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Development of Social Infrastructure in Karnataka: A Case Study of Belgaum District

Questionnaire for Educational Infrastructure

1. Name : 
2. Address : 
3. Gender : 
   a. Male 
   b. Female 
4. Age : 
   a. 18 & 21 
   b. 22 & 25 
   c. 26 & 29 
   d. 30 & above 
5. Marital Status : 
   a. Unmarried 
   b. Married 
   c. Divorced 
6. Qualification : 
   a. Uneducated 
   b. Matriculate 
   c. Pre-University 
   d. Graduate 
   e. Post-Graduate & More 
7. Occupation : 
   a. Government 
   b. Private 
   c. Own Business
8. Do you believe that educational infrastructure is important for the overall development of the district?
   a. Yes
   b. No

9. What is your opinion about the status of educational infrastructure in the district?
   a. Very best
   b. Adequate
   c. Inadequate
   d. Improving

10. Are you satisfied with the number of Government Primary Schools in your neighbourhood?
    a. Yes
    b. No

11. Where did you enroll your kids for primary education?
    a. Government Primary School
    b. Private English Medium School
    c. Studied in Both

12. If your kids are studying in government primary school, what are the reasons for enrollment?
    a. Very economical
    b. Mid-Day Meals
    c. Near to home
    d. Good quality of education
    e. No private schools are available

13. If private school, what are the reasons for enrollment?
    a. English Medium Education
    b. High quality teachers & education
    c. Good infrastructure and facilities
    d. Personal Prestige
14. What do you feel are the problems being faced in primary education system in your locality?
   a. Lack of Physical Infrastructure
   b. Inadequate and Indifferent teachers
   c. Lack of Quality teaching and personal care
   d. No English Medium Education
   e. No Co-curricular activities

15. What measures do you suggest for the improvement of government primary educational system in your locality?
   a. More number of primary schools
   b. Improvement in Physical Infrastructure
   c. Adequate, Trained and Motivated Teachers
   d. Adoption of English Medium

16. Are there adequate numbers of government higher educational institutes in your locality?
   a. Yes
   b. No

17. Where do you prefer to enroll your children for pursuing the higher education?
   a. Government Institute
   b. Private Institute
   c. Indifferent

18. If government institute, what are the reasons for such an enrollment?
   a. Good Quality of Education
   b. Economical
   c. Located in nearby place
   d. No Alternative private colleges
19. If private higher educational institute, what are the reasons for the enrollment?
   a. Good teaching quality
   b. Improved Infrastructure and Ambience
   c. More academic combinations to choose
   d. Personal Prestige and Choice

20. What are the problems did you witness in government higher educational institutes?
   a. No proper infrastructure
   b. Poor academic combinations
   c. Lack of good quality faculty
   d. Lack of New Courses

21. What do you feel about the adequacy of government hostels for the students who are pursuing the higher education?
   a. Very Best
   b. Adequate
   c. Inadequate
   d. Poor

22. Are there separate government higher educational institutes for the girls in your locality?
   a. Yes
   b. No

23. If No, will you send your girl child to another town/village for studying higher education?
   a. Yes
   b. No

24. Is your locality having adequate numbers of government technical educational institutes?
   a. Yes
   b. No
25. How do you rate the quality of governmental I.T.I./Diploma Technical Institutes in your neighbourhood?
   a. Good
   b. Average
   c. Poor

26. Are there any regional imbalances of educational infrastructure within the district?
   a. Yes
   b. No

27. If yes, what could be the reasons for such an intra-district regional imbalances within the district?
   a. Inequal distribution of budget
   b. Negligence on the part of policy makers
   c. Lack of political will
   d. Differences in Population Density

28. What do you suggest to improve the quality of educational infrastructure in the district?
   a. More Numbers of Schools, High Schools & Colleges
   b. Improvement in quality of teaching
   c. Improvement in Infrastructure and Ambience
   d. Reduce the school and college dropout rate
   e. Establishment of more hostels for both boys and girls.
   f. Public-Private partnership in Education
Development of Social Infrastructure in Karnataka: A Case Study of Belgaum District

Questionnaire for Health Infrastructure

1. Name : 
2. Address : 
3. Gender :
   a. Male
   b. Female
4. Age :
   a. 18 & 21
   b. 22 & 25
   c. 26 & 29
   d. 30 & above
5. Marital Status :
   a. Unmarried
   b. Married
   c. Divorced
6. Qualification :
   a. Uneducated
   b. Matriculate
   c. Pre-University
   d. Graduate
   e. Post-Graduate & More
7. Occupation :
   a. Government
   b. Private
   c. Own Business
8. Do you believe that the good health infrastructure is essential for the economic
development of the state/country?
   a. Yes
   b. No

9. Is your locality having enough public health delivery system to meet the needs of
local population?
   a. Yes
   b. No

10. What do you rate about the existing quality of public health delivery system in
your locality?
    a. Good
    b. Average
    c. Poor
    d. Miserable

11. Where do you prefer to get treated when you are your family members are sick?
    a. Government Hospital
    b. Private Hospital
    c. Both/Indifferent

12. If government hospital, what could be the reasons?
    a. Free treatment and medicines
    b. Qualified Doctor
    c. Near to Home
    d. Cant afford the private treatment

13. If Private hospital, what could be the reasons?
    a. Non-Availability of doctor and staff
    b. No free treatment and medicine at government hospital
    c. Better quality of treatment and medicines
    d. No government hospitals in the locality
14. Did you ever heard of any public health insurance scheme?
   a. Yes
   b. No

15. Are you and your family members covered under any public health insurance scheme?
   a. Yes
   b. No

16. What is the major health problem being faced in your locality or neighborhood?
   a. Communicable Diseases
   b. Malnutrition
   c. Premature Birth
   d. Delivery related deaths

17. What do you feel about the frequency of local government or its agencies conducting health awareness and promotional camps in your locality?
   a. Very Often
   b. Occasionally
   c. Never

18. Are there regional imbalances in the health infrastructure within the district?
   a. Yes
   b. No

19. If yes, what are the reasons for regional imbalances in the health infrastructure within the district?
   a. Inequitable distribution of government budget
   b. Lack of political will
   c. Differences in the spread of population
   d. Any other (specify)
20. What do you think are the problems of health infrastructural system in the district?
   a. Too few government hospitals and PHCs
   b. Lack of qualified doctors and support staff
   c. Shortage of medicine and equipments
   d. Lack of cleaning and inadequate facilities

21. Is local/State government making enough efforts and expenditure to promote the health infrastructure in the locality?
   a. Yes
   b. No

22. What do you suggest to improve the public health infrastructure system in the district?
   a. More Investment in health infrastructure
   b. Better Administration of existing health infrastructure
   c. Public-Private partnership in health management
   d. Political Will
Higher Education in Karnataka: Weaknesses and Challenges

By Swapna L. Patil and D. N. Patil*

Higher education refers to education in post higher secondary institutions, colleges and universities. It is called “higher” because it constitutes the top most stage of formal education and it is concerned with processes in more advanced phases of human learning. The age of entrants is 18 years and therefore they are mentally matured level. They can analyse, synthesize and evaluate the concepts, facts, ideas of all kinds. Their creativity is at the peak level.

Higher education in India has expanded since Independence in the form of increase in number of colleges, universities, and centres of higher learning, and in the increase in number of students as well as courses. The growth has, however, not been uniform. There is large disparity in the quality of education imparted by various institutions. A limited number of them are offering excellent services to the nation whereas others are mediocre or average. Undoubtedly, the expansion of higher education has met some of the envisaged goals by providing education to a large section of student living in rural and urban areas and creating employment opportunities for them.

The emergence of a worldwide economic order has immense consequences for higher education more so under the changes that have taken place in the recent past with regard to globalisation, industrialisation and information technology advancement. Its impact on education has aiced the policy changes that have taken place at UGC, AICTE, DEC, NCTE, Medical Council of India, BAR Council, Architecture Council and such other regulatory bodies from its beginning.

Despite of an impressive growth of higher educational institutions in Karnataka, it is still not in position to meet demands for higher education and number of higher educational institutions and enrollment is not impressive. We need to develop more higher educational institutional and more students enrollment. The major weaknesses and reasons for the less impressive growth of higher education in Karnataka are that we need to completely overhaul the curriculum in universities to meet the global standards and there needs to be a significant up graduation of academic infrastructure in many higher educational institutions.

The landscape in general, has changed towards a new order. It is obvious that centre and state governments, the institutions and academic and non academic staff need to gear themselves to deal with the challenges posed by those to achieve the slated, and this demands review of beaten track, set notions, comfort, attitudes and work styles. It is time for all those who are concerned with policymaking, planning, administration and implementation of Higher Education to revitalize the very thinking on the subject and put it on the right track. With this background, this paper attempts to analyse the trends and status of higher education in Karnataka in terms of growth rate of higher educational institutions, enrollment in higher education and universities. The paper makes extensive use of secondary sources, which mainly consists of various issues of statistical abstract, senses, relevant publications and Karnataka government reports. Statistical methods like mean, standard deviation (SD) Co-efficient of variation (CV), growth rate, average, percentage etc, were used at appropriate places for analyzing this data.

Higher Education in Karnataka

Higher and technical education in Karnataka is imparted by Government and private colleges affiliated to recognized universities and deemed universities. The colleges are classified and recognized as Arts, Science, Commerce and Oriental Learning Colleges by the University Grants Commission, while the technical and professional colleges are recognized by All India Council for Technical Education (AICTE). Education is a state subject. Each state has the power to create, accredit and fund schools and universities. The colleges are classified and recognized as Arts, Science, Commerce and Oriental Learning Colleges by the University Grants Commission, while the technical and professional colleges are recognized by All India Council for Technical Education (AICTE). Education is a state subject. Each state has the power to create, accredit and fund schools and universities. At the same time a number of schools and universities are run directly by the Central Government, creating a dual management system. While many
### Table 1
Division wise Distribution of Higher Educational Institutions

<table>
<thead>
<tr>
<th>Divisions</th>
<th>Number of Higher Educational Institutions</th>
<th>Higher Educational Institutions Per lakh population</th>
<th>Growth Rate of Higher Educational Institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belgaum</td>
<td>70(23.65)</td>
<td>90(24.65)</td>
<td>694(23.84)</td>
</tr>
<tr>
<td>Gulbarga</td>
<td>47(15.88)</td>
<td>50(13.46)</td>
<td>642(22.05)</td>
</tr>
<tr>
<td>Bangalore</td>
<td>120(40.54)</td>
<td>162(43.67)</td>
<td>1154(39.64)</td>
</tr>
<tr>
<td>Mysore</td>
<td>59(19.93)</td>
<td>69(18.60)</td>
<td>421(14.46)</td>
</tr>
<tr>
<td>Karnataka</td>
<td>296(100)</td>
<td>371(100)</td>
<td>2911(100)</td>
</tr>
<tr>
<td>SD</td>
<td>32.07</td>
<td>48.97</td>
<td>307.83</td>
</tr>
<tr>
<td>MEAN</td>
<td>74.00</td>
<td>92.75</td>
<td>727.75</td>
</tr>
<tr>
<td>CV</td>
<td>43.34</td>
<td>52.80</td>
<td>42.30</td>
</tr>
</tbody>
</table>

Source: Karnataka at a Glance 1995 - 2001-2005

Note: Figures in Brackets Indicate Percentage of Higher Educational Institutions.

SD: Standard Deviation  CV: Co-efficient of Variation

### Table 2
Division wise Distribution of Enrollment in Higher Education

<table>
<thead>
<tr>
<th>Divisions</th>
<th>The Total Enrollment in Higher Education</th>
<th>Growth Rate of Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belgaum Division</td>
<td>21242(18.42)</td>
<td>27529(20.22)</td>
</tr>
<tr>
<td>Gulbarga Division</td>
<td>13023(11.29)</td>
<td>18012(13.23)</td>
</tr>
<tr>
<td>Bangalore Division</td>
<td>54180(46.97)</td>
<td>61842(45.43)</td>
</tr>
<tr>
<td>Mysore Division</td>
<td>26901(23.33)</td>
<td>28749(21.12)</td>
</tr>
<tr>
<td>Karnataka</td>
<td>115346(100)</td>
<td>136132(100)</td>
</tr>
<tr>
<td>SD</td>
<td>17830.52</td>
<td>19150.59</td>
</tr>
<tr>
<td>MEAN</td>
<td>28836.50</td>
<td>31033.00</td>
</tr>
<tr>
<td>CV</td>
<td>61.83</td>
<td>56.27</td>
</tr>
</tbody>
</table>

* Enrollment in Higher Education

Source: Karnataka at Glance 1995-2001-2005

Note: Figures in Brackets Indicate percentage of Enrollment in Higher Education

32 July 2010
Technical schools and colleges are managed and run by private organizations, even in case of those affiliated to Government Universities. Most all universities are government funded. At the apex of the system are national research institutes.

Higher education is no less important from the point of view of man resource development. Higher education comprises both general and technical education. An important component of human resource development is technical education. Technical education enables a country develop on the economic scale.

The development of higher education facilities at all levels and a been presented in Table-1. Table tells that there has been a good all of expansion of educational institutions at all levels. Karnataka state has adopted the objectives of universal higher education. Division wise data indicated that Bangalore division had maximum number of higher educational institutions 120 (54 percent) in 1994-95, 162 (.67 percent) in 2000-01 and 1154 (.64 percent) in 2004-05 and Hyderabad (Belgaum) division, 70 (.55 percent), 80 (24.25 percent) 694 (23.84 percent) respectively.

Similarly, in Bangalore division higher educational institutions catering to lakh population were above the state level average, 1.51 higher educational institutions per lakh population below the Karnataka state level average. The growth rate of higher educational institution in Karnataka has significantly increased from 20.1 percent during 1995-01 to 684.64 percent during 2001-05. The highest growth rate were registered in Bangalore division (25.00) and Belgaum division (21.57), which was above the Karnataka level average during 1995-2001 but during 2001-05 only Gulbarga division had highest growth rate.

b) Enrollment in Higher Education: Division wise distribution of enrollment in higher education and growth rate for various relative indicators for the divisions of Karnataka along with the State as a whole has been shown in Table - 2, the table indicates the number of PG Professional, technical, B.Ed, B.A. degree students who come under higher education. Table provides information about student s enrollment in higher education. Bangalore division had more than 45 percent of total state enrollment in higher education period of 1994-95, 2000-01 and 2004-05. In Gulbarga division total percentages of enrollment was less than 13 percent which is lowest than all divisions during the period of 1994-95 and 2000-01 and further enrollment improved to 23 percent in 2004-05.

Growth rate of enrollment in higher education has significantly increased from 18.02 during 1998-01 to 601.12 percent during 2001-05. Highest growth rate of enrollment registered in Belgaum and Gulbarga division, 29.60 percent and 36.31 percent during, 1995-01 and 732.47 and 1118.87 percent during 2001-05.

c) Universities in Karnataka: Table-3 presents details of the division wise distribution of universities per thousand km in Karnataka during last Ten years from 1994-95 to 2004-05.

Table-3 reveals that number universities have been increased in Karnataka from 10 in 1994-95 to 18 in 2004-05. It is evident from the Tables that during the 1994-95, 2000-01 and 2004-05, highest number of universities are in Bangalore, amounting to 4, 5 and 8 respectively. Bangalore division enjoyed a high growth rate of enrollment in higher education. Growth rate of universities in Karnataka was 50.00 percent during 2004-05. Highest number of universities in Bangalore division (100.00) and there is no growth rate in Mysore division.

Conclusion

From the careful analysis of the above data one can conclude that during the period of 1994-95, 2000-01 and 2004-05, highest growth rate of enrollment in higher education and growth rate of higher educational institutions during the study period.

Moreover, Bangalore division had more than 45 percent of total state enrollment in higher education and lowest in Gulbarga division (13 percent) and more universities were concentrated in only Bangalore division.

Despite of an impressive growth of higher educational institutions in Karnataka, it is still not in a position to meet demands for higher education and number of higher educational institutions and enrollment is not impressive. There is a need to develop more higher educational institutional and more students
Table-3
Division Wise Distribution of Universities

<table>
<thead>
<tr>
<th>Divisions</th>
<th>Number of Universities</th>
<th>Universities Per 1000 sq km</th>
<th>Growth Rate of Universities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belgaum Division</td>
<td>2(20.00)</td>
<td>3(25.00)</td>
<td>4(22.22)</td>
</tr>
<tr>
<td>Gulbarga Division</td>
<td>2(20.00)</td>
<td>2(16.67)</td>
<td>4(22.22)</td>
</tr>
<tr>
<td>Bangalore Division</td>
<td>4(40.00)</td>
<td>5(41.67)</td>
<td>4(44.44)</td>
</tr>
<tr>
<td>Mysore Division</td>
<td>2(20.00)</td>
<td>2(16.67)</td>
<td>2(11.11)</td>
</tr>
<tr>
<td>Karnataka</td>
<td>10(100)</td>
<td>12(100)</td>
<td>18(100)</td>
</tr>
</tbody>
</table>

SD 1.00 1.41 2.52
MEAN 2.50 3.00 5.00
CV 40.00 47.14 55.92

Note : Figures in Brackets Indicate Percentage of Universities ; SD : Standard Deviation ; CV : Co-efficient of Variation

enrollment. The major weakness and reasons for the less impressive growth of higher education in Karnataka are that there is a need of complete overhaul the curriculum in universities to meet the global standards and there needs to be a significant upgradation of academic infrastructure in many higher educational institutions. On the other hand, the private participation from large corporate houses is a small component of higher educational institutions at present and it needs to be increased by offering certain incentives and subsidies for these business houses. The shortage of qualified faculty in new and emerging areas can be solved by offering excellent salaries and growth opportunities.

References

Anger Management

Causes of Anger:
a) Irsecurity b) Hurt/Humiliation c) Stress d) Indifferent health
e) Absence of control over events f) Poor time management

How Anger gets Manifested:

Dealing with Anger:
1. Set limits for tolerance of anger displays
2. State how bad behaviours are unacceptable
3. Criticize the action, not the individual
4. Create a forum for discussing any problem that may exist
5. Generate positive actions to counter anger
6. Be generous in appreciating the achievements of the anger prone individual
7. Foster optimism and be supportive
8. Help a person make an alternative choice to anger
9. Build the self-esteem of the person(s)
10. Give him/her the opportunities to succeed.

— Dr. Vasantha R. Patilig, New Delhi.

July 1, 2010
Health and PHCs in Karnataka: An Inter-Divisional Analysis

By Swapna. L. Patil and D.N. Patil*

Health is the most important socio-economic aspect of every individual life. Its importance is evident in old saying “Health is wealth.” Health is not only basic to a happy life for an individual, but also necessary for all productive activities in the society. The whole development cycle of a person depends upon his intellectual caliber, curiosity and constructive thinking, all these qualities depend upon good health. Therefore, to meet the very important need of the healthy citizens of a healthy society, health services are “since-qua-non” for the government. Health is an important constituent of well-being, the foundation of prosperity and development of a country.

World development report 1993 stated “Improved health contributes economic growth in four ways: 1. It reduces production losses caused by worker illness, 2. It permits the use of natural resources that had been tally or nearly inaccessible cause of disease. 3. It increases enrolment of children in schools and makes them better able to learn, and 4. It frees for alternative uses sources that would otherwise have been spent on treating illness.

The economic gains are relatively easier for poor people, who are pica!ly most handicapped by ill health and who stand to gain the most from the development of denized resources. Good health is both the means and end of development. A healthy population is a prerequisite for economic growth; in turn this income growth can be channeled to improve human lives through the provision of a decent education, good healthcare facilities, and foundation of prosperity and development of a country.

WHO (1983) states that “the enjoyment of the highest attainable standard of health if one of the fundamental rights of every human being without distinct of race, religion, economic or social conditions.

Health service is one of the most important of all human endeavours to improve the quality of life. Health development is recognized as an essential and important part of the national socio-economic development. The health of human capital generates both higher income and individual well being. Improved health generates economic growth and poverty reduction in the long run. Two key elements of human capital are the extent to which the labour force is educated, and the level of health. The role of health in influencing economic outcomes has been acknowledged at the micro level (Strauss and Thomas, 1998, Schultz, 1999). Thus improvement in health is an important engine of economic growth. If economic growth of a country is to be sustained, the provision of healthcare has to be more accessible and qualitatively better. The focus of the paper is to analyze the status of Health Care and Health infrastructure in Karnataka during the period of 1991-2005. The paper has been divided into three sections. Section I presents an overview of the current status of health in Karnataka. Section II analyzes Literacy and Poverty in Karnataka. Section III examines the disparities in the availability of Primary health Centre’s in Karnataka.

Health Status in Karnataka

Health status is generally measured in terms of life expectancy at birth, birth rate, death rate etc. According to WHO, health is a state of complete physical, mental and social well-being and not merely the absence of disease or in formation. The indicators of health status measured in terms of the birth rate and death rates are more reflective of the demographic changes taking place in the country. Division wise life expectancy, birth rate per 1000 person and death rate per 1000 person are presented in a Table-1.

The birth rate in Karnataka was 22.4 per 1000 person in 2001-02. The highest birth rates were in Belgaum division (29.5) followed by Belgaum division (23.5). This is higher than the state average. Bangalore division had low birth rate than state average. Bangalore division had the highest life expectancy (66) and low life expectancy in Gulbarga.
Table-1 - Health status of Karnataka

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangalore Division</td>
<td>27.3</td>
<td>7.4</td>
<td>65.9</td>
</tr>
<tr>
<td>Belgaum Division</td>
<td>29.2</td>
<td>9.5</td>
<td>63.0</td>
</tr>
<tr>
<td>Gulbarga Division</td>
<td>30.4</td>
<td>9.1</td>
<td>63.9</td>
</tr>
<tr>
<td>Mysore Division</td>
<td>27.4</td>
<td>8.4</td>
<td>64.8</td>
</tr>
<tr>
<td>Karnataka</td>
<td>27</td>
<td>7.5</td>
<td>64.4</td>
</tr>
</tbody>
</table>

* Per 100 persons

Table-2 - Poverty Trends in Karnataka

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangalore Division</td>
<td>33.4</td>
<td>16.7</td>
</tr>
<tr>
<td>Belgaum Division</td>
<td>33.5</td>
<td>20.0</td>
</tr>
<tr>
<td>Gulbarga Division</td>
<td>42.9</td>
<td>34.0</td>
</tr>
<tr>
<td>Mysore Division</td>
<td>19.8</td>
<td>9.7</td>
</tr>
<tr>
<td>Karnataka</td>
<td>33.16</td>
<td>20.1</td>
</tr>
</tbody>
</table>

Table-3 - Trends of Literacy Rate in Karnataka

<table>
<thead>
<tr>
<th>Division</th>
<th>Literacy Rate 1991 (%)</th>
<th>Literacy Rate 2001 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangalore Division</td>
<td>58.1</td>
<td>70.6</td>
</tr>
<tr>
<td>Belgaum Division</td>
<td>58.3</td>
<td>67.0</td>
</tr>
<tr>
<td>Gulbarga Division</td>
<td>41.44</td>
<td>55.6</td>
</tr>
<tr>
<td>Mysore Division</td>
<td>59.1</td>
<td>70.6</td>
</tr>
<tr>
<td>Karnataka</td>
<td>53</td>
<td>67.04</td>
</tr>
</tbody>
</table>


Trends of Poverty

Now there is a consensus that the post-reforms period has witnessed a decline in the poverty in India and Karnataka. Division wise poverty trends during 1993-94 and 1999-2000 is given in Table-2. In Gulbarga division, percent of population below poverty line is higher than state level during the 1993-94 (42.9) and 1999-2000 (34.0). And in Mysore and Bangalore division, percent of population below poverty line was lower than state level average during the same period.

Literacy Trends

Education plays a key role in the ability of a developing country to absorb modern technology and to develop the capacity for self-sustaining growth and development. The progress of India also largely depends on the education.

Table-3 shows that the glaring level of inter-division variations in literacy. According to 1991 and 2001 census, Bangalore division and Gulbarga division represent higher and lower literacy rate respectively. Gulbarga division had low literacy rate during 1991 (41.44) and 2001 (55.6) than state level average. But remaining 3 divisions had highest literacy rate than state average.

Table 1, 2 and 3 examines the relationships between birth rate, death rate and life expectancy with literacy and poverty. It is seen that in two division like, Gulbarga and Belgaum divisions, high birth rate, high death rate and low life expectancy with high poverty and low literacy rate. In Bangalore and Mysore divisions, low birth rate, low death rate and high life expectancy with high literacy rate and low poverty rates.

Status of Primary Health Center

Health service is one of the most important of all human endeavours to improve the quality of life. Health development is recognized as an essential and important part of the national socio-economic development. WHO (1983) states that "the enjoyment of the highest attainable standard of health is one the fundamental rights of every human being without distinct of race religion economic or social conditions.

The Government is spending quite a lot of money for setting up Primary Health Services centers. Over time, Karnataka has expanded in health infrastructure in terms of primary health centers. However this expansion is not evenly distributed across the state has evident from the primary health centers and population ratio. Table-4 shows that division wise distribution of health centers, their percentage, per 100 Sq.Km and growth rate from 1994-95 to 2004-05.

Table-4 gives information about Primary Health centers. There were 1459 Primary health centers in Karnataka, out of these 444 (30.43 percent) found in Mysore division this is followed by 395 (27.07 percent) in
### Table-4 Division wise Distribution of Primary Health Centers (PHC)

<table>
<thead>
<tr>
<th>Division</th>
<th>Number of Primary Health Centers</th>
<th>Primary Health Centers Per 1000 Sq.Km</th>
<th>Growth rate of PHCs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangalore</td>
<td>395 (27.07)</td>
<td>466 (27.66)</td>
<td>469 (27.62)</td>
</tr>
<tr>
<td>Belgaum</td>
<td>353 (24.54)</td>
<td>417 (24.75)</td>
<td>418 (24.52)</td>
</tr>
<tr>
<td>Gulbarga</td>
<td>262 (17.96)</td>
<td>291 (17.27)</td>
<td>291 (17.37)</td>
</tr>
<tr>
<td>Mysore</td>
<td>444 (30.43)</td>
<td>511 (30.35)</td>
<td>516 (30.39)</td>
</tr>
<tr>
<td>Karnataka</td>
<td>1459 (100)</td>
<td>1685 (100)</td>
<td>1698 (100)</td>
</tr>
<tr>
<td>D</td>
<td>77.03</td>
<td>34.94</td>
<td>95.16</td>
</tr>
<tr>
<td>V</td>
<td>21.12</td>
<td>32.54</td>
<td>22.42</td>
</tr>
</tbody>
</table>

### Table-5 – Division wise Distribution of Beds in Primary Health Centres

<table>
<thead>
<tr>
<th>Division</th>
<th>Number of Beds in Primary Health Centers</th>
<th>Number of Beds per lakh Population</th>
<th>Growth rate of Beds in PHCs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangalore</td>
<td>3892 (30.72)</td>
<td>4667 (20.82)</td>
<td>4956 (31.18)</td>
</tr>
<tr>
<td>Belgaum</td>
<td>2710 (21.39)</td>
<td>3204 (21.15)</td>
<td>3310 (20.83)</td>
</tr>
<tr>
<td>Gulbarga</td>
<td>1979 (15.62)</td>
<td>2363 (15.60)</td>
<td>2429 (15.26)</td>
</tr>
<tr>
<td>Mysore</td>
<td>4090 (32.28)</td>
<td>4910 (32.42)</td>
<td>5196 (32.71)</td>
</tr>
<tr>
<td>Karnataka</td>
<td>12671 (100)</td>
<td>15144 (100)</td>
<td>15893 (100)</td>
</tr>
<tr>
<td>D</td>
<td>4771.25</td>
<td>5988.76</td>
<td>5981.86</td>
</tr>
<tr>
<td>V</td>
<td>5658.00</td>
<td>6711.00</td>
<td>7119.00</td>
</tr>
</tbody>
</table>

Source: Karnataka at a Glance 1995-2001-2005

Note: Figures in Brackets Indicate Percentage of beds in primary Health Centers

D: Standard Deviation; CV: Coefficient of Variation

The number of primary health centers in Karnataka increased from 585 in 1994-95 to 1698 in 2004-05, with the highest number of primary health centers in Mysore division (30.39%) and the lowest in Gulbarga division (17.27%). The growth rate of primary health centers per 1000 Sq.km was highest in Mysore division (11.87%) and lowest in Belgaum division (9.44%).

As per the area wise, the primary health centers per 1000 Sq.km in Karnataka during 1994-95 was 0.76, and it increased to 8.85 in 2004-05, with the highest in Mysore division (11.87%) and the lowest in Gulbarga division (0.69%).

June 1, 2010