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STATUS AND CHALLENGES IN ADDRESSING HUMAN DEVELOPMENT RELATED ISSUES: INDIAN SCENARIO**NISHITH DAVE****PRINCIPAL (I/C)****C Z PATEL COLLEGE OF BUSINESS MANAGEMENT****NEW VALLABH VIDYANAGAR****DR. ASHISH VORA****ASST. PROFESSOR****C Z PATEL COLLEGE OF BUSINESS MANAGEMENT****NEW VALLABH VIDYANAGAR****VIKRAM PRAJAPATI****ASST. PROFESSOR****C Z PATEL COLLEGE OF BUSINESS MANAGEMENT****NEW VALLABH VIDYANAGAR****ABSTRACT**

21st century has brought upon significant focus on Human Development, as it increases the chances for sustainable development across globe. India has been ahead of several other countries in embracing human development work and since 1990, with the support of UNDP, have started analyzing and reporting these activities systematically. India today has the largest programme of any country in the world for the preparation of human development Reports (HDRs) at the sub-National (State and lower) level. As on date, 18 States have published State HDRs (SHDRs). The whole idea of human development approach, which is about expanding the richness of human life, rather than simply the richness of the economy in which human beings live, has essentially changed the people's perception about the concept of 'Sustainable Development'. In India, the efforts related to Human Development have always been people centric. State Governments and UNDP - Planning Commission are largely responsible for taking initiatives for planning and execution of various schemes leading to Human Development. However, implementing the government schemes for Human Development activities have not always been an easy task in country like India. This article focuses on the present status of Human Development in India, issues and challenges with regard to human development initiatives in India.

KEYWORDS

human development, gender, women empowerment, government, schemes, social- developments.

INTRODUCTION

Human Development is an approach that focuses on creating fair opportunities and choices for all people. The primary requirement for enlarging people's choices is to build human capabilities in such a way that they can lead a long and healthy life, an educated and an informed life, and a decent life.

The whole idea of human development approach is about expanding the richness of human life, rather than simply the richness of the economy in which human beings live. Human Development approach has definitely changed the people's perception about the concept of 'Sustainable Development'. It is an approach that is focused on creating fair opportunities and choices for all people.

Merely creating opportunities / work for unemployed people in the society does not lead to sustainable development. There has to be a proper sync among the other areas of human development activities such as health, education, social etc. thereby, ensuring the balanced development across all such areas. The all-round human development is not automatic. It needs holistic planning and flawless implementation of government schemes.

These opportunities also need to be measured from its qualitative aspects such as whether a job provides dignity and a sense of pride and whether it facilitates participation and interaction. To strengthen the link with human development, work also has to enhance environmental sustainability. Work strengthens its link with human development when it goes beyond individual benefits to contribute to shared social objectives, such as poverty and inequality reduction, social cohesion, culture and civilization.

Conversely, the value of work is diminished and its link with human development becomes weaker when there is discrimination and violence at work. The most observable discrimination is along gender lines—in positions, pay and treatment. But discrimination also occurs along lines of race, ethnicity, disability, and sexual orientation.

Addressing challenges for human development in India is of vital importance since a large portion of the population is living below the poverty line, and income inequalities are rising by the day. It is estimated that more than 800 million Indians live on less than 20 Rupees per day¹.

Disparities exist and widening across States, along rural/ urban lines and across different groups. More than 60 percent of women are chronically poor. The percentage of poor among Scheduled Tribes and Scheduled Castes remains high. Many people are excluded from access to basic services. More than 296 million people are illiterate and 233 million are suffering from malnutrition. Workforce participation for woman is half of that for men, and almost 96 percent of women work in the informal sector².

The last few Mid-Term Statistical Appraisal of the MDGs (Millennium Development Goals) highlights that India lags behind in several targets relating to hunger, child labour, nutrition and maternal mortality, health and other major diseases.

Despite a good economic growth rate of 7.336% (according to IMF World Economic Outlook – April 2016), far too many of our people still lack the basic requirements for a decent living in terms of nutrition standards, basic health, access to education and, to other public services such as water supply and sewerage. Disadvantaged groups, especially the Scheduled Castes and Scheduled Tribes and the minorities have benefited less than they should have. Regional imbalances have emerged across and even within States.

LITERATURE REVIEW

Mishra and Chaudhary (2014) In their study "A Comparative Study of Human Development Index Of Selected Indian States" found that several states have good health index and highest ranked like Kerala then Punjab, Maharashtra. Some states have good education index and highest ranked like Himachal Pradesh has taken highest rank, Tamil Nadu then Kerala. Some states have good income index and highest ranking like Haryana, Maharashtra, and then Gujarat. But some states have lowest health index and lowest ranked Madhya Pradesh, Andhra Pradesh, Assam then Bihar. Some states have lowest education index and lowest ranked Rajasthan, Bihar, Jharkhand, Assam then Bihar. Some states have lowest income index and lowest ranked Madhya Jharkhand, Assam then Bihar.

Priya Deshingkar and Shaheen Akter (2009 -13) "Migration and Human Development in India" reveals that migrants are the worst affected people as they work in extreme difficult and dangerous conditions. The impacts of migration on poverty reduction and the contribution that migrants make to the economy are under-

recognised. The immediate need is to change the policy level discourse on migration by reviewing key documents and policies and moving away from theory and language which portrays migration as bad and something that must be stopped. In the country like India, migrants are need support and reduce their vulnerability by improving their access to education, housing and health programmes. India needs to take similar steps urgently. Without such recognition and action large parts of the population will continue to be excluded and this will compromise India's prospects for poverty and reaching the Millennium Development Goals (MDGs).

Sonalde Desai, A Dubey, B L Joshi, M Sen, A Shariff, R Vanneman (2010) "Human Development in India - *Challenges for a Society in Transition*" a multi topic survey of 41,554 house holds in 1,503 villages and 971 urban neighbourhoods across India. Two one-hour interviews in each household covered topics concerning health, education, employment, economic status, marriage, fertility, gender relations, and social capital.

OBJECTIVES OF THE STUDY

1. To look into the present status of human development initiative in India.
2. To identify the challenges in addressing human development related issues in India.

SOURCES OF DATA

For this study Secondary Data have been collected from various Research papers, Books, Periodicals, Journals and Government websites etc.

THE PRESENT STATUS OF HUMAN DEVELOPMENT INITIATIVE

In the recent years, India has enjoyed consistently high rates of growth and steady improvement in human development. However, even as the world's largest democracy remained flexible in face of the global economic crisis, the country faces a critical challenge similar to several other BRICS counterparts – high growth has been accompanied by persistent poverty and inequality.

The country's Human Development Index value when adjusted for inequality loses 28 percent of its value. The imperative of faster, more inclusive and sustainable growth is central to the government's national development agenda and a series of progressive schemes introduced by the government.

India's national Millennium Development Goal (MDG) Report released in 2015 reveals that while significant progress has been made on achieving targets on poverty reduction, education, and HIV at aggregate levels, the results have been uneven. Much work remains to be done in reducing hunger, improving maternal mortality rates and enabling greater access to water and sanitation targets, as well as reducing social and geographic inequalities in achieving these targets.

In addition, while measures have been taken to reverse the loss of environmental resources by improving the coverage of forest area, protected areas and reducing CFC emissions, carbon dioxide emissions and energy intensity still remain areas of concern.

Rising gender inequality hampers India's progress on development goals. Women continue to be excluded from social, economic and political domains.

Home to 1.21 billion people, India's rate of progress affects the achievement of development goals globally. However, progress made during the MDGs period has proven that, with sound strategies and targeted interventions, global action can work. India is poised to carry forward this momentum into the 2030 Agenda for Sustainable Development, for 'transforming our world' and ensuring that the most vulnerable are not left behind.

The range of possible dimensions for Human Development includes:

- Education
- Decent Standard of Living
- Political Freedom & Process Freedoms
- Creativity and Productivity
- Environment
- Social & relational
- Culture & Arts

The language of human rights, as we shall see later, permeates the reports in different ways, and human rights are sometimes included among the 'dimensions' or specific capabilities mentioned.

According to 12th Five Year Plan, The Twelfth Plan relies on an extensive range of government programmes, which cover a wide variety of sectors, to help achieve the inclusive and sustainable growth. There are programmes in health, education, drinking water and sanitation, provision of critical infrastructure in rural and urban areas, programmes of livelihood support for the weaker sections and special programmes for the historically disadvantaged sections of our population, particularly the Scheduled Castes, Scheduled Tribes, OBCs, Minorities, and other marginalised groups. Plan programmes can be classified into three groups. There are central sector programmes, administered directly by agencies of the central government. There are state sector programmes, administered by state agencies, which form part of the State Plan. There are also Centrally Sponsored Schemes (CSS), operating in areas that are, constitutionally the domain of the States, but the Central Government provides resources to the states to support these programmes while the programmes themselves are implemented by the State Government and its agencies.

➤ *Life and Longevity*

The most fundamental of all human capabilities is life itself and the steady rise in life expectancy in the country suggests that significant progress has been made in this dimension. Life expectancy which was only 32 years at the time of Independence is now 67 years. The level of life expectancy in India remains lower than in many emerging market economies and it is appropriate to plan for significant further improvements in this important dimension.

1. The infant mortality rate (IMR) is another dimension of human capability where India is making progress. IMR fell from 80 in 1991 to 66 in 2001 and at a faster rate thereafter to 47 in 2010. The rate of decline was 14 in the first period and 19 in the second period. Nevertheless, the level of IMR remains high and need to do much better for children of next generation. Efforts must strive to bring the IMR down to 28 by the end of the present Five Year Plan.
2. Maternal mortality rates (MMRs) are another indication of weakness in our performance. MMR has been falling over time, thanks to the initiatives for promoting institutional deliveries under the NRHM. The percentage of women giving birth in institutions with the benefit of skilled birth attendants has increased from 53 per cent in 2005 to 73 per cent in 2009. At the end of the present Five Year Plan, all the efforts must bring MMR down to 1 per 1,000.
3. The decline in the child sex ratio rings an urgent alarm. This is an area of grave concern since it implies that society is denying life to female children, and increasingly resorting to female foeticide. The spread of diagnostic and medical facilities has paradoxically actually worsened the situation, as the falling child sex rate is being seen in the more developed areas and cities.

➤ *Education*

India has a young population, and consequently, the labour force, which is expected to decline in most developed countries and even in China, is expected to increase over the next 20 years. This 'demographic dividend' can add to nation's growth potential through its impact on the supply of labour and also, via the falling dependency ratio, on the rate of domestic savings.

Besides, a young population brings with it the aspirations and the impatience of youth, which in turn can become strong drivers for bringing about change and innovation. To reap this demographic dividend, we must ensure that young citizens come into the labour force with higher levels of education and the skills needed to support rapid growth. The SSA has brought us close to the target of universalisation of primary education and the Right to Education Act (RTE) 2009 makes eight years of elementary education a fundamental right for all the children. The MDM Scheme has ensured that retention in schools has improved greatly.

However, the learning outcomes for a majority of children continue to be disappointing. Addressing the quality issue in our schools is critical for the effective development of human capabilities and for achieving the objective of equality of opportunities. The quality of teachers and, even more important, their motivation and accountability will need to be improved. Many of the children who are presently in school are first-generation learners, and these children need supplementary

instruction. This is not easy due to shortage of qualified teachers in many schools across the country. New and innovative approaches such as multigrade learning, which has been successfully tried in Tamil Nadu, could be adopted in such cases.

Although there is considerable focus on providing secondary school access, the dropout rates between elementary and secondary schools continue to be high, and between the secondary and post-secondary stage they are even higher. This is a particularly serious problem for girls, who have to travel longer distances to attend secondary schools. Curricular and examination reforms in secondary schooling would receive special attention aimed at fostering critical thinking and analytical skills, and preparing students for further education.

➤ **Skill Development**

In the present FYP there is due focus on the Skill Development Mission and by end of 2017 there is target to impart skill to at least 50 million individuals. Skill Development Programmes in the past have been run mainly by the government, with insufficient connection with market demand. To ensure that skills match demand, special efforts are needed to ensure that employers and enterprises play an integral role in the conception and implementation of vocational training programmes, including managing Industrial Training Institutes (ITIs) and in the development of faculty. An enabling framework is needed that would attract private investment in Vocational Training through Public-Private Partnership (PPP).

Union Government has made required efforts and mobilized investments in setting up first rate ITIs, Skills Development University etc. ensuring efficiency in operations and management and enabling post-training employment.

➤ **Health and Nutrition**

Health and Nutrition is another critical dimension of Human development. At present, less than 30 per cent of outpatient and less than half of inpatient health care capacity of the country is in the public sector, and the majority of the population relies on private health care provision which often imposes a heavy financial burden. India has had the largest and the longest running child development programme in the world in the form of ICDS, but the problem of malnutrition remains large.

Malnutrition is also a problem among adults, especially women. The incidence of anemia and low body mass among women is very high in the country. The causes of this persistent malnutrition are not well understood. The availability of food, especially better quality food products such as fruits, vegetables and dairy products, is significantly better today than it was in the past.

The Food Security Bill under consideration will address some of these issues, but the problem of nutrition is actually much more complex and a multidimensional approach is necessary.

The NRHM, launched during the Tenth Plan, made an important start in expanding health care facilities in rural areas. While additional infrastructure has been created, there are large shortages of personnel, especially specialists in rural health facilities, reflecting the fact that trained human resources in health are in short supply and it takes many years to set up new medical colleges to train the required number of doctors.

The Twelfth Plan will therefore see the transformation of the NRHM into a National Health Mission, covering both rural and urban areas. An important component of the National Health Mission will be the Urban Health Initiative for the Poor, providing public sector primary care facilities in selected low-income urban areas. This will require additional resources in the public sector from the budgets of both the Centre and the States, and cities. At present, there is a massive shortage of healthcare professionals in the country.

➤ **Drinking Water and Sanitation**

The problem of providing safe drinking water is particularly acute in the rural areas. Successive plans have emphasised programmes for expanding the coverage of rural drinking water but they have not had as much success, as desired. Part of the problem is that rural drinking water schemes are not fully integrated with national system of aquifer management. Excessive drawal of groundwater for irrigation is leading to lowering of water tables causing drinking water hand pumps to run dry and lowering of the water table is also causing salinity and chemical pollution, making the water non-potable.

Sanitation and clean drinking water are critical determinants of health and are complementary to each other. Without proper sanitation, the incidence of diarrhoeal diseases due to contaminated drinking water will not come down, and without adequate water supply, improved sanitation is generally not possible. It is, therefore, necessary to adopt a habitation approach to sanitation and to institutionalise the integration of water supply with sanitation in each habitation.

The problem of sanitation in urban areas is also very serious since almost all our cities, including even the State capitals and major metros, have a large percentage of the population (45 per cent in Delhi) not connected to the sewer system. Urban development must give top priority to planning for water, toilets and sewerage as an integrated whole taking into account the likely expansion of the urban population.

Twenty-five core indicators that are listed below reflect the vision of rapid, sustainable and more inclusive growth ³:

ECONOMIC GROWTH

- (i) Real GDP Growth Rate of 8.0 per cent.
- (ii) Agriculture Growth Rate of 4.0 per cent.
- (iii) Manufacturing Growth Rate of 10.0 per cent.
- (iv) Every State must have an average growth rate in the Twelfth Plan preferably higher than that achieved in the Eleventh Plan.

POVERTY AND EMPLOYMENT

- (v) Head-count ratio of consumption poverty to be reduced by 10 percentage points over the preceding estimates by the end of Twelfth Five Year Plan.
- (vi) Generate 50 million new work opportunities in the non-farm sector and provide skill certification to equivalent numbers during the Twelfth Five Year Plan.

EDUCATION

- (vii) Mean Years of Schooling to increase to seven years by the end of Twelfth Five Year Plan.
- (viii) Enhance access to higher education by creating two million additional seats for each age cohort aligned to the skill needs of the economy.
- (ix) Eliminate gender and social gap in school enrolment (that is, between girls and boys, and between SCs, STs, Muslims and the rest of the population) by the end of Twelfth Five Year Plan.

HEALTH

- (x) Reduce IMR to 25 and MMR to 1 per 1,000 live births, and improve Child Sex Ratio (0-6 years) to 950 by the end of the Twelfth Five Year Plan.
- (xi) Reduce Total Fertility Rate to 2.1 by the end of Twelfth Five Year Plan.
- (xii) Reduce under-nutrition among children aged 0-3 years to half of the NFHS-3 levels by the end of Twelfth Five Year Plan.

INFRASTRUCTURE, INCLUDING RURAL INFRASTRUCTURE

- (xiii) Increase investment in infrastructure as a percentage of GDP to 9 per cent by the end of Twelfth Five Year Plan.
- (xiv) Increase the Gross Irrigated Area from 90 million hectares to 103 million hectares by the end of Twelfth Five Year Plan.
- (xv) Provide electricity to all villages and reduce AT&C losses to 20 per cent by the end of Twelfth Five Year Plan.
- (xvi) Connect all villages with all-weather roads by the end of Twelfth Five Year Plan.
- (xvii) Upgrade national and state highways to the minimum two-lane standard by the end of Twelfth Five Year Plan.
- (xviii) Complete Eastern and Western Dedicated Freight Corridors by the end of Twelfth Five Year Plan.
- (xix) Increase rural tele-density to 70 per cent by the end of Twelfth Five Year Plan.
- (xx) Ensure 50 per cent of rural population has access to 40 lpcd piped drinking water supply, and 50 per cent *gram panchayats* achieve Nirmal Gram Status by the end of Twelfth Five Year Plan.

ENVIRONMENT AND SUSTAINABILITY

- (xxi) Increase green cover (as measured by satellite imagery) by 1 million hectares every year during the Twelfth Five Year Plan.

- (xxii) Add 30,000 MW of renewable energy capacity in the Twelfth Plan.
 (xxiii) Reduce emission intensity of GDP in line with the target of 20 per cent to 25 per cent reduction over 2005 levels by 2020.

SERVICE DELIVERY

- (xxiv) Provide access to banking services to 90 per cent Indian households by the end of Twelfth Five Year Plan.
 (xxv) Major subsidies and welfare related beneficiary payments to be shifted to a direct cash transfer by the end of the Twelfth Plan, using the Aadhaar platform with linked bank accounts.

States are encouraged to set state-specific targets corresponding to the above, taking account of what is the reasonable degree of progress given the initial position. Sector-wise growth targets for each State are given as below.

TABLE 1: GROWTH RATES IN SDP IN DIFFERENT STATES [Averages for Plan Periods (% per annum)]

Sl. No.	States/UTs	Eighth Plan 1992-97	Ninth Plan 1997-2002	Tenth Plan 2002-07	Eleventh Plan 2007-12
1	Andhra Pradesh	5.4	5.5	8.2	8.2
2	Bihar	3.9	3.7	6.9	9.9
3	Chhattisgarh**	-	-	8.8	7.7
4	Goa	9	5.7	8.5	9.1
5	Gujarat	12.9	2.8	11	9.5
6	Haryana	5.2	6.1	9	9
7	Jharkhand**	-	-	5	9.3
8	Karnataka	6.2	5.8	7.7	7.2
9	Kerala	6.5	5.2	8.3	8.2
10	Madhya Pradesh	6.6	4.5	5	9.2
11	Maharashtra	8.9	4.1	10.1	8.6
12	Odisha	2.3	5.1	9.2	7.1
13	Punjab	4.8	4	6	6.7
14	Rajasthan	8	5.3	7.1	8.5
15	Tamil Nadu	7	4.7	9.7	7.7
16	Uttar Pradesh	5	2.5	5.8	7.1
17	West Bengal	6.3	6.5	6.2	7.3
(Special Category States)					
18	Arunachal Pradesh	5	6.6	6.2	8.5
19	Assam	2.8	1.8	5	6.8
20	Himachal Pradesh	6.5	6.3	7.6	8
21	Jammu & Kashmir	5	4.2	5.5	5.9
22	Manipur	3.7	4.7	5.7	6.2
23	Meghalaya	4	7.2	6.7	7.8
24	Mizoram	-	5.7	5.9	10.8
25	Nagaland	7.2	6.5	7.4	6.2
26	Sikkim	4.6	6.6	7.7	22.8
27	Tripura	6.7	9.4	6.9	8.9
28	Uttarakhand**	-	-	11.7	12.8

Sources: 1. Eighth, Ninth and Tenth Plan achievement from most recent base year series (CSO) & 2. Eleventh Plan achievement from 2004-05 series (CSO).

**These States have been formed recently.

CONCLUSION

Achieving the targets of Twelfth Five Year Plan (2012 / 2017), as far as Human Development in India is concerned there several challenges in the way ahead. However, there are several Human Development initiatives are fulfilled by central government and some initiatives are being implemented with the help of State governments.

- In the health and nutrition dimension, primary responsibility for health care rests with the States, the strategy needs to effectively incentivise State Governments to do what is needed to improve the public health care system while regulating the private health care system, so that together they can work towards addressing the management of delivery of preventive, promotive, curative and rehabilitator health interventions. This is not a task that can be completed within one Plan period. It will certainly span two or three Plan periods, to put the basic health infrastructure in place.
- In the Education area, specific interventions taken up during the Twelfth Plan would be aligned to the broad strategy spelt out in the Plan document. To overcome procedural bottlenecks, a system of empowered committees would be deployed wherever necessary. New structures and institutional mechanisms would also be created for coordination across ministries and agencies. The implementation framework should include:
 - Interlink expansion, equity and excellence, and focus on those programmes that serve as the locus at which more than one objective is met.
 - Bring down the walls that separate higher education from technical education with a focus on interdisciplinary action points.
 - Recognise State education systems as the principal site for expansion and focus on improving the average quality of State institutions.
 - Recognise that diverse disadvantaged groups suffer from different kinds of disadvantages and need specifically targeted interventions.
 - Revamp student financial aid programmes as the main channel for individual-focused equity schemes.
 - Recognise that fostering excellence is a multidimensional challenge requiring simultaneous action on many fronts.
 - Provide greater flexibility to the implementing agencies by grouping schemes under umbrella national initiatives.
- In the area of Employment and Skill Development, the issues must be addressed relating to quantity and quality improvement; expansion of outreach and equity and systemic and institutional reforms a time bound action plan in terms of well-defined implementation and operational strategies with focus on the delivery of the skill is the need of the hour.
- Women's agency and Child Rights are the areas of concerns, despite several attempts in this direction - women empowerment and child rights there is a huge gap between the targeted growth and actual development. There are several schemes offered by central government and state governments to fulfilling women's rights by prioritizing the issues such as gender based inequalities, discrimination and violence faced by girls and women. There is a urgent need on part of government to fulfill children's rights of survival, development, protection and participation especially those of the most vulnerable children, girls and women, locked in an inter-generational cycle of multiple deprivations. Critical priority is accorded to prevent under-nutrition as early as possible, across the life cycle, to avert irreversible cumulative growth and development deficits that compromise maternal, child and adolescent health and survival, achievement of optimal learning outcomes in education and gender equality.

- In the area of social inclusion, government must put in efforts in the direction of socio-economic development of every disadvantaged groups, thereby providing them with social empowerment, economic empowerment and social justice.
- In addition, there are three issues which need highlighting: (a) substantial quantities of real-time data can provide better information on spikes in prices of food staples that will disproportionately impact the near-poor. Sensors, satellites and other tools produce real-time data on activities and vulnerabilities. (b) “big data” analysis holds the promise of producing highly relevant information almost instantaneously to levels hitherto undreamt of outside population censuses. Trends in millions of searches on the Internet and users’ posts on social media offer insights into people’s opinions and priorities. Big data has the potential to be harnessed for diverse uses, including measurement of important indicators, capturing attitudinal trends, monitoring health epidemics and providing real-time feedback on the efficacy of policymaking. (c) Third, many countries have combined traditional and new methods of data collection for censuses, ranging from administrative registers to mobile devices, geospatial information systems and the Internet.

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