

CHAPTER 3

PLAN IMPLEMENTATION AND PUBLIC SECTOR OUTLAYS

3.1 PLAN IMPLEMENTATION

The Programme Evaluation Organisation (PEO), Planning Commission undertakes evaluation of central and centrally sponsored schemes to assess their physical and financial performance, the efficacy of the implementation/delivery mechanisms and impact on the beneficiaries. The findings of the evaluation studies are made available to the implementing ministries and the concerned subject divisions of Planning Commission for mid-course corrections in design and implementation, to the researchers and general public through publications, seminars and the print media for generating informed debate on the nature and efficiency of public spending.

2. The Planning Commission undertook a review of the past PEO studies to derive lessons from experience in execution of development programmes and emphasised in the Ninth Plan Document (Vol. I) on putting these lessons to practice. Realising the importance of these lessons in programme formulation and implementation, Planning Commission have decided to make the findings of PEO studies available at the INTERNET so as to ensure easy access to all concerned.

RECENT ACTIVITIES

3. Accordingly, an attempt is being made to improve the infrastructure of PEO so as to enable it to respond to the increasing demand for evaluation and to discharge other related responsibilities. In recent times, apart from conducting evaluation studies, PEO has undertaken other activities which, inter alia, include: organising training programmes for its staff members in reputed institutions (like IIPA, NIRD), increased interaction with the state level evaluation organizations and providing computer to PEO field units for speedy transmission and processing of data. These activities are at different stages of completion.

4. The important programmes evaluated by PEO during the last few years are: Short Stay Home for Women and Girls, Non-formal Education (NFE), Border Areas Development Programme (BADP), Community Health Centres (CHCs) and Employment Assurance Scheme (EAS). The findings of these evaluation studies are reported in brief in the following paras.

Short Stay Homes For Women & Girls (SSH)

5. The scheme of Short Stay Homes for Women and Girls was launched in 1969 to provide temporary shelter to women and Girls, who are in moral danger due to family problems, violence at homes, mental strain and other causes. The scheme is designed to provide a package of services with the facilities of medical care, psychiatric treatment, case work services, occupational therapy, educational-cum-vocational training, recreational facilities and social and economic rehabilitation of inmates. At the instance of the Department of Women and Child Development, Ministry of Human Resources Development,

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PEO undertook the study to evaluate the performance and functioning of Short Stay Homes. The interim report was submitted in March, 1999.

6. The study observed that the Homes at present were being run by a few All-India level NGOs, some of whom were not directly involved in the operation of the Homes. The scheme would need to be well publicised through electronic and print media to attract local organisations. It was noted that there was need for evolving a set of criteria to ensure an even geographical spread and facilitate better utilisation of facilities. Since the cost of delivery of services was found to be very high, it was suggested that there was a need for rationalising the staff structure and establishing better linkage with organisations providing complementary services and facilities. Most of the Homes were not found to be adhering to the guidelines issued by the Ministry. Widespread deviations were observed with regard to admission procedures/practices, medical examination/treatment, boarding and lodging facilities and other norms specified in the guidelines. The Home Committees were not found to be effective. These need to be reconstituted to include State government officers from a few Departments. According to the existing guidelines, the State governments had no major role to play. It was suggested in the evaluation study that more active involvement of State Governments was required for better control, supervision and inter-Department co-ordination so as to improve the functioning of the Homes.

Non-Formal Education (NFE)

7. The Non-Formal Education (NFE) Scheme was introduced during the Sixth Five Year Plan in a few states as a Centrally Sponsored Scheme to meet the educational needs of children who do not enroll themselves in formal schools because of poverty and illiteracy of parents and other socio-cultural factors. Though the scheme was originally conceived as a complementary mode of delivery of educational services for elementary school-age children, the number of NFE centres grew manifold over the years. Its phenomenal growth during the last two plan periods indicates that the NFE was being used as a major instrument to achieve Universal Elementary Education (UEE). The Programme Evaluation Organisation undertook the study to evaluate the performance, methods of implementation and impact of the scheme. The report was finalised in May, 1998. The main findings of study were as follows:

- The financial needs of NFE centres are not being met, as both the Centre and the states are not releasing their shares of allocation for NFE fully. Inadequate and untimely release of financial resources have affected the performance of these centres adversely.
- In addition to inadequate resources, the performance of NFE centres is affected by non-availability of Teaching Learning Material (TLM), unqualified instructors, and inadequate supervision and monitoring.
- The NFE system has not made any significant contribution towards the realisation of the goal of UEE. Only a small fraction of the out-of school-children have been benefited by it.

8. The findings of the study tend to suggest that the NFE scheme cannot be a major instrument for achieving the goal of UEE. The goal has to be achieved primarily through the FE system, which would need to be made more efficient by bridging gaps in resources, administrative planning and delivery system. Till these shortcomings can be attended to, NFE would need to continue especially for those children who, because of economic compulsions, can not enroll themselves in the FE system. The NFE system would need to be

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modified with regard to the quality of instructors, improvement in resource allocation, implementation and monitoring methodology. Since the performance of NGO run centres was found to be better than state run centres, it was felt that the responsibility of running the existing state-run centres could be transferred to NGOs and the organisational set up of the State Governments could be used for monitoring, supervision and control of the scheme.

Community Health Centres (CHCs)

9. The Community Health Centre (CHC), the third tier of the network of rural health care institutions, was required to act primarily as a referral centre (for the neighbouring PHCs, usually 4 in number) for the patients requiring specialist health care services. The objective of having a referral centre for the primary health care institutions was two-fold; to make modern health care services accessible to the rural people and to ease the overcrowding in the district hospitals. The CHCs were accordingly designed to be equipped with: four specialists in the areas of medicine, surgery, paediatrics and gynaecology; 30 beds for indoor patients; operation theatre, labour room, X-ray machine, pathological laboratory, standby generator, etc., along with the complementary medical and para medical staff.

10. At the instance of Planning Commission, the Programme Evaluation Organisation undertook the study to evaluate the functioning of the Community Health Centres (CHCs) and their effectiveness in bringing specialist health care services within the reach of rural people. The report was released in September, 1999. The findings of the study are as follow:

- Given the other relevant factors, the services of a CHC are likely to be used less intensively, if: (i) its geographical coverage is very large; (ii) it has inadequate medical staff, particularly the specialists; and (iii) the mean distance of the PHCs from the CHC is longer.
- Some CHCs have been approved without sanctioning all the posts of specialists. Only 30 per cent of the required posts of the specialists were found to be in position. More than 70 per cent of the sample CHCs are running either with one specialist or without any specialist.
- There is a mis-match between medical specialists vis-à-vis equipments/facilities/staff, leading to sub-optimal utilisation of resources. The over-all productivity of the public health services can substantially be improved, if this mis-match as well as thin spread of resources is avoided.
- Only two out of 31 CHCs were found to have been used as referral centres to some extent. As many as 11 CHCs have not attended any referral case, while the remaining 18 have been used sub-optimally with an average of 206 cases per year. The constraints in utilisation of the services of CHCs relate to inadequacies of infrastructure, medical and paramedical staff, and more importantly, the mis-match of various inputs.
- Notwithstanding the existing limitations in the services delivery system, a large majority of the households expressed their strong preference for public health care system as against the private facilities.

11. The findings tend to suggest that CHCs have not made any significant contributions towards realisation of the intended objectives even after about two decades of their establishment. The study has been able to identify a set of key factors that has contributed to the poor performance of CHCs.

Border Area Development Programme (BADP)

12. The Border Area Development Programme was introduced during the Seventh Plan as a Centrally Sponsored Scheme with the objective of creating an enabling environment so that people living in border areas feel secure and can pursue normal economic activities. The programme was initially administered by the Ministry of Home Affairs and its converge was confined to the western Border States with an emphasis on development of infrastructure to facilitate deployment of Border Security Force. The revamped BADP is being implemented by the respective State Governments under the over all administrative control of the Planning Commission. Programme Evaluation Organisation took up the study to assess the physical and financial performance, the efficacy of the implementation methods and impact of the programme. The report was finalised in October, 1999.

13. The findings of the study tend to suggest that, to a large extent, BADP has contributed towards creating an enabling environment for undertaking normal economic activities in border areas. The PEO study has helped in identifying some areas of success and failure. It seems that BADP has the potential for bringing about an improvement in the quality of lives of the people living in border areas. For realisation of this potential, PEO study has suggested for corrective actions in some areas of planning and implementation.

Employment Assurance Scheme (EAS)

14. The Employment Assurance Scheme was launched on 2nd October, 1993 in 1778 identified backward blocks situated in drought prone, desert, tribal and hill areas where the revamped public distribution system was in operation. Subsequently, the scheme was extended to cover all the blocks by April, 1997. The primary objective of the Employment Assurance Scheme is to provide gainful employment in manual work during lean agricultural season to all able bodied adults in rural areas who are in need of work, but cannot find it. The secondary objective is the creation of economic infrastructure and community assets for sustained employment and development.

15. At the instance of the Planning Commission, the Programme Evaluation Organisation (PEO) undertook the evaluation study on Employment Assurance Scheme (EAS) to assess the performance, appropriateness of implementation methods adopted by the states, extent of coverage of target group and the impact of EAS on the beneficiaries. The report was released in April, 2000. The main findings of the study are:

- The provisions in the guidelines relating to the preparation of shelf of projects, identification/registration of people seeking wage employment, issuance of family cards and constitution of co-ordination committees at different levels were not adhered to in a large majority of the cases.
- The utilisation of EAS funds is extremely low. Lack of planning, untimely release of funds, both from the Centre to DRDAs and from DRDAs to blocks, and other factors, such as inability of the States to generate matching resources are the important factors that have contributed to low utilisation of EAS funds.
- The coverage of villages and the target group is extremely low. A maximum of 32 per cent of villages and 5 per cent of the target group in a block are estimated to have been covered annually.

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- A large part of the EAS has been used in activities that are less labour intensive and more capital intensive. The normative capital - labour ratio has not been generally adhered to. As a result, the cost of employment generation becomes abnormally high in a few states.
- The majority of EAS beneficiaries received less than 30 day's wage employment in a year. Non-poor households were also found to have been the beneficiaries of EAS. The income from the EAS was not enough to enable the poor households to cross the poverty line. Most of the EAS beneficiaries got employment in one out of the four years of its operation.

ANNUAL PLAN FOR 2000-01

16. The following six evaluation studies are in hand:
- (i) A Study on Functioning of State Pollution Control Boards (SPCBs).
 - (ii) Evaluation Study on Khadi & Village Industries in General and its Impact on Rural Employment Generation.
 - (iii) Evaluation Study on Construction of Godowns & Purchase of Vans/Trucks for Strengthening of Public Distribution System - Infrastructure in the States/UTs.
 - (iv) Evaluation Study on Social Safety Net Programme (SSNP) for Primary Health Centres (PHCs).
 - (v) Evaluation Study on Member Parliament Local Area Development Scheme (MPLADS).
 - (vi) Evaluation Study on National Project on Bio-Gas Development and National Programme on Chullhas.
17. The studies that are likely to be completed during 2000-2001 are given as under:
- (i) A Study on Functioning of State Pollution Control Boards (SPCBs).
 - (ii) Evaluation Study on Khadi & Village Industries in General and its Impact on Rural Employment Generation.
 - (iii) Evaluation Study on Construction of Godowns & Purchase of Vans/Trucks for Strengthening of Public Distribution System - Infrastructure in the States/UTs.
 - (iv) Evaluation Study on Social Safety Net Programme (SSNP) for Primary Health Centres (PHCs).