I. BACKGROUND

Despite over six decades of affirmative action policies, programmes, and budgets to ensure tribal development, India’s tribal children continue to remain the most nutritionally deprived section of the population. The country’s third National Family Health Survey (NFHS) had shown that in 2005, 54% of tribal children (that is, one in every two) were undernourished. Various field-studies and media reports reveal that even today poverty induced hunger deaths, poor livelihood opportunities and inadequate access to essential services exist in tribal areas. These circumstances exist primarily due to physical remoteness of the tribal people, inadequate monitoring and accountability mechanisms in government programmes for them, and loss of command over land and forest resources.

The primary fiscal policy strategy for tribal development was the Tribal Sub Plan (TSP), which was introduced in the Fifth Five Year Plan. The TSP programmes are to be financed by the following sources: (a) Tribal Sub Plan funds from State /UT Plans and Central Ministries/Departments, (b) Special Central Assistance (SCA) to Tribal Sub Plan (TSP), (c) Grants under Article 275 (1) of the Constitution to the States/UTs, (d) Funds through Central Sector Schemes, (e) Funds from Centrally Sponsored Schemes and (f) Institutional Finance.

II. RESEARCH QUESTIONS

Some of the questions, which are pertinent to be addressed in the present context, include the following:

i. Are the TSP allocations by Union Ministries in conformity with the recommendations of the Narendra Jadhav Task Force1 on SCSP and TSP?

ii. Are the Union and State Governments consistently earmarking TSP funds for the programmes/schemes that are directly or indirectly relevant for nutritional attainments of tribal children?

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1 The Planning Commission had appointed a Task Force to Review Guidelines on Scheduled Castes Sub-Plan (SCSP) and Tribal Sub-Plan (TSP) in June, 2010 under the Chairmanship of Dr. Narendra Jadhav, who was then Member, Planning Commission. The Task Force submitted its report in November 2010.
III. METHODOLOGY

An in-depth assessment of Union and State Government budgets was undertaken for selected nutrition-related Central schemes (See Box above). The study analyses the TSP expenditures and outlays of the Union government and four State governments. The following four States which have Schedule Five Areas with large tribal population were selected for the purpose, namely, Maharashtra, Odisha, Madhya Pradesh (MP), and erstwhile undivided Andhra Pradesh (AP).

- Information for the TSP allocations of the Union government was collected from ‘Statement 21A-Schemes for Development of Scheduled Tribes’ included in the Expenditure Budget Volume I of the Union Budget documents. The budget documents for three consecutive years 2014-15, 2013-14, and 2012-13 were considered for the purpose.

- The total Union government allocations for the selected schemes were collected from each Ministry’s Expenditure Budget Volume II documents.

- TSP allocations of the State governments were collected from the respective State budget documents.

IV. KEY FINDINGS

FINDING 1: Overall TSP Outlay of Union Government remained less than the Task force recommended 8.2% of Plan Outlay

TSP outlays have improved from 2011-12 budget onwards following the recommendations of the Task Force. However, the total TSP outlay still remains below 8.2% of the total Central plan outlay. In the year 2013-14 the total TSP outlay of the Central government was 5.9% of the total central plan outlay (Fig. 1).

FIGURE 1: TSP as a proportion of Plan budget of selected Union Government Ministries/Departments for the FY 2013-14BE (in %)

**FINDING 2:** TSP allocations of key nodal ministries remained low

Among the Ministries/Departments considered for analysis, the Department of Rural Development, which implements NRlM and MGNREGA, allocated only 6% of the plan outlay for TSP in the FY 2013-14.

Where the Task Force allowed for less than 7.5% allocation for TSP, several Ministries responded with meagre TSP allocations. Thus, the Department of Food and Public Distribution allocated only 2.4% of its Plan Outlay for TSP in 2013-14. While the total Union Budget Outlay of the department was Rs 91,034 crore for the FY 2013-14, only Rs. 259 crore was allocated as plan outlay, which in turn led to low TSP allocations.

The TSP allocations for the RCH-flexi pool component are not consistently reflected in the budgets of the Union Ministry of Health and Family Welfare. The Union Budget for 2013-14 provided TSP allocation of Rs. 1391 crore for RCH-flexi pool, but the preceding and subsequent budgets do not show such specific allocations.

The positive indication was that with the increase in the ICDS budget of the Union Government there has been a rise in TSP share of ICDS as well. The allocations for the year 2014-15 were approximately Rs 1730 crore, which is almost double the expenditure in 2011-12. Although the Ministry is consistently reporting TSP expenditure since 2011-12, we do not find corresponding data on the physical outcomes and funds utilised.

The TSP allocations under NBA increased from Rs. 120 crore in 2011-12 to Rs. 426 crore in 2014-15. While the share of TSP is reported by the Ministry for NBA and NRDWP, no separate initiatives for the tribal population have been formulated, thus reducing TSP share merely to a reporting exercise.

**FINDING 3:** Inconsistent commitment to nutrition related schemes under TSP in some states

The number of tribal children under age of five years in Madhya Pradesh is almost double that of Odisha. However, the TSP expenditure on ICDS by MP government was less than that of Odisha till 2013-14, despite the fact that the total budget size for ICDS is greater in MP than in Odisha. TSP guidelines in Maharashtra require that at least 3% of the district-level tribal sub-plan allocation should be earmarked for nutrition. This would amount to a minimum allocation of at least 1.8% for nutrition as a proportion of the entire TSP budget of the State. However, the analysis of TSP budget documents of the State showed that the combined expenditure of State and district-level TSP has come down in the last few years from 4.2% of the TSP budget in FY 2010-11 to only 1.6% in FY 2014-15 (Fig. 2).

The four State budgets revealed no TSP allocations under PDS. Allocations through TSP could have been used to enlarge and make diverse the food basket by providing oil, iodised salt and iron-rich food.

A major portion of the NRHM funds are transferred to the states through RCH Mission Flexible Pools, which also has a tribal RCH\(^2\) component. Odisha and Madhya Pradesh show inconsistencies in allocating and utilising funds under the tribal RCH. The overlap in Tribal RCH and flexi-pools do not give a clear picture on funding in TSP blocks.

It may be observed from the Outcome Budget of the Union Ministry that in general the percentage of utilisation of funds by the states for NRDWP and NBA during the years 2012-13 and 2013-14 has been lower.

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\(^2\) Among the states selected for the study, Odisha, Madhya Pradesh and Maharashtra allocate funds for ‘Tribal RCH.’
FIGURE 2: Proportion of TSP under Major Head 2236 (Revenue head for nutrition) in Maharashtra (in %)

Note 1: In Maharashtra the TSP funds (in proportion to the ST population of the state) are separated at the beginning of the planning exercise from the total plan budget of the state and given to Tribal Development Department (TDD). TDD in turn divides the funds between the state- and district-level TSP funds in 40:60 proportions. As per the guidelines given by the TDD at least 3% of the district TSP outlay should be spent on nutrition.

Note 2: The percentage is based on aggregate expenditure for nutrition at the state and district level as indicated in the TSP Budget of the state.

Source: Compiled from Maharashtra State Budget documents, Tribal Development Department, Demand for Grants for the FY 2012-12, 2013-14 and 2014-15

FIGURE 3: Proportion of TSP Expenditure for Nutrition related Centrally Sponsored Schemes (ICDS, MGNREGA and RCH) by undivided Andhra Pradesh (in %)

Note 1: The TSP proportion of MGNREGA and RCH has been calculated for only state governments’ matching contribution because the central share is routed outside the state budget.

Note 2: The proportion of STs in the state to the total population of the state is around 7% as per Census 2011.

FIGURE 4: Proportion of TSP Expenditure in Nutrition related Centrally Sponsored Schemes (ICDS, MGNREGA, NRLM, NBA and NRDWP) by Odisha (in %)

Note 1: The TSP proportion of MGNREGA, NRLM, NBA and NRDWP has been calculated only for state governments matching contribution because the central share is routed outside the state budget.
Note 2: The proportion of STs in the state to the total population of the state is around 22.9% as per Census 2011.

FIGURE 5: Proportion of TSP Expenditure in Nutrition related Centrally Sponsored Schemes (ICDS, MGNREGA, NRLM, and NBA) by Madhya Pradesh (in %)

Note 1: The TSP proportion for MGNREGA, NRLM, and NBA has been calculated only for state governments matching contribution because the central share is routed outside the state budget.
Note 2: The proportion of STs in the state to the total population of the state is around 21.1% as per Census 2011.

FINDING 4: Schemes do not have a specific tribal component

It is seen that the schemes do not have a specific tribal component. Special issues related to tribal people such as high rates of migration, poverty, landlessness, spatially dispersed habitations, cultural differences, difficult terrain, remoteness, etc., need to be taken into consideration while planning for them. Most of the social sector schemes do not account for geographical, administrative, and socio-cultural realities of such areas.
The planning processes and consequent budgetary provisioning do not take into account the NCST recommendation for a need based planning approach. The NCST in its recommendations to the Steering Committee for the 12th FYP reflected that the TSP component “should not be per population share but according to ‘problem-share’; and ‘need-based’ taking into account the extent of deprivation, or even more than that to make up the backwardness/ negligence experienced over the years.”

V. RECOMMENDATIONS

1. “Need based, problem-share” allocations: The extent of malnutrition among STs is a serious concern, and has social and human costs. Hence, the TSP allocation for departments directly or indirectly having an impact on nutrition should be more than the population share. The extra allocation can be dependent on the deviation of the extent of malnutrition among STs vis-à-vis the non-STs.

2. There is a need to increase TSP allocation for food security which is presently meagre because food subsidy is classified as non-Plan expenditure.

3. Since Rural Development schemes (MGNREGA and NRlM) have impact on livelihood, the Department needs to earmark funds as per the recommendations of task force.

4. Decentralised Planning: Planning and budgetary analysis in all four states shows a lack of bottom-up approach to planning and decision-making. There remains a lack of a targeted approach to improve nutritional attainments in tribal children. Also nutrition related programmes lack in identifying specific needs of tribal communities and tribal pockets which is clearly reflected in inconsistencies in budgetary allocations.

5. There is a need to increase absorptive capacity in tribal areas through flexible administrative and technical norms for remote tribal areas, provision of greater administrative costs, and funds for maintenance expenditure.

6. Strategic use of funds and Continuity in service delivery mechanisms: Utilisation of funds strategically for improving nutritional outcomes through small but well thought out action plans such as providing animal proteins/ eggs /bananas under ICDS would attract children and have positive impact on their nutritional intake. Provisioning of adequate funds for drinking water and continued and consistent service delivery mechanisms in health in remote tribal pockets would also go a long way to improve outcomes among tribal children.

7. TSP expenditure needs to be redirected from a focus on infrastructure towards focus on soft interventions such as better outreach services, IEC/BCC strategies, stronger handholding for livelihood components, etc. The funds can be used also for i) up-gradation of sub-health centres to provide around-the-clock services, ii) setting up crèches in partnership with self-help groups (as most mothers of tribal children work for long hours outside the home), and iii) funding civil society organizations to run mobile clinics and implement nutrition programmes in remote and civil strife areas.

8. Ministry of Tribal Affairs (MoTA) needs to initiate inter-sectoral coordination on nutrition, health and education in tribal areas. Coordination meetings need to be regularly held between MoTA and line Ministries with specific reference to: i) providing a separate chapter in the annual plans for STs by all line Ministries, ii) designating a tribal officer or cell at the state level in all line Ministries for inter-sectoral liaising and monitoring of schemes, iii) addressing the vacancy load in tribal blocks through partnerships, differential planning and relaxed norms, v) ensuring adequate earmarking, allocation and expenditure of TSP funds, and vi) establishing better policies and service delivery in tribal regions. It is hence recommended to establish a Planning and Monitoring Unit within MoTA at both the state and ITDA levels.