EVALN STUDY

DRAFT

UNICEF CONTRIBUTION TO INDIA'S SOCIAL SECTOR DEVELOPMENT AND ITS LINKS TO POVERTY ALLEVIATION

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JUNE 19, 1995

SECOND DRAFT
comments welcome

"Are you coming with us to church?" I enquired.

"Thanks, no," he courteously replied. "It's not--exactly in my line, you know. It's an excellent institution--for the poor. When I'm with my own folk, I go, just to set them an example. But I'm not known here: so I think I'll excuse myself sitting out a sermon. Country-preachers are always so dull!"

Lewis Carroll in
Sylvie and Bruno.

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ACKNOWLEDGEMENTS

This paper could not have been written without the goodwill, help and cheerful cooperation of a very large number of people, to all of whom I am deeply indebted.

Unicef invited me to undertake this study, and not only were no restrictions at all put on me: my many demands were cheerfully met. I therefore enjoyed my work very much. I am indebted to many in Unicef, many of whom I met for the first time, for their generosity with time and cooperation in my efforts. While all have been helpful, I have imposed myself on some quite shamelessly: L.N. Balaji; Gordon Alexander; A.K. Shiv Kumar; Dipika Shrivastav; Richard Bridle; P.K. Gurnani; S.C. Bhargava; K.S. Chaturvadi; Gopi Menon; S.K. Mendiratta; Vijaya Chavan; Vimla Ramachandran; G.Balagopal. I have learned a lot from all of them, and I am grateful indeed.

I have also discussed these issues with those who have had dealings with Unicef: Nand Kumar; Anita Kaul; Sanjay Kaul; R.Suresh; Pradip Bhide; P.P.Sharma; M.S Bhatia; Poornima Vyasulu; V Ramalingaswami; and a whole host of helpful officials and people working in NGOs. From all of them I have learned something useful.

I have been received with extraordinary hospitality by villagers in the course of my field visits. If they remain nameless, it is because I can not even begin to name all of them, they are so numerous. But it is from them that I have learned the most.

Writing about an organisation like Unicef, which works in an area close to the hearts of most people, and writing this in India, where organisational inefficiency and corruption are the routine norm, it is easy to get carried away by the work that Unicef is doing, because it is free of these all too common failings we take for granted in this country. I am not sure that I have not been affected by this perspective virus which makes it difficult to spot weaknesses and assess faults. I am sure Unicef has its own warts that I have failed to see, because of the blinkers of time and circumstance. I have tried to keep a balance; and many have helped me by asking difficult and perceptive questions and I have consciously tried to be as objective as I possibly can in my response. Every comment I received on the draft has been carefully gone over. Further, I am better acquainted with Karnataka, where I live, than with many of the other states: and this may have

coloured my presentation and conclusions. Because of all this, the reader has to be cautious in reading this report: I can only sound this warning.

Responsibility for errors of omission and commission remains my own as I cannot find anyone to blame them on.

Contribution of UNICEF cooperation to India's Social Sector Development and its relationship to Poverty Alleviation and Disparity Reduction.

INTRODUCTION

This paper has been written at the invitation of the India Country Office of Unicef, and it is a part of the ongoing Situation Analysis. The paper has been written in the three months ending 31 May, 1995.

The paper is organised as follows:

Section I looks at Unicef and its mission in India. This is followed by a discussion of Unicef's cooperation with the Government of India, with special reference to the anti-poverty programmes of the government, and the changing external environment in which Unicef is now working.

The basis on which this paper has been written has also been detailed.

Section II is a reflection on my experiences in the field in visiting Unicef projects in Karnataka, Maharastra and Bihar. The sectors covered include primary education, child development, health, water and sanitation, credit, and communications. These visits provide the main basis for my comments on the terms of reference for this paper.

Section III is devoted to a discussion of each of the items referred to me in the Terms of Reference by Unicef.

The paper ends with a brief Conclusion: Poverty Alleviation per se is not the primary objective of Unicef; but a great deal of what Unicef has been doing contributes very positively to improving the lot of the poor. This is because the definition of poverty used in India is a very narrow one; taking a family above the poverty line does not mean that it has adequate access to the basic necessities of life; and this is something that Unicef understands well and acts upon systematically. Unicef's contribution to poverty alleviation in India in a broader sense is therefore a very positive one.

SECTION - I

UNICEF AND INDIA'S SOCIAL SECTOR

I. UNICEF AND INDIA'S SOCIAL SECTOR

About Unicef

Unicef was set up after the war to look into, and do something about, the terrible plight of children in that emergency situation. It functions as a specialised agency of the United Nations, and its funds come from contributions from governments and other donors. Very soon after its inception, the Unicef realised that the problems that children faced were not just those of the disruption caused by the war, but had deeper roots in society, in terms of its historical evolution, and in terms of political forces shaping the course of events in various nations. This realisation has concrete expression in the name of the organisation being changed to the United Nations Children's Fund, while retaining the English acronym, Unicef, as it has what may be called "Brand Equity".

In the last fifty odd years, Unicef has not only done a great deal, along with other agencies, it has, as an organisation, accumulated a great deal of experience on how to deal with the plight of children across the globe[1]. In approach, it seems similar in many ways, to Oxfam [and some members of the staff agreed about this], but of course, it is much larger in size and scope. As part of the UN system, Unicef works primarily through governments; but since its area of concern, children's welfare, is one for which government everywhere has primary responsibility, this may not be too much of a limitation. Anyway, Unicef has not closed the door to working with NGOs when that course will help further its basic goals. The World Summit on Children in 1990, was an important landmark in shaping its current priorities, policies and goals; and in getting the political support of governments for these goals. The ongoing exercise on the rights of the child is a very important extension of Unicef's work in this context. It is out of the decisions taken at the World Summit on Children that specific goals for the decade have been set. They have been further broken up into goals that are to be achieved by the end of 1995. These Mid-Decade goals are prominently displayed everywhere in the Unicef offices, and serve as a constant reminder of work that needs to be done.

CRC & Unicef only 13 have not ratified

[1] I have seen two useful references: A history of Unicef in India, somewhat dated but very useful, available in the Unicef office in Delhi; and Maggie Black, The Children and the Nations, Unicef, 1986.

In India, Unicef has been present more or less since it was established [since 1949], and India had newly become independent. It today has ten field offices in state capitals, from where the bulk of its work is carried on. Briefly, this work relates to Unicef promoting Universal Education and Universal Immunisation; putting in place, and improving, Health and Child Development Services, including nutrition, drinking water and sanitation; Communication and Advocacy. Since it is not possible to help the child in isolation, it is essential to work with the mother and child diad, and Unicef does so. As a result, the welfare of women is an important dimension of Unicef's work; conscious efforts are made, not only to be woman friendly, but to be genuinely gender sensitive.

The field offices of Unicef have come to be established gradually over the years. The Country Office in Delhi liaises with the Government of India, provides support to the field offices, and performs coordinating and monitoring functions. It is from the field offices that Unicef's main work is carried on. This gives Unicef an important advantage, as in a large country like India, with different languages, cultures, and State government rules and priorities, it enables specialisation by its staff in a way that would be difficult otherwise, and gives the organisation a local presence all over the country. At all levels, relations with the government are excellent, with Unicef personnel having complete and free access to the governmental machinery at all levels: Union, State, District and even taluk and village, in practically every State. I know of no other agency that has this vast local network and goodwill, built up over the years. This is indeed remarkable. If the mid-decade goals are achieved, and, in India I think, ~~they will be,~~ it will be in large measure because of the contributions of Unicef's Field Offices.

Cooperation with the Indian Government

The Directive Principles of State Policy in the Indian Constitution provide a Constitutional mandate, or rather, an obligation, for the Government of India to provide certain facilities to all citizens. However, almost fifty years after Independence, the average Indian citizen's access to an adequate level of social services, in health, education, housing etc., is woefully poor. Since these Directive Principles are non-justiciable, in the sense that citizens cannot seek the help of the Courts to enforce these as rights, progress in meeting them has

been, unfortunately, both slow and tardy. The impact of Unicef's contribution, or the effects of Unicef cooperation with the Indian government, must be seen in the context of an overall failure in India to make any significant progress in the field of social services.

This failure comes out starkly from the data provided in the annual Human Development Report brought out by the UNDP. This is not to deny that there has been some progress: there clearly has been, and it is not only the Kerala experience that provides excellent evidence to support this. But it is not enough, nowhere near enough. Whether it is primary education or malnutrition or access to health services, the overall situation is both poor and inequitable, across both regions and classes; and there are glaring gender differences. India has the largest number of illiterates in the world; and female literacy rates are depressingly low. While the average infant mortality rate has declined, the variation across states is unacceptably high. The absolute number of poor people is higher today than at any time in the past, although the poverty ratio has shown a decline. Recent data indicate that two-thirds of the children in the country suffer from malnutrition. Access to drinking water, health services and sanitation is way below any acceptable level for the majority of the people. Therefore, it is necessary to try and form an impression of how Unicef has functioned in this context of overall failure in India: has Unicef made a significant difference? To put it differently, would things have been much worse without Unicef? Is it possible to answer this question meaningfully?

This Constitutional mandate in India, and the actual requirement of the majority of the population for better access to such services, fits beautifully into Unicef's main area of concern: the well being of the child. Hence these good relations between Unicef and the government should not come as a matter of surprise.

Unicef cooperation with the Union and States' governments has been quite systematic, with Unicef supporting social sector activities that contribute to the well being of the child and the mother, decided upon in the various Five Year Plans, and written into what is called the Master Plan of Operations, the MPO. With the increasing emphasis on poverty reduction strategies in India from the Fifth Plan onwards, [which tried mainly to create employment by i] providing assets, as in the IRDP, ii] wage employment, as in the NREP, iii] training youth for self-employment

as in the TRYSEM, and so on] they have also begun to influence the kinds of support that has been sought from Unicef which has all along been stressing the importance of investing in the social services sector: health, education etc. for women and children. The requirements of electoral politics, and the publication of the famous Dandekar-Rath study of Poverty in India at that time [1971] led to a focus on these anti-poverty programmes with which the country began then to experiment. The country rejected the "trickle down" hypothesis which said that if growth took place, benefits would eventually reach the poor: even if they did, it took far too long. There was clearly a need for direct action, and the government took it.

If incomes through jobs/employment could be provided, then, it was felt, people would look after themselves. Thus the various schemes which today go under the name of Jawahar Rozgar Yojana. These anti-poverty programmes are this country's equivalent of social security; our safety net, to use a contemporary term. In spite of all the short-comings that have been so extensively documented, they have made a major difference to the extremely poor in rural India. These schemes are undoubtedly important; but they give hungry people a fish, rather than teach them how to fish. This "relief" or "welfare" approach dominated government policy for a long time, and got compounded in the politics of subsidies. Also, the low and insecure incomes that were provided by these programmes did not automatically translate into better health/education etc for the families: in the way were attractions like liquor and gambling. And with the advent of the fiscal crisis, these expenditures began to come under pressure. It took time for the system to realise that such programmes are perhaps neither necessary, nor sufficient, to deal with the problems of children. Here too direct action was needed.

Unicef has all along been stressing the importance of directly investing in children; it has tried to persuade the government of the long run importance of doing so, but it has refrained from open criticism of the government and its short term oriented policies. Thus, there has been no open conflict between the two. And in recent years, there has been a narrowing of the gap between what the Government of India considered priority areas [garibi hatao] and what Unicef considered priority areas [child welfare] in the process of economic and social development.

The view that focusing on the latter in the immediate future may have a positive impact in the longer-term on the former has also been gaining ground in recent years. Thus, there is a feeling today that fighting malnutrition in children may be of greater urgency than expanding employment generating schemes per se for adults, as improved nutritional levels may not only equip people to look after themselves, but also, in all probability, make less demands on the social services in later years, thus contributing to a lessening of the burden on the government exchequer while meeting the desired developmental goals. Since the Constitution mandates that the government take steps to improve the nutritional level of the population [Article 47], this can be taken as an important end in itself. This shift in policy perspective is a very positive development. Both the government and Unicef have been learning from experience in implementing these anti-poverty schemes.

It might be worth noting that the Indian strategy of Planning, based on the Mahalanobis framework, felt that investment in the core industrial sectors was an essential prerequisite for the growth that was needed to promote self-reliance as the other side of political independence, and that it looked to small and village industry to meet the mass consumption needs of the people. Such growth was expected to provide the base from which poverty could be eliminated. A great deal of the government's resources were invested in public sector industry in this period. In the early days, the day to day requirements of the people were to be met through the Community Development Programmes, under which a large rural infrastructure of people and institutions, such as the Block Development Officer, was built up. However, in later years, the Community Development Programme slipped from the main agenda of the government, and became the preserve of the bureaucracy, which grew in importance in India in the heyday of Planning. In the late sixties and early seventies, when the economy faced a crisis brought on by both war and famine, the need for direct action to fight poverty and reduce glaring inequalities became a political imperative. At this time, instead of trying to revamp the Community Development Programmes, the Government decided to include anti-poverty schemes into the Planning Process; the change was introduced in the Fifth Five Year Plan[2], and has continued to be a major component since.

[2] At the same time the Government raised the rates of taxation to phenomenally high levels-ostensibly to both reduce inequalities and also to raise resources for financing the Plans--and also introduced a range of controls in the economy. Whether corruption and inefficiency are related to all this is another, perhaps related question that I will not pursue here.

Thus India got schemes like MFAL, CSRE, DPAP and so on, to which funds were directly allotted. Over the years, the number of centrally sponsored schemes grew in both scope and number. They were directly under the control of the bureaucracy, which grew in strength and numbers during this period, which included the trauma of the Emergency in the mid-seventies. This was a time when there was a strong centralising tendency in the Indian polity: and attention focused on things other than social services, and even from children and their specific requirements. Unicef, with its work- with-government philosophy, could do little to counter this tendency in spite of its own very decentralised way of working. And given the many problems in the bureaucratic administration of these welfare programmes, because of which the benefits often did not reach those they were meant for, it became necessary for Unicef at this time to provide essential support at the grass roots level for the delivery of the services: and this is one reason for the growth of the Field Offices; a good thing for many other reasons too. This top-down tendency, especially in the governmental sector, in the design and administration of social sector schemes, which are best dealt with at local levels of government, is strongly evident even today in India. There are strong forces against decentralisation and deregulation in the country: and this, I think, is one of the challenges that faces, and will continue to face, Unicef in its work with children in this country. Until these programmes are dealt with at the lowest possible level of self- government--a point that the World Bank has been emphasising--obstacles to the services reaching the poor will remain.

In the mid-eighties, the panchayati raj movement came up again, as a political counter to the centralising tendencies noted above, particularly in West Bengal and Karnataka; and the unique experience of Kerala, where social services developed to a high level of efficiency, and were well distributed, posed a challenge to other states, and to the Union Government. Along with all this came a renewed emphasis on the importance of investing in the social sectors, which were to be the major responsibility of these levels of self-governance. Between the days of Community Development and the days of Panchayati Raj, there was little emphasis on things like education, health and women and child welfare, as the nation was busy with other things. And, in this time, the Union government gradually discovered that it really could not by itself directly implement such developmental programmes. This belated realisation, along with other political pressures, led to the 73rd Amendment of the Constitution, dealing

with panchayats; but too much should not be read into it, as the Party that piloted the bill at the Union level was the same as the one that effectively destroyed it at the state level in Karnataka[3]. However, as effective administration of social sector schemes is the major, if not sole area of concern of Unicef, it is in the latter period that the Indian state rediscovered, at least in part, the importance of things Unicef had been talking about throughout this decade or more. If today there is a feeling that expenditure on the social sectors is like investment in the future rather than current consumption, then some of the credit for this shift in perspective may be given to gentle Unicef advocacy. The good thing is that view has been taken seriously, and now seems to form a key ingredient of policy.

Since 1985, when the Government Of India, under Rajiv Gandhi's leadership, took up Technology Missions in Immunisation and Drinking Water, which are central to Unicef's concerns, cooperation between the two has been increasing, with greater emphasis being given in the government's plans and programmes for women and children. It was around this time that a Department of Women and Children was set up to coordinate the various schemes, and especially the Integrated Child Development Services, [ICDS] which began as an experiment in the late seventies. Programmes initiated through Unicef support, such as the ICDS or Development of Women and Children in Rural Areas, [DWCRA], are being rapidly expanded by the government using its own funds. The schemes are growing perhaps much too fast. This rapid expansion is posing certain problems that have to be coped with. How this is to be done is not very clear, even though the goal is reflected in the jointly agreed upon Master Plan of Operations for the last decade; the Plan for 1992-97 being very clear on what is to achieved, and at what pace. In government departments, there is always the danger that numerical targets acquire a life of their own, and achievement of targets may have little to do with the actual state of welfare of the people who are supposed to benefit: the family planning programme is a piquant reminder of this danger. Targets can then be shown to have been achieved even when the spirit on which they were decided upon has been bypassed or ignored. This danger must be guarded against constantly in working with government departments through a system of checks and balances. In Unicef's case, the Filed Offices provide the required counterbalancing.

[3]The chequered experience of panchayati raj in Karnataka, which included several directions from the Supreme Court, shows how strong the forces against such decentralisation are in India. If the system is successful, backlashes can be expected; Unicef will have to prepare itself to cope with them.

In purely managerial terms, this Plan is very clear cut; and the mid-decade goals to be achieved this year have been realistically set, based on a deep understanding of the underlying processes, and it is expected that, by and large, they will be achieved. Corresponding to the Unicef's goals are those of the various state government departments that they work with. These too have been worked out in great detail, and with Unicef assistance, disseminated in local languages in printed booklets that have been widely circulated. I was quite impressed with the ones I saw.

Yet, the question remains: how is the scale factor to be dealt with? Even at the experimental level, DWCRA has faced problems, and does not seem to have achieved what was hoped for. The question of whether it can be made to work as hoped is still open. If it is now is to be expanded on this scale, can this be done while keeping the programme true to its spirit? In India, this is a question that Unicef will have to pose, and, perhaps, to seek to answer. This perhaps will be the most difficult question of the coming years.

Unicef's External Environment

In the meantime, there have been changes in the external environment of Unicef[4], which may have to make some strategic choices soon, moving from the simple delivery of social services to children to capacity building to empowerment, especially of women. From trying to help women in their role as mothers, it is becoming imperative to see them, in addition, as workers and consumers as well. It is becoming essential to do this without alienating men; rather, the task is to carry men along in this process of changing the subordinate role of women in society into one in which all are equal citizens. While feminist literature has shown that men are at the root of the problem, it must be recognised that men are also part of the solution to this problem. This will require major changes in the organisation, with a shift from a hardware focus [drilling rigs] to software concerns [awakening/consciousness raising].[5] It may also require changes in methods of work and types of cooperation: but that is another story.

[4]This comes out in the Multi-Donor Evaluation of Unicef. I refer to the Executive Summary: E/ICEF/1993/CRP.7, 25 January 1993.

[5] The questions related to the organisation are being dealt with in a related study by Biswajit Sen.

The world as a whole has been suffering from a financial crunch. The financial problems of the UN system are well known. Private flows are now preferred; and the Bretton Woods institutions have their own views on these issues which are being listened to with increasing respect, and often, with unfortunate consequences for the social sectors, which unhappily seem to be the first to feel the pain of Stabilisation Policies[6]. In this view, increasing inequality is often seen as an inevitable, but small, price to pay for economic growth, which will eventually enlarge the cake from which all have to share; inequality may then be expected to come down[7]. In India too, one hears talk of the privatisation of health and education, [because of the need to control the fiscal deficit] without the implications of such drastic measures in a country of great inequalities being clearly spelt out. It is hoped that such measures will be restricted to meeting the needs of those who can afford them, thus freeing Government resources for those who cannot. This will also help Unicef, which speaks in terms of the universal rights of the child, in its efforts to concentrate its limited resources more effectively in ensuring that the unfortunate have access to such services on an ongoing basis. In speaking of the importance of continuing to invest in the social sectors in this situation, Unicef is making an important contribution, not only to the cause of the child, but also to that of the deprived in Indian society. This is an important contribution to the cause of Poverty Alleviation, and Disparity Reduction, both broadly understood, because it forces attention on the long run rather than on the immediate future limited to the next election. I hasten to add that it is not a sufficient contribution!

The current trend in the donor countries is towards loans and bilateral relationships, not for an expansion of multi-lateral assistance given as grants or on very soft terms[8]. The Swedish Government, for instance, is reviewing how its own foreign aid is to be disbursed, so as to most effectively bridge the gap between what the Swedish people mandate through their Parliament, and what the recipient countries require and wish to do in terms of their own priorities. These priorities, on the Swedish side include

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[6] Several people I spoke to credited Unicef for coining the phrase "Adjustment with a human face" which played an important part in keeping social aspects of economic restructuring in public focus. I do not know how whether this is apocryphal.

[7] The contrary view is that a lower level of inequality, brought about by raising the lower level and thus the average value, will have a positive impact on the economy by removing the demand constraint.

[8] A very useful document is the recent EURODAD publication: World Credit Tables: Creditor-Debtor relations from another perspective, 1994-95, Brussels.

support to programmes of poverty alleviation; and the question is being asked about the best way in which this can be achieved, especially when a large proportion of the increasingly limited funds have already been committed to certain other sectors, for example, in the case of SIDA, to power. India has been a major recipient of Swedish aid for a number of reasons that have been very clearly discussed in a paper by Gus Edgren[9] and as SIDA has been a major contributor to Unicef projects in India, these decisions may have a major impact on Unicef's work in India.

In this background, Unicef in India has undertaken a Situation Analysis of its own, which includes both internal studies and reports commissioned from various outside agencies on different aspects of its work and functioning. This report, looking at Poverty Alleviation and Disparity Reduction, is one part of this overall exercise, and has been prepared in the three month period from end February to end May 1995.

Basis of this Report

This report is based on field visits to areas where Unicef has been working to see different programmes at first hand; on discussions with Unicef personnel; on discussions with those who have worked with Unicef at different times and in different departments and capacities; on discussions with the rural poor who are meant to benefit from Unicef programmes, and on reports available in Unicef. A great deal of quantitative information is available in these reports, especially if they are read together with the Annual Reports of the Ministries that work with Unicef. I have deliberately chosen not to repeat statistics that are already well known. Instead, they have served as a useful background to me in the process of putting together my views on these issues based on impressions gathered in the field. The locations were chosen on the basis of mutual discussions, given the limitations of time within which the work was to be completed.

In particular I would like to note the following visits:

1] Amravati in Maharastra, two days March 14 and 15, 1995.

Apart from the unicef team that was with me in Amravati, we

[9] A copy of this was shown to me in Unicef; it is a remarkably clear document putting forth the problems faced on the different sides of this question. It must be noted though that it is appreciative of Unicef's work, and that its main concerns lie elsewhere.

had the opportunity to interact with the Secretary Education of the Government of Maharastra, with the Divisional Commissioners of Nagpur and Amravati, with CEO's of nine districts of Maharastra; with the Institute of Youth and Development, an NGO in Nagpur, and a whole host of District level officials in Amravati, including several doctors in PHCs.

2] Bidar in Karnataka, two days, March 23 and 24.
In Bidar we met the CDPO, a supervisor, officials of the Department of Women and Child Development, the District Health officer, the district medical officer in charge of immunisation, a PHC doctor, a school teacher. We did not meet the senior district officials.

3] Visits to New Delhi on February 16, and April 3 and 4; in discussions with Unicef staff, and in consulting various documents and reports available there; and April 18 and 19, attending a Workshop on Capacity Building in Nutrition, along with several concerned individuals and organisations, which was very useful.

4] Bombay on March 16, when I spent the day in the Unicef office, discussing work with the officials there.

5] Hyderabad on March 22. Unfortunately, at this time many of the staff were away on leave, but I had plenty of time with those present.

6] Bihar, from April 24 to April 30, with visits to Muzzaffarpur and Ranchi, in addition to time spent in the Field Office in Patna. I also had the opportunity to spend some time in a Training Programme of Sahiyoginis of Mahila Samakhya, a part of the Bihar Education Project, and to visit some DWCRA groups in both the districts. The bulk of the time, though, was spent on watsan projects.

When this report was being written, there were several constraints. Unicef's Field Offices are not overstaffed; its officers are quite busy with their work, and they travel a great deal. I felt quite guilty about the amount of their time that I took in talking to them about their work rather than letting them get on with it. Also, apart from the inevitable holidays, it was the end of the financial year and many of the government officials were preoccupied; former Prime Minister Morarji Desai passed away and the country more or less shut down for a week; and after that

many people went on leave. Thus the extensive field work that had been planned could not be carried out in toto, and this is an unfortunate limitation that must be noted at the outset.

This report is not based on primary data collected for this purpose, nor is it based on any specialised knowledge I have of Unicef and its activities over the years. It is the overall impression of an interested outsider, a development economist concerned with these issues in India who has looked into Unicef's plans and projects in some places and talked to those involved in these projects and read some reports: and, perhaps, jumped to hasty conclusions.

The four items specially referred to me are discussed separately; however there is a certain amount of overlap across these issues. This is perhaps inevitable.

This specific discussion on the terms of reference is preceded by a brief write up on my impressions of different programmes in the field that I have seen, as what follows draws, in large part, upon them. I have shared my views and impressions on what I have seen with the concerned Unicef staff at different times; what is presented here may be seen as putting it all together.

SECTION - II

DEVELOPMENT PROGRAMMES IN THE FIELD

II. DEVELOPMENT PROGRAMMES IN THE FIELD

There is a great deal of variation in the field in all the programmes; this must by now be a banal statement. What may be of interest to Unicef is the fact that wherever I went, irrespective of the state of the project under consideration, I found goodwill for the organisation, and a deep appreciation for the professional assistance rendered. This was not just among government officials, but also among what may be called the "target" groups. It was known that the amounts of money that came from Unicef are small; in some government circles people said it was so small that it was not worth bothering about, [and this was generally in comparison with the World Bank funded projects]; but there was general agreement that the projects that Unicef supports are worthwhile ones. Many said that without Unicef, the projects would never have taken off. This was particularly true of governmental officials at the field/district/directorate level. In that sense, Unicef's role has been truly catalytic.

In what follows, I discuss some of the programmes that I visited and saw for myself, and the impressions I formed. This forms the basis for my discussion, later, of the specific issues of poverty alleviation that have been referred to me.

Primary Education

When it comes to social services, in India, everyone thinks of Kerala as the ideal. Everywhere else, they are in a depressing condition: the government systems are collapsing under the twin problems of inadequate funding and increasing demands upon them; and privately provided services are priced out of the reach of a majority of the people. In either case, the callous attitude of the people working in the system at various levels leaves much to be desired. In Kerala, for specific historic reasons a decent level of social services is available, both in the public and in the private domains, but the economy in general is stagnating, and this is the paradox, or problem, of the Kerala model. Something better is needed. And Amravati may be a pointer in the right direction.

In Amravati, a vast, typically backward district in the Vidharba region of Maharastra, bordering on Betul district of Madhya Pradesh, and with a significant tribal population, things are changing: the district has some surprises for the discerning visitor.

Like most other districts in India, Amravati has its share of poverty, its low levels of literacy, especially female literacy [51.8% for all females and 17.44% for tribal women], poor health practices, malnutrition and the like. In its underdevelopment, and in the poor quality of services available Amravati is like any of the other backward districts in the country. Unlike most of these districts though, where stagnation seems to be the rule, tremendous progress is being made in these areas in Amravati, and the difference is palpable because it comes from the community.

A visit to one of the local schools is a delightful experience. One sees brightly painted walls, with maps of India and the world [not to scale!], and portraits of national leaders like Gandhi, Nehru and Ambedkar. The lower part of the wall in each classroom has been converted into a blackboard on which children can write messages and practice their lessons. For children coming from families that cannot afford to buy them a slate, this makes all the difference in the world when it comes to retaining what they learn.

The teachers have broad smiles on their faces, as these changes have come about as a result of their efforts, and the eyes of the children are glowing with fun and enjoyment as school is a place of song and dance. The parents think of the school as their own: amchi shala, and they have contributed a sum of about Rs 50 lakhs in cash and kind through donations. This is hardly the picture one has in mind when one thinks of a primary school; certainly not when the primary school in question is one run by a zilla parishad. Yet, this is what I saw in Amravati. It was no dream; and I am quite sure it was no drama either.

This change has taken place over the last one year.

What has made this possible is what the local people call Anandayee Shikshan: joyful learning. It is an attitude: given all the constraints, let us enjoy what we are doing. Let us do what we can to make things work better. And the primary school teachers, under the guidance of the Village Education Committees, are taking the lead in implementing Anandayee Shikshan. The teachers, the Village Education Committee, the Zilla Panchayat, and the district level bureaucracy, under the leadership of the Chief Executive Officer, are all working together to make this innovative

experiment a success. Together they prepared a project that required Rs 15 lakhs, and this was provided by Unicef. It is this teamwork and cooperation that makes Amravati different. Certainly there are problems, certainly there are gaps, and most certainly, much remains to be done. But they have begun to work on their problems. And they are achieving dramatic results.

To make such joyful learning possible, each school, or rather, each teacher, was given a grant of two hundred and fifty rupees to spend as he or she deemed fit to make the place cheerful; to buy teaching materials and the like. Many developed their own teaching aids, using what was readily available. Even after my visit to several of these schools, I am struck by the fact that the amount of money involved was a paltry two hundred and fifty rupees per school. The teachers used this money to buy paint, some posters etc. The anti-poverty schemes like the Jawahar Rozgar Yojana were used to provide the labour. And in a few days the dingy classrooms got transformed into cheerful places. It is really as simple as that!

The Department of Education of the Maharastra government, in collaboration with Unicef, has been working on teacher training programmes for some time. Given the experience gained in the Minimum Levels of Learning experiment, and with the involvement of primary school teachers all over the state, a curriculum in the local language had been developed, and textbooks prepared. To ensure the required coordination, Amravati came under the Area Intensive Education Project; there has been excellent cooperation among the various departments, at various levels. Thus the basic conditions for progress existed in all or most of the districts of Maharastra. What makes Amravati different? How did the programme take off so spectacularly here? Can the momentum built up be sustained?

Only time will give the answers to these questions. But if impressions built up in a visit have any validity, then I would give an optimistic forecast, for what the government or the bureaucracy propose may wither away when the inevitable transfers take place; what the people take up, on the other hand, is likely to continue for the simple reason that they feel it is their programme, and they have control over it. This, I feel, is what make the Amravati situation unique. One indicator of the fact that all concerned with Anandayee Shikshan have accepted it as their own lies in the Anandayee clap: everyone together claps their hands in

the following rhythm: 1-2-3::1-2-3::1-2-3. All visitors are treated to the spectacle of everyone together participating in the Anandayee clap; and visitors like me were encouraged to join in. In how many places in India, even educated, urban India, has such a symbol of common commitment spontaneously developed?

In Hirsal village, remote from the district capital which is a three hour drive away for people like me who have access to cars, I was treated to an entertainment programme put together by the primary school teachers, called the AIEP Top Ten. [Oh, the phenomenal power of television!] The theme was social awakening, and the songs, with words originally written and sung to the lilting lyrics of popular film songs, dealt with problems of education; of the need for girls and boys alike to go to school, to learn things that were useful to them; of problems like alcoholism and the need for voluntarily giving up drinking. I was struck by the fact that there was no demand to impose prohibition; the focus was on persuasion. I had some reservations about the both the message to encourage women to use the Copper T contraceptive, locally called tambi, and the manner in which it was done; but then, an urban upper middle class person like myself may not have all the answers either. It is the essence of grassroots participation that people do their own thing, and learn over time from their own mistakes. It is good enough for me that they are willing to listen to people like me! And anyway, they realised very clearly that the emphasis in the family welfare programmes was on female sterilisation; and that it was important that the men too looked at their own responsibilities in this matter. I, for one, cannot ask for more.

My friends and I visited several remote village schools, and everywhere we were impressed by the enthusiasm and creativity and energy of the people, and what they are capable of when they decide to implement a programme. The Hirsal experience, we found, was not a unique one; we could expect that sort of thing in most other places in the area. The idea that primary school teachers can take up, and effectively implement social awareness programmes is an interesting one with immense potential.

We also saw several primary health centres, where messages about the use of Oral Rehydration Therapy and the importance of proper immunisation had reached, and were being passed on by the ANMs and the anganwadi workers. They told us how important Anandayee Arogya Shikshan, communicating their messages in song,

was. And they had made up many, in Hindi, in Marathi, and in Korku. Efforts are being made to link other social services like the ICDS with Anandayee Shikshan, and to transfer the joyful learning philosophy and attitude to them. Certainly there were gaps in the messages, there were errors of understanding; but this only served to underline the basic point that learning was taking place, and that the people were hungry for more; and that they were entitled to information in these and other matters.

A helpful bureaucracy, yes. Some critical support from Unicef, yes; the two working harmoniously together with the people, interesting. But at the base is the commitment and concern of the local people: and this, I think, has been the necessary condition for what is happening. Yes, Amravti has experience from which the rest of us must learn. Whether we have the capacity to do, is another matter.

The important thing in Amravati is the way people have taken to the joyful learning programme: they have "owned" it. If this district is similar to others, in this respect, at least in Maharastra, then one may hope for substantial progress in the near future. While Amravati offers hope, what I saw in other districts makes clear the magnitude of the unfinished task; a very great deal remains to be done, and it is on this that massive efforts will have to be made.

Child Development

In the area of child health and development, the most important programme is the ICDS: Integrated Child Development Services. An excellent programme in theory, it nonetheless has some problems, and in one view, has degenerated into a mere feeding programme. In another, the system has been overloaded with too much being demanded of the anganwadi worker, who, apart from being one person, is also not very highly educated, and besides, is quite poorly compensated. Yet, I for one cannot convince anyone that the ICDS has not been of great importance in preventing a decline in the status of children, in terms of nutrition, from the consequences of the abject poverty into which so many of them are so unfortunately born. Thus, while its role in meeting its stated objectives may be justifiably questioned, the flip side of the coin is that without it, the condition of children would have become much worse. I realise this is a counterfactual statement that is

difficult to prove; but it is a conclusion from my visits that I have some confidence in. I leave it at that for now.

Politically, the ICDS is an attractive programme that everyone supports, and no one can [politically] afford to oppose. To some extent, the problem lies there.

In assessing the ICDS, one must also keep in mind the speed with which it has been scaled up, from xx projects in say 1980 to xxx in 1995. Replication at this speed, and a change of scale at this rate, are bound to impose stresses and strains on the most successful experiment. Success on a larger scale is not something that can be taken for granted, especially in government programmes; the demands on manpower and other resources, the need for sensitive, rather than routine, training etc, are often underplayed when the upscaling is decided upon, and the result may be that a successful experiment at one scale of operations does not deliver success in the same terms at a larger scale. This problem seems to have cropped up in the case of the ICDS. And, unfortunately, the system least geared up to deal with such problems is the governmental one, which functions by routine bureaucratic rules. Thus, in one district, it can ensure that staff are posted and that they are trained and so on. When the experiment is scaled up, this becomes impossible: posting people in one district often means taking them out of another, and the overall project suffers[10]. I could see this happening in the ICDS.

The lesson: make haste slowly. And develop priorities. Is the ICDS really needed in all districts? And does it have to be uniformly designed everywhere? What are the desired project outcomes: children reached or underlying processes strengthened? Is there a trade off between short run requirements and long run sustainability? There does not seem to be much clarity on this issue.

It may be useful to quote from the conclusions of a major evaluation of ICDS in Dharani block after 15 years of the programme.[11]:

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[10]This can perhaps be generalised as a problem in the governmental set up. I saw this happening in the banking system, in the Pilot Project to Strengthen the Credit Delivery System, sponsored by the World Bank and coordinated by Nabard, in the late 1980's.

[11]Women and Children in Dharani: A case study of villages after fifteen years of the ICDS. Directorate of the ICDS, Govt of Maharastra, supported by Unicef, no date.

"By and large, we have seen the impact of the ICDS... has been limited in terms of absolute levels of child mortality and health, nutrition and growth, and education... While nutrition levels continue to be poor, they are consistently better than those recorded in the non project area,...Further, some attitudes have undergone a positive change, notably those pertaining to the weighing of children, to immunisation, and to the use of soap, and there is an increasing willingness to visit the health centre for childhood ailments...while this is no mean achievement,... there is no denying the conclusion that integrated child development has not yet been achieved despite fifteen years of the programme."

In Bidar, the sustained Unicef support in the BIRD [Bidar Integrated Rural Development] project, in my view, has led to the development of the basic infrastructure which makes possible progress in these fields. Today the anganwadis exist; they open everyday; the anganwadi workers know about weighing children, about the different grades of malnutrition and the need for supplementary feeding. They realise the need to link up with the PHC. The food that is given to the children in Bidar is from the CARE supply; it consists of a mix of corn-soy cereal that is cooked and served. It is very different from what the local people are used to; yet such is their poverty that it is readily accepted. With CARE now deciding to withdraw from the ICDS programme, alternative arrangements will have to be made.

This may present an opportunity to redesign the ICDS on the basis of lessons learned, from a feeding programme to a child development programme. For example, the programme had been administered by government; but unless the mother's Clubs/societies, or mahila mandals [for which there is provision in the scheme] take it up in earnest, unless the community owns it; it may be difficult to make further progress in the desired direction. In Bidar, specifically, a link with the Mahila Samakhya would go a long way in improving the ICDS, and I wonder why such a link has not developed. The new approach for the ICDS should be the encouragement of mother's societies, which should then run the anganwadis; only when a mother's society takes interest should an anganwadi be sanctioned. This is a shift from the inputs approach to a process approach[12]. This has the advantage that eventually the community will take over the running of the anganwadi.

[12]Or, to use the language of the multi-donor evaluation, a shift from the services delivery approach to an empowerment one.

Again, can this be linked to the fair price shops under the PDS? In Andhra Pradesh, in some areas, the PDS shops supply ORS packets[13]. If CARE and others withdraw, then is it possible to think in terms of substituting this food with coarse cereals such as ragi supplied through the PDS to the mother's society which should take increasing responsibility for the anganwadi? How practical is it to think in terms of coarse cereals being supplied through the PDS? Are the operational problems involved of a more complex type than those this system is currently facing? And so on. If this were possible, there would be a certain amount of self-selection in this, as the better off would prefer to eat rice or wheat at home rather than ragi in the anganwadi. But all this would require deeper study and expertise, if the redesign exercise is to be taken up. Some of these issues were discussed in detail in the Nutrition Workshop in Delhi in April 18-19, and the recommendations of the group raised these questions as well. Unfortunately, they did not give the answers.

These problems are typical of government run programmes in such areas: the sanctioned posts are vacant; either those who were there have been transferred in due course of time, or people are reluctant to accept postings in such a district, and avail of as much leave as possible and so on, so that effectively there is a shortage of people. The ICDS in Bidar is thus short staffed; there is inadequate supervision and it faces all the problems that stem from this. This is in terms of project inputs. And so long as any government administers these programmes, such problems will be endemic to the system; such problems have, for example, beset the Rural Credit Delivery System that was sought to be strengthened by the World Bank working through NABARD.[14] So long as results are to be achieved by cooperation with government, this will remain an ongoing problem. But it raises the question: should Unicef take up issues of Bureaucratic Reform? Is this issue liked to the implementation of panchayati raj? Should Unicef get involved in this complicated matter, perhaps as a part of its advocacy activity? Will it enhance effectiveness? Or will it distract attention from the basic goals of the organisation, which, perhaps can best be achieved by carrying on as before?

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[13]This has been included as an action item in the National Action Plan for Nutrition, recently released.

[14] For details, see SSM Unit, Institute for Social and Economic Change, Bangalore, 1991: Strengthening the Rural Credit Delivery System, Final Report submitted to NABARD.

An evaluation of the ICDS in terms of project outcomes is more complex; and it is towards this objective that the ICDS must now move. But it does not negate the fact that those I met were working sincerely, in a situation of inadequate supervision and in this I see signs of hope. [Nutrition levels in Bidar are somewhat better than those of equally poor neighbouring districts like Gulbarga and Raichur. Could this be attributed to the BIRD project?] Such hope may not be misplaced because, with the revitalisation of the panchayati raj institutions in Karnataka, which may bring in the element of local concern and participation that has been missing till now, the local service delivery system may be expected to improve. I have been told that the success of the BIRD project lay in the fact that it elicited interest at the highest levels of the Karnataka government, with the Chief Minister visiting the project several times, and other ministers and senior officials following suit. Now, perhaps, whether these political heavyweights take note or not, I hope local participation will provide the needed thrust, not only to the ICDS, but to all the other development programmes of Bidar.

Thus the base for a major assault on these problems has been built over the years. Bidar is a very backward district by any criterion; and this foundation that has been built up is a necessary condition for the effective delivery of social services to the people, especially the poor in remote areas. Experience tells us that it is not sufficient. I do not know if a cost-benefit analysis of this project will give a positive result; yet the importance of what has been done must be noted. Perhaps a better way of putting this is to say, with the benefit of hindsight, that the original time frame within which the BIRD project was to meet its goals was set unrealistically if the goal was the actual delivery of basic social services in a backward district with primitive infrastructure; or, that this is what we learn as a lesson of experience. However, the effective delivery of child development services is now a real possibility as a result of the base built by the earlier efforts, especially if the panchayats begin to take it up seriously. The earlier top-down interest has to be matched now by a grass roots concern; and the immediate task is to facilitate that. Thus the efforts at training elected panchayat members, particularly women, is a step in the right direction; and I am happy to note that it has been taken by Unicef.

Nutrition

In the field of Nutrition the real problem is with children too young to go to the anganwadi. The ICDS today most conveniently reaches the three plus year old child, who can come to the anganwadi. The data from the National Nutrition Monitoring Board point out that the problem starts at the time of weaning a baby; it is from six months to two years that the problem of malnutrition manifests itself; and the anganwadis get kids who already have a problem; and not too much can be done about it with all the goodwill in the world. Here, as in the case of the environmental degradation, prevention is essential. If the ICDS is to be a child development programme, it can, with suitable modification, and community participation and control, meet this challenge. The point of contact for nutrition has to be the immunisation schedule: when babies are brought for the vaccination by their mothers, they must be weighed, and classified according to the standard norms in the growth charts; and the mothers then appropriately counselled, by the anganwadi worker and the mother's club members; when needed, they must be taken to the PHC where the doctor must spend time with them. All this is well known: I am only repeating what I have heard, because it makes sense to me.

And the magnitude of the task is daunting: in India, two out of three children are malnourished. Given that one person out of three is below the poverty line--which is defined in terms of an average intake of 2400 k cal per person per day--it implies that children in households that are not below the poverty line are suffering from moderate to severe malnutrition. The two data sets: poverty from the NSS and Nutrition from NNMB, need to be closely examined to see what can and cannot be fairly concluded from them, but that is another story.

This situation of unnecessary malnutrition is a completely intolerable one; a position reiterated in the Delhi workshop in mid April. What this implies is that, with the existing resources, a significant improvement in the nutritional status of children in India is possible, and that should be the goal. If mother's societies become effective in the ICDS, then it should be possible to detect incipient malnutrition among infants early enough to do something about it. This is also the point at which the problem of micro-nutrients deficiency: iodine, vitamin A etc can be taken up. The consequences of malnutrition in these are very serious, and in fighting Protein Energy Malnutrition in this vast country, it is

important not to forget other causes of malnutrition. [It is not my intention to suggest that it has been. This is being repeated only to stress the importance of fighting all kinds of malnutrition on a war footing.]

Malnutrition of this magnitude cannot be tolerated. Unicef has been an important advocate of this view in India, and had been involved in a great deal of both research and advocacy efforts. The best way of dealing with it is to concentrate on the child below two years of age. With India's level of income, malnutrition is about twice as large as it need be, going by world norms. Unicef's own studies from different parts of the world on the income-nutrition nexus bear this out. Thus, funds/resources cannot be considered a constraint to dealing with malnutrition; what is required is the will, and it is this that is now being pushed. If the National Action Plan for Nutrition can be implemented, with all the departments and agencies playing the part they are supposed to, then an important step forward will have been taken. But, as in the case of democracy, eternal vigilance is the price that has to be paid.

Health

The comprehensive Health Sector Programme, covering major problem diseases from diarrhoea to kala azar, complements this concern well. The Child Survival and Safe Motherhood programme, called CSSM, [and largely funded by SIDA till now] with its emphasis on care for the pregnant woman, ante-natal tetanus vaccines, immunisation, treatment of childhood diseases like diarrhoea through ORS therapy, etc. is the flip side of the coin to a proper ICDS. The CSSM is designed to meet the needs of the expectant mother, support her through pregnancy and delivery, and to advise, and provide, for baby care, immunisation and nutrition, along with the required micro-nutrients as well. Over the years, kits have been developed to test for iodine in salt, and this is an important contribution that must be noted, as it has led to the growth of a small industry in making these kits[15].

Immunisation is the point where contact with the young child has to be established if malnutrition is to be prevented; and it is

[15]The immunisation programme of Unicef has long, historical links with Indian industry, starting with support for setting up what is today Hindustan Antibiotics Ltd, in the public sector, in Pimpri, to a whole host of others, in the private sector, for the manufacture of vaccines and related items. This is an aspect that must be taken into account in the benefits of Unicef collaboration in any cost-benefit study.

here that field level efforts have to concentrate. If both CSSM and ICDS work well, there is reason for optimism; the question is a managerial one of making things work at the field level: capacity has to be built and utilized properly at all levels; but with particular emphasis, I feel, in the field at present. ANMs and others are being trained in the skills required, yet, constant monitoring and encouragement continue to be essential. Every ANM I met could tell me how to mix an ORS solution, yet when actually asked to demonstrate, some had difficulty in estimating how much water constitutes a litre. Unicef has made efforts by telling them to use the empty pack, and demonstrated that if it is filled five times, you get between 900 ml to 1000 odd ml; an acceptable range. This has simplified the problem to terms that can be easily understood, but the task of getting thousands of such ANMs to internalise this simple knowledge and use it routinely and effectively is not a simple one. Great efforts are being made; this I saw in the field and in the Unicef offices.

One aspect that I might mention is my surprise in not hearing anything about the controversies surrounding certain vaccines. I have heard debates about the effectiveness of both the BCG and the measles vaccine, with two clearly distinct, and contradictory positions being expressed. In Unicef, the programme as defined has been accepted and is being recommended to the States for implementation and it includes both BCG and the measles vaccine. Is this after an internal debate and agreement on this issue, after medical advice has been carefully considered? If not, I feel this is too important an area not to discuss and sort out the pros and cons; and as a non-medical person, I really do not know the implications of this debate. But those who discussed this programme with me did not refer to this controversy; and some of the non-medical officials involved in other programmes of Unicef did not even know of the controversy. Hence my assumption, in ignorance, about its importance and the need for a carefully considered position that is patiently explained to the medically ignorant who panic on the basis of newspaper accounts.[16]

The use of the measles vaccine as a marker for complete immunisation seems to be the only practical solution. In many of the villages I visited, there were problems with the immunisation

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[15]When I was working on this paper, there were reports in the newspapers about deaths due to polio/measles vaccination in Calcutta.

[16]I would neither be surprised, nor hurt, if this comment were taken with more than a pinch of [iodised] salt.

records of children that I saw. Even when the card was available, not all children were given the appropriate vaccine at the appropriate time; many had received some but not the others. In general, the DPT and polio vaccines seem to have been given to the children. It is after this that a kind of apathy seems to set in. In this situation, a mother who is careful enough to take the child for the last vaccine, and that too for a disease that is not perceived by them as "serious", has in all probability made sure that her child has been given all the proper inoculations. Anyway I can think of nothing else in this situation.

In the area of Health and Immunisation, the worst case I saw was Bidar. The doctor was in his PHC, but it was dirty and ill-kept. The room in which the medicines were stored was dusty. Yet, the register of medicines was maintained, care was being taken on the expiry date of medicines and so on. There was no problem about the stock of medicines.

The cold chain, I think, is facing some problems. This is somewhat distressing because this was a major element of the Technology Mission on Immunisation taken up in the mid 1980s. Clearly, the problem was not solved then. There is the by now perennial problem caused by power cuts, which are regular and frequent. The district doctor complained about the inadequate number of ILRs; the ice-packs for transportation of the vaccines seemed alright near Bidar, but probably was not in places not close to the district capital. There was a shortage of kit A; of steam sterilisers; overall the system needs to be strengthened. There is scope for improvement in this respect in other districts too. Clearly, this is something that the Health Departments of the State governments have to take up and achieve. What exactly is Unicef's responsibility here?

It is hard to imagine that this situation will change very much for the better until the demand for quality health services makes itself felt on the system. So long as it is a top down exercise, this is the way it may be expected to run. But if local NGOs and self government bodies take up this matter as their own, then positive change will indeed occur.

Water and Sanitation

It was in Ranchi district of Bihar that I was fortunate enough to see what had been achieved in Water and Sanitation, or Watsan. It is a strange experience to be invited by a family that one meets for the first time, to proudly see their new toilet. And this happened to me in house after house in several villages of the district. There were many kinds of toilets, to suit a range of budgets. [I saw an interesting video film, made by Unicef, on this]. The people had clearly understood the importance of sanitation; and the more important fact that sanitation alone is not sufficient to keep away diseases like diarrhoea. Villagers, who five years ago did not know what clean water was, were today showing me the washing platforms they had built in front of their houses, and explaining how the water drained away into an enclosed pit, so that, unlike in the past, the whole area was dry and clean, and mosquito free. They explained the link between clean water [from a handpump], clean toilets, and general cleanliness to me. They were aware of the options in the building of toilets, one to suit each purse. As one who had seen this area in 1984-85, I was astounded at the change that had taken place; and very happy to see that it seems to have taken root in the community.

In this regard, Muzzaffarpur, a part of North Bihar, is way behind Ranchi, but the potential for progress is equally clear, and one can expect solid results soon. Given the natural conditions in this part of the Gangetic plain, where the water table is low, and the area suffers from frequent flooding, the technology for watsan has to be different from that appropriate for Ranchi; but here too options exist, and are being diffused. For example, here the Tara pump is more appropriate, and it is this that people are learning to use. Waste disposal may be a little more difficult here, but this is known, and I hope, being efficiently dealt with.

In bringing about this transformation, the role of the voluntary agencies working with the people has been absolutely critical. This effort, complemented by that of some dynamic officers in the Public Health Engineering Department, and the unobtrusive but constant support of Unicef, together made this success possible. Each component is essential; together they seem to have been sufficient to begin change through what the local people call Jagruti: awakening or consciousness. In Bihar, the government seems paralysed, or caught up in totally different issues; little can be achieved in the secretariat in Patna; and, as

a result, many of the districts seem to be effectively autonomous. If the local officials wish to go ahead and do something, there is little or no interference. There is plenty of money from various schemes: in Ranchi district, the amount of money available from all the schemes of the government came to something like 70 crores of rupees. What is needed here is a dedicated cadre of workers, and ideas to pursue. If NGOs can provide the first, [with individuals from government departments chipping in] and Unicef the second, them positive changes should take place in Bihar in the near future. Especially as the recently elected government is talking in terms of health and education. Some of the schemes being implemented by Chief Minister Laloo Prasad seem to be very much in line with the priorities of Unicef; and, to my surprise, he has even been insisting on keeping the women in the picture right through. In the slum housing scheme, he insists on the house being registered in the name of the husband and wife, and attaches a photograph to the ownership papers. Another conditionality of house allotment is that all the children be sent to school. This is indeed remarkably positive, and should provide Unicef with a supportive environment in which to work in the near future in this most difficult of Indian states.

The reason for hope lies in the fact that the community has begun to "own" the programme; they have enough knowledge about it- for example, in each village I visited, they had developed the capability to repair the handpump; I was happy that women had taken to this task. The cynic could, of course, say, and even with some justification, that the men had once again passed on the work to the women. I am not sure that this would be true, from what I saw, but even if it were, the ability to repair a handpump is an empowering skill, and it is the worse for men if they do not have it.

The surprising thing to me is that it took so long for the Drinking Water Programme to become Watsan. Unicef has a long history in the drinking water business, and was at one time known as the supplier of rigs.[17] But this did not then extend to sanitation, and I am puzzled about why? Even the Rajiv Gandhi Drinking Water Technology Mission did not link up with Sanitation; again I wonder why? It seems to be in the late 1980s and the early 1990's that this link has been made, and incorporated into the mid-

[17] In fact, Unicef involvement was important in both encouraging R&D, as in the public sector Richardson & Cruddas [1972] Ltd; and in developing production capacity for both rigs and handpumps in the country. This is a positive linkage that must be noted in any cost/benefit study.

decade goals. And in these few years, on many fronts, the Sanitation side of watsan has made rapid progress, in both technology development and its diffusion. But this also raises the question: as the sanitation programme grows in scale and spread, how long will it be, and under what conditions, for watsan to be seen as a partial aspect of a programme that includes sewage treatment and disposal? In particular, in urban areas? Has the time to prepare for this shift arrived? What is Unicef's role in preparing for these foreseeable future problems?

Once again, success can be attributed to the wholehearted cooperation that the Watsan programme received from the community. But it is cooperation that has been earned with hard work. The VCD, or village contact drive, in which local people, after training in subjects like immunisation, ORS use etc, went into the villages to talk to the people, especially the women, has been an important contributor to success. And in this effort, any opportunity that appears is used. I was present in a meeting of sahiyoginis of Mahila Samakhya in Ranchi when the Assistant Engineer of the Public Health Engineering Department began to tell them about the importance of sanitation. They listened; at that time they could not spare the time for an Orientation course, but they agreed to meet a few weeks later for a full one week course which Unicef support makes possible. Thus collaboration between officials, voluntary agencies and Unicef can work wonders.

Perhaps it is the CBCS Approach- in Ranch it was CDD-Watsan--that is responsible. No one could tell me why the link was not made earlier; and I leave the matter at that.

Communication/Training/Empowerment

An interesting initiative that has recently been supported by Unicef is the Gramsat Programme. In the last year, elections to the gram panchayats were held in Karnataka. It is well known that 30% of the seats in these bodies are reserved for women: in these elections, 47% of the elected representatives were women. In order to make them aware of their rights and duties-an enormous task-the Department of Women and Child Development in Karnataka, in line with the State Policy on Women, undertook the responsibility of suitable training. One dimension of this exercise was a tie up with the Indian Space Research Organisation-ISRO-in which ISRO provided a television and telephonic connection between Bangalore with its ground station and the headquarters of each of the 20 districts via

transponders in its satellite Insat 2C. This was to be incorporated into a training programme in which this technological opportunity would be used to beam training films to the elected representatives in the districts. They would then be given an opportunity to ask questions on dedicated long distance phone lines of a Panel of Experts that would be waiting for them in Bangalore. The selected experts were people who had direct personal experience of some aspect of panchayati raj, such as T.R.Satish Chandran, who had been the Chief Secretary of Karnataka when the legislation was first passed in the mid 1980s; P.R.Nayak, who had worked in government for a long time and retired as Chairman of NABARD; and several others, including some from the voluntary sector. This interaction, it was felt, would not only clarify the doubts these women members of the gram panchayats had, it would also help them to develop the required self confidence to face up to their new responsibilities.

The preparation that preceded this high-tech exercise is, in my view, the most important factor behind the success of this gramsat experiment. Several months before the telecasts were due, representatives of the women elected to the gram panchayats were contacted; some, from each of the districts were brought together in Bangalore for a week, in which they were given some basic inputs about the panchayati raj system by SEARCH, a voluntary agency specialising in training, and which was given help and support in developing suitable training material. Thus, links were built across a wide variety of groups that were interested both in making the panchayati raj system work and in women's empowerment: these linkages were important in generating wide interest and in ensuring that a broad cross section of issues got discussed. In these meetings, several professionals, political scientists, film makers, management specialists etc were also brought together to interact with the local level legislators. Lessons were learned from the experience; questions for further work were spelt out; and from all this the design of what was to be broadcast was developed. A great deal of hard and creative work went into the final gramsat telecast training experiment. Without this background, it would have been no more than another high tech wonder that did not touch the lives of those who were meant to benefit from the exercise.

In making this possible, Unicef played a crucial role, not only providing the critical minimum of funds, but also a great deal of encouragement and moral support. Unicef's help in the preparation of an excellent handbook on the rights and duties of gram panchayats and their members-a task ably undertaken by the

Department of Women and Child Development-has been deeply appreciated. Unicef made it possible to print copies that have been widely circulated. It is Unicef that made it possible to enlist the services of a well known film maker to make the films that were to be transmitted as part of the training programme. It was Unicef help that made possible the participation of various kinds of professionals and institutions, from the Administrative Training Institute to Search, an NGO, in the entire exercise. And it is this professional input that gave the exercise its value: if one compares these inputs with those from other Departments that did not work as closely with Unicef, the quality difference becomes very clear. And very welcome.

The programme has been appreciated, not only by the elected representatives of the gram panchayats who benefitted from the programme, but by a whole range of others interested in the success of the Panchayati Raj system that in now coming into operation all over the country on the basis of the 73rd Constitutional Amendment. Other states have shown interest in similar programmes; a great deal of software has been built up that can be used again, perhaps with some modification; and experience has been gained in working with a new, exiting, and powerful medium. Unicef's role in this cannot be equated to its small financial contribution: the cooperation of others made it possible to leverage a great deal on the initial Unicef contribution. Even without including the benefits to ISRO in the form of testing out its technology, the benefits of this initiative in building up capacities and confidence are resoundingly positive. And what is even nicer is the fact that there is clearly much more to be done; and here too Unicef has an important role to play in ensuring that the work started continues, in Karnataka and all the other states as well.

DWCRA

The other programme I saw was DWCRA: The Development of Women and Children in Rural Areas. This was originally, in 1982 when it was launched, seen as a sub-component of the IRDP: the Integrated Rural Development Programme, designed to give the poor assets which would make it possible for them to earn a living in rural areas. The basic idea has been borrowed from the experience of the Grameen Bank in Bangladesh, which has had great success in proving that women not only make good use of loans, but they always repay them, if one moved away from the collateral system of lending to one of group lending. In DWCRA, groups of women are formed, and then they

work together in some income generating activity. In the Grameen Bank model as it operates in Bangladesh, women are encouraged to form themselves into groups of five, on the basis of some common bond; and each member acts as a surety for the other. Only when the first to get a loan repays it, does the next woman in the group qualify for a loan. And so on. Over time, in a poor society with little access to finance, the members of the group realise the importance, not of the individual and specific loan, but of the system of recycling of credit. They realise that repayment is part of the cycle of credit and so repayment is made promptly to keep the system going. There are no subsidies: not only is normal interest charged, but a small premium also goes into an insurance fund. Over the years the system has gained acceptance, and even been the "model" for other programmes like that of credit linked training for self-employment, supported [in Bangladesh] by the Asian Development Bank.

In DWCRA, on the contrary, women are formed into groups somehow. Each group gets a fixed amount-Rs 15000- as a contribution to a revolving fund, which can be used as working capital; if further amounts of money are needed, it is given as loans by banks. The marketing side is supposed to be looked after in the appraisal process. If there is any common bond in forming groups, it is to get the contribution to the fund: on paper the women have formed a group, but in reality each functions as an individual, and there does not seem to be a credit cycle. Not surprisingly, marketing issues are the concern of each individual woman.

Little seems to have been learned from the experience of Bidar in the credit side of the BIRD project. As a part of that project, and much before DWCRA came to Bidar, efforts were made to form mahila mandals that also had a savings and loan dimension. As each mandal was formed, it was given a core/seed grant of Rs 5000 that was to be operated by a saving bank account with the President of the mandal and a designated representative of the project as co-signatories. I understand that several hundred such mahila mandals were formed. When the time came to wind up the project, and these mandals were studied, it was found that few of them had utilised the seed grant given: it had been lying unutilized in the banks, and together with the accrued interest, the amount available was Rs Ten lakhs. What was to be done with this money was then the big question.

At this point, in 1986, the Working Women's Forum of Madras entered the picture, and eventually agreed to set up a Bidar branch of the WWF if this sum of ten lakhs of rupees was given to it as a corpus fund and it enjoyed operational autonomy. This was indeed done: and I understand that it is still functioning today in Bidar, and that it has grown in the intervening years.

It was after this that DWCRA came to Bidar in 1991: and the design does not seem to have been influenced in any way by this experience with credit for women that Bidar had. This is not surprising: DWCRA is a centrally sponsored scheme and in these the designs are decided upon in Delhi--this is a criticism that has been powerfully and frequently made in the Indian literature. One reason for this could lie in the fact that all these are seen as welfare or poverty alleviation programmes and not as financial schemes whose function is to provide the required working capital for business activities in a way that is consistent with the local economy and customs.

Thus issues like the rate of interest to be charged, or the way in which money is collected and saved and recycled, are often not thought out beforehand, and rarely in consultation with bankers. And above all, there is a fixed view that some form of subsidy is essential because the target group is poor women. The possibility that they would be willing to pay reasonable interest, and enough to cover the cost of funds, if the quality of credit is good, is rarely considered[18]. It is forgotten that the much maligned money lender charges usurious rates of interest [and gets away with it] mainly because there is no one else who can match him in terms of the quality of credit: an adequate amount for the purpose in hand, at the time it is required, with a minimum of complex paperwork. There is something to be learned from the moneylender! This aspect of the credit issue must be covered if such programmes are to have a chance of success.

DWCRA seems to be the one programme that I saw that seems to me to have gone wrong. Without claiming that it is a failure, or that there are no cases of success within the larger programme, for there may be, it appears to me that in general the group is something of a camouflage for what are essentially individual activities. The marketing side leaves much to be desired: in the few cases where this has not been a problem, it is because of

[18] These issues have been discussed in SSM Unit, op cit.

rather special circumstances: the District Administration buying up the file boards made by these groups, at a slightly higher price than that prevailing in the open market. The products made seem to be for exclusive local consumption, like lac bangles in Muzzaffarpur; there is little scope for either expansion or for growth through quality betterment. I doubt the desire to expand and grow exists either.

And two, and more important, I see nothing in the programme that justifies the "C" in the name: there seems to be not only nothing for children in it; children seem incompatible with what is supposed to be a women's programme. There is no provision for creches, or any kind of child care. It is an IRDP reserved for women, and no more. It is hard for me to understand why it is being expanded at a rapid rate: I conclude that this is purely political.

At the same time, I heard about savings and thrift societies for women, emerging as a result of efforts using the CBCS approach in West Champaran district of Bihar, where the main industry, I was told, is kidnapping. I did not see these for myself, and so will not comment further. But those who spoke to me said it was quite different from, and had nothing to do with, DWCRA. Thus, I wonder if that experience can be used in this context in designing that will work better.

This is one programme that could be phased out in its present form, if what I saw is at all typical. Of course, the political feasibility of such a suggestion is another thing altogether. But it might be worth noting that a strategic withdrawal from DWCRA does not mean that an important group of poor people, women, will be left high and dry so far as their credit needs are concerned. The NABARD has been experimenting with what they call self- help groups--SHGs--and a majority of SHGs are women's groups. Such SHGs are given credit through the formal banking system, at rates of interests comparable to those prevailing in the market for deposits--12%--and it has been reported that these groups are becoming increasingly popular. If this matter is left to the banking system, with Nabard to provide the necessary credit support, then it may be possible, if not to withdraw from DWCRA, then at least to direct future expansion to the SHGs: the government and Unicef can keep away. Or Unicef can move on to working with the SHGs. So this is not necessarily a utopian suggestion.

SECTION - III

DISCUSSION ON THE TERMS OF REFERENCE

III DISCUSSION ON THE TERMS OF REFERENCE

III. A. Strengthening service delivery mechanisms at different levels: Central govt; State govt; District administration, NGOs and community level

What UNICEF provides are:

1] technical inputs, including technology demonstration and pilot plants, as in the case of ferroconcrete platforms for toilets, in North Bihar, to give only one example;

2] management inputs, especially strategic planning, setting of "doable" goals and objectives, and organisational design and development;

3] training to the concerned staff, including the preparation of suitable material to help them meet the set objectives and goals; and,

4] help in disseminating information in various ways across all concerned to facilitate the setting of realistic goals, deciding on priorities, and achievement of goals by encouraging and strengthening linkages. This can only succeed at the local level. The official name of this is clear: Community Based Convergent Services, or CBCS. The way in which women's groups have gone into savings and thrift in West Champaran district [which I know about by hearsay] is a case in point. I saw the CBCS approach in Ranchi, in the Watsan programme.

In all these activities, while Unicef has a clear field presence, it does not work directly; it works through the local bodies, government and private. I saw basically the work with government bodies so far, and little of its work with NGOs[19]. The importance of its local presence for improving the functioning of the delivery systems must not be underemphasised. The service delivery system in ICDS, for example, has been established, and strengthened, by Unicef cooperation, from the level of the anganwadi worker to the National Institute for Public Cooperation and Child Development. The basic infrastructure is in place, even in backward Bidar. This is a big contribution.

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[19]NGOs have contributed to the process of strengthening service delivery systems, for example in Ranchi in the watsan work. In the process, the NGOs themselves have gained experience,eg Search in Bangalore after the Gramsat programme.

Government officials were happy to work with Unicef. In many cases the support of Unicef makes all the difference between a project being taken up or dropped; and the little money that Unicef gives provides those in government with a flexibility that they could not get in any other way. Whether or not any specific project is a success or not, several government officials appreciated the flexibility that this gave them. It has helped them to experiment, and based on results, put various programmes on to the government agenda.

The ICDS is a good example; its rapid expansion has been with funds that the State governments have provided themselves; in fact some of the problems being faced today are those caused by such a rapid growth in this programme. The honorarium given to the anganwadi worker is a pittance: there is really no reason for keeping it at such a low level except for the fact that even a rupee hike makes a big dent in the government [of India] budget, given the size of the programme; and at this time, with no lobby for anganwadi workers, it remains frozen. But with this kind of remuneration, is it not unreasonable to expect so much from the anganwadi worker?[20]. Both the problem and the solution seem to be well known to all who discussed this with me, yet it does not seem possible to do anything about the ground situation. Unicef cannot wash its hands off the larger programme; and it has little influence in getting the programme to work well on a larger scale within the system. Thus, it is caught in a cleft stick.

In the field of primary education, one bottleneck is the timely supply of textbooks: Unicef has been helping by getting them printed and passing them on. But in the long run this has to be handled by the concerned government department, which has complex procedures and consequent delays. Those within the Education department of the government feel that it is just not realistic to expect textbooks to be ready at the beginning of the school year! This is a problem of the government bureaucracy, and it is not easy to solve. Unicef works with government in the spirit of friendly cooperation, and its officials put up patiently with the snags and snarls of normal and routine delays; there is no criticism and no loss of temper. Thus, even where Unicef has put in the money upfront, there is a tendency to take this friendly organisation for

[20] Karnataka is trying to set up a welfare fund for the anganwadi workers, modifying the scheme that exists in Kerala. But the amounts involved are so pitifully small that one wonders whether it is worth all the administrative headaches it will involve.

granted. The point is that Unicef supplying textbooks may solve the problem for a year or two, not in the medium term. It is not clear what can be done about this type of problem, which crops up everywhere in government programmes. This is something Unicef will have to solve in the coming years. That solution probably lies outside the bureaucracy: this will have to be carefully considered, and even more carefully tackled.

What is required, at present, it seems to me, is a dogged patience. The child has a right to be looked after; systems to do so are slowly being put in place. Decentralised self government is slowly becoming a reality, and much hope is being pinned on it- perhaps too much. There are many problems; there is the occasional lapse of political will; there are the problems of bureaucracy; all these are known, and it requires endless patience to cope with them and make an appreciable dent in it. Great effort has been put in, in the last so many years. Unicef cannot afford to stop now, when the immediate future seems to hold promise that the work of the past may be beginning to yield tangible fruit. It is not so much new ideas that are needed as dogged persistence in continuing with the work already begun, so that results begin to be seen. Further strengthening of the service delivery mechanisms depends upon the panchayati raj institutions developing the capacity to do what is required. Unicef has begun work here; it must continue if the fruits of these efforts are to become available.In my own opinion, in the longer term context, this is probably the most important thing that Unicef is doing today.

In brief, Unicef support to strengthening service delivery mechanisms, at all levels, has been significant. It has been more than a mere catalyst. But the time seems to have come to think in other terms than service delivery.

III.B. Capacity Building

Investment in building the capacity of people and institutions has been perhaps the most basic of Unicef's objectives. The idea is simple: if people have the skills and institutions that are needed, then people become empowered and can take care of their own needs. The multi-donor evaluation of Unicef spoke of three models, of service delivery, of capacity building and of empowerment. In India at least, the first is not critical now, as the service delivery mechanism, between the government and NGOs, should be able to cope, even if not at a level of high efficiency. Capacity building and

empowerment are more critical, but I am not sure if they are alternative models: the two are inter-related in complex ways. Empowerment sometimes follows capacity. Watsan is an example: women learning to repair handpumps has done wonders for jagruti, the first step in empowerment. But unless the demands for new skills and capacities that come from empowerment are responded to, the whole thing will come to a standstill. And the creation of such capacities will in turn strengthen empowerment: what we have here is a complex process that has to be carefully nurtured.

Investment towards this goal is necessarily of a long term nature; it take time and effort before results can be seen. In watsan, remarkable results have been achieved in south Bihar. But it is also true that this is a region where the government presence is weak. It is also an area where missionaries and NGOs having been working for years. I wonder whether these factors have been contributing factors to progress and development? But it [the investment in efforts] provides the foundation on which development can take place. This shows up repeatedly in the programmes I have seen:

In primary education in Amravti, in which the community, led by the primary school teachers, has taken up this task in right earnest.

In the gramsat training programme, where all kinds of professional talents have been mobilised under the leadership of the Department of Women and Child Development, working in positive partnership in what was perceived as an important cause. Here the support-or at least the lack of active hostility-was an important factor in achieving results. Perhaps the system did not realise what was being done!

In health education and infrastructure, the CSSM programme has led to a great deal of awareness on what are the important factors in promoting the health status of women and children. But there are major problems to be tackled at the field level, from personnel to cold chain systems. The awareness has to be translated to systems, and this task has now to be pursued.

In advocacy: for example the material prepared to explain existing laws and the special provisions pertaining to women and children, in Kannada, that I saw. No other such material is available; these laws are generally honoured in the breech; and if

widely used, these booklets will contribute to increasing awareness in the people at the local levels, without which no progress may be expected. But it must also be noted that this material cannot be used without facilitators, for self-study; therefore some form of continual training is essential. It must also be noted that this by itself is not enough: CBCS is essential, and has to be actively fostered and nurtured. Such capacity has to be mobilised and made available to local communities: and here Unicef has a great deal to do still.

What is provided are 1] ideas, 2] management system support, 3] training, 4] suitable development of materials and their dissemination. The skills of the staff are thus upgraded and this is a long term benefit to society that government representatives constantly refer to. I cannot say much about institutional capacity building[21]. Government works in an extremely bureaucratic way, and capacity gets mixed up with a number of things which are difficult to separate. If the capacity painstakingly built in people is not used in the appropriate area because of the government's policy of transfers, then of what effective use is the new, but unused, capacity? This happens repeatedly. There are also other factors: for example, anganwadi workers who were women from the local communities, have had their skills upgraded; but today they see themselves as government employees, and the Times of India [of 17 April 95] has a report about a strike they are planning. The original idea of an anganwadi worker as a "successful" mother from the community was something quite different. I doubt the system can be very efficient if they become government servants, but that is what seems to have happened. The solution lies, not in government stepping in, but in encouraging mother's clubs, and in letting the panchayats cope with, and solve, the problem in their own ways. In making this possible, Unicef can play both an advocacy and an enabling role via village contact drives, in the setting up and then providing initial support for running the mother's societies in a revamped ICDS. In a way, this amounts to transferring experience gained in CBCS from Watsan to ICDS.

In brief, Unicef has made a great contribution to capacity building in India over the years; but this enhanced capacity has not always been effectively made use of as hoped; and much more critical support is needed if the fruits of past efforts are to be

[21] From an entirely different point of view, the fact that demand created by Unicef programmes has led to the growth of industry in India is an aspect of capacity building that must be recognised and acknowledged, for example, firms making rigs, handpumps, testing kits etc.

realised in a society of genuinely empowered people, especially women.

III.C.Disparity Reduction [by gender, socio-economic groups, regions]

A little introspection on what is meant by Disparity Reduction may be in order. The reference, I take it, is not to absolute disparities: we are born with them, and nothing can, or even, need, be done about it. The world would be an awfully dull place if all of us were Beethovens. I take it that disparity reduction, as we are concerned with it, refers to two things: One, a disparity in access to essential goods and services, for whatever reason, such as food or health or education, with some group not having the desired minimum level of access; Two, in a world of constant technological flux, an increasing access to the benefits of such technological progress, an expansion in opportunities, so that the quality of life improves as a result: say by immunisation and thus by being freed from avoidable disease. The reference is to the floor: every citizen must thus benefit from disparity reduction in this sense. It is not our concern that some in society may have the chance to benefit from multiple sources, or that they have enough money to forget about whether government provides them with such benefits. To put it differently, we are concerned with raising the floor value and thus the average access to such services in the population, not with imposing ceilings on consumption by a small section of the rich. If we can deal with the floor and increase the average, even if the disparity in the sense of the range or the variation across the population goes up, it is nothing to worry about. What follows has been considered in this sense of the phrase Disparity Reduction.

The gramsat experiment is an innovative one with tremendous potential for dealing with gender discrimination. There is a Constitutional provision reserving 30% of the seats in local bodies-the gram panchayats, the taluk panchayats, and the zilla panchayats- for women. In the elections for gram panchayats completed about a year ago in Karnataka, almost 47% of the seats went to women: about 36,000 of them. Most of them are entering the male dominated political arena for the first time.

All of them faced problems as women in a traditional patriarchal society. The husbands of many expected them to act and

vote in a certain way. The sitting fee of Rs 20 for panchayat meetings was often collected by the menfolk. And so on. The Unicef supported exercise gave these women an opportunity to meet and interact with each other. They learned from this process that the constraints that each had thought of as her personal problem was, in reality, a systemic social one. They learned that they shared similar concerns, across districts and parties. They learned of their responsibilities as elected representatives; of the responsibilities of the bureaucracy in implementing decisions; of their rights and privileges and responsibilities. They learned that they could bring their concerns into the agenda of the panchayats: for example, the ways of dealing with the problems related to liquor. The meetings served the important purpose of boosting their confidence; it also taught them the need for restraint and responsibility.

All this was captured on video film by a group of professionals whose participation was made possible by Unicef support and funds. These films were edited, and when the chance of using the ISRO satellite came along, they served a useful function in enabling many more women to share the experiences of those who participated in the Workshops. They got the opportunity of getting their doubts clarified by experts. The result is a better equipped representative, one capable of presenting, and defending, her views. Given that such women had no voice earlier in these bodies, this experience has begun the process of correcting an unfortunate historical imbalance; or discrimination; or denial of rights. By no means is this a solution to the most serious problems of rural Indian society. But it is an important start in the process of correcting a disparity; and it does this by helping the women to speak for themselves. A great deal more will be needed for this to become routine reality. Backlashes can be expected; and will have to be dealt with. Thus, what has been started has to be sustained and a great deal of work has to be done, including ways of coping with the inevitable backlashes as various groups fight to keep their traditional power intact. For Unicef, devising a strategy to deal with the expected backlash is, I think, an urgent matter.

The strategy adopted by Unicef in connection with addressing issues of disparities, if I may say so, is an inspired one. Unicef speaks of Universal Education, of Universal Immunisation and so on. These are all areas of great gender and social disparity in India. Other agencies, with similar concerns and goals, have spoken of

meeting basic needs, of reducing inequality and discrimination and targeting benefits to specified groups, and thus split society into camps of haves and have nots on some criterion. Inevitably, this led to groups, to fragmentation and to opposition. By making its concerns Universal, Unicef has got everyone working together: for all can agree that every child must get education, or that every child must benefit from immunisation. This is not a matter that permits of exceptions, and political acceptance of these goals becomes easy; I think this has been the case in India. Having made Universal Immunisation the goal, it is a subsidiary, logical and necessary activity to seek out those children who do not have ready access to the needed medical facilities on a priority basis; again, no one will feel threatened by this. By focusing on the positive goal, on what must be done, and, equally importantly, by not talking of the negative need to exclude specific groups-and groups that wield power-, political space for positive action has been created in a society where it is so easy to divide a community into many fragments. It becomes possible, without confrontation, to seek to help rural schools where the required facilities do not exist. I think to a large extent this factor is behind the positive developments in Amravati.

But the consciousness of this can be extended. The mid-decade goals do not differentiate targets in gender terms. Perhaps, when they were decided upon, these goals represented a great step forward. Today, however, it would be desirable to specify them in gender terms as well within Unicef. Debate is needed on how this is to be done; agreement among the staff will be critical to success. I could suggest indicators like a reduction in the female below five infant mortality rate as a specific sub-goal; a reduction in the below two female malnutrition; and so on. One could insist that there be no difference by gender in the immunisation programme; that female literacy be the target rather than overall literacy. And so on. In a longer run perspective, say by the Census of 2011, there should be clear improvement in the sex ratio; with emphasis on those states where it is poor now. The importance of such gender sensitivity within Unicef has been stressed in another report prepared as part of the ongoing Situation Analysis.[22]

[22] The Report prepared by Srilata Batliwala, Renuka Misra and Vimla Ramachandran, which I understand is now being implemented.

I do not have enough material to discuss disparity reduction in terms of regions, and let alone Unicef's role in this. But I can make a passing comment for what it is worth. In Bihar, I noted that the process of meeting the mid-decade goals required work in, if I remember correctly, 23 districts. A large number of very poor districts, were left over for later intervention; even those where some local body was prepared to support and carry on work after Unicef came in with initial support. When I visited some of the areas in the Sone Command Agency jurisdiction, I was told that they would like Unicef to help them, particularly in mobilising women and in helping them devise suitable schemes for them. There was no response from Unicef, I was told. And this is because the mid-decade goals could be met without going to these districts. Now, this is not to say that the goals are unrealistic; or that Unicef has unlimited manpower-or womanpower, for that matter-or that Unicef is working in "undeserving' districts. But it does lead to negative feelings, to a sense of exclusion. How can Unicef respond to such requests/felt needs? This is something that could be discussed internally as it will raise a number of issues on priorities and choices that could be important. I mention it only for that purpose.

III.D. Contributions to institutional arrangements for poverty alleviation/empowerment of beneficiary groups

The UNICEF insistence on working at the local level with people is important. In a society where remote bureaucrats take a number of decisions and where centrally sponsored schemes rule the roost, this insistence on working locally, [and now with panchayats], is desirable because it strengthens mechanisms of local level accountability[23]. By empowering women who have been elected to gram panchayats, this process is considerably strengthened. But it is not the end: handholding support will be needed for quite a while.

One point that may be worth noting is the way Unicef assistance dovetails into the State government's finances. Normally, social sector funding comes to the State, apart from what it puts aside in its own budget [in recent years, exceedingly small

[23]In Karnataka, one more opportunity to make panchayats work has opened up, after the elections of early 1995. The State government has set up an Expert Committee, headed by Dr K.S.Krishnaswamy, and with such other eminent persons as Mr S.S.Meenakshisundaram and Ms Srilata Batliwala as members, to recommend changes that will help empower local communities and do this in an institutional manner, not susceptible to change with the changing political fortunes of parties. It is to be hoped that this will have positive effects: for Unicef it is another opportunity to push its agenda.

amounts], in the form of Plan transfers, in accordance with the Gadgil, or modified Gadgil, formula. In earlier years, once a State's Plan had been approved, it was really up to the Government Of India to find funds for it, from domestic or foreign sources, and to the State it did not matter which. This money was then given as 30% grant and 70% loan, at some rate of interest that varied from time to time, but is now around 12%. This was so even if the money came to the Government Of India as a grant from some foreign source, or even if it was a high interest commercial loan by the Centre. The exchange rate fluctuation risk was borne by the Government of India.

It is important to point out that, in this scheme of things, foreign funds did not come as an additionality to the State. That is, they did not mean an addition of a new activity to those that had been agreed upon in the Five year Plan and which the Government Of India was bound to somehow finance. The finances were really the concern of the Government Of India alone. The State governments' had no particular interest in directly negotiating foreign loans; there have even been cases where State governments have refused specific offers of assistance as they did not care to accept the conditionalities involved, while the Government Of India was anxious to take these loans and put what pressure it could on the state government to accept the conditionalities. This led to a bargaining situation between the Government Of India and the State Governments, in which things did not always go the way of the GOI.

This system has been undergoing changes, and what applies to bilateral and multilateral assistance does not seem to apply to Unicef, or perhaps to the UN system [?]. Unicef money, based on a mutually approved Master Plan of Operations is given through the Field offices, of which there are ten at present, in rupees, to the concerned departments for use on mutually approved projects. For the State governments, this is a boon, as this money does not become a loan to be repaid to the GOI. Money from bilateral or multilateral sources, like the World Bank, on the other hand, are loans to be repaid with interest. In some of the bilateral projects, the donor country often brings in its own consultants in a number of subjects; in a country like India where there is a great deal of expertise available, this has often been an irritant, as these consultants are paid expatriate rates out of project funds which the State government has to repay with interest. The State government does not necessarily object to the expatriate consultant, but to the payment of expatriate rates, as it can get

consultants of similar experience for local rates, and resents being pressured in this way. Such problems do not arise in the case of Unicef grants.

This system of fiscal transfers is undergoing further change, with the GOI now agreeing to let State governments negotiate loans directly, and giving a counter guarantee when needed, if the States took on the foreign exchange risk. But this will in no way affect the Unicef funding, if the current practice continues.

The implication: for the State governments, Unicef will be a preferred source to other foreign sources of finance for social sector projects[24]. This should be a relevant criterion for donor nations deciding how best to use their limited funds in India.

Is poverty alleviation a primary objective of Unicef's work? In the literature that I have seen, Unicef's mandate seems to be the wellbeing of children; and to ensure this its activities have grown in an integrated fashion. From children to their mothers; to women; to immunisation and nutrition and to families; to women's education; to water, sanitation and credit; to issues of gender; and so on. Of course, if all this is effectively done, then there must be a positive impact on poverty, but for Unicef I would expect that to be a byproduct, albeit a desirable one, but a byproduct nevertheless. The multi-donor evaluation of January 1993 does not even refer to poverty alleviation in its extensive discussion of Unicef's work. How can the question of impact on poverty alleviation then be suddenly asked of Unicef?

It must also be noted that while one third of the population is below the poverty line, two thirds of the children are malnourished; or, children in households that are not below the poverty line are malnourished as well. Thus, eradication of malnourishment seems to be more important than the eradication of poverty; for even after poverty alleviation malnutrition may remain. It is a sobering realisation: even if poverty is alleviated, it does not necessarily mean that Unicef's basic goals are met. Therefore it is better to attack the problems of children directly, rather than through the indirect route of poverty alleviation.

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[24]There is of course the question of further devolution from the State to the various panchayats. The mechanism for this is the State Finance Commission; there is no assurance that the states will in turn share their resources with local levels without attaching strings. The battle is therefore not over yet.

To that extent, my comment remains: in terms of what goes into the quality of life, especially of children and women, as analyzed in the UNDP's Human Development Reports, Unicef is working in priority areas. Without improvement in these areas, poverty [except in some statistical sense] cannot be reduced. Mere reduction in poverty does not mean these problems will be automatically solved as the sad reality in the case of nutrition shows. The experience of Kerala tells us that improvement in these indices does not mean that poverty will be automatically eliminated[25]. But it is not clear what more is needed; and whether that which is needed is in the mandate of Unicef. It seems that me that what is important is that Unicef keep on at what it is doing; there is enough work for our lifetimes.

[25]It is true that poverty figures in kerala are lower than the country wide average; but the unemployment rate, specially the educated unemployment rat, is much higher. The nature of the problem is a little different.

CONCLUSIONS

My conclusion, for anyone who has read the sections above, is simple: Unicef 's assistance to India's social sector programmes has been critical, and should not to be measured in terms of its monetary disbursement. Unicef money has succeeded in leveraging large amounts into social sector programmes and that would be considered success enough. But apart from that Unicef has played an important part in keeping the social sector on the government's agenda. It has played an important role in helping define priorities and in setting up management systems for implementing these chosen goals. Unicef has played an important role in diffusing technology: at the level of the user, as in the provision of rigs, handpumps, and in training local people, especially women, in maintaining them; at the level of industry, by creating demands, and supporting local initiatives of industry to meet those demands by setting up plants, as in handpumps and water testing and iodine testing kits. It has taken a lead in encouraging participation of the poorer groups in decision making, as in the village committees for sanitation. It has encouraged empowerment of women in sensitive areas, as in the gramsat programme for women elected to panchayats in Karnataka, now being extended elsewhere. It has taken successful experiments from one place to another, and encouraged cross fertilisation of ideas. It has had patience in dealing with development issues. It has moved to a strategy of encouraging and promoting the empowerment of women as a necessary condition for development to occur, without neglecting essential issues like nutrition and immunisation and so on. If confidence and capacity building can be seen as providing the foundation on which sustained development can take place, then Unicef has contributed very positively, if indirectly, to what matters in the process of poverty alleviation, disparity reduction and institution building. I conclude that all this makes it imperative for Unicef to intensify its efforts in the coming years: we see hopes of success today, and this is no time to hesitate or look back.