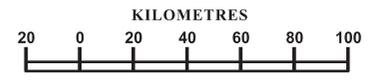


Status of Scheduled Tribes in Karnataka

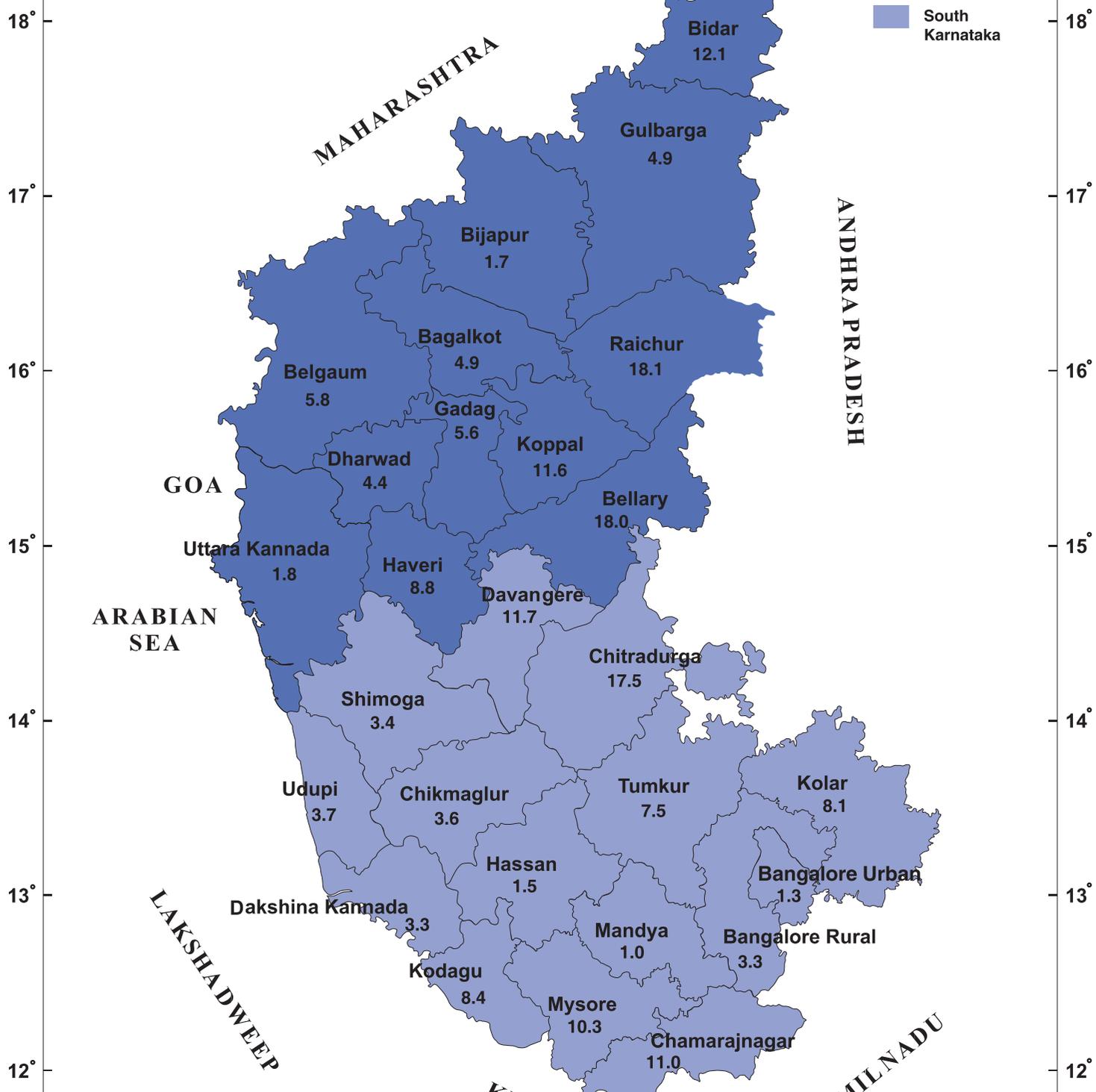


KARNATAKA

Scheduled Tribes Population 2001 (%)



- North Karnataka
- South Karnataka



MAHARASHTRA

ANDHRA PRADESH

GOA

ARABIAN SEA

LAKSHADWEEP

KERALA

TAMIL NADU

Status of Scheduled Tribes in Karnataka

Introduction

The Scheduled Tribes are tribes notified under Article 342 of the Constitution, which makes special provision for 'tribes, tribal communities, parts of, or groups within which the President may so notify'. There is no definition of a tribe in the Constitution but one may distinguish some characteristics that are generally accepted: self-identification, language, distinctive social and cultural organisation, economic under-development, geographic location and initially, isolation, which has been steadily, and in some cases, traumatically, eroded. Many tribes still live in hilly and/or forested areas, somewhat remote from settlements.

Many stereotypes flourish about the tribal persona and tribal society. Many of the tribal people are undeniably economically under-developed, and the process of their marginalisation can be traced to the intrusion of British colonialism, which quickly detected in the forest that was home to tribals, great potential for appropriation of resources. Exploitation of forest-lands by both the British and the *zamindars* resulted in the clearing of huge tracts for commercial crops such as tea, coffee and rubber and allowing contractors to fell trees in the very heart of the forest. These actions deprived the tribal people of their livelihoods because many of them were hunters and gatherers of forest produce. The interaction with the outside world brought the tribal people face to face with problems they were not equipped to cope with, such as alcoholism and sexually transmitted diseases. In the post-Independence period, while the Constitution protected the rights of the Scheduled Tribes and accorded them reservation in the legislature, educational institutions and government jobs, other 'development' activities, such as the construction of large dams or the sale of timber, led to the further marginalisation of some tribes. The scenario is therefore a mixed one. It may be necessary to use natural resources to improve the living conditions of the people of

the state, but it must be done in a manner that is sensitive to ensuring the protection of the environment, which provides a livelihood to tribal people.

Apart from the Scheduled Tribes, there are 75 indigenous groups in India known as 'Primitive Tribal Groups'. The Tenth Plan of the Central Government observes that these vulnerable communities have experienced a 'decline in their sustenance base and the resultant food insecurity, malnutrition and ill-health has forced them to live in the most fragile living conditions and some of them are even under the threat of getting extinct'. In Karnataka, the Koragas of Dakshina Kannada district and the Jenu Kurubas who are concentrated in the districts of Mysore, Chamrajnagar and Kodagu are classified as 'primitive tribes'.

Population

The tribal population of Karnataka increased to 34.64 lakh in 2001 from 19.16 lakh in 1991. The decadal growth rate during this period is a high 80.8 per cent, caused not by a spurt in fertility rates but by the addition of several new tribes to the Scheduled Tribes (ST) category. The decadal growth rate is higher for females (81.9 per cent) than for males (79.8 per cent). The highest decadal growth rate occurred in Mysore district (around 328.0 per cent), Bagalkot (261.6 per cent), Dharwad (201.1 per cent) and Belgaum (193.0 per cent). The decadal growth rate is negative in Dakshina Kannada (-2.9 per cent).

Raichur (18.1 per cent) has the highest percentage of ST population followed by Bellary (18.0 per cent), while Chitradurga (17.5 per cent), which had the highest percentage of ST population in 1991 came down to third place in 2001 on account of its bifurcation. The reverse is true of Raichur. Bellary has the highest population of Scheduled Tribes as a percentage of the ST population in the state (10.6) (Appendix Tables: Series 10).



The tribal population of Karnataka increased to 34.64 lakh in 2001 from 19.16 lakh in 1991. The decadal growth rate during this period is a high 80.8 per cent, caused not by a spurt in fertility rates but by the addition of several new tribes to the Scheduled Tribes category.

The literacy rate of STs in Karnataka is a cause for concern, as it has consistently been lower than that of the total population.

Sex ratio

The sex ratio for Scheduled Tribes (972) is higher than the all-India average (964) for STs as well as the state average (965) according to the 2001 census. There has been a perceptible improvement in the sex ratio of STs since 1991 when it was 961. Among the southern states, Kerala performs well with 1,021 followed by Tamil Nadu (980). Andhra Pradesh is below Karnataka with 971. The child sex ratio for the 0–6 age group is also higher (960) than the state average of 946. Culturally, there is greater gender equity among the Scheduled Tribes compared with the general population, which is largely shaped and driven by a male-dominated discourse that prioritises son preference.

Across districts, one impressive finding is that Udupi (1023) has a sex ratio higher than Kerala’s followed by Kodagu and Bagalkot (996) while Bangalore Urban, typically, has the lowest sex ratio (913) followed by Haveri (941), Dharwad and Bijapur (944) and Bidar (950). In Bellary, which has the highest proportion of ST population to the state’s ST population, the sex ratio is 985 while Raichur, which has the highest percentage of ST population to the total population, is in fourth place with 993 (Appendix Tables: Series 10).

Literacy

It is a well-accepted fact that access to knowledge is crucial to improving the human development status of people. Improvements in literacy levels have positive spin-off effects, such as better health indicators and an increase in productivity, which can increase the income levels of poor people significantly.

The literacy rate of STs in Karnataka is a cause for concern, as it has consistently been lower than that of the total population. The literacy rate among Scheduled Tribes, which was 36.0 per cent in 1991, increased to 48.3 per cent in 2001, while the state average moved up from 56.04 to 66.64 per cent. The gap between the literacy rate of the total population and the ST population is very wide, although there has been a marginal decline of about 1.6 percentage points in the last decade. The decennial literacy rate of the ST population has increased at a faster pace (12.3

per cent) than the rate for the total population (10.6 per cent). The literacy rate of urban STs (64.6 per cent) is higher than the overall literacy rate of STs and compares quite favourably with the state average.

The female literacy rate among STs in 1991 was 23.6 per cent and it increased to 36.6 per cent in 2001. While it has increased at a faster pace than the male literacy rate (the increase during the decade was 13.0 percentage points for females and 11.8 percentage points for males) the gap between the ST male and female literacy rate declined only marginally, from 24.3 in 1991 to 23.1 in 2001, which is slightly higher than the gap between the male and female literacy rates for the total population (22.92 in 1991 and 19.22 in 2001). The literacy rate for ST women is the lowest in the state in comparison with all women as well as Scheduled Caste women. The literacy rate for rural ST women is a low 33.3 per cent compared with 56.9 per cent for men (Table 10.1).

Overall, the Scheduled Tribes in the state have markedly lower literacy rates than other groups. The fact that they are above the all-India average in respect of men and women is, of course, an indicator that Karnataka has performed better than many other states in this respect. However, the literacy status of the STs in Karnataka, which is in marked contrast to the improvements in literacy of other social groups, is a matter of concern and needs strong policy initiatives to push up literacy levels significantly.

Dakshina Kannada district (72.95 per cent) has the highest literacy rate followed by Bangalore Urban (72.83 per cent), Udupi (69.62 per cent), Uttara Kannada (62.74 per cent), Shimoga (62.11 per cent), Tumkur (59.69 per cent) and Chikmagalur (58.84 per cent). The literacy rate is the lowest in Raichur (29.01 per cent), followed by Gulbarga (32.40 per cent) and Kodagu (40.37 per cent).

While the literacy rate of Scheduled Tribes has improved in the decade 1991-2001, they still have a long way to go before they catch up with the rest of the population. The ST literacy rate in

TABLE 10.1
Scheduled Tribes' literacy rates by sex and region: 1991 and 2001

(Per cent)

State/ Country	Area	1991			2001		
		Persons	Male	Female	Persons	Male	Female
India	Total	29.6	40.6	18.2	47.1	59.2	34.8
	Rural				45.0	57.4	32.4
	Urban				69.1	77.8	59.9
Karnataka	Total	36.0	47.9	23.6	48.3	59.7	36.6
	Rural				45.3	56.9	33.3
	Urban				64.6	74.4	54.3

Source: Registrar General of India, Census 1991 and 2001.

2001 (48.3 per cent) was even lower than the literacy rate of the total population in 1991 (56.04 per cent), placing them more than a decade behind in literacy levels. Though the literacy rate for women has increased at a faster pace than for males, it is still problematic because it is so much lower than the literacy rate for all women in 2001. Districts that have high literacy rates have also done well with regard to STs with the exception of Kodagu. This is clear when we look at the statistics of districts with low literacy rates, such as Raichur (48.81) and Gulbarga (50.01), where the literacy for STs is also poor (29.01 and 32.40 respectively).

The low literacy level suggests that the programmes of the Education Department have not had the desired effect on this very vulnerable sub-population. More concerted efforts are required to bring STs' literacy on par with the state average, at the very least. Culture-specific curricula would be a step in the right direction. Since illiteracy and poverty are factors that play off one another to create a cycle of deprivation, ensuring greater cohesion at the gram panchayat level between anti-poverty programmes and school enrolment/retention drives would provide the poor with viable ways to access education.

Education

Low literacy rates are matched by less than satisfactory educational attainments across all levels of primary, secondary and tertiary education. Many schools in tribal areas suffer from high dropout rates. Children either never

enrol or attend for the first three to four years of primary school, only to lapse into illiteracy later. The attrition rate is quite strong at various levels of the educational system thereafter. The first step in the education ladder is enrolment, where performance is high for most social groups, except STs. For instance, the gross enrolment ratio (GER) in 2001, for STs for Classes I–VIII (90.12) was significantly lower than the GER for all students (98.81) and SCs (104.57). This inequality is heightened even more by the gap between the GER for south Karnataka (110.62) and north Karnataka (74.21). The GER for girls (103.64) is also much better in the southern districts than in north Karnataka (70.22). In that respect, the GER of the Scheduled Tribes in south Karnataka more closely approximates the overall GER of other social groups. The northern districts are caught up in a cycle of deprivation: they have the highest levels of ST population and also have poor human development indicators.

Among districts, Bangalore Urban (319.10) and Bijapur (270.65) had high GERs, but then, the proportion of ST population in these districts is not significantly high. Districts with high ST populations did not perform well: Bellary (76.47), Raichur (58.21) and Bidar (48.76) are well below the state average. Kodagu has the lowest (73.41) GER in south Karnataka, followed by Davangere (76.23), Chamarajnar (86.02) and Chitradurga (87.03). It is noteworthy that the ST population of Chitradurga and Davangere forms a significant percentage of the state's total ST population.



Since illiteracy and poverty are factors that play off one another to create a cycle of deprivation, ensuring greater cohesion at the gram panchayat level between anti-poverty programmes and school enrolment/retention drives would provide the poor with viable ways to access education.

Unequal access to schooling is further exacerbated by the fact that ST children stay in school for the least amount of time, as indicated by the mean years of schooling. Scheduled Tribe children have the lowest levels of achievement (4.166 years) compared with SC (4.235 years) and non-SC/ST (4.458 years) children. Not surprisingly, in this context, then, ST children also constitute the highest percentage of out-of-school children (2.42), compared with the state average of 1.54 per cent. The percentage of out-of-school ST girls (2.67) is the highest across all categories (Table 10.2).

The Sample Survey of ST households conducted by the Department of Economics and Statistics in 2004, which elicited responses from persons in the age group 9–35 years, found that the principal reasons for females dropping out of school were (i) to work at home and (ii) their parents could not afford to pay for their education. The reasons are identical to the ones adduced to SC girls and indicate that the poor cannot afford the high opportunity costs of education. Girls are the first to be pulled out of school to work at home and take care of siblings to enable their mothers to work. In such cases, families do not find the many incentives offered by the government such as free uniforms, text books and even scholarships, an adequate compensation for lost wages. For boys, family work is the main reason for dropping out. *Akshara Dasoha*, the recently introduced midday meals programme for school children, will have a more sustained impact on ensuring enrolment and retention hereafter.

Enrolment in secondary education is lower than in primary education. This is part of a pattern of attrition, which increases with levels of education

and occurs across all social groups. The GER, in Classes I–X, in 2000–01, was 81.17, which was considerably lower than the GER for SCs (94.31) and all students (89.95). The differential between boys (85.59) and girls (76.51) was also higher than for SCs and all students. As with primary education, there is a marked disparity between the GER for south Karnataka (100.10) and north Karnataka (66.03). While a similar regional trend exists for all students and SCs, the disparity is not as high as it is with STs; Gulbarga (32.86), Bidar (43.06) and Chitradurga (77.93) were all below the state average. GER for Bellary and Raichur (61.89 and 43.89), which have the highest proportion of ST population, is very poor.

What are the outcomes for students who overcome the barriers of poverty and gender and stay the course? Surprisingly good, if performance in school examinations is taken as an indicator of educational attainment. Scheduled Tribe students performed well in the Class VII examinations in 2002, with a pass percentage of 88.25, which was higher than the pass percentage of all students (87.31) and SC students (87.87). Girls (89.41) had an edge over boys (87.39) as in all social groups. The inference is that girls will perform well academically, if they are enabled to overcome the socio-economic constraints that keep them out of school. This is apparent when we look at the percentage of students who passed the S.S.L.C examinations from 2001–2005 where ST girls have outperformed ST boys, SC boys and SC girls (Table 10.3).

In 2005, ST girls had a pass percentage of 55.18, which is higher than the percentage of ST and SC boys and SC girls. This outcome only serves to support the earlier finding that the performance of girl students in general, and ST girl students in particular, is exemplary, once they make it past the roadblocks. As the Sample Survey (DES: 2004A) found, the dropout rate increased with levels of education. In the sample surveyed, there were only 0.18 per cent women graduates and 1.40 per cent male graduates, and only 0.02 per cent ST women were post-graduates.

Scheduled Tribe students, in general tertiary education, cluster primarily in government



Unequal access to schooling is further exacerbated by the fact that ST children stay in school for the least amount of time, as indicated by the mean years of schooling.

TABLE 10.2
Percentage of out-of-school children in the age group 7–14

Category	Boys	Girls	Total
All	1.47	1.62	1.54
SCs	1.99	2.47	2.22
STs	2.11	2.67	2.42
Muslims	1.30	1.24	1.27

Source: Children's Census, Department of Public Instruction, Karnataka, 2005.

colleges. In 2003-04, STs constituted 4.46 per cent of students in government colleges and 2.80 per cent in private aided colleges. There is a marked disparity in the enrolment of boys (3,209) and girls (1,652). This gap in male and female enrolment in general degree courses is uniform across government and private aided colleges. The percentage of ST students in engineering colleges averaged 0.1 per cent from 1996 to 2000 and went up to 1.7 per cent in 2002-03. Scheduled Tribes enrolment in engineering diploma courses is a minimal 0.2 per cent (Annual Reports, DTE; Annual Report VTU 2002-03). This places young ST graduates in a disadvantageous position when they seek jobs in a market that wants trained technical professionals. They are ill-equipped to take advantage of the IT-fuelled boom in jobs in Karnataka.

Economic status

Historically, the tribal economy was based on subsistence agriculture and/or hunting and gathering. However, since the tribal people treated land as a common resource, they rarely had land titles, and thus, lost their lands to outsiders when exploitation of forest resources began to take place on a significant scale. This ensured that a majority ended up as small and marginal landholders.

The 2001 Census data reveals that around half the ST population is in the workforce. Women constitute about 41.7 per cent of the workforce. More than 85 per cent of the working population is in rural areas. The distribution of main workers (76.4 per cent) is concentrated in the rural parts of the state where a high 51.5 per cent work. Bellary has the highest percentage of main workers (11.5 per cent) followed by Raichur (7.8 per cent). The highest percentage of ST marginal workers lives in Raichur (11.7), which also has the highest proportion of the ST population to the total population, clearly indicating their highly precarious livelihood status.

Land holdings

The data analysed in this section shows that STs largely own low-productivity assets: the principal asset being their own labour. This scenario is exacerbated by their low literacy and lack of

TABLE 10.3
Percentage of students who passed the SSLC examinations: 2001-05

Year	All		SCs		STs	
	Girls	Boys	Girls	Boys	Girls	Boys
2001	52.44	40.22	38.09	39.05	40.47	38.24
2002	53.76	48.54	37.74	35.96	39.47	34.91
2003	58.54	52.19	41.15	39.06	43.47	39.84
2004	68.06	61.74	53.30	50.41	55.80	54.01
2005	66.10	59.30	50.31	47.29	55.18	49.55

Source: Karnataka State Secondary Education Board, Bangalore.

TABLE 10.4
Percentage distribution of ST population aged 7+ years
by levels of education

Level of Education	Male	Female	ST literacy levels	SC literacy levels
Not literate	48.19	55.30	51.61	49.07
Literate without formal education	1.68	0.72	1.22	1.78
Literate below primary	17.01	18.43	17.69	16.89
Primary	10.70	11.68	11.17	11.81
Higher primary	10.53	7.32	8.99	9.78
High school	7.29	5.27	6.32	6.96
PUC	2.36	0.66	1.54	2.30
Diploma	0.34	0.12	0.23	0.25
Graduate	1.40	0.18	0.81	0.86
Post-graduate	0.15	0.02	0.09	0.13
Technical graduate	0.06	0.00	0.03	0.07
Technical post-graduate	0.05	0.00	0.03	0.03
Handicrafts (skills)	0.23	0.30	0.27	0.07

Source: Sample Survey, Directorate of Economics and Statistics, Karnataka, 2004A.

vocational skills, which pushes them into jobs with poor remuneration, where men, women and children, between them, earn insufficient wages, as represented by their monthly per capita expenditure. Urban STs are slightly better placed than their rural counterparts. According to the 2001 Census, 7.65 per cent of STs are cultivators, 11.86 per cent are agricultural labourers and 4.70 are in household industry. The largest percentages of ST women are in household industries (58.80) and agricultural labour (57.90). Only 29.89 per cent of ST cultivators are women.

TABLE 10.5
Category-wise working population of Scheduled Tribes in Karnataka: 2001

(Per cent)

Category	Total			Rural			Urban		
	Persons	Male	Female	Persons	Male	Female	Persons	Male	Female
Workers	49.4	58.3	41.7	51.5	57.6	45.3	37.6	52.6	21.9
Non-workers	50.6	41.7	58.3	48.5	42.4	54.7	62.4	47.4	78.1
Main workers	77.9	87.9	63.8	76.4	87.2	62.3	89.1	92.4	81.1
Marginal workers	22.1	12.1	36.2	23.6	12.8	37.7	10.9	7.6	18.9

Note: Percentages are estimated.

Source: Registrar General of India, Census 2001.

TABLE 10.6
Ownership of agricultural land

Type of agricultural land	Percentage
Rural ST households possessing land	57.39
Irrigated	17.05
Un-irrigated	74.35
Partially irrigated	8.60

Source: Sample Survey, Directorate of Economics and Statistics, Karnataka, 2004A.

Rural Scheduled Tribes had the lowest monthly per capita expenditure of Rs.404, compared with Rs.419 for all social groups and much lower than the average MPCE of Rs.500 for all rural groups.

The Sample Survey shows that while 57.39 per cent of rural ST households owned agricultural land, a high 74.35 per cent of it was not irrigated. The percentage of total area irrigated in the state to gross area sown was 21 per cent (2002-03).

The Karnataka Agricultural Census 2001 established that STs hold 30.9 per cent of small and 19.4 per cent of semi-medium holdings. There is not much difference between STs and

others here, but ST ownership of medium and large holdings is a low 7.9 and 1.0 per cent respectively (Table 10.7).

The majority of STs have small units with low productivity, which are so economically unviable that landholders are compelled to work as wage labour to survive.

Sources of income

The NSS (1999-2000) data shows that the largest percentage of rural ST households (12.8) reported rent as a source of income, followed by wages/salaried employment (9.7), cultivation (7.7), fishing and other agricultural enterprises (6.7). In Andhra Pradesh, which has a significant tribal population, 11.4 per cent derived income from fishing and other agricultural activities and 8.9 per cent from cultivation. An analysis of the income levels of STs in the Sample Survey (DES: 2004A) reveals a wide gap of more than 100 per cent between STs in urban areas and their rural counterparts. The annual per capita income of rural STs is Rs.4,768, as compared with Rs.10,987 for urban STs. The percentage of families below the poverty line in the rural ST population is 40 while it is 25 for the urban ST population.

Rural Scheduled Tribes had the lowest monthly per capita expenditure (MPCE) of Rs.404, compared with Rs.419 for all social groups and much lower than the average MPCE of Rs.500 for all rural groups. In urban Karnataka, the MPCE for STs was Rs.634, which was again below the state average MPCE of Rs.911. Not surprisingly, the MPCE of STs is the lowest in rural areas given their concentration in rural areas and their dependence

TABLE 10.7
Ownership of land holdings by size

Class size	Scheduled Tribes		Others	
	No. of holdings	Area (lakh hectare)	No. of holdings	Area (lakh hectare)
Small	30.9	25.3	26.3	21.0
Semi-medium	19.4	29.7	18.3	27.9
Medium	7.9	25.3	8.6	28.3
Large	1.0	7.7	1.4	11.4

Source: Agricultural Census 2001, Directorate of Economics and Statistics, Karnataka, 2003.

on subsistence agriculture and agricultural labour (NSSO 55th round, 1999-2000). Table 10.8 shows the MPCE for the southern states and Madhya Pradesh, which has a significant tribal population.

Table 10.9 shows an increase in the MPCE of urban households but a perceptible decline in the expenditure of rural households since 1999-2000. The decline in rural expenditure is disturbing and could be the effect of the increasing casualisation of labour.

Healthcare

Data on health, except for NFHS surveys, does not contain information disaggregated by social groups on a regular basis. Lack of data is a constraint when it comes to tracking the health indicators of the ST population. This section uses data from the NFHS surveys and the Sample Survey to develop a profile of the health and nutritional status of STs in the state.

The Sample Survey estimated the crude birth rate (CBR) at 22.79, which is marginally higher than the state average of 21.8. The crude death rate (CDR) is estimated at 8.50 which is again higher than 7.50 for the general population. The CDR is lower for STs than SCs (9.12) in the state. Most of the health indicators show deterioration in the health of women and children. The health status of the tribal population is not on par with the rest of the state's population. The infant mortality rate (IMR) of STs (64.37) is much higher than the state average (52.0); the IMR for STs is marginally lower than the IMR for SCs (64.74) and there is a marked difference between male (75.84) and female IMR (54.48). The Sample Survey found that the principal causes of death among infants are diseases of the circulatory system (49.06 per cent) and respiratory system (23.45). Disturbingly enough, NFHS data for 1992-93 and 1998-99 shows regressive trends with the total fertility rate increasing to 2.38 from 2.15, the post-neonatal mortality rates to 21.9 from 18.0, the child mortality rate to 38.9 from 38.0 and the under-five mortality rate to 120.6 from 120.3. Only the neonatal mortality rate fell to 63.2 from 67.6 (Table 10.10). These figures

present a grim picture of the health status of ST women and children.

There are many reasons for infant and maternal deaths: the mother's age at the time of delivery, her nutritional status, access to antenatal care (ANC) and postpartum healthcare are all significant factors that determine whether women and their infants will survive the challenges posed by pregnancy and childbirth. The Sample Survey reveals that the most reproductive age group among STs in Karnataka is 20-29 years, which accounts for about 71.0 per cent of births. Given this data, the age of the mother is probably a

Data on health, except for NFHS surveys, does not contain information disaggregated by social groups on a regular basis. Lack of data is a constraint when it comes to tracking the health indicators of the ST population.

TABLE 10.8

MPCE: Karnataka and selected states

State	Rural	Urban
Andhra Pradesh	383	635
Karnataka	404	634
Kerala	674	994
Madhya Pradesh	325	567
Tamil Nadu	384	1076

Source: National Sample Survey Organisation, 55th round: 1999-2000.

TABLE 10.9

Income and expenditure: 2004

Region	Annual per capita income (Rs.)	Monthly per capita expenditure (Rs.)	Percentage of BPL families
Rural	4768	386	40
Urban	10987	735	25
Total	5713	439	38

Source: Sample Survey, Directorate of Economics and Statistics, Karnataka, 2004A.

TABLE 10.10

Total fertility rate and child mortality: Some indicators

Year	Total fertility rate	Neonatal mortality rate	Post-neonatal mortality rate	Child mortality rate	Under-5 mortality rate
1992-93	2.15	67.6	18	38	120.3
1998-99	2.38	63.2	21.9	38.9	120.6

Sources:

1. National Family Health Survey-1 Karnataka 1992-93, IIPS, Mumbai, February 1995.
2. National Family Health Survey-2 Karnataka 1998-99, IIPS, Mumbai, November 2001.

TABLE 10.11
Antenatal care during pregnancy

(Per cent)

Year	Source			Total	No ANC
	At home by health worker	Doctors	Other health professionals		
1992-93	20.5	53.6	4.5	78.6	21.4
1998-99	9.9	48.5	13.4	71.8	28.2

Sources:

1. National Family Health Survey-1 Karnataka 1992-93, IIPS, Mumbai, February 1995.
2. National Family Health Survey-2 Karnataka 1998-99, IIPS, Mumbai, November 2001.

Ensuring that women receive professional care during childbirth and in the postpartum period will greatly reduce infant and maternal deaths caused by prolonged or complicated labour, eclampsia, haemorrhage and infections.

lesser contributory factor than undernutrition and lack of access to healthcare services.

Antenatal care

Here too, women's access to antenatal care has either worsened or remained static. The percentage of tribal women receiving no antenatal care has increased to 28.2 per cent from 21.4 per cent during the period 1993-98. Pregnant women receiving antenatal care from registered medical practitioners also showed a decline from 53.6 per cent to 48.5 per cent during the same period.

While the percentage of women not getting tetanus toxoid vaccinations at any time showed only a negligible increase from 33.0 per cent to 33.4 per cent, those receiving iron and folic acid showed a slight increase from 61.6 per cent to 63.3 per cent (Table 10.12). This leaves a very large number outside the purview of antenatal care and the protection it affords to the mother and her infant.

Institutional deliveries

Ensuring that women receive professional care during childbirth and in the postpartum period

will greatly reduce infant and maternal deaths caused by prolonged or complicated labour, eclampsia, haemorrhage, infections, etc. The NFHS data indicates that there was a marginal increase in institutional deliveries from 26.8 per cent in 1992-93 to 31 per cent in 1998-99. The Sample Survey (DES: 2004A) suggests that the situation has improved significantly with the percentage of births receiving some kind of professional care being a high 63.36 per cent, with another 24.08 per cent attended by trained *dais*. While this is a good development, the outcomes in terms of lowered IMR and MMR are yet to become visible. The inaccessibility of ST habitations, combined with high absenteeism of medical staff in primary healthcare centres, further contribute to the difficulties that tribal people have in availing basic health facilities.

Genetic and other diseases

There are also certain genetic disorders and deficiency diseases specific to tribal areas such as GEPD and sickle cell anaemia. Malaria, tuberculosis and sexually transmitted diseases are other areas of concern. Cases of HIV/AIDS too have made their appearance among the tribal

TABLE 10.12
Tetanus toxoid vaccinations and iron/folic acid tablets during pregnancy

(Per cent)

Year	None	One	Two or more	Iron and folic acid tablets or syrup
1992-93	33.0	8.0	59.0	61.6
1998-99	33.4	11.0	55.6	63.3

Sources:

1. National Family Health Survey-1 Karnataka 1992-93, IIPS, Mumbai, February 1995.
2. National Family Health Survey-2 Karnataka 1998-99, IIPS, Mumbai, November 2001.

population. Given the isolation of some tribes, their traditional healing systems should be allowed to complement modern medical care practices. Many ST habitations are located in remote areas in the forest where immediate attention by trained medical staff is rarely available when it is most needed, so traditional healthcare can fill this breach.

Nutrition

The nutritional status of an individual depends partly on income but also on awareness of the importance of the nutritional content of food. The diet of ST women is likely to be low in terms of consumption of fruit (39.8 per cent), eggs (49.4 per cent) and chicken, meat, fish (26.6 per cent). Their consumption of milk/curd is higher than that of SCs, but less than OBCs and others, and contains some amount of pulses, beans, green leafy vegetables and other vegetables. If this is juxtaposed with data relating to the consumption patterns of (i) poor women whose consumption of milk, curd, fruit and vegetables is less than that of high income women and (ii) rural women whose consumption of milk, curd, fruit and meat is below that of urban women, then it is not surprising that ST women have very poor nutritional levels (NFHS-2, 1998-99). Malnutrition is of many kinds: there is protein-energy malnutrition and micronutrient malnutrition caused by inadequate dietary intake, as well as intake of food insufficient in protein and micronutrients. Mal- and under-nutrition are reflected in the statistics relating to height and body mass. Among rural women, 9.4 per cent were below the mean height (which is on par with OBCs and others and less than SCs) and 49.0 per cent were below the body mass index (BMI), which is

much worse than for all social groups. At the all-India level, 13.5 per cent were below the mean height and a high 46.3 per cent were below the BMI, which is poorer than SCs (42.1), OBCs (35.8) and others (30.5) (see Table 9.21, chapter 9). Given their poverty levels, ST women have very high levels of under-nutrition. Tribal children also suffer from sharp levels of under-nutrition (Table 10.13).

Policies directed at reducing under-nutrition among children and women must also target the dietary intake of adolescent girls in addition to focusing on pregnant and nursing mothers. Government programmes include ICDS, for children in the age group 0–6, pregnant women and nursing mothers, the public distribution system (PDS), which provides 10 kg of rice and wheat at Rs.3.0 per kg to the poor and midday meals for school children. The midday meals scheme is a big step in the right direction but, unfortunately, it does not address the nutrition needs of out-of-school children, many of whom are girls. Another cause of poor nutrition could be the declining access of the tribal people to forest areas, which had earlier provided them with food rich in protein and micronutrients. Nutrition security through kitchen gardens is an intervention that would pay rich dividends.

Family planning

Awareness of birth control methods is relatively high among ST married males (48.0 per cent) and married females (45.0 per cent). Permanent forms of birth control appear to be the preferred mode, with 26.30 per cent women and a low

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TABLE 10.13

Nutrition status of children

Year	Weight-for-age		Height-for-age		Weight-for-height	
	% < 3SD (severely underweight)	% < 2SDI (underweight)	% < 3SD (severely stunted)	% < 2SDI (stunted)	% 3SD (severely wasted)	% 2SDI (wasted)
1992-93	26.4	66.7	26.4	56.9	6.9	26.4
1998-99	28.7	55.7	22.1	41.2	1.1	21.0

Sources:

1. National Family Health Survey-1 Karnataka 1992-93, IIPS, Mumbai, February 1995.
2. National Family Health Survey-2 Karnataka 1998-99, IIPS, Mumbai, November 2001.



Almost 89.0 per cent of ST villages surveyed have a drinking water facility within the village and the sources comprise bore-wells with hand pumps, mini water supply and piped water supply schemes. Three out of four villages have adequate drinking water supply during all seasons.

1.58 per cent men selecting permanent birth control (DES: 2004A). The brunt of family planning is borne by women, possibly because they have a higher stake in not becoming pregnant frequently and because men are not prepared to take equal responsibility for birth control, or possibly, because healthcare providers find it easier to target women.

Sanitation

An unsanitary environment contributes to the proliferation of disease, leading to high morbidity rates, which reduces productivity and affects the earning capacity of individuals. The poor sanitary condition of ST households is highlighted by the 2001 Census data, which shows that 79.71 per cent of households do not have latrines and 61 per cent do not have any kind of drainage facilities. A high 90.3 per cent of rural ST households and 41.7 per cent of urban households do not have latrines, although it must be noted that the rest of the population is not well situated either, since the state averages are 82.5 per cent for rural and 24.8 per cent for urban areas. About 42 per cent ST households have a bathroom in the house, as against 58.9 per cent of the total population at the state level and 36.1 per cent at the all-India level. In Karnataka, STs have better sanitary facilities than their counterparts at the all-India level, but this is only a matter of degree. A low 11.18 per cent of ST settlements/villages have community latrines, about 30.5 per cent of households have open drains and only 8.6 of households have closed drainage. A high 58.0 per cent habitations lack storm water drains.

Drinking water

Tap water constitutes the main source of drinking water for 53.7 per cent ST households (58.39 for all households). Access to drinking water by tap within the premises is higher for all households (24.1) than for STs (12.7) and SCs (12.6). A slightly higher number of ST households have access to tap water near the premises (Census: 2001).

Almost 89.0 per cent of ST villages surveyed have a drinking water facility within the village and the sources comprise bore-wells with hand pumps,

mini water supply and piped water supply schemes. Three out of four villages have adequate drinking water supply during all seasons (Table 10.14).

Housing

The percentage of STs living in permanent houses (43.7 per cent) is lower than the corresponding figures for SCs (51.1) and all households (54.9) according to the 2001 Census. About 39 per cent dwell in semi-permanent houses compared with 35.6 per cent for all households and 36.6 per cent for SCs. A higher percentage of rural STs live in semi-permanent houses (43.4) than urban STs (23.1) who live predominantly in permanent houses (66.9). There is little difference between STs and all households, with reference to building material used. A high percentage of STs (84.4 per cent) owned their houses, compared with 78.5 per cent for all households. House ownership is highest in rural areas (91.9 per cent). This can be attributed to the very progressive state and Centrally-sponsored housing programmes (*Ashraya, Ambedkar, Indira Awaas*), which clearly have had visible outcomes.

TABLE 10.14

Availability of drinking water facility

Item	Percentage
I. Access to drinking water	
a. Within colony	88.82
b. Outside colony within village	8.70
c. Outside village	2.48
II. Type of drinking water facility	
a. Bore-well with hand pump	65.84
b. Mini water scheme	53.42
c. Piped water supply	58.39
d. Tank	18.01
e. Pond	1.86
f. River	4.35
g. Open well	15.53
h. Others	4.97
III. Availability of adequate drinking water	
a. Available	74.53
b. Not available	25.47

Note: For item II, percentages do not add up to 100% due to accessibility of households to multiple sources.

Source: Sample Survey, Directorate of Economics and Statistics, Karnataka, 2004A.

Electricity

Electrical connectivity is fairly high among ST households. According to the 2001 Census, a total 64.7 per cent of ST households in Karnataka had electricity as a source of lighting, compared with 78.5 per cent for all households and 68.5 per cent for SC households. In rural areas, STs depended on electricity (60.3 per cent) as well as kerosene (38.8), whereas urban ST households relied principally on electricity (80.6 per cent). These high levels of connectivity indicate that state policies to provide electrical connections to ST households have paid off handsomely.

State policies

The Department of Tribal Welfare was formed specifically to address the needs of STs in Karnataka. Its budget is part of the budget of the Department of Social Welfare.

Tribal Sub-Plan

The concept of the Tribal Sub-Plan (TSP) and its counterpart the Special Component Plan (SCP) emerged in the National Fifth Five-Year Plan. The Tribal Sub-Plan was first introduced in 1976-77 when it was implemented in five Integrated Tribal Development Projects (ITDP)

in the districts of Mysore, Chikmagalur, Kodagu and Dakshina Kannada (including Udupi). In 1992, it was extended to all districts in the state.

The objectives of the TSP are poverty alleviation, protection of tribal culture, education, healthcare and providing basic minimum infrastructure. Poverty alleviation includes programmes in agriculture, animal husbandry, sericulture, horticulture, village and small industries as well as all employment-generating schemes such as *Swarna Jayanthi Swarozgar Yojana* (SJSY).

Pooling TSP funds

Under the TSP, departments earmark three per cent of their plan budget for expenditure on tribal development. However, as in the case of the Special Component Plan for Scheduled Castes, some departmental schemes were not particularly relevant or effective and ended up being symbolic gestures to the development of STs. The TSP funds were first pooled in 1991. In 'pooling', funds earmarked under TSP are partially or completely withdrawn from the department. The resultant corpus is then utilised to finance three strategic areas: housing, education (construction of hostels) and financing irrigation wells and

The Department of Tribal Welfare was formed specifically to address the needs of STs in Karnataka.

TABLE 10.15
Funds pooled under the Tribal Sub-Plan

(Rs. lakh)

Component	2001-02			2002-03			2003-04			2004-05			2005-06		
	State sector	District sector	Total	State sector	District sector	Total									
State plan outlay	750508	108320	858828	794253	66808	861061	909159	68841	978000	1138321	93971	1232292	1155211	200289	1355500
Divisible outlay	208729	91942	300671	232657	66808	299465	256874	68841	325715	336847	93971	430818	114416	167359	281775
TSP outlay	8926	4485	13411	10346	2721	13067	9940	3070	13009	4977	4366	9343	5914	9413	15327
Pooled TSP funds	2083			1870			1798			1138			1846		
Percentage of TSP to state plan outlay	1.19	4.14	1.56	1.30	4.07	1.52	1.09	4.46	1.33	0.44	4.65	0.76	0.51	4.70	1.13
Percentage of TSP to divisible outlay	4.28	4.88	4.46	4.45	4.07	4.36	3.87	4.46	3.99	1.48	4.65	2.17	5.17	5.63	5.44
Percentage of pooled funds to state sector TSP	23.34			18.07			18.09			22.87			31.21		

Source: Directorate of Scheduled Tribes Welfare, Karnataka.

The land purchase scheme provides land to landless agricultural labourers by purchasing lands from non-SC/ST landholders at a unit cost of Rs.60,000 with a subsidy of 50 per cent.

pump sets under the *Ganga Kalyan* scheme. Table 10.15 provides information about the TSP outlay and the funds pooled since 2001-02.¹

Review of programmes

In this section, we look at programmes, which have been more successful than others in promoting tribal development.

Collection of minor forest produce and tribal co-operatives: Tribal people living in hilly, forest areas depend heavily on minor forest produce (non-timber forest produce) for their livelihood. As much as 50 per cent of the income of the Soliga Tribe in Chamarajnar district, for example, comes from the collection of minor forest produce (MFP). Large-scale Adivasi multi-purpose societies (LAMPS) were formed in the late 1970s, with tribal people as members, to market non-timber forest products (NTFP) procured from the forests by the tribal people. It also supplies essential food commodities and consumer items to its members. At present, there are 21 LAMP Societies in Karnataka with 42,182 tribal families in the jurisdiction. Only 25,504 out of 63,558 members, are active. LAMP Cooperatives, which were established to provide marketing tie-ups and ensure better prices for NTFP products procured by the tribals, have had mixed outcomes. One view is that they do not provide much scope for tribals in the price fixation mechanism for NTFP. While the NTFP selling rates have been registering a steady increase, the purchase price fixed for procuring the produce from the tribals has shown only a nominal increase. LAMPS should enhance rates so that the poor tribal people, who actually procure these items from within the deep jungle at some personal risk, can improve their economic conditions.

Animal Husbandry: Unlike subsistence agriculture, animal husbandry is an important income-generating activity for the tribals, as it gives immediate returns. Unfortunately, the income from these activities is meagre due to tribals' inability to provide adequate fodder and water

and lack of marketing support. Not surprisingly, a high 30.82 per cent of families failed to maintain their assets (Tribal Sub Plan-Asset Evaluation Study 2000-01).

Income Generation: Apart from poverty reduction and income generating programmes such as SJSY, SGSY, *Stree Shakti*, there are also specific schemes to address the needs of the Scheduled Tribes who are landless or who have land that is not irrigated. The Karnataka Scheduled Castes and Scheduled Tribes Development Corporation implements various programmes for the economic development of the community, among which, the most important are:

- a. The land purchase scheme: This provides land to landless agricultural labourers by purchasing lands from non-SC/ST landholders at a unit cost of Rs.60,000 with a subsidy of 50 per cent.
- b. Self-employment programme: Under this, financial institutions provide assistance for setting up businesses. The corporation provides a subsidy of Rs.10,000 for a unit cost of Rs.1,00,000, and the remaining amount is a loan from financial institutions. Where the unit cost is above Rs.50,000, the corporation sanctions 20 per cent as 'margin money loan', with a ceiling of Rs.one lakh in each case, with an interest of four per cent, while 75 per cent is a loan from banks and NSFDC. The beneficiary must meet the remaining 5 per cent as his/her contribution.
- c. *Ganga Kalayana:* This comprises (i) the Community Irrigation Scheme, under which, land owned by several ST families are provided bore-well irrigation. Depending upon the availability of water, two to three bore-wells are drilled and other expenses for installation of pump sets, energisation, storage tanks, pipelines are provided by the corporation; (ii) the individual irrigation bore-well programme, where the corporation takes up construction of irrigation bore-wells and provides infrastructure at a unit cost of Rs.75,000 of which Rs.65,000 is subsidy and the rest is a loan from financial institutions.

¹ Sectors, which have direct and quantifiable benefits for the Scheduled Tribes, are classified as 'divisible' and the TSP allocation is limited to these sectors. 'Non-divisible' sectors include major and medium irrigation, energy, borrowings, etc.

Micro industries: The objective here is to utilise local skills for the promotion of micro industries like bee-keeping, minor forest produce, tribal crafts, sericulture, and carpentry. An investment varying from Rs.500 to Rs.25,000 generates an income of about Rs.30–40 per day.

Self-help groups: Self-help groups (SHGs) have radically changed the micro-credit systems in rural areas. Tribals, who form a large percentage of rural agricultural labour, and subsistence farmers find it difficult to source credit from financial institutions and are likely to benefit from the SHG philosophy. Self-help groups promote savings and microfinance among members, but they also have other objectives such as social empowerment and gender equity. The *Stree Shakti* programme of the department of Women and Child Development has 1,19,621 ST women members in 1,00,000 SHGs.

The role of NGOs in tribal development

There is growing realisation of the need to develop a healthy partnership between the government and the non-governmental organisations (NGOs). The role of NGOs in tribal welfare activities, though small, has been responsible for introducing qualitative changes in the lives of the people. *Vivekananda Girijana Kalyana Kendra*, Swami Vivekananda Youth Movement, DEED, FEDINA, CORD, *Samagra Grameena Ashrama*, *Janashikshana Trust*, *Chintana Foundation*, *DUDI*, *Samvriddi/Krupa*, *Vanavasi Kalyana Ashrama* are some of the NGOs involved in tribal development in Karnataka.

Community based organisations

It is possible to make development works more effective and sustainable through an engagement with the local community, which has a better understanding than non-tribals, of its own socio-economic needs, traditions and culture. Their participation in programmes, funded by government and voluntary organisations builds confidence in the people to utilise the services thus offered and provides feedback for modification and re-orientation of programmes. In Chamarajnagar district, the tribal people's organisations are known as *sanghas*. They actively

BOX 10.1

NGO experiences in tribal health

Under the IPP-9 project, the Health Department and NGOs trained tribal girls as Auxiliary Nurse and Midwives (ANM) and they were posted to sub centres in remote tribal areas. These ANMs are now providing good healthcare services to tribal women and children.

The government-owned primary health centres at Gumballi and Thithimathi, were handed over to Karuna Trust and Vivekananda Foundation respectively and are run as model PHCs.

In B.R. Hills, VGKK, an NGO, is promoting the traditional knowledge systems of tribals and has integrated traditional healthcare system with modern medicine. Tribal knowledge of herbal medicines is being promoted.

Source: Author.

participate in issues concerning tribals, such as preventing forest fires, illegal quarrying, smuggling and poaching. Their participation in programmes such as sustainable harvesting of NTFP through participatory resource monitoring, value additions to the NTFP and conservation of bio-diversity has helped to reduce the exploitation of minor forest produce by outsiders.

Concerns

Some state programmes have been very successful in providing services to the Scheduled Tribes, e.g. free housing, drinking water supply and electrical connectivity to ST households. There is a gamut of programmes designed to address the problems of school dropouts (*ashram* schools, scholarships, free text books and uniforms, midday meals) and income poverty through the many poverty reduction programmes. Unfortunately, the degree of effectiveness in terms of programme implementation that one sees in these sectors is not evident in the three critical areas of health, education and poverty reduction. The magnitude of the problem is so great that a large percentage of Scheduled Tribe families is still poor and lacks access to resources that would improve their education and health status. It can be said, based on some of the indicators discussed above and in chapter 2, that the **human development status of the Scheduled Tribes is more than a decade behind the rest of the population of the state and they are the poorest and most deprived of all sub-populations in the state.**

The role of NGOs in tribal welfare activities, though small, has been responsible for introducing qualitative changes in the lives of the people.

Tribal participation in programmes such as sustainable harvesting of NTFP through participatory resource monitoring, value additions to the NTFP and conservation of bio-diversity have helped to reduce the exploitation of minor forest produce by outsiders.

TABLE 10.16
Scheduled Tribes in Karnataka: Key indicators

Sl. No.	Indicators	Units	Results
I. General:			
1	Population **	lakh	34.64
2	Percentage to total state population **	per cent	6.55
3	Percentage to total Hindu population **	per cent	7.82
II. Education and literacy:			
4	Literacy rate **	per cent	48.27
5	Levels of education:		
	a. High School *	per cent	6.32
	b. PUC *		1.54
	c. Graduation *		0.81
	d. Post-graduation *		0.09
6	Out-of-school children (7-14 Age group) ***	per cent	2.42
7	Dropout rates		
	a. Primary level (7-14 Age group) *	per cent	6.29
	b. Higher Primary/High School level *	per cent	14.54
III. Health status:			
8	Sex ratio **	per 1000 males	972
9	Estimated birth rate *	per 1000	22.79
10	Estimated death rate *	per 1000	8.50
11	Estimated infant mortality rate *	per 1000 live births	64.37
12	Life expectancy at birth *	Years	61.8
13	Type of birth assistance at deliveries:		
	a. Institutional *	per cent	32.05
	b. Health staff *		31.31
	c. Trained dais *		24.08
14	Access to nutrition programme:		
	a. Boys *	per cent	83.70
	b. Girls *		83.64
	c. Pregnant women *		54.69
	d. Nursing mothers *		59.53
IV. Housing profile:			
15	Households by ownership:		
	a. Owned **	per cent	84.4
	b. Rented **		11.8
	c. Any other **		3.8

(Table 10.16 Contd...)

(Table 10.16 Contd...)

Sl. No.	Indicators	Units	Results
16	Households by type of structures:		
	a. Permanent **	per cent	66.9
	b. Semi-permanent **		23.1
	c. Temporary **		10.0
17	Toilet facility:		
	a. Within house premises *	per cent	8.35
	b. Outside house premises *		9.33
	c. Public latrine *		6.75
	d. Pit latrine **		8.8
	e. Water closet **		7.9
	f. Other latrine **		3.6
	g. No latrine **		79.7
18	Type of drainage:		
	a. Closed drainage	per cent	8.6
	b. Open drainage	per cent	30.5
	c. No drainage	per cent	60.9
19	Type of fuel used for cooking:		
	a. Firewood **	per cent	79.8
	b. Cow dung **		0.2
	c. Kerosene **		6.2
	d. LPG **		6.1
20	Lighting:		
	a. Access to electricity **	per cent	64.7
	b. Kerosene **	per cent	34.3
	c. Any other **	per cent	0.5
	d. No lighting **	per cent	0.5
21	Access to drinking water *	per cent	88.82
V. Economic scenario:			
22	Type of occupation:		
	a. Cultivator *	per cent	8.80
	b. Agricultural labour *		17.89
	c. Other labour *		7.35
	d. Government services *		1.68
23	Annual per capita income *	Rupees	5713
24	Monthly per capita expenditure *	Rupees	439
25	Proportion of BPL households *	per cent	38

Sources:

- * Sample Survey, Directorate of Economics and Statistics, Karnataka, 2004A.
- ** Registrar General of India, Census 2001.
- *** Children's Census, Department of Public Instruction, Karnataka, 2005.

TABLE 10.17
Major Scheduled Tribes in Karnataka

1	Adiyan	26	Koya, Bhine Koya, Rajkoya
2	Barda	27	Kudiya, Melakudi
3	Bavacha, Bamcha	28	Kuruba (in Kodagu district).
4	Bhil, Bhil Garasia, Dholi Bhil, Dungri Bhil, Dungri Garasia, Mewasi Bhil, Rawal Bhil, Tadvil Bhil, Bhagalia, Bhilala, Pawra, Vasava, Vasave.	29	Kurumans
5	Chenchu, Chenchwar	30	Maha Malasar
6	Chodhara	31	Malaikudi
7	Dubla, Talavia, Halpati	32	Malasar
8	Gamit, Gamta, Gavit, Mavchi, Padvi, Valvi.	33	Maleyakandi
9	Gond, Naikpod, Rajgond	34	Maleru
10	Gowdalu	35	Maratha (in Kodagu district).
11	Hakki Pikki, Harnshikari	36	Marati (in Dakshina Kannada district).
12	Hasalaru	37	Meda, Medari, Gauriga, Burud
13	Irular	38	Naikda, Nayaka, Cholivala Nayaka, Kapadia Nayaka, Mota Nayaka, Nana Nayaka, Naik, Nayak, Beda, Bedar and Valmiki.
14	Iruliga	39	Palliyan
15	Jenu Kuruba	40	Paniyan
16	Kadu Kuruba	41	Pardhi, Advichincher, Phanse Pardhi.
17	Kammara (in Dakshina Kannada district and Kollegal taluk of Chamarajnagar district).	42	Patelia
18	Kaniyan, Kanyan (in Kollegal taluk of Chamarajnagar district).	43	Rathawa
19	Kathodi, Katkari, Dhor Kathodi, Dhor Katkari, Son Kathodi, Son Katkari.	44	Sholaga
20	Kattunayakan	45	Sholigaru
21	Kokna, Kokni, Kukna	46	Toda
22	Koli Dhor, Tokre Koli, Kolcha, Kolgha.	47	Varli
23	Konda Kapus	48	Vitolia, Kotwalia, Barodia
24	Koraga	49	Yerava
25	Kota	50	Siddi (in Uttara Kannada district).

Source: Directorate of Tribal Welfare, Karnataka.

Their literacy rate is the lowest for all social groups and female literacy, which is a low 36.6 per cent when compared with the state average of 56.9, places ST women far behind a population that is, itself, disadvantaged to start with. There are disparities between ST students and others at every level and along all indicators of educational attainment: enrolment and retention in primary education and subsequent participation in secondary and tertiary education. One bright feature is the fact that girls perform well scholastically once they clear the hurdles to the deceptively simple acts of first enrolling and secondly, being allowed to stay on in school.

The health of the tribal people has not improved significantly over the previous decade. Their IMR (64.37) is worryingly higher than that of the total population (52.0) of the state. This scenario can be partly attributed to the inadequacy of institutional support. Both antenatal and post-partum care by skilled attendants is not adequately available to the tribal people, especially those who live in remote or inaccessible habitations. State functionaries have not focused sufficiently on these vulnerable people to ensure a reduction in maternal and infant deaths. Under-nutrition levels among children are severe enough to lead to stunting.

The occupational distribution shows that the majority of the tribal people are small and marginal farmers and agricultural labour. Their holdings are unirrigated and therefore economically unviable. The Scheduled Tribes also have very low monthly per capita expenditure compared with the rest of the population. Access to MFP and NTFP is critical to the survival of certain tribes, who live in or around forests, most of which are now classified as wildlife sanctuaries.

Recommendations

- Develop a comprehensive policy on tribal development, which derives inputs from people at the grassroot level to ensure sustainable development that is ecologically sound, people oriented, decentralised and culturally acceptable.

- Ensure the collection and collation of disaggregated data to enable benchmarking and monitoring.
- Conduct a rapid survey of the health status of the tribals and prepare region-specific and tribe-specific health plans.
- Relax norms for primary health centres and sub-centres in tribal areas and make allowances for geography and population.
- Select tribal girls for training as ANMs and post them to sub-centres located in predominantly tribal areas. They could also be trained in traditional medicine and health practices, thus encouraging and integrating traditional healing systems into modern medicine.
- Encourage nutrition security by promoting kitchen gardens.
- Focus on genetic diseases.
- Ensure 100 per cent antenatal care coverage and immunisation of women and children. Provide secondary and tertiary care, transport facilities for emergency services and obstetric care.
- Ensure greater access to education through convergence of the services of several departments: Education, Rural Development and Labour to monitor child labour, track dropouts and provide local employment to their parents.
- Include tribal culture, traditional knowledge systems, tribal history and vocational skills training in the school curriculum.
- Involve tribals in biodiversity conservation; encourage them to grow fruit trees on degraded forest-lands; allow sustainable harvesting of the non-forest produce for their livelihood, without endangering the biodiversity of the forest.
- Encourage need-based economic activities that use locally available raw materials and assist in marketing of finished goods.
- Provide more budgetary support to the land purchase scheme.
- Promote organic farming, conservation of traditional seed.
- Empower tribals at village level to participate effectively in Gram Sabhas, by promoting community based organisations.

Develop a comprehensive policy on tribal development, which derives inputs from people at the grassroot level to ensure sustainable development that is ecologically sound, people oriented, decentralised and culturally acceptable.

Include tribal culture, traditional knowledge systems, tribal history and vocational skills training in the school curriculum.

