

Institute for Social and Economic Change



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DIRECTOR'S PRESENTATION

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NAMASTE

With reverence to the Founder Padmabhushana Awardee Professor VKRV RAO whose presence is felt every moment in ISEC

Presentation covers

- Contribution of ISEC as THINK TANK to Government
- ISEC contribution as training center
- Unique seminars / workshops held
- New initiatives, grants generated
- ISEC contribution to Research





I. ISEC: Think tank in social science research to Government of Karnataka

- 1. Requested for establishment of a new Department for Skill Development and Livelihood. Concept note submitted.
- 2. Karnataka State Human Development Report
- 3. Report: "Identifying compelling reasons of Backwardness, Adequacy of Representation and Efficiency on Administration" for promotion of SC/ST
- 4. Expert committee report on Issues of Karnataka State Open University
- 5. Report: "Social Justice and Empowerment for the Nava Karnataka Vision 2025"
- 6. State of Environment Report for Karnataka " Water Resources and Irrigation Management"





I. Think tank to Government (contd)

- 7. Report: Scheme of social security for elderly individuals in India
- 8. Report: Scheme of social security for unorganized sector workers in Karnataka
- 9. Report: Impact of age structure transition on public education expenditure, universal old age pension and universal health care by using the new methodology of National Transfer Accounts
- 10. Report: fiscal sustainability of reforms in pensions and health care using new application of Generational Accounting methodology.
- 11. Micro-Irrigation Policy Road Map for Karnataka
- 12. Involved in bringing out a policy output on Future Rice Strategy for India





ISEC: Recognized as training center for Indian Statistical Service

 Recognized as permanent nodal agency for offering training to Indian Statistical Service (ISS) probationers and rated Excellent



II. ISEC conducted unique seminars



- 1. For the first time Seminar on "Rediscovering Dr Babasaheb Ambedkar with participation by scholars Prof Gopal Guru funded by ICSSR, conducted at ISEC
- 2. 300 farmers all over Karnataka participated in workshop: Enhancing farmers income and welfare
 : Karnataka Agricultural Prices Commission
- 3. International conference on "Middle Class in the World Society" funded by World Society Foundation, Zurich





New initiatives, Grants generated, invitations

- III. ISEC generated research funds upto Rs. 5 crores for research in social sciences in 2016-17
- IV. Obtained approval of Government for land lease agreement with Bangalore University, which was pending since last 45 years.
- V. Professor MV Nadkarni delivered 15th LSV memorial lecture - focussed on maximizing employment with growth in agriculture
- VI. ISEC invited to International Conference on Financing Longevity: The economics of pensions, health, long-term care and disability insurance held at Stanford University



GOI study: farmers suicides in 13 states



- SPUR OF THE MOMENT triggered action responsible for 75 percent of suicides
- Indebtedness due to crop loan (44.3%)
- Indebtedness due to non-institutional loan (37.1%)
- Expectation of non-institutional credit (36.9%),
- Recovery pressure from non-institutional sources (36.1%)
- Non-realisation of higher output (35.4%)
- Non-realisation of higher prices (33.3%)
- Lack of access to expected institutional credit (33.1%)
- Crop failure due to lack of irrigation (32.2%)
- Expectation of loan waiver (31.1%)
- Recovery pressure from institutional sources (28.1%)
- Indebtedness due to non-agricultural loan (27.5%),
- Drug abuse and alcohol addiction (26.5%)





Policies recommended

- Establishment of farmers welfare cell,
- Crop and enterprise diversification, crop insurance
- Fixing MSP covering all costs
- Provide compensation in cash and kind for immediate needs and for investment in income generating activities
- Reservation/ giving priority to victim families for availing agri dev benefits for 5 years





VII. Agriculture

- VII. Are farmers subsidizing consumers in groundwater irrigated crops?
- Groundwater contributes to 70% of irrigation.
- Cost of groundwater forms 15% of cost of cultivation of perennial crops,
- Cost of GW irrigation forms 30% of cost of cultivation of seasonal crops
- These costs are not accounted for in cost of cultivation methodology in fixing MSP and accordingly are not paid for by consumers
- Farmers are subsidizing consumers to the tune of 15% to 30% of the cost of cultivation of groundwater irrigated crops
- Thus, the need proper pricing policy for these crops.





VIII. Neem Coated Urea

Urea accounted for 60% of fertilizer use. Due to fast nitrogen release property and subsidy, it was diverted to industrial use.

NCU was developed for sustained release of nitrogen. This improved crop productivity.



IX. Contract farming, land leasing

- 1. At present, all types of farmers (small, medium and large) are leasing in / out land to increase their incomes for a fixed time period with annual rent in cash.
- 2. Farmers preferred formal lease as they faced problems in informal leasing due to arbitrary lease rate and too short lease periods
- 3. Land reforms should facilitate making land viable for farmers and not render them landless labourers working for lease companies.



X. ISEC Recommendations to Fourth



State Finance Commission

- a) Assured transfer of resources from state Government to local bodies and should not be subjected to the level of fiscal distress faced by the State.
- b) Share of plan funds to Panchayats under Plan as a percentage of total state Plan allocation declined from 35 % in 1991 to 16 % in 2014. This needs to be restored to original level.
- c) State Government has to complement Central Govt's funding to local bodies towards development, and avoid substitution of State funds with that from the Center
- d) At present, Districts with absorbing capacity of funds, receive more funds from the State, compared with backward districts, which exhibit lower absorbing capacity. This should be rectified to reduce regional imbalance.





XII. ISEC suggestions to scale up the sluggish apprenticeship program in Karnataka

- 1. Currently, only 10 % of apprenticeship potential has been tapped.
- 2. Apprenticeship cell at district level has to be created including rural enterprises, and industry to enhance potential.
- 3. Apprentice web portal needs to be redesigned to enhance the potential.



XIII. <u>ISEC evaluated Karnataka Health System</u> <u>Development and Reform Project</u>



- Non-communicable diseases (NCDs) (chronic diseases) heart disease, stroke, cancer, diabetes, chronic lung disease form 70% of all deaths, who die before 70 years of age due to tobacco use, physical inactivity, alcohol, unhealthy diets. It was recommended to scale up prevention and control programme of NCDs.
- Disseminate updated Medical Manual for doctors in PHCs every 2/3 years.
- Develop well-planned need-based targeting of Mobile Health Clinic with increased budgetary allocation
- Re-implementation of Citizens Help Desk with effective monitoring system in place.
- Seting up Emergency Health Services with a separate organogram.



XIV. ISEC projections of Income and Employment for Vision 2030, Karnataka



Particulars	2011-	2029-30	Required annual growth rate to achieve vision 2030
GSDP in (Rs billion)	5511	18627	13.22%
Per capita income Rs	98021	2,09,82	6.34%
Employment in million	62	85	2.06%
Additional skill required for new entrants (in million)		13	
Investment required to achieve the above (in billion)	2361	7209	11.41%





XV. ISEC prepared India Youth Development Index (YDI) and Report 2017 released Nov 14, 2017

YDI developed using 6 dimensions:

Level of education
Health and well being
Employment
Political participation

Civic participation

Social inclusion

Lowest YDI index is 0.466 for Bihar

Highest is 0.689 for Himachal Pradesh

YDI ndex for India is 0.569

YDI for Karnataka 0.602, ranks 8th



Dalit studies



XVI. Study on Status of Scheduled Castes in Karnataka

Suggested for Development of 'Dalit
 Agricultural Colonies and Industrial Units' to make lives of dalits' stable and sustainable.

XVII. Study on Dalith health care personnel

- Inadequacy of health care personnel from among Dalits
- Domination of non-dalits in key positions of rural health care services resulting in caste based discrimination





XVIII. Study on disability

2% of India's population suffer from disability / physical / visual challenges

Need to develop appropriate policies and programmes adequately





XIX: Study on adolescent pregnancy

- According to 4th National Family Health Survey, 8 % of women (15-19 years) were pregnant or already mothers at the time of survey.
- 20% of women in Karnataka married before 18 years.
- Such women with child birth during adolescence have higher probability of having babies with low birth weight.





XX: Knowledge base on ageing

Based on the ISEC study on building data base on ageing, the Govt of Odisha framed and released the State Policy for the elderly in Odisha, on 1st October, 2016





XXI. Studies on Decentralization

- Provision of financial incentives in delivery of public services for inclusive flow of benefits will increase enrolment by 8 % and helps in overcoming social distance.
- MGNREGS responsible for a modest increase of 4.3
 % in real agricultural wages.
- In Atal Pension Yojana for poor unorganised workers with irregular incomes:

Any default in payment of premium for over two years, leads to closure of account.

Such punitive provisions should be removed.

Due to location of banks at long distances, payment of subscriptions by different modes such as mobile has to be encouraged.





Decentralization contd

- Government should introduce savings schemes (public sector banks) and improve access to social security (health insurance programmes) for advasis and the poor.
- Considering all social security schemes for unorganised workers (about 28): suggested to
- 1) develop a common application form for all the schemes
- (2) minimize number of support documents
- (3) encourage online submissions;
- (4) only obtain the appropriate information used for decision making.





XII. Public Services in urban areas

Urban Education:

- 1.83% enrolment for English medium education
- 2. Gender and preference for Type of school did not show any partiality in treatment to girls or boys
- 3. Households spent between Rs. 25000 to Rs. 50,000 per year towards children education





Urban Health

- Non communicable diseases cardiovascular disease (36%), diabetes (30%) back pain (27%)
- Extensive dependence on private hospitals /clinics that charged exorbitantly
- Reasons for preferring private hospitals timely service (42%), good treatment (34%), good facilities (22%)
- Majority of hospitals were accessible in 1 to 5 km radius
- Primary Health Centers were not preferred due to lack of trust
- PHC per ward was insufficient indicating poor access and accountability





Urban drinking water

- 78% have access to piped water supply
- Metered Connections:
- General Households 89%; Slum Households 43%)
- Rain water harvesting not properly implemented due to poor institutional processes of promoting RWH, lack of awareness, reluctance to invest, financial constraints, lack of space
- Still 36% of households are drinking water without treatment at home





Urban Solid waste

- 1-2 kgs of solid waste per day is generated
- BBMP collects 98%
- Frequency Daily: 66%
- Bi-weekly 25%

XXIII. Study Data collection needs of urban areas

- Data on per capita income, population BPL has to be made available at city level (currently available at State / District level)
- 2. Data on vehicles registered and traffic flow at city level to reflect vehicular congestion
- 3. An optimum Floor Area Ratio for buildings (ratio of built area to plot area) has to be designed for Indian cities depending upon our resources, needs and environmental concerns. The FAR for buildings in India is 4:1, China upto 13:1, Manhattan upto 15:1, Singapore upto 20:1.





XXIV. Female labor force participation:

- Female labor force participation in India 35%
- Female labor force participation in China 64%
- Crucial to provide social security and other benefits for women