

Spatial and Social Inequalities in Human Development: India in the Global Context

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1. Introduction

The vision of India emerging as a Giant in the global economic scene seems to dominate the contemporary discussion on its growth performance, leading to coinage of phrases like "amazing India" and metamorphosis of a "slumbering elephant" etc. The development scenario is viewed optimistically in the global context not only in terms of the pace of its growth but also because of its capacity to stand out in periods of global economic crisis. The country's seven and a half per cent growth performance during the Tenth and Eleventh Plan period against the projected scenario of 9 per cent growth, particularly its deceleration in 2011-12, has not dented this optimism. In the context of growth in employment, too, the economy has done reasonably well, allaying fears of jobless growth, the key concern in the late 1990s. There seems to be, however, a shared concern that the country has not been successful in transforming "its growth into development", the problem manifesting most significantly in serious regional imbalances, rural urban disparities and inequalities across social and religious groups. It would be important to probe into these questions.

The present paper begins with a global overview, analyzing the pattern of the loss in human development in different countries, when computing the inequality adjusted indices, as proposed by UNDP (2010), by grouping the countries into three development categories. A similar analysis is attempted by taking all the states of India as the units of analysis. This is done in the second section which follows the present introductory section. The next section looks at the trend of inequalities in socio-economic indicators, primarily in terms of per capita State Domestic Product, consumption expenditure and indicators pertaining to education, health and access to civic amenities, based on the latest statistics at state level collected from national sources. Inequality across socio-religious groups and gender have been analysed in the fourth section. The final section gives a summary of findings and provides a perspective for its future development in the context of inequities in the socio-economic system.

2. Inequality in Dimensions of Human Development in Global Context

A major anxiety in the context of the targets set through Millennium Development Goals (MDGs) to be achieved by 2015 is that there will be significant deficits in achievement and these will be particularly high in the developing countries, including the emerging economies. The deficits are likely to be high in terms of health and education linked indicators, which can be attributed to the inequalities in availability and access to the related facilities across states, regions, cities as also across social and religious groups. These, at the second level can be attributed to the inequality in access to basic services, particularly, safe drinking water and sanitation.

A large number of less developed countries in Asia, Africa and Latin America are noted as having high deficits in human development and their rankings in human development index (HDI) turn out to be lower than that in per capita income at Purchasing Power Parity. The deficits in HDI are largely due to poor performance in terms of educational, health indicators, as noted above. There are serious gaps in the levels of and access to the facilities across regions, socio-religious groups and households falling in different income and asset brackets within the counties.

Table 1: List of the Countries in Descending Order of overall HDI index (as presented in the Graph 1, 2 and 3) for which the analysis of the Percentage Losses due to Inequality in three HDI indices has been carried out

Very High and High [Development Category	Medium Development	Low Development
		Category	Category
Norway	Antigua and Barbuda	Tonga	Kiribati
Australia	Trinidad and Tobago	Belize	South Africa
United States	Kazakhstan	Dominican Republic	Vanuatu
Netherlands	Albania	Fiji	Kyrgyzstan
Germany	Venezuela	Samoa	Tajikistan
New Zealand	Dominica	Jordan	Viet Nam
Ireland	Georgia	China	Namibia
Sweden	Lebanon	Turkmenistan	Nicaragua
Switzerland	Saint Kitts and Nevis	Thailand	Morocco
Japan	Iran	Maldives	Iraq
Canada	Peru	Suriname	Cape Verde
Korea	Macedonia	Gabon	Guatemala
Hong Kong, China	Ukraine	El Salvador	Timor-Leste
Iceland	Mauritius	Bolivia	Ghana
Denmark	Bosnia and Herzegovina	Mongolia	Equatorial Guinea
Israel	Azerbaijan	Palestinian Territory	India
Belgium	Saint Vincent and the Grenadines	Paraguay	Cambodia
Austria	Oman	Egypt	Lao
Singapore	Brazil	Moldova (Republic of)	Bhutan
France	Jamaica	Philippines	Swaziland,
Finland	Armenia	Uzbekistan	Congo
Slovenia	Saint Lucia	Syrian Arab Republic	Solomon Islands
Spain	Ecuador	Micronesia	Sao Tome and Principe
Liechtenstein	Turkey	Guyana	Kenya,
Italy	Colombia	Botswana	Bangladesh
Luxembourg	Sri Lanka	Honduras	Pakistan
United Kingdom	Algeria	Indonesia	Angola
Czech Republic	Tunisia		Myanmar
Greece			Cameroon
Brunei Darussalam			Madagascar
Cyprus			Tanzania
Malta			Nigeria
Andorra			Senegal
Estonia			Mauritania
Slovakia			Papua New Guinea

Qatar	Nepal
Hungary	Lesotho
Barbados	Togo
Poland	Yemen
Chile	Haiti
Lithuania	Uganda
United Arab	
Emirates	Zambia
Portugal	Djibouti
Latvia	Gambia
Argentina	Benin
Seychelles	Rwanda
Croatia	Côte d'Ivoire
Bahrain	Comoros
Bahamas	Malawi
Belarus	Sudan
Uruguay	Zimbabwe
Montenegro	Ethiopia
Palau	Liberia
Kuwait	Afghanistan
Russian Federation	Guinea-Bissau
Romania	Sierra Leone
Bulgaria	Burundi
Saudi Arabia	Guinea
Cuba	Central African Republic
Panama	Eritrea
Mexico	Mali
Costa Rica	Burkina Faso
Grenada	Chad
Libya	Mozambique
Malaysia	Congo
Serbia	Niger

UNDP (2010) has proposed a procedure for computation of the loss in the three dimensions of human development - income, education and health, based on the gap between the *original index* and *inequality adjusted index*, taken as a percentage of the original index. The figures for the loss for all the countries for the year 2013, taken from UNDP (2013), have been analysed in the section. The countries have been placed in three categories of human development, as shown in Table 1. Graph 1 depicts the loss in these dimensions of income, health and education due to inequality, taking into consideration 94 countries in *very high and high development category*, arranged in a descending order. A few countries in each category unfortunately report no information, and consequently there are gaps in the graph. It may be noted that the loss in income index, due to intra country inequality, is very high compared to indices for other dimensions, as assessed from the high average value of the loss. So is the variation in the loss across the countries, measured through standard deviation (Table 2). In case of the loss in education index, the average value is low and so is its variation. Furthermore, the loss in health index is the least and so is the inter-country variation. This implies that the developed countries, despite their high income inequality within the countries and significant differences

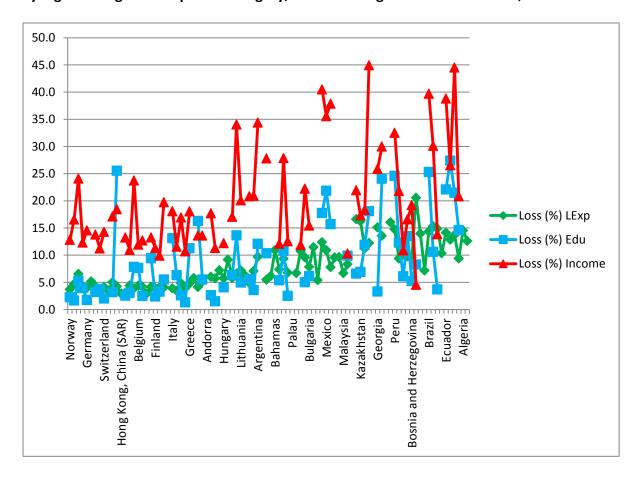
across them, are able, in general, to ensure fairly good health conditions and equal access to education for all sections of their population.

Table 2: Percentage Loss in Three Human Development Indices
Due to Inequality Adjustment - 2013

Category of Countries	Life expectancy	Education	Income
	Average		
Developed	8.1	9.1	20.1
Medium developed	16.5	21.1	26.8
Least developed	32.9	34.6	28.8
India	33.20	41.22	13.96
	Standard Deviati	ion	
Developed	4.1	7.2	9.5
Medium developed	5.4	11.6	8.7
Least developed	10.2	10.5	11.3
India	7.99	5.43	2.56

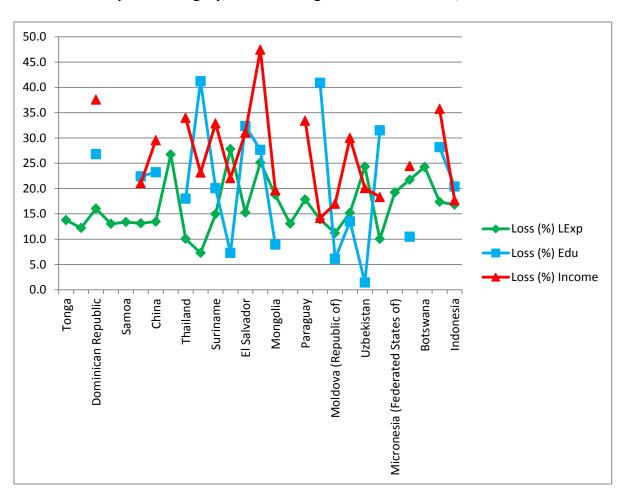
Note: Compiled from UNDP (2013) and Suryanarayana et. al. (2011)

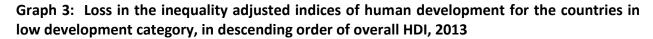
Graph 1: Loss in the inequality adjusted indices of human development for the countries in very high and high development category, in descending order of overall HDI, 2013

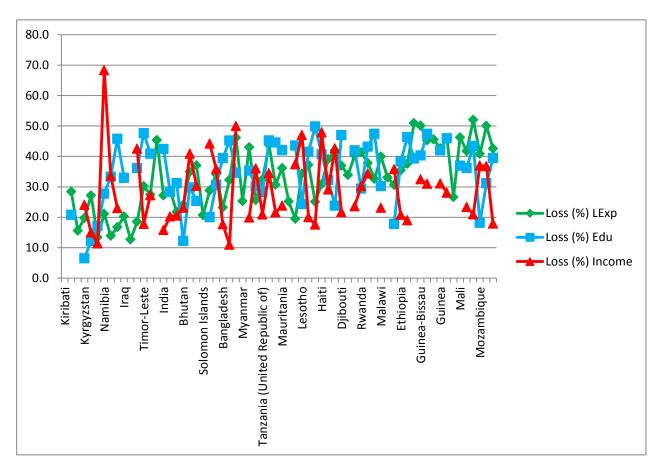


Unfortunately, the situation changes when we consider the 27 countries in the *middle category* of human development (Graph 2). The average loss in income index due to intra-country inequality goes up by 56 per cent compared to the *very high and high development category* but that in health and education, the indices go up by 124 per cent and 200 per cent respectively. The inter country variations are also higher here, as may be seen in the higher value of standard deviation. In case of the third category of 65 *less developed countries*, the average loss due to income inequality is very high but less than that in the medium category. However, the losses due to health and educational inequality in absolute and relative terms are extremely high, much above that of other two categories (Graph 3). Most significantly, the inter country inequality in health index in these countries is more than two times that of the countries belonging to higher categories of human development.

Graph 2: Loss in the inequality adjusted indices of human development for the countries in medium development category, in descending order of overall HDI, 2013



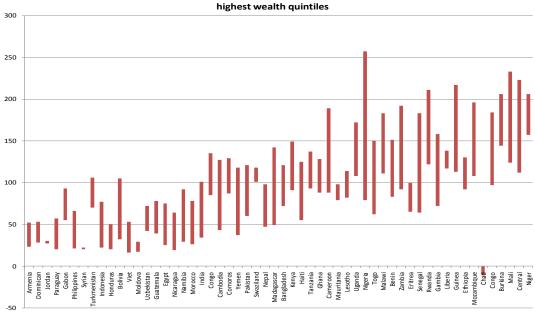




The loss in health index can partly be attributed to inequality in access to water and sanitation, particularly in urban areas. The analysis of cross country data show that the health outcome in a country depends not so much on average health expenditure but on marginal expenditure on water and sanitation in marginal areas within their cities¹. The differences in the under 5 mortality rate between the households in the highest and the lowest quintiles are presented for different countries in Graph 4 that sharply bring out the inequality in one of the major indicators of health outcome.

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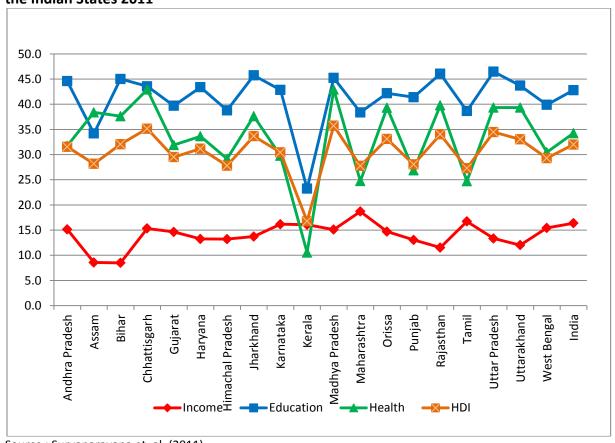
¹ See Cheng, Schuster-Wallace, Watt, Newbold and Mente (2012)



Graph 4: Difference in under 5 mortality rate per thousand live births in the lowest and highest wealth quintiles

Source: World Development Indicators 2010

The pattern, emerging from the computation of the inequality adjusted indices for the three human development dimensions in India at the state level (Suryanarayana et. al. 2011) for the recent years (Graph 5), confirms this pattern. Clearly, the loss in income due to inequality is 14 per cent only, significantly below that of health and educational index that work out to 33 per cent and 41 per cent respectively (Table 2). The loss in health index in India would have been higher if the measure of inequality was worked out by using household level data instead of state level data. Furthermore, the interstate inequality is very high for educational and health indices, more than twice that of income index. The correlation between the inequality index for income and that in education is negative (-.19) but statistically insignificant, that between income and health index is negative but statistically significant (-.47). More importantly the inequality indices for education and health relate positively (.77). One can argue that inequality in health to an extent is determined by the inequality in income but that in education is not significantly affected by the latter. However, low inequality in health is strongly related with that in education. One would infer that the variation, say in infant mortality can be reduced by reducing inequality in education.



Graph 5: Percentage loss in the three inequality adjusted indices of human development for the Indian States 2011

Source: Suryanarayana et. al. (2011)

Serious concerns have been raised in the above context with the recent release of the information related to poverty, hunger and health related indicators in the Statistical Year Book of India for 2013. It is evident that India will miss the MDGs relating to reduction in poverty, malnutrition, infant mortality rate, maternal mortality rate etc. as the current rates are significantly below the target values. It would be important to consider a few of the indicators pertaining to these aspects and assess the extent to which the inequality in the health and educational outcomes as also in the access to basic amenities are responsible for the deficits in our achievements for the MDGs.

3. Trends in Economic Growth and Spatial Inequality

Income differentials across the states

In a country as vast and as regionally differentiated as India, a discussion on growth scenario will be incomplete without bringing in the interstate and rural-urban differences into account, as shown above. In particular, the period since the early nineties has come under close scrutiny as the country has entered a new policy regime of globalization, ushering in an era of 'greater economic efficiency and accountability', and bringing down subsidies and bureaucratic

controls² that were supposed to ensure regional balance in development. In view of that, income inequality measures have been computed for the years from 1993-94 to 2009-10, for which the data are available, using the per capita state domestic product figures at constant prices. The data up to the year 2004-05 obtained from CSO are taking the 1993-94 as the base year while for the subsequent years they are with 1999-00 base year. However, the figures for coefficient of variation and Gini coefficient, that are relative measures of inequality, are unlikely to be affected by this as these are based on a uniform methodology followed by all States. Unweighted coefficients of variation have been worked out by giving equal weights to each state while the weighted values have been worked out by assigning weights equal to their population.

It is important to note that inequality across the states, measured through a standard measure of relative deviation like coefficient of variation in the per capita SDP, has gone up in the country over the entire period since 1993-94. The increase in inequality is noted both when we consider only 20 larger states or all the states in the country. There is, thus, no evidence to suggest that measures of globalization have brought down regional imbalance. The trend of growing regional inequity has continued, possibly at a slightly higher pace after 2003-04 when the overall growth in GDP for the country shot up to 8 per cent per annum and many of the backward states, including those in North East, exhibited even higher growth rates. It is only during 2007-09 that the interstate disparity in the growth rate of SDP records a stability or decline which is reflected in a slower increase in CV in per capita SDP. Unfortunately, this growth process has not been sustained in many of the backward states which has led to income inequality increasing again in recent years.

Importantly, weighted CV is higher than the unweighted CV in all the years. This is because the relatively more populous states like Bihar and Uttar Pradesh report per capita SDP significantly below the national average. Furthermore, the rise in the weighted CV is higher than the unweighted CV since the more populous states have not improved their per capita income levels as much as the less populated states.

Several other studies analyzing the trend in inequality in per capita income, based on coefficient of variation (CV) and Gini-coefficient confirm the thesis of accentuation of regional imbalance³. Studies show that the low income states like Bihar, Chhattisgarh, Jharkhand, Orissa, and Uttar Pradesh and Uttarakhand and Madhya Pradesh had reported low economic growth during eighties. In most cases their average growth rates have gone down further during the nineties which is reflected in increase in the CV, as discussed above. The less developed states have the disadvantage not only of a low growth rate but also high fluctuation in the rate from year to year⁴. What compounds their problems is that there is only a marginal decline in their population growth that have stayed much above the national average.

² Ahluwalia (2000)

³ Ahmad et. al. (2008) and Planning Commission (2005)

⁴ Another important fact is that these states have reported a decline in per capita income or no growth in at least two years during nineties, a problem not encountered in the middle or high income states.

Table 3: Average, Standard Deviation and Coefficient of Variation of the Per Capita State

Domestic Product Taking 20 Large States

			20 Large S	tates				All States	
Years	Unweighted Mean	Unweighted SD	Unweighted CV	Weighted Mean	Weighted SD	Weighted CV	Unweighted Mean	Unweighted SD	Unweighted CV
1993-94	8500.3	2739.2	32.2	8170.7	2878.8	35.2	8836.6	4002.3	45.3
1994-95	8937.6	2877.5	32.2	8588.2	3006.7	35.0	9186.6	4291.1	46.7
1995-96	9173.7	3099.5	33.8	8863.0	3342.2	37.7	9423.7	4428.7	47.0
1996-97	9624	3370.1	35	9350.2	3495.6	37.4	10058.5	5031.8	50.0
1997-98	9930.1	3387.4	34.1	9600.2	3638.1	37.9	10533.4	5325.2	50.6
1998-99	10315.1	3553.6	34.5	9967.9	3787.8	38.0	10973.5	5807	52.9
1999-00	10635.3	3776.4	35.5	10335.0	4028.8	39.0	18611.3	9182.5	49.3
2000-01	10681.2	3804.0	35.6	10290.6	3946.1	38.3	18831.8	9512.6	50.5
2001-02	11030.3	3886.8	35.2	10538.7	4080.1	38.7	19484.2	9703.6	49.8
2002-03	11276.2	4120.5	36.5	10744.8	4322.7	40.2	20187.1	10690.6	53
2003-04	12097.5	4414.3	36.5	11479.1	4703.1	41.0	21364.4	11082.8	51.9
2004-05	12821.4	4755.6	37.1	12164.4	5069.7	41.7	22364.9	11399.2	51.0
2005-06	13781.9	5311.0	38.5	12985.9	5717.7	44.0	23753.1	12499.6	52.6
2006-07	14883.5	5741.8	38.6	14019.9	6182.5	44.1	26027.8	14156.6	54.4
2007-08	15910.8	6234.9	39.2	15115.5	6624.7	43.8	28319.1	15593.8	55.1
2008-09	16797	6709.9	39.9	15920.5	7100.0	44.6	29054.3	15965.7	55.0
2009-10	25260.9	9676.5	38.3	18489.4	9364.4	50.6	30615.8	17863.6	58.3

Source: The per capita NSDP figures are taken from National Accounts Division, Central Statistics Office and are at 1993-94 prices.

Note: (a). Mean and inequality indices have not been calculated by giving population weights to all the states since inclusion of small states with low population give figures not very different from the weighted values for 20 states. (b). All States and UTs include the newly formed states of Uttarakhand, Jharkhand and Chattisgarh for which the figures from 1993-94 are available, but excludes, Lakshadweep, Dadra and Nagar Haveli. The figures for the 20 large states have been obtained after further excluding the Delhi, Puducherry, A & N Islands and Chandigarh, and the six Northeastern states excluding Assam. The other smaller states of Goa and Sikkim are also excluded.

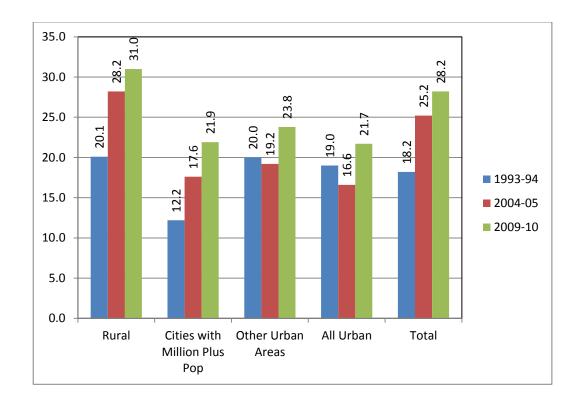
Variations in Consumption Expenditure and Poverty

The inter-state inequality for the other catch-all economic indicator - per capita consumption expenditure obtained from the National Sample Surveys - also shows a clear increasing trend as in case of income. The unweighted CV computed for the rural areas using the average consumption expenditure figures for large states has increased from 20.1 per cent in 1993-94 to

28.2 per cent in 2004-05 and then to 31.0 per cent in 2009-10 (Graph 6). This increasing pattern can be observed when we consider the figures for million plus cities and other smaller urban centres as well, taking the states as units of observation and computing the CV from unit level data. The inter-state inequality in case of metro cities initially works out to be low but exhibits a sharp rise. It goes up from 12.2 per cent in 1993-94 to 21.9 per cent in 2009-10. One would infer that the cities were similar in terms of their average expenditure levels in early nineties but have become more disparate over time. This is because many of them subsequently have got linked to global market and experienced high income growth. The non- metropolitan urban centres, on the other hand, exhibited interstate inequality similar to that of rural areas and this has not gone up over the two decades. This is largely because of stagnation of their economies and absence of sectoral diversification.

The calculation of CV for the years 2004-05 and 2009-10 in Graph 6 is based on the average figure for per capita consumption expenditure for 20 large states (see Notes under Table 3), built through unit level data. The CV for 1993-94, is also based on the average expenditure figures computed from unit level data but for 17 states. The number is reduced here as Bihar stands for the undivided state comprising Bihar and Jharkhand while Madhya Pradesh includes Chhattisgarh and Uttar Pradesh includes Uttarakhand. Graph 7, however, gives the CVs obtained directly from the unit (household) level data without first computing the per capita expenditure figures at the state level and then computing the CV and consequently is much higher than those of Graph 6. This further shows that inequality in urban areas is much higher than rural areas in 2009-10. Also, the increase in inequality has been very sharp in urban areas, particularly in metro cities, during 1993-2009. The most significant point is that inequality in the metro cities was very low in early nineties but has gone up sharply in the recent past. Not only that the metro cities differ from one another across the states but also that there is much higher inequality within the cities now than before two decades, as one would infer from rising value of CV in Graph 7.

Graph 6: Coefficients of Variation of monthly per capita expenditure across States



Source: Computed from NSS unit level data

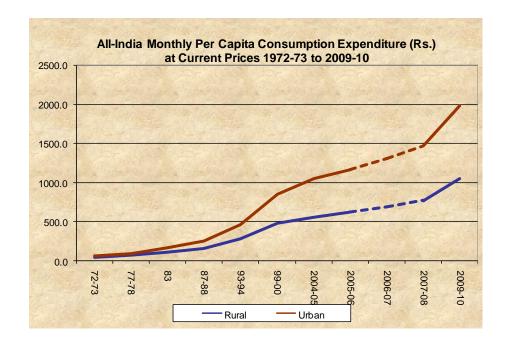
200 180 167 160 134.8 124.1 140 124. 120 98.3 93.6 97. **1993-94** 100 **2004-05** 80 **2009-10** 60 40 20 0 Rural Cities with M Other Urban All Urban Total plus Pop Areas

Graph 7: Coefficient of Variation in monthly per capita expenditure computed from household level data

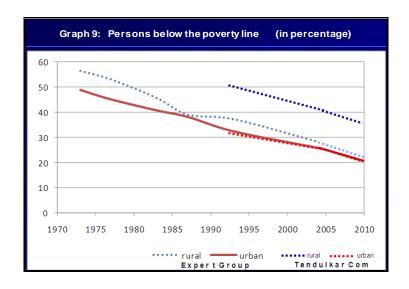
Source: Computed from NSS unit level data.

In view of the fact that reliable income figures for rural and urban areas are not available at regular intervals, it has been considered appropriate to assess the trend in R-U inequality using the data for consumption expenditure. There has been a much steeper rise in per capita consumption expenditure in urban than rural areas in real terms in the nineties and subsequent years compared to the preceding years (Graph 8). The discussion on consumption expenditure and poverty has been undertaken with a slightly longer time horizon taking 1972-73 as the starting point since there were major anti-poverty initiatives launched in the seventies as also because temporally comparable data became available since then. This graph and the subsequent one on poverty shows trend since 1972-73 just to bring home that consumption inequality did not rise sharply until 1993-94 and that rural and urban poverty had almost converged in the early nineties.

Graph 8: Monthly Per Capita Consumption (Rs.) at current prices 1972-73 to 2009-10



Poverty has shown a declining trend in rural and urban areas, as one would note from the downward sloping continuous line in Graph 9. A significant point is that the gap between rural and urban poverty figures has not gone up even in recent years, despite the growing gap in consumption expenditures. One may ask why this is the case when with implementation of reform measures, cities and towns are the first to get linked to global market, attracting investments both from within and outside the country, and consequently the development benefits in terms of poverty reduction are likely to be higher in urban than rural areas. Further, given that the growth in agriculture has at best been modest, exhibiting also high instability over time, rural poverty declining faster than urban poverty during nineties and thereafter would be considered anomalous.



A part of the explanation could be that with growth, the increase in inequality has been sharper in urban areas compared to the rural areas, giving modest results in the former, in terms of poverty reduction. More importantly, it is now well recognised that the methodology adopted by the Planning Commission was grossly underestimating rural poverty. The methodology has been criticized for not taking into account social consumption i.e. education and health explicitly in calculating the poverty line. It can be argued that the state sector played a major role in the provision of these social services particularly in rural areas in the base year of 1972-73, for which the poverty line was worked out initially, there has been withdrawal of public agencies over the past three decades. As a consequence, the proportion of education and medical care expenditure in household's consumption basket has increased significantly. Assuming implicitly that the basket in urban areas included all items of consumption including such items like education and health-care, the Expert Group headed by Tendulkar (Planning Commission 2009) recommend this basket for adoption in rural areas as well. Further, in computing relative price indices, health and educational expenditures are to be taken into account, which was never done before. These changes resulted in significant upward revision of poverty figure in rural areas from 29 per cent to 41.8 while urban poverty was taken to remain fixed at 27.8 per cent, suggesting a gap of 14 percentage points between the two poverty figures, as shown by the dotted lines in Graph 9.

Poverty studies focussing on spatially disaggregated scenario indicate that inequality in poverty across states and districts has gone up both in rural and urban areas (Kundu and Mohanan 2009). One would, therefore, argue that poverty reduction has been relatively less in less developed states such as Bihar, Uttar Pradesh and Jharkhand than in developed states like Karnataka, Maharashtra and Tamil Nadu, reporting more modest growth in consumption expenditure compared to developed states, both in rural and urban areas. As a result, poverty has got concentrated in the most backward states and within that in remote regions that are

more difficult to access, both for market forces and governmental programmes⁵. Understandably, the elasticity of poverty reduction to income growth has been less in the Eleventh Plan compared to that of earlier plans.

Education and Health

In analyzing the inequality in the levels of educational development across the states, it would be important to compute indicators of educational attainments with reference to specific age groups. This is because including the people in higher age groups would mean carrying forward inequity of the earlier generation in evaluating current developmental efforts. Consequently, the indicators pertaining to children in the school going age group, their current attendance have been considered appropriate for the study. Also, since the capacity to earn income substantially depends on the educational attainments of the working, education level of persons in the prime working age group - 25 to 59 years - has been considered for each social group.

The percentages of children outside the formal education system (Table 4 & 5), despite a decline in recent years, work out as very high in 2009-10 for boys and girls and in both in rural and urban areas, suggesting that there will be significant deficit in attaining the MDG goals of universal primary education and eliminating gender disparity in all levels of education by 2015. Importantly, the RU disparity in this indicator is not very high compared to that in the percentage of persons with secondary and higher education. The latter in urban areas is two and a half times that in rural areas. The low educational attainment in 15-59 age group in rural areas reflects the cumulative impact of deprivation in earlier years. By both the indicators, one would, however, argue that the situation has improved during 2005-10. What, however, is disturbing that the inequality in both the indicators across the states has gone up in both urban and rural areas.

A similar picture is noted in case of the indicators for males and females in 15-59 age group across the states (Table 5). The situation has improved for both and there is indication that gender disparity has gone down in recent years. This may be inferred from the female male ratio in the percentage of children outside the formal system declining from 1.35 to 1.20. Furthermore, the male educational attainment was 63 per cent higher than that of women in 2001, the figure going down to 53 per cent only in 2011. In case for interstate inequality, however, the trend is the opposite. For men the inequality has gone up distinctly in both the indicators while for women, it has gone up in case of children outside the formal education system. For educational attainment, the inequality seems to have remained stable during 2001-11.

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⁵ Sivaramakrishnan, Kundu and Singh (2005)

Table 4: Percentage of children outside formal education system and adults with secondary plus level of education in rural and urban areas

	Percer	Percentage of children (5 – 14 YEARS) outside formal schooling				with second	ns in the age 1 ary & above le cation	
States/UTs/NCT	200	9-10	200	4-05	200	9-10	2004-05	
	RURAL	URBAN	RURAL	URBAN	RURAL	URBAN	RURAL	URBAN
JAMMU & KASHMIR	6.18	8.69	12.39	6.96	28.09	50.28	21.34	44.27
HIMACHAL PRADESH	3.40	4.51	5.17	4.06	42.83	70.12	33.62	55.77
PUNJAB	7.94	9.85	10.96	11.32	34.16	52.30	29.37	54.34
UTTARANCHAL	8.17	13.02	13.17	9.61	35.73	51.68	25.10	52.54
HARYANA	7.82	9.50	14.11	9.67	34.43	50.54	27.28	51.77
DELHI NCT	27.64	12.50	5.84	10.66	39.49	62.08	47.11	53.80
RAJASTHAN	18.47	18.75	23.25	19.12	15.11	46.09	11.59	33.65
UTTAR PRADESH	15.98	14.50	22.02	20.08	20.04	46.76	16.63	38.16
BIHAR	26.39	17.79	35.34	20.28	21.05	46.73	14.72	42.71
SIKKIM	1.70	3.70	4.98	5.22	21.73	46.90	17.25	38.00
ARUNACHAL PRADESH	32.82	20.11	27.96	3.57	29.38	56.98	17.90	45.93
NAGALAND	1.23	4.96	6.06	6.93	36.67	60.38	31.13	54.24
MANIPUR	8.67	5.78	6.33	1.79	46.56	66.48	27.75	55.03
MIZORAM	6.23	3.54	5.80	0.47	14.12	34.52	15.49	42.77
TRIPURA	8.64	6.56	11.37	10.13	13.01	37.56	14.34	38.08
MEGHALAYA	6.93	15.15	13.44	6.16	15.57	54.63	8.15	56.10
ASSAM	13.01	6.35	12.64	11.84	18.45	59.90	15.07	46.94
WEST BENGAL	14.08	6.25	17.88	15.53	14.24	43.82	12.20	40.20
JHARKHAND	24.97	14.97	25.94	8.43	20.25	49.01	10.67	49.65
ORISSA	7.79	11.23	21.31	12.19	18.82	44.18	13.21	41.85
CHATTISGARH	12.27	10.54	20.45	12.57	21.75	57.04	11.03	44.55
MADHYA PRADESH	14.86	12.28	25.07	10.96	17.43	49.47	10.79	43.35
GUJARAT	22.66	12.62	17.28	8.23	17.19	50.08	18.26	46.77
MAHARASTRA	6.51	4.32	12.70	7.67	31.10	58.20	23.95	45.41
ANDHRA PRADESH	6.49	4.61	13.57	8.30	19.95	50.84	15.50	40.13
KARNATAKA	8.92	3.71	14.13	5.87	25.32	55.57	16.33	47.74
GOA	0.39	0.29	4.97	6.23	56.11	63.11	42.30	50.68
KERALA	2.77	1.25	2.86	0.98	39.72	50.57	34.59	45.44
TAMIL NADU	2.25	0.85	4.17	3.35	24.59	47.83	19.00	44.36
PONDICHERRY UT	0.94	1.55	3.43	1.51	30.82	55.17	26.73	43.94
All India*	14.52	9.27	19.53	11.52	22.18	51.08	17.09	44.05
CV (%)	79.85	64.66	60.64	61.38	40.89 (40.55)	15.13	46.52 (41.89)	13.05

^{*}A II India figures include all States/Uts. Within brackets excluding Delhi

Table 5: Percentage of children outside formal education system and adults with secondary plus level of education among men and women

	Percenta	Percentage of children (5 – 14 YEARS) outside formal schooling				ith seconda	ns in the ago ary & above cation	
	200	09-10	20	04-05	2009-10		2004-05	
	Male	Female	Male	Female	Male	Female	Male	Female
JAMMU & KASHMIR	6.15	7.26	7.0	15.7	40.65	26.14	33.7	19.7
HIMACHAL PRADESH	3.66	3.31	3.9	6.4	52.03	38.83	41.8	30.4
PUNJAB	6.91	10.89	10.4	11.9	42.39	38.14	39.4	36.0
UTTARANCHAL	9.28	9.47	10.4	14.6	50.69	28.46	38.6	26.6
HARYANA	7.60	9.23	9.3	17.3	47.03	30.21	41.5	26.1
DELHI NCT	12.45	15.79	11.2	8.7	64.13	56.16	56.3	49.5
RAJASTHAN	14.01	23.66	15.5	29.6	31.19	14.16	24.5	9.6
UTTAR PRADESH	14.03	17.69	19.1	24.7	32.39	18.84	28.3	14.3
BIHAR	22.61	29.10	29.3	39.8	32.74	13.55	26.5	8.7
SIKKIM	1.63	2.23	6.3	3.7	28.82	19.41	21.5	17.9
ARUNACHAL PRADESH	28.47	31.91	23.1	27.2	40.95	28.28	26.8	16.0
NAGALAND	2.94	1.18	5.6	7.2	48.92	35.82	44.7	32.0
MANIPUR	7.79	8.13	4.7	5.6	61.93	41.41	42.2	26.5
MIZORAM	5.79	4.19	3.3	3.9	26.50	18.73	30.5	22.3
TRIPURA	6.00	10.85	13.7	8.5	19.96	14.23	21.3	14.1
MEGHALAYA	7.05	9.83	14.3	10.6	21.45	20.86	15.5	15.0
ASSAM	13.05	11.58	11.9	13.4	27.67	17.55	22.7	13.5
WEST BENGAL	12.55	12.51	16.9	18.0	24.14	17.48	24.3	15.3
JHARKHAND	23.96	22.73	19.9	27.3	32.98	17.59	25.4	10.5
ORISSA	7.91	8.52	16.8	23.8	27.19	17.27	21.6	13.2
CHATTISGARH	9.06	14.95	14.6	24.1	36.15	19.53	22.9	10.7
MADHYA PRADESH	14.13	14.58	17.9	27.0	30.98	17.47	24.2	13.1
GUJARAT	17.19	22.08	11.4	18.2	36.20	22.84	34.0	22.0
MAHARASTRA	5.98	5.33	10.7	11.1	49.62	34.19	39.8	25.9
ANDHRA PRADESH	5.03	6.95	9.4	15.4	35.03	21.01	28.2	16.2
KARNATAKA	8.22	6.15	10.2	13.4	42.75	29.16	30.6	21.8
GOA	0.59	0.12	6.3	4.6	60.60	54.68	49.6	42.2
KERALA	1.78	3.00	3.1	1.6	40.69	44.56	36.7	37.6
TAMIL NADU	1.40	1.94	2.5	5.4	38.78	29.35	34.5	24.2
PONDICHERRY UT	1.70	1.01	2.3	1.9	50.27	43.12	44.3	31.4
All India*	12.17	14.63	15.2	20.6	36.08	23.59	30.3	18.6
CV (%)	74.45	77.03	57.68	65.77	30.22	43.03	30.20	46.59
CV Excluding Delhi	76.38	79.15	58.67	65.557	28.85	40.48	27.98	42.79

^{*}All India figures include all States/Uts.

The infant mortality rates (IMR), used as negative proxy indicators of health, for men and women and for rural and urban areas, reflect improvement in the situation in recent years (Table 6). The gender disparity works out as high although this has declined marginally during 2005-11. Relatively faster decline in infant mortality rate for girls, however, must be balanced against the increasing termination of female fetuses. Rural mortality rate is about 60 per cent higher than the urban rate in 2005 and unfortunately, this has remained unchanged in 2011. This implies that the rural urban disparity has not declined as the gender disparity. In the context of interstate inequality, one notices high coefficient of variation for men and women and for rural and urban areas. The values of these coefficients have, however, gone down marginally over the years. One must nonetheless point out that the decline is basically due to a fall in IMR in the north eastern states and the smaller states of Goa, Himachal Pradesh and Uttarakhand. Restricting the analysis to the larger states, one would argue that there has been a marginal increase in interstate inequality in recent years, similar to what was noted in case of educational indicators. Educational indicators, however, do not show any strong correlation with economic development as many of the developed states like Delhi, Punjab and Haryana, report low educational attainment along with backward states of Rajasthan, Uttar Pradesh, Bihar and Jharkhand. The correlations of per capita SDP with IMR are, however, strongly negative since the states with high per capita income like Maharashtra, Delhi, Karnataka, Punjab, Gujarat and West Bengal report low mortality rates while the less developed states like Odisha, Chhattisgarh, Rajasthan, Utter Pradesh and Madhya Pradesh record high IMR. The correlation coefficients of per capita SDP with IMR were -0.45 and -0.42 for males and females respectively, the two values becoming even stronger in 2011 going up to -0.72 and -0.64 The IMR showing a strong negative correlation with per capita state income is understandable as the poorer states tend to make low expenditure both by public agencies as also households. The poor educational and health outcomes in a less developed states should, therefore be a matter of concern since these are not able to allocate adequate funds to social sectors and this deficit are not getting compensated through allocations or transfers under the federal system. The states of Kerala and Himachal Pradesh are important exceptions as these are able to report excellent health outcomes at a low level of per capita SDP. Similarly, the high IMR particularly for girl children in the economically developed state of Haryana can be explained in terms of social prejudices against the girl child. More importantly, the decline in IMR does not appear to be high in the backward states that are the regions of concern, reflecting the priority of the public agencies. Understandably, the CV in medical facilities reflecting the interstate inequality can be seen as going up in recent times.

Table 6: Annual estimates of infant mortality rate for men and women in rural and urban areas of States and UTs

	Rural Urbai		oan	Male		Female		
					iviale		ren	lale
	2005	2011	2005	2011	2005	2011	2005	2011
India	64	48	40	29	56	43	61	46
Andhra Pradesh	63	47	39	31	56	40	58	46
Assam	71	58	39	34	66	55	69	56

Bihar	62	45	47	34	60	44	62	45
Chhatisgarh	65	49	52	41	63	47	64	50
Delhi NCT	44	36	33	26	33	25	37	31
Gujarat	63	48	37	27	52	39	55	42
Haryana	64	48	45	35	51	41	70	48
Jammu & Kashmir	53	43	39	28	47	40	55	41
Jharkhand	53	41	33	28	43	36	58	43
Karnataka	54	39	39	26	48	34	51	35
Kerala	15	13	12	9	14	11	15	13
Madhya Pradesh	80	63	54	39	72	57	79	62
Maharashtra	41	30	27	17	34	24	37	25
Odisha	78	58	55	40	74	55	77	58
Punjab	49	33	37	25	41	28	48	33
Rajasthan	75	57	43	32	64	50	72	53
Tamil Nadu	39	24	34	19	35	21	39	23
Uttar Pradesh	77	60	54	41	71	55	75	59
West Bengal	40	33	31	26	38	30	39	34
Smaller States*								
Arunachal Pradesh	39	36	17	10	29	33	46	31
Goa	16	6	15	13	14	7	17	14
Himachal Pradesh	50	38	20	28	47	36	51	39
Manipur	12	11	14	12	12	8	13	15
Meghalaya	50	54	42	38	48	52	51	52
Mizoram	26	43	10	19	18	31	22	37
Nagaland	17	21	22	20	19	15	18	26
Sikkim	31	28	15	17	29	23	31	30
Tripura	31	31	29	19	30	29	31	29
Uttarakhand	36	39	19	23	37	34	48	38
C V for 19 large States	29.18	30.40	26.89	28.92	31.60	33.89	30.26	31.76
CV for all States	41.56	37.94	41.48	36.25	42.58	41.38	40.74	35.43

^{*} IMR for smaller states are based on three year averages. Source: SRS Bulletins, Registrar General of India

Table 7: Percentage of households with electricity for lighting 2001 & 2011

State/UT/NCT	Ru	ral	Urban	
States	2001	2011	2001	2011
Jammu & Kashmir	74.8	80.7	97.9	98
Himachal Pradesh	94.5	96.6	97.4	98.1
Punjab	89.5	95.5	96.5	98.3
Uttarakhand	50.3	83.1	90.9	96.5
Haryana	78.5	87.2	92.9	96.2

Delhi NCT	85.5	97.8	93.4	99.1
Rajasthan	44	58.3	89.6	93.9
Uttar Pradesh	19.8	23.8	79.9	81.4
Bihar	5.1	10.4	59.3	66.7
Sikkim	75	90.2	97.1	98.7
Arunachal Pradesh	44.5	55.5	89.4	96.0
Nagaland	56.9	75.2	90.3	97.4
Manipur	52.5	61.2	82	82.4
Mizoram	44.1	68.8	94.4	98.1
Tripura	31.8	59.5	86.4	91.6
Meghalaya	30.3	51.6	88.1	94.9
Assam	16.5	28.4	74.3	84.1
West Bengal	20.3	40.3	79.6	85.1
Jharkhand	10	32.3	75.6	88
Odisha	19.4	35.6	74.1	83.1
Chhattisgarh	46.1	70	82.9	93.7
Madhya Pradesh	62.3	58.3	92.3	92.7
Gujarat	72.1	85	93.4	97.2
Maharashtra	65.2	73.8	94.3	96.2
Andhra Pradesh	59.7	89.7	90	97.3
Karnataka	72.2	86.7	90.5	96.4
Goa	92.4	95.6	94.7	97.7
Kerala	65.5	92.1	84.3	97.0
Tamil Nadu	71.2	90.8	88	96.1
Puducherry UT	81	95.8	91.4	98.5
All India	43.5	55.3	87.6	92.7
Coefficient of variation (%)	47.75	36.29	9.88	7.91

Table 8: Percentage of households having source of drinking water away from the premises $2001\ \&\ 2011$

State/UT	Ru	ral	Urban		
	2001	2011	2001	2011	
Jammu & Kashmir	32	29.4	6.1	5.1	
Himachal Pradesh	14.3	10.2	6.3	3.6	
Punjab	4.2	5.7	1.5	1.6	
Uttarakhand	20.5	20.1	5.2	3.5	
Haryana	26.6	16.2	7.5	5.1	
Delhi NCT	17.1	10.4	6.3	6.1	
Rajasthan	28.6	31.9	8.2	7.7	

Uttar Pradesh	11.3	14.1	5.4	5.2
Bihar	12.6	12.6	8.6	7
Sikkim	20.9	22.8	2.8	4.5
Arunachal Pradesh	19.8	26.4	11.4	7.3
Nagaland	33.5	31.4	21.1	20.7
Manipur	33.6	40.7	22.6	32.1
Mizoram	37.9	32.1	19.4	13.3
Tripura	31.4	39.6	9.9	13.7
Meghalaya	32.3	37.9	17.1	13.9
Assam	24.5	20.4	10.5	8.4
West Bengal	20.4	31.5	11.9	16.1
Jharkhand	26.7	36.4	16.7	17.8
Odisha	32.4	38.5	20.9	18.5
Chhattisgarh	22.3	30.3	13.7	12.9
Madhya Pradesh	27.3	36.1	15.3	14.5
Gujarat	20.8	18.5	6.5	4.8
Maharashtra	17.2	19.6	5.7	5.2
Andhra Pradesh	21.9	23.9	13.5	10.3
Karnataka	26.1	24.8	13.8	8.5
Goa	14.3	8.2	8	2.7
Kerala	13.5	10.8	7.4	5.2
Tamil Nadu	13.3	8.2	10.4	5.7
Puducherry UT	4.7	2.1	3.8	0.7
All India	19.5	22.1	9.4	8.1
Coefficient of variation (%)	39.52	49.34	54.11	72.89
CV (Excluding Delhi & Goa)	39.29	46.31	54.03	71.18

Table 9: Percentage of households having no access to latrine facilities, 2001 and 2011 (excluding small UTs)

States/UTs/NCT	1	Rural		an
States	2001	2011	2001	2011
Jammu & Kashmir	58.2	61.4	13.1	12.5
Himachal Pradesh	72.3	33.4	22.8	10.9
Punjab	59.1	29.6	13.5	6.6
Uttarakhand	68.4	45.9	13.1	6.4
Haryana	71.3	43.9	19.3	10.1
Delhi NCT	37.1	23.7	21	10.2
Rajasthan	85.4	80.4	23.9	18

Uttar Pradesh	80.8	78.2	20	16.9
Bihar	86.1	82.4	30.3	31
Sikkim	40.6	15.9	8.2	4.8
Arunachal Pradesh	52.7	47.3	13	10.5
Nagaland	35.4	30.8	5.9	5.4
Manipur	22.5	14	4.7	4.2
Mizoram	20.3	15.4	2	1.5
Tripura	22.1	18.5	3	2.1
Meghalaya	59.9	46.1	8.4	4.3
Assam	40.4	40.4	5.4	6.3
West Bengal	73.1	53.3	15.2	15
Jharkhand	93.4	92.4	33.3	32.8
Odisha	92.3	85.9	40.3	35.2
Chhattisgarh	94.8	85.5	47.4	39.8
Madhya Pradesh	91.1	86.9	32.3	25.8
Gujarat	78.3	67	19.5	12.3
Maharashtra	81.8	62	41.9	28.7
Andhra Pradesh	81.9	67.8	21.9	13.9
Karnataka	82.6	71.6	24.8	15.1
Goa	51.8	29.1	30.8	14.7
Kerala	18.7	6.8	8	2.6
Tamil Nadu	85.6	76.8	35.7	24.9
Puducherry UT	78.6	61	35	18
All India	78.1	69.3	26.3	18.6
C V (%)	38.01	50.02	61.54	72.27
CV (Excluding Delhi & Goa)	37.51	48.25	64.22	73.86

Access to Basic Amenities

Sanitation and other civic amenities in a state would have a positive effect on health of the people, particularly the children. An attempt has therefore been made to determine to analyse the access of the households to latrine and drinking water facilities at the state level and across social groups.

The percentage of households having electricity connection has gone up significantly both in rural and urban areas (Table 7). The increase is higher in the former which has reduced the rural urban inequality over the past decade. The inter-state inequality too has recorded a noticeable reduction, the decline in coefficient of variation being higher in rural than urban areas. This would be considered a positive step towards inclusive growth in the country. Unfortunately, the same cannot be said regarding water supply and sanitation facilities. The reduction in the

percentage of households not having safe drinking water facility (Table 8) and toilet (Table 9) within the premise is much less than that of households not having electricity. Furthermore, the interstate inequality has gone up significantly in case of both water as well as sanitation facilities. It is a matter of anxiety that the level of income of the states determine the access to toilet facilities and safe drinking water, the correlations being 0.72 and 0.43 respectively. This should be a matter of serious concern since not having access to these basic amenities in the economically backward states would have a direct bearing on the health status of the family members, particularly the infant mortality rates.

4. Inequalities and Inequality across Social, Religious and Gender Groups

Consumption Expenditure

The discussion on the growth scenario will be incomplete without considering the fact that the benefits do not accrue uniformly also across socio-religious categories. The historically underprivileged scheduled caste and scheduled tribe population are often noted as recording slower improvement over time in multiple economic and social dimensions. The sharpening of inequalities across the states, as discussed above, would also affect these socio-economic groups differently. Furthermore, the deprivation of Muslims and discrimination against them in labour market and certain social spheres is also a matter of serious policy concern. The Prime Minister's High Level Committee (Sachar Committee 2006), probing into this aspect has shown that the gaps in economic wellbeing between Muslims and the average population are very high, more so in case of urban areas and women than for rural areas and men. Various programs of the government including that of the Reserve Bank of India under the Prime Minister's 15-point programme have not made much impact on their conditions.

Given the differential access to labour and capital market of different castes and communities, an attempt is made here to analyse the trends and pattern per capita consumption expenditure - a summary measure of economic wellbeing - to assess the magnitude inter group inequality in the country. Muslims, Christians, Sikhs and Buddhists are India's prominent minority communities, accounting for 140 million or about 18 per cent of the country's billion-plus population. Muslims constitute about 75 per cent of this minority population. Following the classification system adopted by the Sachar Committee, Hindus have been placed in 3 categories – SCs, STs and Others for the analysis in this section. However, for comparability with other sections, figures for total SCs and STs have also been computed. Other religious groups (ORG) include all non Hindu religious groups except Muslims but include non-Hindu SC & ST population that are very small. The people in the first five categories thus add up to the total population with no overlap between any two categories.

Table 10: Per capita consumption expenditure (based on URP) in different social groups in various settlement categories at constant Prices of 1987-88

		Cities of	Other			Other	
		Million	urban		Metro to	Urban to	Urban to
	Rural	plus pop	areas	Urban	Rural	Rural	Rural
		prose prop		93-94			
ST Hindu	128.8	257.6	200.7	210.8	2.00	1.56	1.64
SC Hindu	134.7	221.6	189.9	196.6	1.64	1.41	1.46
Other Hindu	171.7	380.1	263.0	288.2	2.21	1.53	1.68
Muslim	151.8	261.0	188.6	201.8	1.72	1.24	1.33
Other Religions	202.6	479.1	284.5	338.3	2.36	1.40	1.67
Total ST	133.2	255.8	212.4	220.0	1.92	1.59	1.65
Total SC	135.8	225.0	190.7	198.2	1.66	1.40	1.46
Total	159.9	350.5	241.7	264.9	2.19	1.51	1.66
			200	04-05			
		Cities of	Other			Other	
		Million	urban		Metro to	Urban to	Urban to
	Rural	plus pop	areas	Urban	Rural	Rural	Rural
ST Hindu	128.0	295.9	213.7	232.6	2.31	1.67	1.82
SC Hindu	147.1	257.9	207.0	220.9	1.75	1.41	1.50
Other Hindu	187.7	452.9	305.5	346.8	2.41	1.63	1.85
Muslim	171.1	308.7	203.8	229.7	1.80	1.19	1.34
Other Religions	243.6	526.5	367.4	416.9	2.16	1.51	1.71
Total ST	133.6	308.9	239.6	253.7	2.31	1.79	1.03
Total SC	148.8	262.5	209.5	224.4	1.76	1.41	1.06
Total	175.0	405.9	275.6	311.3	2.32	1.57	1.78
			200	09-10			
		Cities of	Other			Other	
		Million	urban		Metro to	Urban to	Urban to
	Rural	plus pop	areas	Urban	Rural	Rural	Rural
ST Hindu	149.8	494.6	260.3	317.7	3.30	1.74	2.12
SC Hindu	157.1	313.1	232.4	250.7	1.99	1.48	1.60
Other Hindu	201.2	504.5	353.1	392.9	2.51	1.75	1.95
Muslim	175.9	324.5	245.7	262.7	1.84	1.40	1.49
Other Religions	274.2	617.8	397.1	455.7	2.25	1.45	1.66
Total ST	154.8	490.9	272.9	320.1	3.17	1.76	1.10
Total SC	159.9	314.3	235.1	253.6	1.97	1.47	1.10

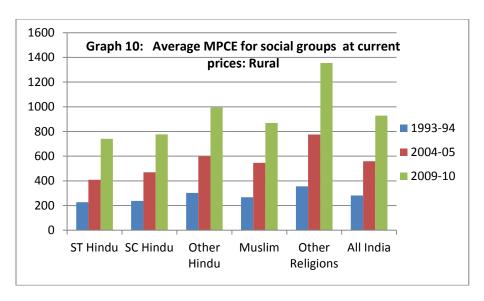
Total	187.8	463.9	318.7	355.0	2.47	1.70	1.89
						2., 0	2.00

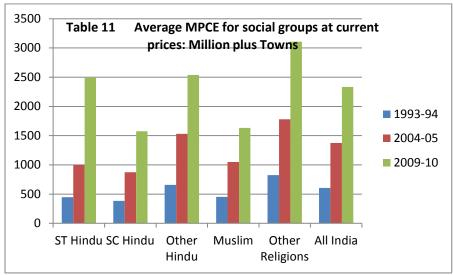
^{*} derived from CPI for agricultural labourers with base 1986-87=100

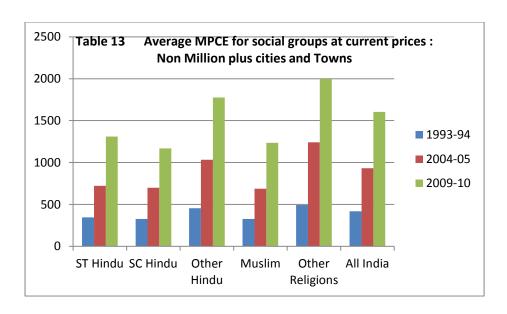
derived from CPI for urban non-manual employees with base 1984-85=100

Table 11. Growth in MPCE (URP) in different social groups in various settlement categories

	Dl	Cities (Million	Other urban	Hale and
	Rural	plus pop)	areas	Urban
1993-94 to 2004-05				
ST Hindu	-0.1	1.3	0.6	0.9
SC Hindu	0.8	1.4	0.8	1.1
Other Hindu	0.8	1.6	1.4	1.7
Muslim	1.1	1.5	0.7	1.2
Other Religions	1.7	0.9	2.4	1.9
Total ST	0.0	1.7	1.1	1.3
Total SC	0.8	1.4	0.9	1.1
Total	0.8	1.3	1.2	1.5
2004-05 to 2009-10				
ST Hindu	3.2	10.8	4.0	6.4
SC Hindu	1.3	4.0	2.3	2.6
Other Hindu	1.4	2.2	2.9	2.5
Muslim	0.6	1.0	3.8	2.7
Other Religions	2.4	3.3	1.6	1.8
Total ST	3.0	9.7	2.6	4.8
Total SC	1.4	3.7	2.3	2.5
Total	1.4	2.7	2.9	2.7
1993-94 to 2009-10				
ST Hindu	0.9	4.2	1.6	2.6
SC Hindu	1.0	2.2	1.3	1.5
Other Hindu	1.0	1.8	1.9	2.0
Muslim	0.9	1.4	1.7	1.7
Other Religions	1.9	1.6	2.1	1.9
Total ST	0.94	4.16	1.58	2.37
Total SC	1.03	2.11	1.32	1.55
Total	1.0	1.8	1.7	1.8







The percentage of Muslims to total population in urban areas is slightly higher than that in rural areas. This is due to historical factors, the seat of governance during the Mughal period being the large cities of today. The growth of population among Muslims (also Sikhs) is higher than the national growth rate in recent decades, particularly in rural areas, but that has to be understood and explained in terms of their socio-economic characteristics rather than religious identities. Further, there has been a decline in their growth rate during the nineties (the information for the decade 2001-11 are yet to be released), compared to the previous decade. Rural-Urban migration for both Muslims and Sikhs has declined as inferred from their declining share in urban population.

Economic wellbeing of population, in different social categories in rural areas, towns and metro (million plus population) cities, has been measured using the large sample data on consumption expenditure from NSS over the period from 1993-94 to 2009-10 at the constant prices of 1987-88. It is seen that the ST Hindus are at the bottom of the ladder in rural areas, followed by SC (Table 10 and Graph 10) at all the three time points. In urban areas, however, STs are better off than both SCs and Muslims (Table 10 and Graphs 11 and 12). This can be attributed to the fact that the STs do not move out of rural areas due to economic distress or seasonality, owing to their strong socio-cultural bonds and consequently their rate of out migration is low. They migrate out mostly induced by governmental schemes and programmes and therefore record the maximum relative gain through their movement. The ratio of urban to rural figure for the ST is similar to the average figure in 1993-94 and is the highest among all social groups in 2009-10. This can be attributed to their very high growth in consumption expenditure in urban areas, particularly in metro cities, during 1993-2009, partly due to the low figure in the base year. The growth in consumption in rural areas is about the same across communities except for the ORG which recorded a significantly higher growth rate than the others.

SC Hindus record marginally higher consumption expenditure than the STs in rural areas but in urban areas, it is the other way round. The annual compound growth in consumption for the SCs during 1993-2009 (1 per cent per annum) is marginally higher than that of STs but is at par

with that of other Hindus or total population. Importantly, ST-SC gap in urban areas has gone up significantly particularly in metro cities, while the gap in rural areas has remained the same. SCs have done better than other Hindus and Muslims in metro cities but much worse than them in small urban areas.

Muslims are at a slightly higher level of consumption compared to SC population in rural areas as also in small and large urban centres, in both the years. In rural areas, their consumption expenditure is 95 per cent of the rural average figure in 1993-94 and remains stable over the years. Muslim-non Muslim gap in rural areas work out as low but go up in urban centres, particularly in metro cities. The low gap in rural areas could be attributed to their being outside agriculture - into small manufacturing and service activities - where earnings are higher. Unfortunately, Muslims seem to be benefiting the least by shifting to smaller or larger urban centres relative to the other communities (Table 10), as may be inferred from the low metro to rural and urban to rural ratios in Table 10. Importantly, the growth rates in consumption for Muslims are less than the average for other religious groups in all settlement types (Table 11). Furthermore, the divergence between the two is the highest in metro cities, wherein the Muslims saw the lowest growth in consumption during 1993-2009 in relative terms.

The non SC/ST Hindus are better off than all other groups except the other religious groups (ORG) that include Christians, Parsis, Buddhists etc., in all settlement categories at both the time points. The growth in consumption expenditure in case of the former, however, is significantly below that of the ORG in rural areas and small towns. In metro cities, however, the opposite is the case. On the whole, the upper caste Hindus and non Muslim minority groups have reported higher levels of consumption in the base year and have also improved their expenditure figures over the years much more than the other groups. It is only in metropolitan cities that the STs and SCs have been able to benefit relatively more than the general population. Furthermore, urbanisation improves economic wellbeing of all but the impact varies across social groups. The maximum benefit comes to STs and upper caste Hindus followed by ORG, as one would infer from the ratio of the urban to rural figures (Table 10). Muslims come at the bottom in the context of improvement through movement to urban areas.

Education and Health

In the context of educational attainment for persons in 25-59 age group, information from the two NSS rounds pertaining to 2004-05 and 2009-10 show (Table 12) that there is a high level of deprivation for the ST, SC and OBC population, in this order. This is inferred from the high level of illiteracy among them, two and a half times compared to the general category. Nevertheless, there have been progressive improvements over time in the education level for all social groups. Persons in the general category can still be noted as having significantly higher levels of attainment, compared to ST and SC population in 2009-10. Over 26 percent of the former have education level of higher secondary and above while this percentage figure is only 7 for ST and SC and 12 for the other backward castes. The improvement for the ST during 2004-09 can be

noted to be higher than other categories including the general population, except in post graduation level where the SCs have done the best. One can see the continuation of the old inequities and the outcome indicators do not suggest better performance by the non-SC/ST/OBC category than the general population.

Table 12: Percentage of persons with different educational attainments for the age group 25 to 59 years, India, 2004-05 and 2009-10

	2004-05							
Education level	ST	sc	ОВС	Others				
not literate	61.87	55.67	44.47	25.55				
Literate with completed level								
below primary	11.35	10.75	10.72	9.40				
Primary	9.94	11.42	13.23	12.79				
Middle	8.64	10.94	14.14	15.74				
Secondary	3.67	5.21	7.76	12.67				
higher secondary	1.95	2.55	3.96	7.58				
diploma/certificate course	0.48	0.77	1.34	2.10				
Graduate	1.71	2.14	3.33	10.63				
postgraduate and above	0.38	0.55	1.05	3.55				
All categories	100	100	100	100				
		2009-10						
Education level	ST	sc	ОВС	Others				
Not literate	50.29	48.37	37.07	21.29				
Literate with completed leve								
below primary	12.23	10.64	10.91	8.11				
Primary	12.44	14.02	13.72	13.36				
Middle	11.85	12.91	16.11	15.93				
Secondary	6.36	6.66	10.51	14.80				
higher secondary	3.67	3.34	4.95	9.35				
diploma/certificate course	0.43	0.50	1.05	1.47				
Graduate	2.21	2.60	4.37	11.35				
postgraduate and above	0.50	0.94	1.30	4.32				
All categories	100	100	100	100				

Source: Tabulated from the unit level data of the 61st and 66th round

The percentage of children outside the education system (Table 13) has gone down across all categories but it is much higher for the SC and ST population relative to the others. The decline for the ST and SC is 6 percentage points compared to 2 points for the general category. Interestingly, the attendance at primary level is similar across social groups at both the time points because the larger non enrolment of children among the deprived groups at pre-primary and primary level is compensated by the fact that a larger percentage of their children stay or

enroll at that level, instead of going to higher levels. The percentage of children in the middle and secondary school, however, are much lower for the SC, ST population than the other groups. The disparity however has gone down over the years. There has been an increase in school attendance at higher levels due to a decline in the percentage of children dropping out of the school at the age of 9 or 10 years. This increase has been higher for the socially deprived groups compared to the others, confirming the proposition of increase in equity within the formal education system.

Table 13 Percentage of children in Current attendance (for age group 5 to 14), NSS 61st round, 2004-05 and 2009-10

2004-05						
	ST	SC	ОВС	Others		
Currently attending in: Pre-primary and Primary	53.43	54.61	55.14	54.52		
Currently attending in: Middle	16.57	19.06	20.63	24.72		
Currently attending in: Secondary	3.43	4.81	6.49	8.64		
Not in the education system	26.57	21.52	17.74	12.12		
	2009-10					
	ST	SC	OBC	Others		
Currently attending in: Pre-primary	52.36	53.66	54.05	53.13		
Currently attending in: Middle	21.22	23.53	23.31	26.19		
Currently attending in: Secondary	7.20	7.56	9.23	10.13		
Not in the education system	19.22	15.25	13.41	10.55		

Source: NSS 61st and 66th round survey data.

As an outcome indicator of health system, infant mortality rate is often considered as the most appropriate for India, although it reflects the combined impact of factors like access to health care facilities, educational level and economic well being of the people in a region. In the Table below, the IMR for different religious groups (Table 14) show that it is low for Sikh, Buddhists and Christians in rural areas compared to Hindus and Muslims. Among the social groups, the IMR is the highest for SC, followed by the ST. However the IMR for all categories are still way above that observed in developed countries.

Table 14: Infant mortality rates for socio-religious groups for 1998-99 and 2005-06

Infant mortality rates for socio-religious groups: All India, 1998-99						
	Rural	Urban	Total			
Hindu	82.8	53.3	77.1			
Muslim	67.5	39.9	58.8			
Christian	53.9	37.5	49.2			
Sikh	56.8	40.6	53.3			
Buddhist/Neo	76.9	26.7	53.6			

Buddhist			
Others	91.0	26.7	80.3
ST	86.9	57.6	84.2
SC	88.1	60.4	83.0
OBC	82.2	51.2	76.0
Others	69.3	43.5	61.8
Infant mortality ra	tes for socio-religious g	roups: All India, 2005-06	
	Rural	Urban	Total
Hindu	63.0	44.3	58.5
Muslim	60.4	35.5	52.4
Christian	54.8	16.3	41.7
Sikh	46.0	Not Reported	45.6
Buddhist	46.6	Not Reported	52.8
Others	86.7	Not Reported	84.6
ST	63.9	43.8	62.1
SC	71.0	50.7	66.4
OBC	61.1	42.2	56.6
Others	55.7	36.1	48.9

Source: Table 6.4, NFHS-2 and Table 7.2, NFHS-3, All India reports

Sanitation and Water Supply

The percentage of households having no toilet facility is extremely high in rural areas, as revealed from the Population Census (Table 15). However, against the 70 per cent for rural India, the figures are as high as 77 per cent for SC and 84 per cent for ST in 2011. In urban India, the deficits are lower and there is no difference between the figures for SC and ST population. In case of households having drinking water sources outside the premise, the figures are less but the SC and ST figures are much larger compared to the national average. Similar is the pattern across social groups in case of the percentage of households not having electricity for lighting, but here there is no difference between ST SC population in urban areas, as noted in case of toilet facilities.

An identical pattern emerges from the NSS data for the years 2002 and 2008-09 (Table 16 & 17)). The percentage of households having drinking water facility for exclusive use is very low in case of the ST and SC population, compared to "others" category. The ST-SC gap is very high in case of drinking water but low for toilet facility. The access to both is better for the OBC and for the general category, the figures are even higher. The outcome indicators seem to suggest some progressivity in the provision of drinking water as the deprived social groups like ST and OBC report higher improvement in accessing drinking water for exclusive use. However, the improvements, not much in favour of SC population as their dependence on community facility

remains very high in 2008-09. A similar picture emerges from for the access to toilet facilities from the NSS data, the SC, ST and OBC reporting much lower figures for households having toilets for exclusive use that the others category. The improvements over the recent years, however, have been much more in favour of the deprived social groups than in case of drinking water facilities.

Table 15: Access to selected amenities by social groups

Percentage of he	ouseholds wit	th no access to lati	ine facilities	
		Rural		Urban
	2001	2011	2001	2011
SC	84.88	77.15	45.55	34.08
ST	88.92	84.21	42.27	34.04
All households	78.1	69.3	26.3	18.6
Percentage of h	ouseholds wit	h source of drinki	ng water away from	premises
		Rural		Urban
	2001	2011	2001	2011
SC	20.89	23.96	14.69	12.47
ST	29.81	36.39	17.41	15.88
All households	19.5	22.1	9.4	8.1
Percentage of h	ouseholds wit	h no electricity fo	r lighting	·
		Rural		Urban
	2001	2011	2001	2011
SC	66.01	50.54	18.75	13.13
ST	69.59	53.80	21.87	13.53
All households	56.5	44.7	12.4	7.3

Source: Computed from Census 2001 & 2011 tables

Table 16: Access to drinking water by different sources by social groups 2002 and 2008-09

2002 (July-December 2002)							
	ST	SC	OBC	Others	All		
Exclusive use of household	11.7	20.1	29.1	43.5	30.6		
Common use of households in the building	8.7	10.2	14.0	16.6	13.7		
Community use	79.6	69.7	56.8	39.9	55.7		
Total	100.0	100.0	100.0	100.0	100.0		

2008-09						
	ST	SC	OBC	Others	All	
Household exclusive use	15.7	23.3	36.4	49.3	35.8	
Common use of households	8.4	11.1	13.6	15.3	13.1	
Community use	72.2	61.5	45.7	30.9	46.8	
Others	3.8	4.1	4.3	4.4	4.3	
Total	100.0	100.0	100.0	100.0	100.0	

Source: NSS unit level data

Table 17: Access to latrine facilities of different types by social groups 2002 and 2008-09

July-December 2002									
	Scheduled tribe	Scheduled caste	Other backward class	Others	All				
Exclusive use of household	11.4	14.5	23.8	43.9	27.5				
Shared with other households	5.6	5.9	6.3	10.4	7.5				
Public/community latrine	2.1	3.9	3.0	4.9	3.8				
No latrine facility	78.1	74.9	65.8	38.8	59.8				
Total	100.0	100.0	100.0	100.0	100.0				

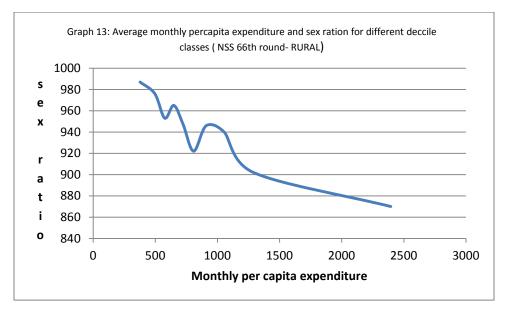
2008-09								
	Scheduled	Scheduled						
	tribe	Caste	OBC	Others	All			
Exclusive use of household	20.7	22.8	33.6	55.4	36.9			
Shared with other households	8.4	9.0	9.9	15.0	11.1			
Public / Community Latrine	1.9	3.2	2.3	3.5	2.8			
No Latrine facilities	69.1	65.0	54.2	26.1	49.2			
Total	100.0	100.0	100.0	100.0	100.0			

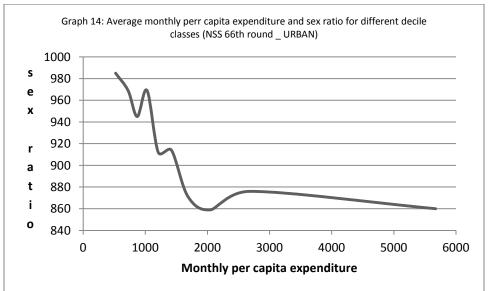
Source: Computed from NSS unit level data

The Gender Dimension

As far as gender based inequalities are concerned, the magnitude have been noted to be very high although there has been decline in recent years due to increase in literacy and employment rate among women, exposure to global media, modernization and resultant changes in social norms. The studies focusing on this aspect, however, have mostly been undertaken at micro level, at best covering a sector or region. The data generated by official agencies at macro level do not capture the magnitude of gender differentiation not only in social but also in economic spheres. Attempts to estimate income for men and women at

national and state levels, for example, are fraught with serious methodological and data related problems, making the results extremely tentative. The NSS provides data on consumption expenditure only at household level and there is no way by which one can disaggregate that by gender.





One can, nonetheless, focus on the gender dimension by bringing out differences in poverty levels between men and women headed households. The incidence of poverty is indeed much higher among the latter than the former. The Graphs 13 and 14 show how the number of women per 1000 men in different expenditure classes. One notes that the number goes down with increase in the level of consumption expenditure, both rural and urban areas. The highest sex ratio is recorded in the first quintile. At higher expenditure classes, the sex ratio tapers off

and goes well below the average figure for the country. It is well-known that households tend to be headed by women often due to the exigency of the male earning member being dead or deserting the family. The probability of women headed households having a single earner and her getting lower earnings than a male in a similar job is high. The households below poverty line have higher female male ratio compared to the average households, both in urban and rural areas. Understandably, poverty among women would work out to be much higher than among men, even if one chooses to ignore the gender differences in consumption within the household.

5. Conclusions and a Perspective for Intervention

An overview of the human development scenario at global level suggests that the serious deficits in the three dimensions, income, health and education, as identified by UNDP, can be attributed largely to the inequality existing within the countries. The loss in income index, reflecting intra country inequality, for the countries having high or very high level of human development, is high whereas that in education and health index are relatively low. For the countries in the *middle category*, the intra country inequality is higher but the increases in case of health and education are much higher than that in income inequality. In case of the *less developed countries*, the income inequality is less than that in the medium category but that in health and educational indices are extremely high. This implies that the less developed countries, besides reporting fairly high income inequality are also failing in ensuring good health conditions and access to education for all sections of their population. The pattern, emerging from the computation of the inequality adjusted indices for the three human development dimensions in India at the state level for the recent years confirms this pattern. The interstate inequality is very high for educational and health indices - more than twice that of the income index.

The overview of the trend and pattern of economic growth across the states over the past two and a half decades reveals that the high growth in income and consumption expenditure have been associated with increase in regional inequalities. Despite systematic reduction in poverty both in rural and urban areas over the past three and a half decades, inequality has gone up - in rural areas, but more significantly in urban areas. Poverty has got concentrated in a few regions and social groups where poverty alleviation is likely to be more difficult in future years.

The percentage of children outside the formal education system, despite a decline in recent years, works out as very high in 2009-10 both in rural and urban areas. Importantly, the R-U disparity in this indicator is not very high compared to that in the percentage of persons with secondary and higher education. By both the indicators, the situation has improved during 2005-10. What, however, is disturbing that the inequality in both the indicators across the states has gone up in both urban and rural areas. In case of the two indicators for males and females, one would argue that the situation has improved for both and that the gender disparity has gone down over the decade. In case for interstate inequality, however, the trend is the opposite. For men the inequality has gone up distinctly in both the indicators while for

women, it has gone up in case of children outside education system. For educational attainment for women, the inequality seems to have remained stable during 2001-11.

The IMR shows a significant variation across the states, strongly correlated with their level of backwardness. Unfortunately, the decline in IMR is not high in the backward states, reflecting that the thrust of intervention has not been in the high priority regions. The interstate inequality in the health indicator can be seen as going up in recent times. Sanitation and drinking water facility in a state would have a positive effect on health of the people, particularly the children. The strong negative relationship of IMR and deficiencies in provision of the amenities with per capita SDP suggest that the less developed states have not been able to make adequate provision for the social sectors. Unfortunately, the deficiencies have not been made up through increased allocations from the federal funds.

There exists significant disparity between ST, SC and general population on the one hand and Muslims compared with other religious groups. The level of consumption expenditure and growth therein during 1993-2009 has been very high in million plus cities, compared to small towns or rural areas for all socio-religious groups. STs, although are at a low level in villages, towns and metro cities, record the highest growth in expenditure in metro cities during the period under study. Rural urban migration for employment emerges as a tool of poverty alleviation. This, however, is noted to make a differential impact on a person or a household, depending on whether the movement is to a metro city or other urban centre and also on his/her socio-religious identity. Importantly, STs benefit much more than the other groups by shifting from rural to urban areas. The growth in consumption for the SCs has been similar to that of average in rural areas. This however is much less than the average in non metro cities while in metro cities, it is the other way round. Muslims, however, have benefitted less than the average in all settlement categories.

There exists significant disparity between scheduled tribes and scheduled castes population in terms of educational attainment, STs being the most deprived category. There has, however, been a progressive improvement for all social groups, this in case of the STs is higher than the other groups. There is continuation of old inequities and there is no evidence of better performance by the non-SC/ST/OBC category than the general population.

The access to drinking water and toilet facilities for exclusive use is low in case of the ST and SC population, the figure is higher for the OBC and still higher for the general category. There is no conscious policy in favour of the deprived social groups, smoothening out the inequalities, as the gains are similar across the social groups.

As far as gender based inequalities are concerned, the magnitude have been noted to be very high although there has been decline in recent years due to increase in literacy and employment rate among women, exposure to global media, modernization and resultant changes in social norms. The number of women per 1000 men in different expenditure classes goes down with increase in the level of consumption expenditure, both rural and urban areas. The probability of women headed households having a single earner and her getting lower

earnings than a male in a similar job is high. The households below poverty line have higher female male ratio compared to the average households, both in urban and rural areas. Understandably, poverty among women is much higher than among men, even if one chooses to ignore the gender differences in consumption within the household.

The high inequality in IMR across the states and its increasing trend over time should be a matter of serious policy concern. The inequalities in the provision of water and toilets across the states too have gone up in recent years. While the absence of basic amenities, particularly toilets, have a strong association with health facilities and both are negatively related to per capita income, one would argue that growth process will not address the problems of human development in less developed states that are not growing rapidly. Unless there are specific policies and interventions to address the issue of delivery of basic amenities and tacking the problem of health in backward regions and for the poor and vulnerable social groups, it would be impossible to achieve the concerned MDG targets even at the national levels.

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