

Introduction

".....it is not the water in the fields that brings the development; rather, it is water in the eyes, or compassion for fellow beings that brings about real development..."

Anna Hazare

1.0 Development Experience of Indian Planning

Improvement in the socio-economic conditions of the people, at large, and mitigating the impact of socio-economic ills like incidence of poverty, regional backwardness, unemployment, morbidity to name a few, have always figured at the core of Indian planning since its inception in the early fifties. A host of welfare programmes, have been initiated from time to time, to attend the specific needs of vulnerable so that the gap between them and the advantaged groups could be reduced. This welfare programme approach, perhaps, assumed that the general improvement in the economic conditions would lead to amelioration in the conditions of the poor (Papola, 1984).

However, over the period of time, it became obvious that, growth by itself, was unlikely to eliminate and resolve poverty and other social issues confronting the society and the benefits of economic development were not being adequately reflected in per capita terms due to unprecedented and uncontrolled growth in population, levels of unemployment, regional backwardness etc. (Rajeev, 1999). Likewise, the poor level of people's participation in the welfare programmes that were launched from time to time, virtually undermined the scope of these programmes on one hand, marginalised a sizeable section of people particularly, the socially

disadvantaged groups, and compounded the situation. Among the factors that afflicted the scope of these programmes, some causes frequently identified by the and scholars are tight bureaucratic control, red tapism, collusion with vested interest, apathy, deliberate delays in decision making etc. (Dantawala, Sethi & Visaria, 1998; Shah & Iyenger, 1998).

A number of studies substantiates that, economic development, has not been able to solve major problems like poverty, hunger, malnutrition, disparities of income, slums, inequality and poor health (Arunugam, 1999). Though, there has been a rise in per capita real income levels, however, the benefits of economic growth has failed to reach the majority of population.

The development experiences of various countries of the world reveal that the nations with rich human resources, consisting of healthy and educated people, with a sense of discipline, dedication and work culture could ultimately gear the economy in the desired channels of growth (Sengupta, 1999). Thus, it has become abundantly clear, that economic development has to be supplemented with social development in order to provide sustenance to the overall process of development which brings into focus the role of human development as a resource and the indispensable role played by the components of social sectors in economic development. The term 'social sector' refers to all those set of activities which contribute to human capital formation and human development. Thus, education, health, medical care, water supply and sanitation, housing etc. have been considered as factors contributing to human development (Panchmukhi, 2000). Even the eight five year plan (1992-97) document states that social sector development should be the primary responsibility of the government (Sudhakar & Moss: 1999).

Hence, there has been a paradigm shift in the approach to development which has now changed from mere economic growth, to growth with justice and finally to growth for social justice (Kulkarni, 1997; Arunagam, 1999). This strategic shift from welfare to development and from development to empowerment also

promotes the concept of holistic and integrated development rather than development in fragmented manner (Singh, 1999).

Investment in infrastructure for social development has become priority and therefore no serious planners or policy makers could afford to ignore it. Inadequate investment in such sector may cause under utilization of productive human resources and lead to wastage of scarce and expensive material resources as well. (Sengupta; Ibid)

1.1 Economic Reforms & Social Sector

The Indian planning, since its inception, in early fifties till the late eighties could be called to be working on centralised pattern, wherein, the government played a pivotal role in all major sectors and all the decisions regarding the plan and programmes, its implementation etc. were pre-conceived at the central or top levels and the entire planning process could be called to be quite rigid. However, by the early nineties, the government initiated economic reforms in order to decentralise its hold, encourage democratic participation and speed up the rate of economic growth. Under the economic reform package, the role of the state was also redefined. The major thrust was on dismantling the control over the economy and pulling the government out of business to enable it to devote its resources to social sector (Singh, 1999). The main plank of economic reforms were liberalization, privatization, and globalization (LPG). All this was being undertaken to loosen the hold of the government on the economy, on one hand, and also to provide a check on the deficits in the plan outlays. The subsequent cuts in plan expenditure, in all directions, affected the outlay of all major sectors. However, the initial brunt of the expenditure reduction was borne by subsidies and the social sectors, which were considered to be soft targets of resource crunch (Sengupta; Ibid). Social expenditure, excluding the food subsidy, both in the central budget and the total of all states expenditure, for the

period of 1990-91 to 1995-96 has declined in the first four years of adjustment, which could affect human development indicators (Guhan, 1995; Dev; 1999).

However, available evidences suggest that slowing down in the plan expenditure has also adversely affected the state plan and outlays for vital sectors like agriculture, irrigation and social sectors where the outlays have been considerably reduced (Nayyar, 1994). It has also become abundantly clear that unless crucial issues like poverty alleviation and social objectives are placed high on the national agenda by mobilising the requisite resources and mustering necessary will for social engineering, it would be difficult to prevent market forces, unleashed under the existing package of economic reforms from further marginalising the weaker sections (Rao, 1995). Likewise, the less developed states which deserve additional capital investment have also been severely hit hard, on account of resource crunch. It has also been feared that the down sizing of fiscal deficits would not affect the economic sectors, because they are treated as non-negotiable sectors hence government expenditure for these sectors could not be reduced significantly. It would only be the social sector, which would have to bear the brunt of deficit reduction, and the adverse impact of economic reforms on social sector, in the long term run, would have damaging effect in the economy in the form of slowing down of human capital formation (Panchmuki, 2000). It has also been feared in many quarters, that regional disparities in human development would be increasing after the liberalization (UNDP, 1999).

1.2 Social Sector in Indian Perspectives

In the context of Indian planning, the development of social sector has always been an area of prime concern for planners, social activists, and academicians and, has, therefore figured at the core of five-year plans since its inception. In fact, its roots could be traced back to our rich glorious heritage where the state encouraged its subjects to develop progress and enhance their capabilities, irrespective of their

caste, creed, and gender, by providing social assistance to vulnerable sections and promoting ideal and conducive environment (Mahendra, Dev; Ibid). However, the enslaving of nation, for a protected period of time, destroyed its rich cultural tradition of social justice.

After attaining the political independence, a number of statutory and socio-economic policy measures were adopted to improve social sectors by giving equal weightage to it just like the economic sectors. The impact of planned efforts became more conspicuous on economic sectors where the nation emerged as a leader in many areas by achieving path-breaking success. For examples, agriculture, sciences and technology, medicine, space research, to name a few are some of the areas where the achievement level has been simply astonishing. However, on the social sector front, the progress achieved was relatively slower and its impact a mixed one. In the case of education or literacy, various field level studies show that though there has been an improvement in the overall levels of literacy, number of schools, number of students enrolled and number of teachers (Mehta, 1995), but so has also been a rise in the level of drop outs of students at the primary and middle levels (Majumdar and Vaidyanathan, 1994), increasing marginalisation of socially disadvantaged groups, dilution in the quality of education (Pillai, 1992; Visaria, Gumber and Visaria, 1993) and the high proportion of illiterates (Rahi, 1996) are some of the illustration that highlight the prevailing paradoxical situations. A number of studies reveal that such discrepancy is not only confined to rural urban settings but is also conspicuous at inter-state levels. Likewise, for the health sector, it could be seen that there has also been a distinct improvement in the health indicators like that of lowering of crude birth rate, crude death rate, infant mortality rate, enhancement in the like expectancy at birth, largely on account of expansion in the infra structure and facilities. Unfortunately, this progress has, by and large, remained confined to urban areas only whereas the situation in rural areas still remains quite grim. Though several sub-centres, primary health centres and community health centres have

come up in rural areas during all these plan periods, but they are yet to be fully operationalised due to high incidence of absenteeism on part of doctors, para medical and multi purpose staff. Generally, the absence of radiographers, lab technicians and other para medical professionals at these centres only adds up to their poor performance (Draft Mid Term Appraisal 1992-97).

Similarly, the perusal of the performance in other social areas like poverty, housing, water supply, employment etc. appear to be disappointing and lopsided. The uneven growth, with distinct tilt towards urban areas has also accentuated the regional problems, on one hand and has also given impetus to the process of rural to urban migration on the other (Economic Survey, 1992-93; Seventh Five Year & Eighth Five Year Plans, Swaminathan, D. 1996)

The limited success attained in social sector could largely, be attributed to the fact that it dealt primarily with the set of endogenous factors and values and their internalization by the people. The process, by its nature, is painfully long and slow. Therefore, social development takes relatively longer time to become conspicuous than the economic development.

1.3 Social Development: An Overview

The skewed pattern of social development has attracted considerable attention of scholars, planners, academicians and social activists. As a result of which many studies have come out, studying various aspects of social development programmes, highlighting the performance and problems, and, at times even suggesting measures to overcome it. An attempt has been to summarise some of the studies briefly.

Dreeze and Sen (1995) attempt to identify policies that could be useful for rapid elimination of deprivations in India. Economic development has been seen as an expansion of opportunities that the individual enjoys in a society. However, the expansion of human capabilities also depends upon many other influencing factors

besides the economic growth. Therefore, the success of development, could not be judged, merely, in terms of effect on income and outputs, it should, at the basic level should also focus on the lives that the people lead. Besides basic education, they also identify gender relations and health care to be equally important factors for development. They have advocated for the removal of counter productive government controls that may finally lead for expansion of social opportunities. According to them, the neglect of basic education, health care, social security, land reforms etc. have been detrimental to economic and social development. The nation has paid a heavy price for its over regulated and dysfunctional rules of economic governance. Therefore, a broader view of economic development has to be seen, in terms of expanding social opportunities. The removal of barriers to using market mechanism, can significantly enhance such opportunities. The practical usability of these opportunities requires sharing of certain basic capabilities including those associated with literacy and education, basic health, social security, gender, equality, land rights, local democracy, etc.

Ram Chandran, V. (1998) on the basis of her study on impact of development programmes on women's development in Karnataka, U.P., Gujarat and Andhra Pradesh arrives at the conclusion that the best way to empower the females is by integrating the components of gender issues into the very fabric of development programmes. Gender issues need to be addressed together with community participation, reduction in social disparities, sensitivity of administrative structure. According to her, any programme that seeks to enhance the self-esteem and self consciousness of poor women would first have to empower its own functionaries.

Prabhu, Seetha K (1998) examines the issues concerning the linkages between economic growth and social sector development in the context of developing countries. India, according to her, has been identified as country with low levels of human development where the linkages between growth and social opportunities have been weak. She has also classified Indian states into four distinct

categories. In the first category, states like Kerala and Tamil Nadu figure which have attained a high level of social development despite modest level of income. In the second category, states like Punjab and Haryana figure, which have high per capita income and relatively poor levels of social development. In the third category, states like Bihar, M.P. and U.P. are placed where neither the economic nor the social opportunities have been realized and the fourth category consists of those states where the difference between social and economic opportunities are not large. She also points out towards the paradox related to mass illiteracy, high mortality and morbidity levels prevailing along with social infrastructural facilities which lie under-utilized and attributes it towards the poor quality of services rendered by these institutions. She strongly advocates for adoption of broader perspectives towards social sector that would not only ensure the quality but also sustain growth in the long run. The expenditure part could, effectively be financed through innovative tax measures, as has been demonstrated, by the Maharashtra government.

The EPW Research foundation (1994) opines that India's performance has been characterized by low social development and high inter-regional and inter-state disparities. Social development is, largely, determined by three group of factors viz. the demographic factors, literacy and educational attainment levels and economic indicators. The study observes that there cannot be a tangible reduction in the birth rates without substantial improvement in the literacy rates. Another significant finding of the study reveals that initial push to literacy and demographic achievements are necessary conditions for economic growth, but it is not a sufficient condition and states like Kerala and Tamil Nadu figure into these categories. Similarly, significant improvement in economic conditions does not necessarily ensures better social indicators and the best examples are Punjab and Harayana. The study also points out toward the prevailing gap between urban and rural areas in terms of their socio-economic level. It also expresses concern over distinct decline in per capita

expenditure across the state on education, medical and public health from the second half of the eighties.

Bhaduria, M. (1999) foresees per capita improvement in the health status of female largely on account of various development plan and policies. A number of issues concerning the female and their health status have been identified as nutrition, sanitation, infection, over work, work hazards, stress, mental tension, pregnancy, child birth and sexual harassment. He further identified education as a key player in raising the health status of female population and feels that there is a need to change the perspectives of our society and planners to look at the lives of women from birth to old age as a holistic process. The real challenge, therefore, lies in tackling the callous attitude of most of the females towards their health and nutrition and strongly argues that females be empowered with appropriate technologies, to help them in their food processing and preparation and also for water collection, conservation and treatment.

Singh, K.M. Sharma, V.K. and Singh D.K. (1989) modified the U.P. model of I.R.D. prepared by the State Planning Institute, Lucknow for identifying growth centres, service centres and central villages in the selected district by incorporating the element of optimality of functional allocation under limited supply of funds against the social gains likely to accrue thereof. The use of linear programming model was made for identifying the model centres. For working out the social gains, cost benefit analysis was attempted to determine the optimal level of investment. The study shows, that, in the initial stages, the social gains exceed the social cost but subsequently afterwards, beyond a certain point, social cost surpasses the social gain. The optimal level of investment, according to the study is that point, at which the social gains and social cost balance each other out.

Dadihavi, R.V. and L.D. Vaikuntha (1990) attempted to study rural disparities in the seventies of some major states of India by constructing an index of infrastructure for rural development and identifying distinctly backward and

developed states with respect to rural development infrastructure. The study covered a period of 1973-74 and 1983-84, is largely based on secondary data and uses per capita income as the indicator for rural development and also accepts the fact that there has been no single indicator that defines the multi-facet dimension of rural development. Using coefficient of variation in per capita income, the analysis shows that disparities in the rural areas have increased and the planning policies, aimed at reducing regional imbalances, have made no significant impact on the problem. However, the development of infrastructure has succeeded in reducing the poverty ratio by generating more employment opportunities and income level for the people.

Ghosh, P.K. (1998) feels that education has been an important social resource and means of reducing inequality in society. An attempt has been made to comprehensively study the progress made by SC and ST vis-a-vis others in different states. More specifically, it examines the inter and intra-state literacy scenario in rural India; estimates the disparity between male and female, scheduled and non-scheduled groups of population. It is, primarily, based on secondary data and covers a period from 1971 to 1991 census years. The study shows that the disparity in literacy between male and female was very high in rural India and there exists a negative correlation between the level of disparity across the states with the level of literacy. It identifies adult literacy, female work participation rate, child work participation rate and work in non-agricultural activities as most significant socio-economic determinants of literacy. The study also recommends appropriate regional planning for education to remove inter and intra district variations in educational development.

Anindita Datt and Sachidanand Sinha (1997) observe that in every social category women forms a subset that is often disadvantaged, discriminated against and marginalised in most spheres of life as compared to men. Such marginalisation and sub-ordination is reflected in wide male-female disparities in virtually all aspects of social well beings at every stage ranging from national and international level. On

the basis of status report, on literature on gender disparities in social well beings, they have tried to document the current research trends, identify gaps in current research, and suggest new areas/methods for analysing the question of social well beings with reference to the problem of gender inequality. According to them, some of the factors contributing to the female subordination and lower status in the society are their derivative role in economic development, their reproductive role, unequal division of domestic labour and females preoccupation with their family etc. They have identified health, nutrition, employment, education and empowerment as different aspect of social well beings.

Rajula Devi (1990) has studied the historical backdrop of rural development programmes in India since their inception. Tracing the profile of poverty, she asserts that the implementation of Five Year Plans has succeeded, to some extent, in addressing the problem of rural poverty where the impact of growth, per-se, has been significantly lower than the urban areas. The study focuses on overall strategy of poverty alleviation in India, examines the performance of major poverty alleviation programmes, the role of credit institutions, discusses briefly four evaluation studies of IRDP to get micro-pictures of the country and takes stocks of lesson learnt and provide guidelines for future planning of poverty alleviation programmes in India. According to the her, the performance of programme was affected on account of inadequate generation of income from assets acquired under poverty alleviation programme; unaccounted interference from authorities, levels of leakages, lack of coordination between programmes, inadequate institutional support at district and block levels. She also feels that it was a high time to reorganize the development set up both at block and district levels. Poverty could not be removed until the poor themselves become conscious, improve their educational level and organize and asserts themselves. The author also feels that studies on poverty suffer not only account of inadequate data but also because of lack of uniform methodology for measuring poverty, where the criteria used has been household consumption

expenditure, calorie intake per person, per capita monthly expenditure etc. As a majority of the rural community derives its sustenance from un-organised sector, it becomes difficult to assess the dynamics of rural poverty and its impact on living conditions without a reasonably pragmatic and measurable criteria of poverty. She also feel that there is a need for evolving a composite index for poverty which encompasses major areas of deprivation that poverty represents like food, housing, potable water supply, sanitation, health and education. Only then, an effective antipoverty action programme can be drawn.

Rout, H (1998) sketches the profile of health sector from the traditional system in pre independence period to the health care in post independence period. According to the author, the decline in the health care system has been mainly on account of the country's failure to use, justly, its resources, to provide basic health care to the majority of its population. The paper has been divided into three sections which discusses, in detail, the traditional system of health care, health care delivery system in British period and health care in post independence period respectively. According to the author, though there has been a marked expansion in infrastructure for health sector yet it fails to match the growth of population, which neutralizes the improvement in health sector in India. The factors that influence the performance of health sector have been the proportionate declining share of investment on health as compared to total plan outlay and lack of political will to prioritise this sector in the planning process.

1.4 The Study Area

The Study has been carried out in two district of the State of Uttar Pradesh. The state, on account of its diverse and pluralistic socio-economic and physical characteristics, offers unique form of miniature India. The pattern of social development in the state has been highly skewed as some districts have marched quite ahead, while others have lagged behind. This uneven growth in social sector,

across various regions of this vast state, has unduly affected the pace of development, accentuating the problem of rural-urban and inter district migration, flight of capital and incidence of poverty. The State has been divided in to five economic regions. If these regions are scaled on the basis of their level of social development as high, medium and low, then the Western region heads the list as technically, the most developed one, because it contains the maximum number of districts that have attained a high level of social development followed by Central, Eastern, Hill and finally the Bundelkhand regions respectively. The Hill and Bundelkhand regions, on account of their peculiar regional characteristics and typical topography and terrains, have been deliberately left out of the study. Further, the inter-district classification of these three regions shows that the following districts have attained a high level of social development viz. Lucknow, Kanpur, Allahabad, Varanasi, Agra, Jhansi, Meerut, Aligarh, Saharanpur, Dehradun and Nainital (Planning Atlas of U.P.1987).

On account of time and resource constraint, the study selected only two districts, one from the developed region and the other from relatively developed region of the State. As has already been stated, that western region has been the most developed region, whereas eastern region being the least developed one. Therefore, the study selected one developed district from Western and the other district from the Eastern region. Further, the district attaining high level of social development from Western regions were Agra, Saharanpur, Dehradun, Meerut and that from the Eastern regions were Allahabad and Varanasi. Hence, the sample contained the two district viz. Saharanpur district from Western region and Varanasi from Eastern regions which were selected with the help of a two stage stratified random sampling technique.

1.5 Methodology

As has already been stated that the study covers two districts, one each from two distinctively different regions of Uttar Pradesh on the scale of development. And from each of the sample district, five inhabited revenue villages were selected. Thus, the sample consisted of a total of ten villages. For selecting the sample districts from the two regions, all the districts of both regions that qualified on the basis of their level of social development were firstly enumerated and then in the second stage, one district each from the two regions was randomly selected with help of the "Tippet" table leading to selection of "Saharanpur" from the Western region, and "Varanasi" district from Eastern region.

Likewise, similar procedure was repeated for identifying and selecting the sample villages. Using a two stage stratified random sampling technique, first the blocks were identified and selected, as the first sample unit from which the all Nyaya Panchayats, and inhabited revenue villages were listed in each of the sample blocks. The five sample villages were then randomly selected. However, before selecting the sample villages, the other criteria viz. distance norm was also applied. According to which, about fifty per cent of the sample villages, to be selected were to be located at a distance of five kilometers or less and the remaining fifty per cent villages from a distance of more than five kilometers from the block head quarters. The basic premise was to test whether the performance of social development programme was inversely proportional to the distance from block head quarters or not?

Similarly, an attempt was also made to study whether the social development programmes are benefiting the socially disadvantaged sections and also female population etc. or not? For this, the sample villages were further divided, on the basis of their nature of classification, which was largely based on the proportion of population of disadvantaged group. Accordingly, it was decided to select.

- (i) One village from Gandhigram category;

- (ii) One village from Ambedkar gram category;
- (iii) One village which is headed by female gram pradhan, and
- (vi) Remaining two villages from general category.

After identification of the sample villages, the selection of beneficiaries was taken up with the help of secondary records obtained from the block offices of the sample districts. However, validation of acquired secondary data had also become necessary because the list provided by the block officials was based on the base line survey conducted by the Government of India in 1998 to identify the households living below the line and poverty. Thus, updating the record became necessary and for updating and validation of data, door to door listing of BPL of the sample households in the village was undertaken.

Therefore, our sample targeted only these set of households, who were living below the poverty line. However in order to study, the impact of programmes on beneficiaries, another set of households, who could not get the benefit of programmes but were living below the poverty line (here after called non-beneficiary) was also selected so that meaningful comparison could be made among the economically equals. Further, the perusal of the profile of social development programme shows that they could be, broadly, classified in to two major groups. The first category contains specific programmes like the Old Age Pension, National Family Welfare Programme, Old Age Widow Pension etc. while in the second category general programmes like JRY/Indira Awas Yojana, Employment Guarantee Programme etc. figured in.

However, it was also observed, during the course of validation exercise, that there were other households also, who did not figure in the list provided by the block, but were enjoying the benefits of social sector schemes. This incident was largely observed in specific schemes. The initiation of such households into the schemes was probably in 1995-96. Thus, the sample contained both act of beneficiaries viz.

the current ones viz. who got benefited in 1998 or later and old beneficiaries who were included in the list in 1995-96.

Further, the data and other relevant information collected for general social sector programmes was largely based on village household schedule and personal field observations and therefore covered all BPL households provided by the block officials, whereas the data collected for specific social sector programme was based on a specifically structured schedule, tested on only a few selected or sample beneficiaries.

As the first category contains limited number of beneficiaries, it was, therefore decided to select a maximum of 5 beneficiary from the schemes, however if the number fell short of five households, then all beneficiaries were to be included. Likewise, in the non-beneficiary category a maximum of 2.5 percent of the total, subject to a minimum of 3 households, were to be selected. In the second category of scheme, as the number of beneficiaries was large, it was decided to restrict the size of beneficiary in each programme to a maximum of 5 per cent of the total, subject to a minimum of 5 beneficiaries. Like wise the size of non-beneficiaries in each category was restricted to a maximum of 2.5 per cent subject to a minimum of 3 beneficiaries. The detail profile of the scheme, showing number of beneficiaries and non-beneficiaries has been summarized in Table -1.1.

Table - 1.1

Profile of Social Sector Programme, Beneficiaries and Non- Beneficiaries, in Sample Districts of Varanasi and Saharanpur

Social Sector Programme	Total Beneficiaries				Sample Beneficiaries			
	Varanasi		Saharanpur		Varanasi		Saharanpur	
	Bene-ficiary	Non-Benefi.	Bene-ficiary	Non-Benefi.	Bene-ficiary	Non-Benefi.	Bene-ficiary	Non-Benefi.
National Old Age Pension	25 (100.0)	27 (100.0)	105 (100.0)	37 (100.0)	10 (40.0)	15 (55.6)	23 (21.9)	16 (43.2)
National Family Benefit Scheme	4 (100.0)	10 (100.0)	4 (100.0)	5 (100.0)	2 (50.0)	10 (100.0)	4 (100.0)	5 (100.0)
National Widow Pension Scheme	51 (100.0)	23 (100.0)	13 (100.0)	45 (100.0)	19 (37.3)	13 (56.5)	7 (53.8)	14 (31.1)
National Handicapped Scheme	11 (100.0)	8 (100.0)	5 (100.0)	10 (100.0)	5 (45.5)	7 (87.5)	5 (100.0)	10 (100.0)
National Maternity Benefit Scheme	25 (100.0)	43 (100.0)	53 (100.0)	45 (100.0)	18 (72.0)	15 (34.9)	24 (45.3)	13 (28.9)
Employment Assurance Scheme/JRY	70 (100.0)	66 (100.0)	203 (100.0)	169 (100.0)	25 (35.7)	19 (28.8)	25 (12.3)	15 (8.9)

Contd...

Social Sector Programme	Total Beneficiaries				Sample Beneficiaries			
	Varanasi		Saharanpur		Varanasi		Saharanpur	
	Bene-ficiary	Non-Benefi.	Bene-ficiary	Non-Benefi.	Bene-ficiary	Non-Benefi.	Bene-ficiary	Non-Benefi.
Indira Awas Yojana	71 (100.0)	44 (100.0)	46 (100.0)	25 (100.0)	13 (18.3)	17 (38.6)	18 (39.1)	11 (44.0)
Rural Domestic Cooking Energy	16 (100.0)	62 (100.0)	-	68 (100.0)	11 (68.7)	15 (24.2)	-	14 (20.6)
Rural Sanitation Scheme	23 (100.0)	69 (100.0)	46 (100.0)	53 (100.0)	12 (52.2)	15 (21.7)	13 (28.3)	14 (26.4)
Public Distribution System	121 (100.0)	16 (100.0)	225 (100.0)	12 (100.0)	121 (100.0)	16 (100.0)	225 (100.0)	12 (100.0)
Rural Electrification	29 (100.0)	116 (100.0)	95 (100.0)	229 (100.0)	29 (100.0)	116 (100.0)	95 (100.0)	229 (100.0)
Neo Literates (T.L.C.)	N.A.	-	811 (100.0)	-	48 (16.8)	-	49 (6.0)	-
Mid-day Meal	1508 (100.0)	-	695 (100.0)	-	25 (17.0)	-	26 (3.7)	-
Scholarship for Primary Education	296 (100.0)	-	353 (100.0)	-	42 (14.2)	-	22 (6.2)	-
Rural Water Supply	5 (100.0)	-	5 (100.0)	-	5 (100.0)	-	5 (100.0)	-

Source Data: Data regarding number of beneficiary was provided by block for non-beneficiary spot verification by the research team with help of villagers.

Note: Figure in parenthesis denotes row percentage.

The comparative study of the two sample regions shows that while there were only two developed districts in Eastern region this number was four for the Western region. The number of blocks in selected sample districts viz Varanasi was eight. It was eleven in Saharanpur. Likewise, the number of Panchayats in both regions were 108 and 113 respectively of which 5 each figured in the sample, and the number of inhabited revenue villages was 1290 and 1278 respectively. The five villages selected in Harhua block of Varanasi district were Benipur Khurd, Koirajpur, Bhagwanpur, Ateshua and Marhuwa, where as five villages which figured in the selection for Rampur Marihorai block of Saharanpur district, were: Pahansoo, Salempur, Jagarauli, Tapari and Kurali (Table - 1.2).

Table - 1.2
Region-wise Classification of Districts, Blocks, Nyaya Panchayati and Revenue Villages of Sample Area of Uttar Pradesh

Particulars	Eastern Region			Western Region		
	Total	Selected		Total	Selected	
		No.	Name		No.	Name
Number of Developed Districts	2* (100.0)	1 (50.0)	Varanasi	4 (100.0)	1 (25.0)	Saharanpur
Number of Blocks	8* (100.0)	1 (12.5)	Harhua	11 (100.0)	1 (9.1)	Rampur Maniharan

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Particulars	Eastern Region			Western Region		
	Total	Selected		Total	Selected	
		No.	Name		No.	Name
Number of Nyaya Panchayats	108* (100.0)	5 (4.6)	1. Murdahar 2. Harhua 3. Marhawa 4. Shabaripur 5. Ayar	113 (100.0)	5 (4.4)	1. Pahansoo 2. Sherpur 3. Chakawali 4. Ambethachand 5. Sona Arjunpur
Number of Inhabited Revenue Villages	1290* (100.0)	5 (0.39)	1. Benipurkhurd 2. Koirajpur 3. Bhagwanpur 4. Ateshua 5. Marhwa	1278 (100.0)	5 (0.39)	1. Pahansoo 2. Salempur 3. Jagrauli 4. Tepari 5. Kurali

Source: Data provided by DRDA and NIC Varanasi and Saharanpur respectively..

Note: *The Number of Blocks, Nayay Panchayat, and Revenue Villages have been transferred to Chandauli district, above figures denote the current number.

The classification of villages, on the basis of their population, shows that the villages that were selected under Gandhi gram, Ambedkar Gram and female pradhan villages were Ateshua Koirijpur and Benipur khurd in Varanasi district while the other two remaining villages from general category were Bhagwapur and Marhwa. Similarly, the villages that figured in Saharanpur district under Gandhi Gram, Ambedkar gram and female pradhan were Pahansoo, Jagrauli and Salempur while Tepari and Kurali villages belonged to the general category there (Table - 1.3).

Table -1.3
Categories-wise Classification of Sampled Revenue Villages of Varanasi and Saharanpur Block of Uttar Pradesh

Villages Categories	Varanasi			Saharanpur		
	Total	Selected	Name	Total	Number	Name
Gandhi Gram	1 (0.6)	1 (20.0)	Ateshua	1 (1.2)	1 (20.0)	Pahansoo
Ambedkar Gram	24 (14.2)	1 (20.0)	Koirajpur	32 (39.0)	1 (39.0)	Jograuli
Woman Pradhan Gram	27 (15.9)	1 (20.0)	Benipur Khurd	17 (20.8)	1 (20.0)	Salempur
Other Grams	117 (69.3)	2 (40.0)	Bhagwanpur Marhwa	32 (39.0)	2 (40.0)	Taparikurali
Total Number of Villages	169 (100)	5 (100.0)	-	82 (100.0)	82 (100.0)	-

Note: Figure in Parenthesis Denotes row percentage.

Further, the comparison of villages in the sample district, on the basis of distance norm, shows that the proportion of villages located near the block head quarters was much higher in Varanasi as compared to Saharanpur which was also reflected in the sample as 40 per cent of the sample villages selected in Varanasi

were located at distance of five kilometer or less against 20 per cent such sample0 villages in Saharanpur (Table - 1.4).

Table - 1.4
Distance-wise Distribution of Sampled Villages in Varanasi and Saharanpur District of Uttar Pradesh

Distance from Block	Varanasi		Saharanpur	
	Total	Sampled	Total	Sampled
0 to 5 km.	53 (31.4)	2 (40.0)	15 (18.3)	1 (20.0)
Above 5 km.	116 (68.6)	3 (60.0)	67 (81.7)	4 (80.0)
Total Villages	169 (100.0)	5 (100.0)	82 (100.0)	5 (100.0)

Source: Data Provided by Blocks of Varanasi and Saharanpur Districts.

Note: The Figures in Parentheses Denote Row Percentage.

1.6 Objectives

The study, primarily, intends to analyse the performance of social sector programmes. In other words to what extent these programmes have helped the people to realise the social development objectives and participate more actively in the two sample districts. More specifically, the study aims at:

- (a) to study the level of participation of people and beneficiaries in the programmes;
- (b) to study the level of involvement of programme functionaries in the programmes;
- (c) to examine the modalities of selecting the beneficiaries in the scheme;
- (d) to study the impact of schemes on the socio-economic condition of the beneficiaries;
- (e) to study the inter-linkages effect of the programmes on the socio-economic activities of the sample villages;
- (f) to study the perception of the people as well as of the beneficiaries about the programmes;

- (g) to study the pattern of allocation and utilization of funds in the programmes;
- (h) to evaluate the monitoring aspect of the programmes; and
- (i) to suggest appropriate remedial measure for improving the programmes;.

1.7 Relevance of the Study

Social Development has now been accepted not only as a strong component of economic development but even some thinkers, academician and planners have started accepting it as the ultimate development, for it is the key to sustain the pace of economic development. The anomalies and disparities that have cropped up during all these years of planning have been largely, on account of low level of social development. The study would enable us to critically examine and evaluate the working of social sector schemes in the sample districts, identify their strong as well as weak points and suggest appropriate policy interventions, both in the short-term as well as in long term so that requisite modifications and rectifications are introduced during the period of operation of schemes and also at the start of new programmes.