INTRODUCTION:

Regional development refers to a wide range of activities aimed at improving the social and economic conditions of a given geographic area. These activities become regional when they are undertaken jointly by multiple units of government that share a common geographic region. In Marathwada region so many committees and working groups have worked on development; these have been appointed by central and state government from time to time. Backwardness of Marathwada region was at one time a political issue among the political parties of Maharashtra. According to Dholakia (2003) regional disparity in income and human capital is often a source of political tensions and dissatisfaction in a federal system. Although the theory and measurement of such disparities have never received adequate attention in India, both the Planning Commission and finance commissions have given very high weightage to this aspect for deciding allocation of resources among states. Hence, central and state government appoint study groups on identification of backward region, but still now this problem is not solved.

According to Gunnar Myrdal (1972): “the assumption is that the poorer regions, unaided could hardly afford much medical care and their populations would be less healthy and have a lower productive efficiency.

They would have fewer schools and their schools would be grossly inferior – in India the population of the poorer states (regions) is actually still largely illiterate. It should be pointed out in this connection that all history shows that the cheap and often docile labour supply has been effective in bringing industry to backward regions.\textsuperscript{53} The above quoted sentence of Myrdal is not wrong even 38 years later.

Dandekar Committee (1983): The Maharashtra government decided in 1983 to appoint a high level fact finding committee of experts to undertake an objective and in depth study of the problem of regional imbalance. Besides the government has also decided to appoint four regional committees for Vidharbha, Marathwada, Kokan, and rest of Maharashtra to suggest remedial action and concrete programmes based on the report of the fact finding to remove imbalance between districts within their respective regions. Before Dandekar Committee some committees/working group on identification of backward areas. In 1968 Government of India appointed a working group namely Pande Committee.

Pande committee recommended, distance from larger cities and large industrial projects, per capita income, population engaged in secondary and tertiary activities, factory employment, non/under utilization of economic and natural resources these criterion for identifying backward districts. Pande committee had identified from the above criteria the following 13 districts in Maharashtra as industrially backward according to the criteria laid down by the planning commission – Beed, Osmanabad, Aurangabad, Nanded, Parbhani, (Marathwada

Region) Jalgoan, Bhandara, Ratanagiri, Yavatmal, Chandrapur, Dhule, Buldhana and Kulaba. These districts are qualified to receive financial concessions for development of industries.

Chakravarty Committee: The problem of identification and classification of backward areas has been more methodically examined by the Chakravarty Committee on backward areas. The committee chose the fourteen indicators: near about all these indicators were related to physical infrastructure.

National Committee on Development of Backward Areas: the NCDBA also examines whether “instead of using overall index, it may be easier to define sectoral indices to indentify backwardness with respect to specific sectors of development e.g. Agricultural backwardness, Industrial backwardness, Educational backwardness.

Dandekar Committee’s terms of reference require was to examine regional disparities district wise. Dandekar committee identified indicators of development was: these are 1) per capita domestic product 2) per capita consumer expenditure 3) per capita domestic product originating in agriculture and allied activities sector 4) per capita domestic product originating in registered manufacturing sector 5) percentage of urban population 6) percentage of workers engaged in activities other than agriculture and such occupations as mining, quarrying, livestock, forestry, fishery, hunting, plantations, orchards etc. 7) per capita consumption of electricity 8) per capita bank credit and bank deposits and credit/deposit ratio 9) male and female literacy and 10) percentage of scheduled tribes, scheduled caste, nav baudhas and agricultural labour in the population.
These studies showed a need for and recommended increased expenditure on above mostly infrastructural things by the government, and assumed that increasing expenditure in these areas would remove the backwardness of regions. This was also often the major demand of local ‘development movements’. But in fact, increased expenditure, even when the government actually spends on these infrastructural matters, does not by itself remove backwardness of regions. That is, only increasing expenditure is not sufficient for sustained development---other things like rights and structural reforms are essential for ‘real’ development, and this is what is underlined by the human development approach.

IV.1 MAHARASHTRA MANAV VIKAS MISSION (2006):

Government of Maharashtra published human development report in 2002. In this report out of 35 districts some districts human development index level find very low. So, for improvement in these low level human development districts, Government of Maharashtra established “Maharashtra Human Development Mission”, under the headship of Krishna Bhoge (Ex IAS). This mission selected 12 districts and 25 Tahsil/Talukas as being low in Human development.\(^{54}\) In selected Tahsil the Mission selected 2600 villages having 31 lakh population in total. According to the Mission’s Action Draft, low HDI in the selected districts is low due to low per capita income and high infant mortality rate.\(^{55}\) Mission’s selected districts HDI below state average 0.58. So, the Mission took on the objective of improving the HDI of the selected districts up to the average state level.

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\(^{54}\) See in Appendix IV-A

TABLE NO. 4.01 MAHARASHTRA MANAV VIKAS MISSIONS OBJECTIVE TARGETS UP TO JUNE 2009 IN LOW HDI DISTRICTS.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Factors</th>
<th>After Three Year Expected Average Indicators</th>
<th>Weightage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Per Capita Income</td>
<td>0.15</td>
<td>1/3</td>
</tr>
<tr>
<td>2.</td>
<td>Literacy</td>
<td>0.80</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Average Schooling</td>
<td>0.80</td>
<td>1/3</td>
</tr>
<tr>
<td>4.</td>
<td>Infant Mortality Rate</td>
<td>0.80</td>
<td>1/3</td>
</tr>
<tr>
<td></td>
<td>Average Index</td>
<td>0.58</td>
<td></td>
</tr>
</tbody>
</table>


IV.2 MISSION’S STRATEGY TO ACHIEVE OBJECTIVE WITH IN TIME:

Actually in selected districts HDI low due to less per capita income but mission wants to improve education and reduce infant mortality rate because it’s not possible to increase per capita income within three years. For achievement of this objective mission uses “convergence approach”. All central and state governments schemes are implemented in an integrated manner in the Mission’s area. Following projects have been implemented by Manav Vikas Mission--- Increase Agricultural Productivity, Help farmers to start agricultural related subsidiary business etc. For health – reduce infant and child mortality, health checking of pregnant women. Nutrition – registration, weight checking of 0-6 years children etc. In Education – to start adult education programme,
registration of school-excluded children number, to start Excellence School Award Scheme, etc. all these project mission done in three year.

IV-3 MAHARASHTRA MANAV VIKAS MISSION’S REPORT ON WORK FULFILS:

In June 2009 missions three years work on human development improve in low HDI districts is over. Mission evaluates his work in this report. For this work mission planed micro planning for each village through help of UNICEF. The Mission does its work within a three year period near about in 2400 villages. Mission wants improvement in each factor of HDI. For increase in per capita income of people in the selected areas, the Mission recalls that they are agricultural dominated. So, the Mission works on increasing agricultural productivity, irrigation projects, women empowerment by self help group etc.

For life expectancy the Mission works on reducing number of infant mortality in work area. Before the Mission’s work (three years before) in working area institutional delivery rate was 32%, the Mission targeted 80% up to June 2009. Now in the Mission working area the percentage of institutional deliveries is 73%, and it is high compared to rural Maharashtra’s average figure of 54% (Central Ministry of Health and Family Welfare Report, 2007-08).
Above figure shows institutional delivery numbers from Oct-2006 to up to Jun-2009, increase from 351 to 1414 respectively. Also, there has been an increase in the number of primary health centers and sub centers within the region. When the Mission started in October 2006, the Infant Mortality Rate (IMR) was 41 per 1000 births. Now, infant mortality rate figure in rural Maharashtra is 43 per 1000 birth, and in the Mission’s work region it has progressively declined to 23 per 1000 births in 2009.\textsuperscript{56} And the Report finds that infant mortality percentage is highest for home deliveries. So, the Mission wants increase number of institutional deliveries.

\textsuperscript{56} MMV Mission Report, 2009 pp 135-136
Education is a most important factor in human development. The Mission has implemented a special adult literacy programme. Under this programme near about 2 lakh people illiterate people have become literate within the three year period. In the Mission’s area literacy was 69%; it is now 80%.

The above picture shows that the Maharashtra Manav Vikas Mission’s work has brought significant benefits to low HDI districts.
REFERENCES: