their children**

## **Proposal for intensive study of the question of single and deserted women in one district in Maharashtra**

### **Background**

It is said that poverty has a woman's face. World over poverty among women is rising faster than poverty among men and, despite having the highest per capita income, Maharashtra state is no exception to this. For example, even the Sex Ratio in Maharashtra has now declined to 922. And there is a considerable gap in the literacy rates of men and women.

#### ***Increasing number of female-headed households***

Female-headed households (FHH) include families headed by widowed, deserted or single women and represent an extremely vulnerable section of women. The Rural Poverty Report 2001 shows that the number of female-headed households (FHH), has risen from 20% to 35% between 1970 to 1996. The UNDP Human Development Report for the State of Maharashtra (2002), also quotes some field studies that indicate that the proportion of FHH may be as high as 30%.

#### ***Single and deserted women the most vulnerable section***

The reasons for the emergence of FHH may range from male outmigration, remaining single, being widowed or due to desertion. Among these, single and deserted women heading households form a special, most vulnerable category. Desertion forms part of the extreme end of the continuum of domestic violence. Though there is considerable variation in the incidence of desertion across communities and castes, a few case studies and anecdotal information indicate that socially and economically the deserted women are the worst affected and may have very little access to resources. Also, the National Family Health Survey (NFHS –2 1998-99) indicates that the nutritional status of single and deserted women is declining.

In spite of this, there is very little study of the extent and severity of their problems. There are hardly any development programmes or schemes that specifically target them, or accommodate their special problems. Recently a study was done by SOPPECOM in collaboration with Women's Studies Unit of TISS and Stree Mukti Sangharsh Chalwal, a women's organisation in Sangli district. This study highlighted the social, cultural and economic deprivation of single and deserted women. It showed how despite their low incomes most of them were still not included in the BPL lists. Most of them were engaged in agriculture labour work and managed to get work on an average for about 100 days in a year and none were able to diversify into other occupations. The sangli study pointed out the vulnerability of the women however it did not explore into the vulnerability of the children of these women in detail.

#### ***The single and deserted women's movement***

Recently, over the last fifteen years or so, a movement of single and deserted women has emerged in some areas in Maharashtra. This movement has pioneered the mobilisation of deserted and single women in India, and held conferences, rallies, *yatras* and organised campaigns throughout the state. The campaign was particularly strong in Dhule, Ahmednagar and in Sangli and Satara districts. At its peak, in 1988-89, under the leadership of Stree Mukti Sangharsh Chalwal (SMS), thousands of single women of Southern Maharashtra, deserted by their husbands, took up a struggle for social honour, access to resources, sustainable agriculture and above all a home for themselves and their children. Following an intensive survey, SMS activists, who had been working in Khanapur and Walwa talukas of Sangli district since 1983, held a conference

at Vita in September 1988 where initial demands were raised and a *dharna* was planned.

The women asked for separate ration cards which not only would provide increased food grains but also an independent social identity; for housing, free legal aid to fight maintenance cases, and support to collectively run plant nurseries for social forestry in the villages of the region. In one of the villages women waged a long drawn struggle for almost 10 years for their rights to the housing plots allotted to them and recently in 2003 realised them after they won the court case.

The movement has succeeded in highlighting some of their needs and demands and have also succeeded in some awareness of the problem at a state level. Firstly, it has highlighted the lack of information on the extent of desertion and the processes through which it arises. This is an important prerequisite for awareness generation, mobilisation, and networking and will facilitate creating an enabling policy and legal framework targeting them.

### ***Lack of rights and a 'rights based' approach***

Moreover, besides non-availability of gender disaggregated data, a large body of emerging critiques also highlights the gaps in the development programmes meant for women. It is also found that, though the targeting of women within various programmes -- the micro credit programmes, income generation schemes of the IRDP and DRDA or the employment programmes like the JRY or the EGS, or Watershed development programmes, Participatory Irrigation Management Programmes, Joint Forest Managements programmes -- has often provided much needed short term relief to women, it has not necessarily meant empowerment of women or long term poverty alleviation benefits. Benefits have very often been siphoned off or controlled by men or more prosperous households, and more importantly women's access and entitlements to productive resources have rarely been expanded nor has their participation in the governance structures of these programmes.

Lack of a rights based approach to livelihood resources, especially productive resources, is a glaring gap in development thinking. Security and bargaining power of women within and outside the household is likely to improve substantially if they are assured rights of access over adequate productive resources. Lack of such access leads to insecurity and renders women vulnerable to extreme forms of domestic violence including desertion. Such access is even more critical for single and deserted women who have to take on the responsibility of meeting livelihood needs of the entire household. They are often in situation where they are denied even the indirect access to parental and marital household resources that unmarried and married women have.

### ***Vulnerability of children***

Most women deserted by their husbands come back to their natal villages along with their children. A brief study of about 150 women from 3 tehsils in Sangli district showed that almost all the deserted women who came back to their natal villages came back with their children and set up independent homes. Many of them were not able to support their children's education and needed support there. The social stigma associated with desertion is another issue that the dependent children have to grapple with amongst their peers. Children of single and deserted women are often looked down upon and therefore for them to live normal lives becomes a difficult task. Deserted women also find it difficult to find an agreeable spouse for their children. The situation is worse when they have daughters as they are forced to marry them off either to older men or in poorer households, or with incapable men, only to find their daughters returning home back as deserted women. This trend seems to be highly common amongst the women who participated in this study.

Vulnerability of children was thus an area that needs to be explored thoroughly from both its social aspects as well as from the point of view of the material deprivation it brings in on their health, their nutrition and their education.

### ***The present project proposal***

## ***Project objectives***

The present proposal is based on this emerging alternative rights based perspective. The project may be seen as the first phase of the process of mainstreaming rights based approach to the livelihoods of single and deserted women. The project would be located in one district of Maharashtra, which is representative of the different social sections within society and where there is a presence of an active women's group working on the question of deserted women. The participation of this organisation is important a) to keep the project and its activity grounded to the needs of the deserted women and b) for building up the relevant capabilities in the organisation.

The project objectives may be stated as follows:

1. Firstly, with the help of the organisation, carry out a fairly in depth study of the extent, nature and severity of the problem of desertion in the district. The study would capture the variations in the extent of desertion across different communities and across different agro climatic zones within the district, the special vulnerabilities of children moving from some initial explorations done in the Sangli study.
2. In the study on nature and severity of the problem detailed narratives of children of deserted women and their families too would be conducted on how they perceive their mothers, sisters or daughters who have been deserted by their husbands. On how the problem of desertion affects them and what do they think should be done about this issue. Extent of child labour would be explored in these households too.
3. Secondly, conduct resource assessment for planning and evaluation of livelihood options through a detailed investigation of resources in one village in the district.
4. Thirdly, taking an overview of village level financial allocations and expenditure for 2 years on various social welfare as well as poverty alleviation schemes like the Sanjay Gandhi Niradhar Yojana, EGS, JRY, SGSY and even watershed and wasteland development programmes to gain a broad understanding of resources available for women and their children. Such an exercise would be useful in targeting demands as well as developing new ones in the changing scenario. Here an effort would be made to link with the micro-planning exercise that UNICEF is already planning in some of the districts in Maharashtra.
5. Fourthly, disseminating of study findings- given the presence of initiatives of grassroots organisations fighting for the rights of the deserted women, its first objective is to disseminate the findings of the study among them. This would help in strengthening the network and reformulating some of the demands of deserted women.

The study findings would also be put forward to a larger audience of NGOs, academics, grassroots organisations concerned government officials and donor agencies through a seminar/workshop. The findings would be collectively discussed and an effort would be made to translate the insights from the above processes into a demand for rights and entitlements over productive resources (like public and private wastelands, small plots for intensive production, water, etc.) and adequate means to transform these entitlements into livelihood outcomes. It is expected that a programme for action would be drawn up in which appropriate institutional arrangements, supportive measures as well as enabling policy framework would be worked out to mainstream the programme.

This would prepare the ground for the formation of a wider network and a wider programme that would be taken up for implementation in the next phase that would basically be a continuing phase of activity.

## ***Project Activities and Details***

### **A. Understanding the extent, nature and severity of the problem of desertion.**

The project would be located in one district of Maharashtra where a women's group has been actively working. The

organisation has been working on the issue of deserted women's rights since the late eighties with some major gains. The organisation had expressed a need for support to systematically understand the extent and nature of the problem to be able to reformulate their demands in a rights based framework. This provides the background and rationale for the location of the study.

Two levels of assessments would be done through this study. The first level of assessment would be a purely quantitative one where a house to house survey would be conducted in the sample villages to understand the extent of the problem. The second level of assessment which would be through a combination of qualitative and quantitative methods would address the specific problems of the deserted women in the context of their livelihoods. This would provide insights into the severity and the nature of the problem of deserted women.

#### Study of Extent

For the study of the extent a sample of 5% villages from this district shall be drawn based on Census information. This sample would be representative of the social and geographical variations in terms of caste and class and drought prone and irrigated areas. This would essentially be a quantitative analysis through a household survey to assess the extent of deserted women in the sample villages. A 5% sample approximately would mean surveying about 16,000 households

#### Livelihood profiles and case studies

The second level of assessment is to gain insights into the nature and the severity of the problem. Based on the information collected for the enumerated sample, smaller representative samples would be drawn using stratified and/or purposive sampling methods, which would help to capture the different situations and contexts in terms of resource access, caste and class backgrounds, reasons for desertion, etc., for detailed livelihood profiling and case study history. The sample for this level of assessment will depend on the enumeration findings, if there is uniformity, a smaller sample could be representative enough to give an indepth understanding of the nature and severity of the problem. In case the variations are found to be very large then it might be necessary to have a larger sample. Combining quantitative and qualitative methods, the identified deserted women would be interviewed at length to understand not only their current livelihoods but also how they perceive a future for themselves.

They would cover the different socio- economic and cultural contexts of the deserted women, their health and nutritional status, present access to resources, legal cases pending, year round livelihood activity, etc. The livelihood profiling of the selected households would have to be repeated at least twice over a period of one year with the help of a pre-designed format. Women's preferences with regard to livelihood options and also their willingness to take up the same would be assessed through group discussions. This along with the livelihood profiles and case studies would provide the basis for developing livelihood baskets and programmatic action for the deserted women. Individual interviews, oral history method and Focussed Group Discussions (FGDs) would be used for this purpose.

Our earlier study covering about 150 deserted women did not compare deserted women with married women from different caste and class backgrounds situated in those very socio-cultural contexts. Here an effort would be made to understand the vulnerabilities or strengths of these women as compared to the other women in marriage.

#### **Understanding the vulnerabilities of the children**

Through oral narratives and through a quantitative analysis an effort would be made to study the extent to which children of deserted women engage in child labour, are deprived of education and other material needs in comparison with other children. The oral narratives would focus more on perception of children on desertion, being parented by single parents, stigma associated with lack of one parent etc. This exercise would be useful in identifying the special needs of children of single and

deserted women.

## **B. Conducting resource assessment for planning and evaluation of livelihood options for deserted women through improved access to land and natural resources in one sample village in the district where the movement is active.**

A smaller sample of one village would be drawn for a detailed resource assessment of that village which would help identify the land and water resources that could be designated for collectives of deserted women.

The first step would be a joint exploration of potentially available land and natural resources, especially public wastelands. Special attention will be given to lands that can be allotted by the government to deserted women. Secondary data from government sources as well as PRA methods like transect walks shall be used to identify these land and natural resources

A detailed resource assessment and development plan would be prepared through PRM methods with the help of the local organisation on few identified lands to demonstrate the methodology. Participative assessment of soils, slopes, existing land use and water resource, as well as potential for sustainable productivity enhancement and water resource development would be supplemented by scientific investigation and detailed survey.

Capacity building of the activists: In the process of conducting the resource assessment and developing the resource development plan, women activists from the deserted women's groups as well as those from the concerned GROs would be trained to conduct resource assessments in new areas with some technical help. A shibir would be organised to facilitate the extension of these skills to a wider group of activists.

Translating the resource development plan into a programme for the deserted women. This involves developing livelihood baskets for the deserted women from the selected village, based on the livelihood profiles, case studies and the resource development plan. SOPPECOM's experience generated through studies and experiments in land and water resource development programmes as well as relevant experiences in Khudawadi, Bhusawal, Solapur and other drought prone areas would be shared and be the basis for a programme developed jointly with the GRO/CBO and the deserted women.

## **C. Taking an overview of the existing schemes**

The project would make a broad assessment of the financial allocation and expenditure at the village level for different schemes like the EGS, JRY, SGSY, watershed and wasteland development activities. This would be based on secondary level information obtained from the district/taluka/village level and other government documents. The main idea here is to assess the potential, especially in terms of funds, to dovetail some of the components of the development plan or the livelihood basket that would emerge from this study with these existing schemes. This would help to load part of the financial requirements for the emerging development plans to the existing schemes, and thus help reduce the quantum of new financial resources for the implementation of the development plans. The policy issue to be addressed here is the need to reorient the schemes to fulfil the livelihood needs of the resource poor of whom deserted women form a large category.

## **D. Organising workshops and meetings for dissemination of the study findings**

The entire study would be conducted with active participation of the local level organisation both in data collection as well as dissemination. The continuing participation of the organisation is crucial to the project. Dissemination would take place through a process of collective discussions and translating the information from the above processes into a demand for rights and entitlements over productive resources like public wastelands and adequate means to transform these entitlements into livelihood outcomes.

Dissemination of findings would be done through two workshops

a) at the district level with the local organisation and its members and the deserted women from the district. A district level conference (parishad) would be organised to discuss the outcomes with the local activists and deserted women themselves. An effort would be made to involve the concerned government officials at the district levels.

b) A consultative workshop will be organised involving a larger and a diverse audience from the academia, policy makers, government officials, funding organisations, different NGOs and movements working on women's issues and representation from deserted women themselves. The focus here is to discuss the policy issues emerging from the study. This will provide the different groups an opportunity to understand the viewpoints of other stakeholders. The process of forming a network across the state too could be initiated at this stage.

1. Highlighting the question of deserted women and the need for the state to recognise the problem and make specific policy commitments based on the study outcomes
2. Firming up the assessment methodology for extent, nature and severity of desertion, developed at a district level as a district prototype and putting it on the agenda for extending it.
3. Developing and firming up the plan for the second phase programme which would demonstrate the livelihood basket developed through the village resource assessment combined with livelihood profiles of deserted women.

Based on the workshop deliberations, the network could hold a concluding meeting at its own initiative in which demands for rights and entitlements over productive resources like public wastelands and adequate means to transform these entitlements into livelihood outcomes will be determined and a programme of action evolved.

### **Outcomes and Outputs**

The outputs would include

1. A document outlining the extent, status and condition of deserted women for building awareness on the issue of desertion for that district. This would have a separate section on vulnerabilities of children of deserted women and their special needs.
2. Firmed up methodology for assessing the extent, nature and severity of the problem
3. A report of village level resource assessment that outlines the resource planning and the emerging agenda for livelihood baskets and programmes for deserted women.
4. Building up skills and capabilities of the activists from amongst the deserted women to formulate their demands and negotiate for those with the government.
5. Consultative workshop bringing together different interest groups in the process, finalising the methodology and the policy agenda.
6. Formulation of a rights based programme for action for deserted women incorporating demand for rights and entitlements over productive resources like public wastelands and adequate means to transform these entitlements into livelihood outcomes based on the study

### ***Time Frame***

This study would be spread over a period of one year divided roughly as follows:

<b>Activities</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
Defining desertion and selection of the sample	*	*										
Kick off workshop		*										
Data collection to assess the extent			*	*	*	*						
Case studies and livelihood profiles of sample of deserted women and their children							*	*	*			
Data Analysis of extent, nature and severity							*	*	*	*		
Resource assessment							*	*				
District Meeting										*		
Consultative Workshop												*
Final reports										*	*	*



## Budget

<b>(A) Personnel</b>	
Core group from SOPPECOM- 4 person months@ 20,000/month	120,000
Research assistants (RA)- 12 person months @ 13000/month	156,000
1 Office assistant -6 person months @ Rs 5000/month	30,000
1 Activist from local organisation working for a period of 5 person months @ 3000/month	15,000
1 technical person stationed in the district for resource assessment -2 person months @ 15,000/month	30,000
Data Collection team to administer approximately 16,000questionnaires @ Rs 5/questionnaire to assess the extent in 5% villages	80,000
Data Collection team to administer approximately 500 questionnaires to the representative sample of identified deserted women @ Rs35/questionnaire	17,500
<i>A) Total For Personnel</i>	<i>448,500</i>
<b>(B)Travel and Related Expenses</b>	
SOPPECOM Core group -6 visits of 2 days each@ Rs 1500/day to include lodging, boarding (12 days x Rs. 1500)	18,000
RA 1 visits/ month for one RA over 12 months, 24 visits @ 500/visit	12,000
Each RA spends 10 days a month for about 8 months of the project period i.e.(DA @ Rs100/day x 160 days)	16,000
Local travel within the district of 1 activist @500/month (500 x 12)	6000
Local travel and logistics for the data collection team (lumpsum)	20,000
<i>B) Total For Travel And Related Expenses</i>	<i>72,000</i>
<b>(C) Networking- Public Meetings, Advisory Committee meetings, Training programmes and Consultative Workshops</b>	
1 day kick off workshop (30 participants costs to cover hall charges and travel etc)	50,000
Advisory Committee meetings 1 in one year (includes travel and honorarium lumpsum)	5,000
One District meeting with the local organisation to discuss the findings- to include the stay, food and travel of the participants.	15,000
2 day consultative workshop with women's groups across the state to present and consolidate the findings and plan for the action programme (Expected participants 30. Costs to cover hall charges, food travel and stay).	100,000
<i>C) Total For Advisors Meetings And Consultative Workshop</i>	<i>170,000</i>
<b>(D)Equipment and Stationery</b>	
Equipment for resource assessment survey at 1site @ Rs 20,000/site	20,000
Data analysis and report writing and stationery to cover computer costs and xerox	100,000
<i>D) Total For Equipment And Stationery</i>	<i>120,000</i>
<b>(E)Dissemination of findings- report/article in Marathi and English</b>	
Institutional charges @10% of the project cost	86050
<b>GRAND TOTAL</b>	<b>946,550</b>

The Total amount of the budget is Rs Nine lakhs, forty-six thousand and five hundred and fifty only.

## Project Holder and Location

The project holder would be SOPPECOM, Pune and the project headquarters would be also located there. The main activity would be located concerned district.

## Project Duration

The project would be for a period of 12 months.

## Address for Correspondence

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### **Advisory Committee**

An Advisory Committee comprising of experts in the field of gender studies and representatives of women's movement would be formed.

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