## Outlook

10.150 Population stabilisation is crucial for the achievement of the goal of sustainable development and an equitable distribution of resources/opportunities. Though Government initiatives exist in the form of suitable public policies on education, health and family welfare alongwith economic incentives and facilities for small and micro-families, these measures have had a limited impact on the fertility, net reproduction rates and the family size. Improved access to primary and secondary education, extension of basic amenities, the empowerment of women, awareness generation and a better standard of living would ultimately contribute towards inculcation of the required consciousness regarding the desirability of a small family size.

10.151 In education, the elementary sector is besieged by numerous systemic problems such as inadequate school infrastructure, presence of single-teacher schools, high teacher absenteeism (specially in rural areas), large-scale teacher vacancies, inadequate equipment, etc. This brings into focus the role of decentralization and people's participation in the provision of basic services. It is essential that control over schools and teachers be transferred to local bodies, having a direct interest in teacher performance. This has also been highlighted as an area of emphasis in the Tenth Plan.

10.152 As the country undergoes demographic and epidemiological transition, it is likely that larger investments in health would be required for maintaining even the current health status, since the technology required for tackling drug-resistant infections and non-communicable diseases is expensive. This would inevitably lead to escalating health care costs. Health sector reforms are a part of economic reforms. However, due care will have to be taken to ensure that the poorer segments of the population are able to access services they need. Data from the NSSO indicate that escalating health care costs is one of the reasons for indebtedness not only among the poor but also in the middle income group. It is therefore essential that appropriate mechanisms by which costs of severe illnesses and hospitalization can be borne by

the individual/organization/State are explored, and affordable/appropriate choices made. Since continuation of a universally free public health care system is unsustainable, strategies be evolved for levy and collection of user charges from people above the poverty line.

10.153 The Government is providing several fiscal and monetary incentives for the smallscale industries, many of which are based on agricultural goods and rural resources. However, these industries suffer from a lack of modern technology and skilled labour, inadequate bank credit, and an inefficient marketing network. It is imperative that a programme of skill development, vocational training and technical education is adopted on a large scale in order to generate productive employment opportunities for those living in rural areas. The entire gamut of the existing poverty alleviation and employment generation programmes may have to be restructured to meet the newly emerging demand for employment.

10.154 It has also been observed that investment on rural infrastructure and agricultural extension services reduces poverty to a greater extent than agricultural subsidies, which are not properly targetted and benefit the rich farmers. Roads, well designed irrigation systems, flood control, rural electrification and telecommunications, are effective safety nets that insure the rural poor against income fluctuations, assist in overcoming market failures and need to be strengthened and widened.

10.155 An anti-poverty strategy that is fiscally sustainable be devised which directly targets those who are unable to benefit from the opportunities offered by growth. Safety nets should focus on those who either cannot participate in the growth process (for reasons of extreme deprivation or vulnerability combined with poverty) or face continuing exposure to risks.

10.156 There is a very good scope for the strengthening of public-private partnership in the delivery of health care services as also for the involvement of Non-Government Organisations (NGOs) in the implementation of various government guided schemes in the social sectors.

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