


INDIA'S INVESTMENT IN NUTRITION
STATES' ROLE AND RESPONSE

Towards A Nutrition-Sensitive Tribal Sub-Plan: Insights From Maharashtra, Madhya Pradesh And Odisha

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Towards a Nutrition-Sensitive Tribal Sub-Plan

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List of Abbreviations

AE:	Actual Expenditure	NRHM:	National Rural Health Mission
BE:	Budget Estimates	RCH:	Reproductive and Child Health
CSS:	Centrally Sponsored Scheme	RE:	Revised Estimates
FY:	Financial Year	SC:	Scheduled Castes
INR:	Indian Rupee	SCSP:	Scheduled Castes Sub Plan
ICDS:	Integrated Child Development Services Scheme	ST:	Scheduled Tribes
MoTA:	Ministry of Tribal Affairs	TDD:	Tribal Development Department
NITI Aayog:	National Institution for Transforming India	TSP:	Tribal Sub Plan
PESA:	Panchayats (Extension to Scheduled Areas) Act, 1996		



Abstract

Background:

4.9 million (42%) tribal children suffer from stunting, a sign of chronic nutrition deprivation. A budgetary strategy to supplement resources - Tribal Sub-Plan (TSP), can be tapped for improving nutrition services in tribal pockets across multiple sectors. This study examined TSP earmarking and utilization at Union level and across three states (Madhya Pradesh, Maharashtra and Odisha) to assess whether this strategy has been used for nutrition related programmes/ schemes.

Methods:

We studied the TSP earmarking of seven Union Ministries (Health and Family Welfare, Women and Child Development, Public Distribution and Civil Supplies, Rural Development, Agriculture, Drinking Water and Sanitation, and School Education and Literacy) and their respective state Departments. Funds earmarked for TSP were collated from State budget documents for three financial years (2016-17 BE, 2015-16 RE and 2014-15 AE). Extent of utilization of TSP earmarked was studied for the FY 2014-15 for the three states.

Results:

TSP earmarking by majority of Union Ministries and state departments of Madhya Pradesh and Odisha have been below the proportions recommended by the erstwhile Planning Commission. Maharashtra earmarks TSP funds at the beginning of planning exercise, and its earmarking specifically for nutrition has increased but is below the norm. Large proportions of TSP fund remained unspent by the departments in the three states at the end of the fiscal year in 2014-15. Absence of data on physical achievement makes it difficult to ascertain the efficiencies of expenditures.

Conclusion:

To ensure TSP is earmarked and utilized for the development of STs, strict monitoring of these funds by the Union Ministry of Tribal Affairs is necessary. New guidelines should be set for TSP earmarking by the government post-merger of plan and non-plan budgets. Simplified routing of TSP as adopted by Maharashtra may be replicated.

Key words:

Tribal Sub-Plan, Budget, State Plan, Nutrition, tribal



Introduction

Despite various constitutional provisions, state and central policies and programmes for protection, development and welfare of tribal people since almost six decades, the unending narrative of nutrition deprivation in tribal children hammers on— from poverty induced food insecurity and hunger deaths to poor access to food and nutrition entitlements. In 2013-14, 42% (~5 million) of India's tribal children under 5 years were stunted (Ministry of Women and Child Development, 2014; Government of India, 2011), compared to 33.9% among children belonging to other groups. Between June and August 2016, media reported death of nineteen children under age three years of *Juanga* tribe due to undernutrition in one single village (Nagada) of Jajpur district of Odisha (Mohanty, 2016) and similar reports have surfaced in Maharashtra (Sinha, 2016) and Madhya Pradesh (Choudhury, 2016).

UNICEF (2014) study, using NFHS-3 (2005-06) data, analysed disparities of stunting between tribal and non-tribal children in India. The paper found that severe stunting was 9 percentage points higher in tribal than in non-tribal children (29% vs. 20%) and was the main reason for the nine point difference in stunting between both groups (54% vs. 45%). The paper concluded that significant predictors of severe stunting among tribal children were multiple, including child's age, birth order and gender, maternal factors (maternal stunting, age, pregnancy interval and illiteracy), poor infant feeding and sanitation, distance from health facility, and household poverty. Other studies too have linked high rates of stunting and undernutrition deaths among tribal children to their poor socio-economic conditions. These include food and nutrition insecurity (Das & Bose, 2015; World Bank, 2011), poor livelihood opportunities, and inadequate access to essential services (such as health and educational facilities, safe drinking water sources, Public Distribution System outlets, ICDS centres) (Institute of Social Sciences, December 2003).

Union Government of India addresses nutrition deprivation through various Centrally Sponsored Schemes (CSSs) that cater to all children, including tribal children. However, specifically for tribal children there is another budgetary strategy to supplement resources -Tribal Sub Plan (TSP), in existence since the Fifth Five Year Plan (1974-75). TSP

High rates of stunting and undernutrition deaths among tribal children are linked to food and nutrition insecurity, poor livelihood opportunities, and inadequate access to essential services.

is non-divertible, non-lapsable fund to be spent by Union Ministries and state departments on tribal people and in identified tribal pockets. TSP funds are to be earmarked from the Plan budget of the Union Ministries or State budgets at least in proportion to Scheduled Tribe (ST) population of the total population of the country or the state (Ministry of Tribal Affairs, 2016). Hence, Union government should earmark about 8.6% (as per Census 2011) of the total central plan budget as TSP. TSP fund can also be utilized to address bottlenecks affecting the access to or quality of nutrition, health and other civic services in tribal areas.

Relevance of tapping TSP for additional resources for schemes or initiating new schemes that directly or indirectly improve nutrition outcomes needs to be considered keeping following caveats in mind.

Firstly, not all ministries and state departments earmark recommended funds for TSP from their Plan budget (Planning Commission, 2010). A total of 28 Union Ministries (of 60 Ministries) have an obligation to earmark funds for TSP from their Plan budget; extent of obligation varies across ministries depending on the category¹ to which it belongs).

Secondly, most TSP actions focus on infrastructure, with negligible

nutrition service provisioning activities or building infrastructure for nutrition services (UNICEF, 2014).

Thirdly, with effect from financial year (FY) 2017-18 plan and non-plan budgeting system will be merged. Presently, funds for TSP are earmarked from the plan budgets; but with this merger the denominator for calculating the quantity of plan funds that should be earmarked for TSP will no longer be valid and a suitable formula to earmark funds for TSP from the budget is yet to be decided (Ministry of Finance, 2016).

Fourth, erstwhile Planning Commission was responsible for monitoring the formulation and implementation of TSP by Union Ministries and state departments. The Planning Commission was replaced by NITI (National Institute for Transforming India) Aayog in January 2015. However, in February 2016 NITI Aayog expressed its inability to monitor TSP, stating that this was not within its mandate (PTI, 2016). Therefore, until December 2016, when the Ministry of Tribal Affairs (MoTA) was given the responsibility for monitoring the TSP, there was no clarity on who will monitor TSP.

Fifth, after the acceptance of the report of sub-group of Chief Ministers on restructuring of CSSs (in October 2015), the state's share in majority of CSSs has been increased by the Union

TSP fund can be used to address bottlenecks that affect access to or quality of nutrition, health and other civic services in tribal areas.

1. The Task Force (Planning Commission, 2010) had recommended four categories: Category I: No obligation; Category II: 0-7.5%; Category III: 7.5-8.2%, and Category IV: >8.2%



With the merger of plan-non-plan funds the denominator for calculating the quantity of plan funds to be earmarked for TSP will not be valid.

government, which has adversely affected TSP earmarking by Union Ministries as well. For instance, TSP earmarking of Ministry of Women and Child Development decreased from 8.7% of its plan budget in 2014-15 AE to 8.2% in 2016-17 BE (from INR 1597 crore in 2014-15 to INR 1418 crore in 2016-17 BE) (Government of India, 2016).

With this background in mind, this paper aims to answer the following two questions:

- (1) Are the mandated Union Ministries and their state departments which run nutrition related programmes, earmarking recommended funds for TSP?, and
- (2) What is the extent of fund

utilization in TSP earmarked?

2

Methods

Arriving at an analysis framework:

Stunting in Indian children, including

tribal children, is influenced by three broad interdependent underlying causes – (1) household food insecurity, including availability, economic access, and use of food, (2) inadequate maternal and child care and feeding practices, and (3) poor access to water, health and sanitation services (UNICEF, 1990). These three underlying causes are in turn influenced by basic causes such as socio-cultural norms, household's access to land, employment, income, and education, and governance issues (politics, governance, and leadership). To address these underlying and basic causes there are two broad categories of nutrition interventions – nutrition specific and nutrition sensitive. Nutrition specific interventions focus directly on nutrient deficits and include: micronutrient supplementation, breastfeeding and complementary feeding, and treatment of moderate and severe acute malnutrition.

Stunting can be reduced by 20% if these interventions are provided at 90% coverage (Bhutta, et al., 2013). For the remaining 80%, the nutrition-specific interventions need to be inter-twined with nutrition-sensitive interventions which indirectly influence nutritional status, such as: family planning and secondary education promotion to reduce teen births and increase birth spacing, antenatal care, water, hygiene and sanitation, agriculture, food security, social protection, and poverty alleviation (Bhutta, et al., 2013). The nutrition-specific and

nutrition-sensitive interventions are delivered through schemes/ programmes implemented by seven different Ministries (Figure 1). In this paper, hence we covered these seven Ministries.

Study states:

All tribal dominated states are not equal, both in terms of undernutrition burden and administrative log-jams in tribal areas. While 4.9 million out of 11.5 million tribal children of India are stunted, ~ 38% (1.9 million) of these stunted children live in just three states - Madhya Pradesh, Maharashtra and Odisha (Government of India, 2011; Ministry of Women and Child Development, 2014). These three states represent large tribal dominated states of central, western and eastern India and are also states with Fifth Schedule Areas where tribal people have borne maximum brunt of land alienation, displacement, and poor compensation for their natural resource rich habitats (UNICEF, 2014; Sethi, 2014). Hence, these three states formed the study states for the present study.

To answer the research question 1, for each of the seven Ministries, percentage of funds earmarked for TSP was collated from Statements 1 (Summary of Expenditure) and 21A (Schemes under Tribal Sub-Plan) (Government of India, 2016) of Expenditure Budget-Volume I of Financial Year (FY) 2016-17 for three consecutive financial years (2016-17 BE, 2015-16 RE and 2014-15 AE). BE means Budget Estimates,



4.9 million tribal children of India are stunted, ~ 38% of these stunted children live in just three states - Madhya Pradesh, Maharashtra and Odisha.

indicate the projected expenditure in the approaching/ongoing financial year. RE means Revised Estimates and indicates revised projections, after six months of the concerned financial year is over. AE means actual expenditure of financial year.

For these three consecutive financial years, information on TSP earmarking by Madhya Pradesh and Odisha, for each of the seven state departments that deliver nutrition-relevant programmes, was collated from State budget documents (Government of Odisha, 2016; Government of Madhya Pradesh, 2016). TSP earmarking for Madhya Pradesh and Odisha were collated from all expenses reported under the Minor Head 796 (Tribal Sub-Plan) of the budget statement of the seven departments considered for this study. The state of Maharashtra adopts a slightly different process for TSP earmarking. Given that 9.4% of state population is tribal population (Government of Maharashtra, 2016), 9.4% of State plan budget is apportioned as TSP at the start of the state planning exercise for a given financial year and transferred to Tribal Development Department (TDD). TDD, in turn, divides the received funds between the state and district TSP funds in 40:60 ratio. Simultaneously, TDD issues guidelines regarding the preparation of state and district TSP plans. The guidelines indicate the percentage amount to be spent on various sub-sectors from the district and state TSP funds. For instance, as per the TSP guidelines of the state,

from the district TSP funds (which is 60% of the total TSP fund) at least 3% and from state TSP funds (which is 40% of the total TSP fund) at least 5% should be earmarked for nutrition. This implies that overall at least 3.8% of the total TSP funds should be earmarked for nutrition.

To answer the research question 2, i.e., what is the extent of utilization of TSP earmarked in these three states, we compared the budget estimates with actual expenditures for the FY 2014-15.

Analysis and presentation of findings:

Data was tabulated in excel spread sheets, analysed departmentally and reviewed by a committee of external technical experts.



Results

TSP earmarking at Union level:

Although 8.6% of central plan fund is to be earmarked for TSP (Planning Commission, 2010) , in FY 2016-17,

TSP earmarking by Madhya Pradesh and Odisha was collated from Minor Head 796 of departments' budget statement; Maharashtra adopts a different process for TSP earmarking.



only 4.4% of central plan funds were earmarked for TSP (Figure 2).

The overall TSP budget for five of seven Ministries considered for analysis has increased in absolute terms between FY 2015-16 and FY 2016-17, but has decreased in absolute terms as well as in percentage terms for two Ministries (Ministries of Women and Child Development and Department of School Education and Literacy) (Figure 2). Furthermore, on TSP earmarking by these Ministries in the last three financial years, ministry which is directly involved in implementing schemes that usher livelihood security (Rural Development), earmarked 5% plan funds for TSP, which although has improved since FY 2014-15, but is still below the recommended 8.6%. Department of Food and Public Distribution, in-charge of implementing the National Food

Security Act, 2013, has consistently been earmarking <2% in TSP since last three consecutive financial years.

TSP earmarking at state-level:

In Madhya Pradesh, line departments are to earmark 21.1% of their plan budget for TSP. TSP earmarking by Women and Child Development Department and Health and Family Welfare Department has been below 21.1% and has decreased during the study period in percentage terms (Figure 3). Similarly, earmarking for school education decreased from ~30% in FY2014-15 to 26% in FY2016-17. Agriculture and Farmer Welfare Department has almost doubled the percentage earmarked in TSP during the period (12% in 2014-15 and 22% in 2016-17). The TSP earmarking by Rural Development Department and Public Health and Engineering Department (which

Overall TSP budget for five of seven Union Ministries has increased in absolute terms between FY 2015-16 and FY 2016-17, but has decreased for two Ministries.



In Odisha, the following four Ministries - Rural development, Panchayati Raj, Civil Supplies, and Women and Child Development - experienced a decline in TSP earmarking.

implement schemes related to water and sanitation) has considerably increased in last three financial years. According to Figure 3, the number of ministries allocating at least 21.1% to TSP was 3 in year 2014-15, 2 in 2015-16 and 5 in 2016-17.

Odisha has 22.9% ST population and hence TSP earmarking should be at least 22.9% by the line departments. TSP earmarking by Rural Development and Civil Supplies Department is much lower than the recommended level, 12.6% and 2.1% respectively for FY 2016-17. Departments of Health and Family Welfare and Agriculture and Farmers Welfare have increased their TSP earmarking almost up to the desired level in 2016. Ministries implementing schemes affecting basic causes of undernutrition such as alleviating poverty (Rural development, Panchayati Raj), food security (Civil

Supplies), and nutrition entitlements (Women and Child Development) have experienced a decline in TSP earmarking in last two financial years, being 12.6%, 24.1%, 2.1% and 22.8% respectively in 2016-17 (Figure 4). According to Figure 4, the number of ministries allocating at least 22.9% to TSP was 2 in all three financial years.

Maharashtra TSP budget is INR 6235.9 crore, of which INR 138.7 crore (2.2%) is the nutrition budget (earmarking under the budget Major Head 2236) in FY 2016-17, which is a significant jump from INR 53.3 crore in 2015-16. The earmarking for health and agriculture has reduced between 2015-16 and 2016-17 (Figure 5).

TSP utilization at state level

Figure 6 gives the utilization of TSP for FY 2014-15 for the two study states (Madhya Pradesh and Odisha). In 2014-15, on an average across

seven departments, ~30% of TSP funds were not utilised by Madhya Pradesh, which is the highest among the three states. The respective figure for Odisha was 25.5% (Figure 6) and for Maharashtra about 18.4% of total TSP budget remained unspent (Figure 5). There are wide variations in fund utilisation across sectors in all three states. More than 40% TSP funds were not spent by Department of Women and Child Development and Agriculture of Madhya Pradesh, whereas, Department of Health and Family Welfare utilised more than 87% of the funds earmarked. There is an over expenditure of TSP funds by Maharashtra in three sectors (rural water supply, health and agriculture) and underutilisation in other three sectors (rural development, education and nutrition). This indicates that there has been re-appropriation of funds between sectors within TSP budget.



Discussion


TSP earmarking below the norm by some of the Union Ministries and state

departments and inadequate fund utilisation by them needs to be seen in context of the budgeting processes and accountability mechanisms, which for TSP seem to be weak.


First, given the huge development gap between the tribal and non-tribal people, it is imperative that the TSP policy is not diluted due to the merger of plan and non-plan funds and regular earmarking of TSP funds by the departments continues. For this it is essential that NITI Aayog or MoTA formulates new guidelines for the earmarking of TSP funds.

Second, it was mentioned above that the TSP is earmarked from the plan budget of the Union government, however we may note here that the plan budget is only a small portion (~30%) of the total budget (plan and non-plan) of the government. An earmarking of 8.6% for TSP from 'plan' budget, in effect implies only ~2-3% of total budget. Also, plan, non-plan proportion varies across departments. For instance, a large-proportion of the Ministry of Food and Civil Supplies budget is classified as non-plan expenditure (for FY 2016-17, total outlay for this ministry was INR 1,40,150 crore, from this the plan outlay was only INR 150 crore) (Figure 2). Such departments then should also focus on improving the outreach of their programmes and services in tribal areas.

Third, there is a need to improve accountability and ease fund flow of TSP. It was mentioned earlier that



In 2014-15, on an average across seven departments, ~30% of TSP funds were not utilised in Madhya Pradesh, 25.5% in Odisha, and about 18.4% in Maharashtra.





From December 2016 onwards, MoTA has been given the responsibility for monitoring of TSP. NITI Aayog should provide support to MoTA for TSP monitoring.

from December 2016 onwards, MoTA has been given the responsibility for monitoring TSP based on fund allocation, utilisation, and outcomes. However, given the need for inter-ministerial convergence, it is necessary that requisite convening power be given to MoTA. Also, NITI Aayog should provide support to MoTA for monitoring of TSP.

At present, TSP funds are earmarked department-wise in the states under separate budget heads and while in most states SC-ST welfare department is nodal agency for monitoring TSP, there is no single Demand Number for SC/ST department to receive funds for TSP (except Maharashtra) (Figure 7).

Although, Madhya Pradesh compiles department-wise earmarking for TSP in a separate document², the fund allocation for TSP is not under the control of SC-ST welfare department. In this context, other States may consider following Maharashtra's approach for apportioning TSP funds, where the TSP funds are routed through the Tribal Development Department.

Another aspect of TSP which is hardly discussed is the devolution of TSP funds to the local governments. Section 4(m) vii of Panchayat (Extension to Scheduled Areas) Act 1996 (PESA) mandates control over plans for TSP in Scheduled Areas by panchayats at the appropriate

2. Demand Number 49 of Madhya Pradesh Budget documents.

level and gram sabhas. However, there is hardly any example of these provisions being followed in letter and spirit. For this, district-level committees need strengthening, along with resources and support to anchor such an initiative. Recently, Maharashtra took a step forward in this direction by devolving 5% of TSP funds of the respective Annual Plan to gram panchayats in Scheduled Areas.

Fourth, in addition to TSP, line Ministries within their own state plan/non-plan budgets have flexible norms for tribal areas and have adopted certain differential strategies. For example, population norms for setting up Anganwadi centres and health centres are much lower in tribal areas to ensure better access to these facilities in tribal areas (as tribal pockets are situated mostly in difficult terrain and are sparsely populated). Under National Rural Health Mission (NRHM), there is a separate component devoted to tribal people called 'Tribal Reproductive and Child Health' or Tribal RCH. Besides, among 184 High-Priority Districts, which are entitled to receive additional per capita resource allocation in NRHM, a fifth are tribal districts (NRHM, 2013). There are other provisions as well, such as mobile outreach health care and free on-call referral transport services that can be used to cover underserved tribal areas, along with monetary and non-monetary incentives (such as transport, residential facility, etc.) to health personnel serving in remote tribal areas (UNICEF, 2014). However,

implementation of such provisions has remained poor in most cases as these have either not been funded for or have been inadequately funded.

Lastly, the budget data is often not supported with physical achievements, hence it is difficult to comment upon the quality of expenditure. Already we have observed that the fund utilisation is low in the three states. In the absence of data on physical achievement it is not possible to comment on the efficiency of expenditure and the progress made under these schemes.



Fund utilisation is low in the three states. In the absence of data on physical achievements it is not possible to comment on the efficiency of expenditure.

Conclusion

The extent of undernutrition among tribal people is high and needs both short- and long-term interventions for redressing the problem. The interventions by line ministries rarely have a tribal perspective within schemes, which limits its reach to the tribal people. Additionally, line ministries rarely have a nutrition perspective in their schemes, except Women and Child Development



After the merger of plan and non-plan classification of the budget, an appropriate new benchmark for overall TSP allocation needs to be set by the Union Government.

Department and Public Health and Family Welfare Department, resulting in poor nutrition outcomes for STs.

TSP is a progressive handle to supplement resources in tribal areas. Mandated departments require strict monitoring by MoTA to ensure appropriate earmarking for TSP and its appropriate usage. However, TSP earmarking by some nutrition-sensitive Union Ministries and state departments has been below norm. The TSP fund utilisation by the state departments, too, has been low. Besides, the recent developments in the fiscal architecture of the country have threatened the existence of TSP

strategy. There is, thus, now an urgent need to take corrective actions, some of which have been suggested in the next paragraph.

After the merger of plan and non-plan classification of the budget, an appropriate new benchmark for overall TSP allocation needs to be set by the Union government. Also, a simplified routing of TSP, as adopted by Maharashtra, needs to be explored and adopted. Finally, the TSP earmarking should be accompanied by the physical achievements by the states' departments and Union Ministries.

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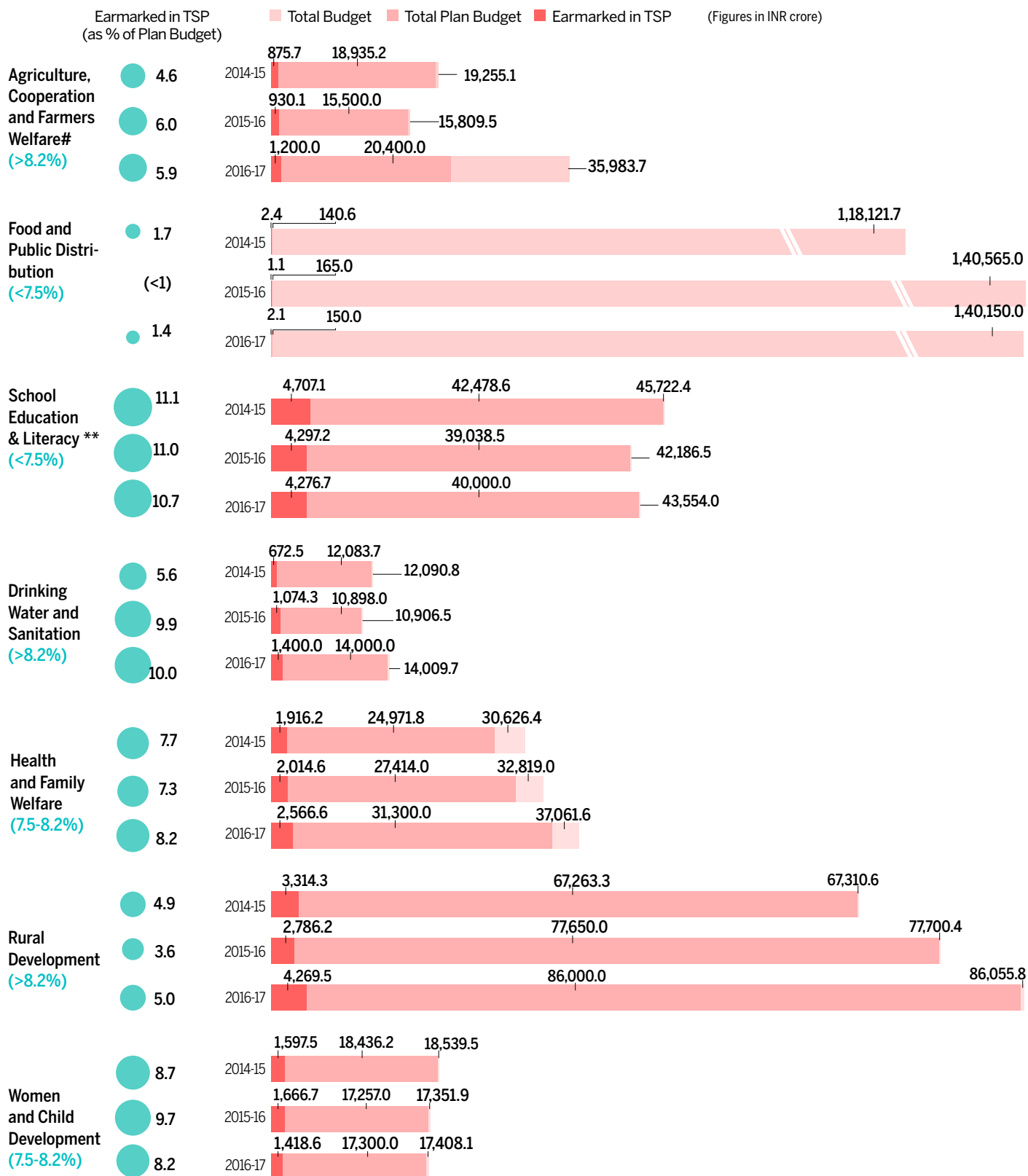


Figure 1: Ministry-wise overarching schemes/programme which deliver the nutrition-specific and nutrition-sensitive interventions

Ministry/Department	Scheme/programme that directly or indirectly addresses underlying or basic cause of undernutrition
Agriculture, Cooperation and Farmers Welfare	: National Food Security Mission Integrated scheme of oil seeds, pulses, maize and oil palm
Drinking Water and Sanitation	: National Rural Drinking Water Programme Swachh Bharat Mission – Gramin
Food and Public Distribution	: Public Distribution System
Health and Family Welfare	: Reproductive and Child Health
Rural Development	: National Rural Livelihood Mission Mahatma Gandhi National Rural Employment Guarantee Act
School Education and Literacy	: Midday meal scheme Rashtriya Madhyamik Shiksha Abhiyaan
Women and Child Development	: Integrated Child Development Services Sabla * Conditional Maternity Benefit Scheme *

* Pilot basis Ministries listed in alphabetical order.

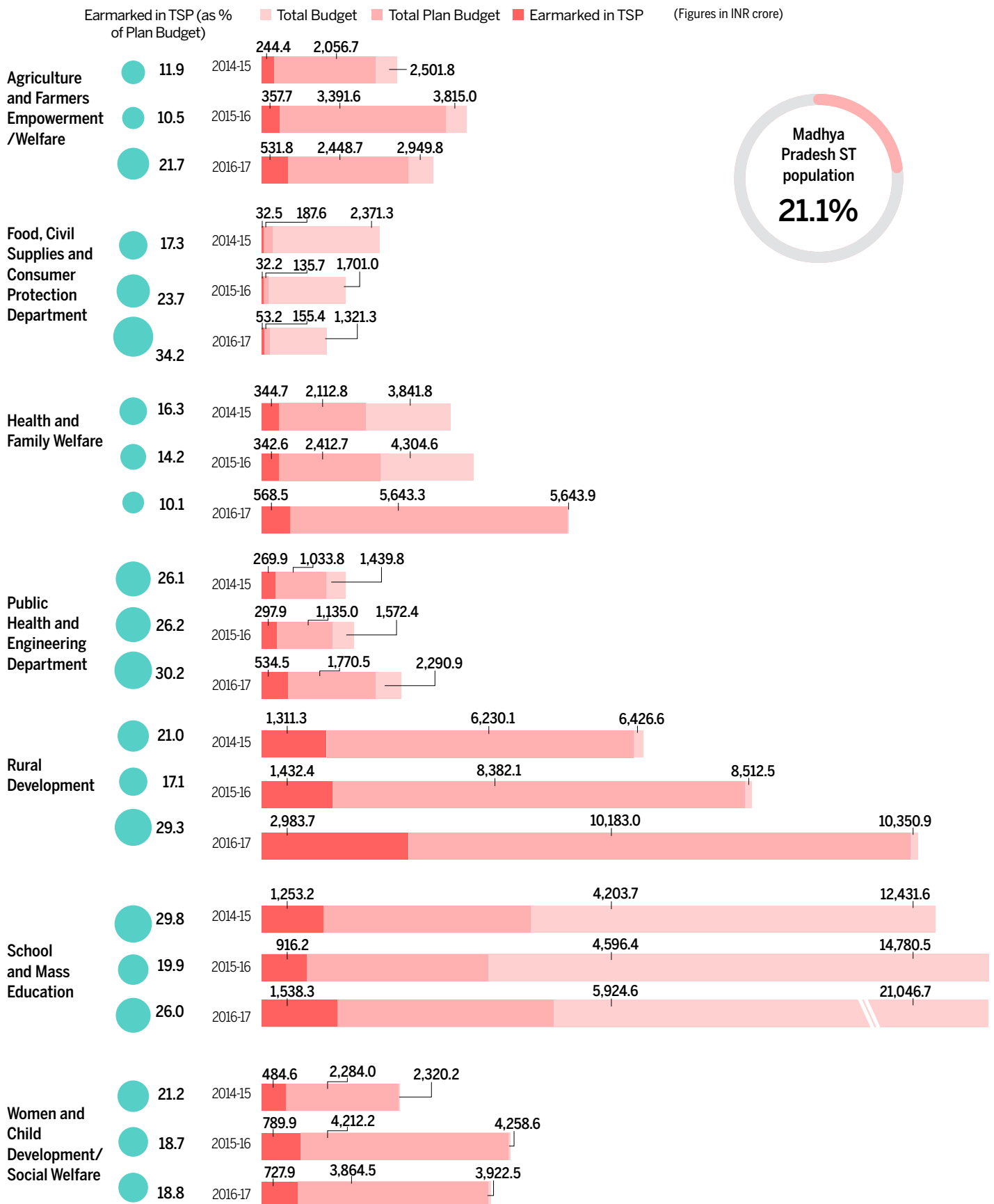
Figure 2: Total Plan budget and TSP earmarking of select Union Ministries



		Total Budget	Total Plan Budget	Earmarked in TSP	Earmarked in TSP (as % of Plan Budget)
Union Budget Expenditure	2014-15	16,63,673.0	4,62,644.0	19,920.7	4.3
	2015-16	17,85,391.0	4,77,197.0	20,963.2	4.4
	2016-17	19,78,060.0	5,50,010.0	24,005.4	4.4

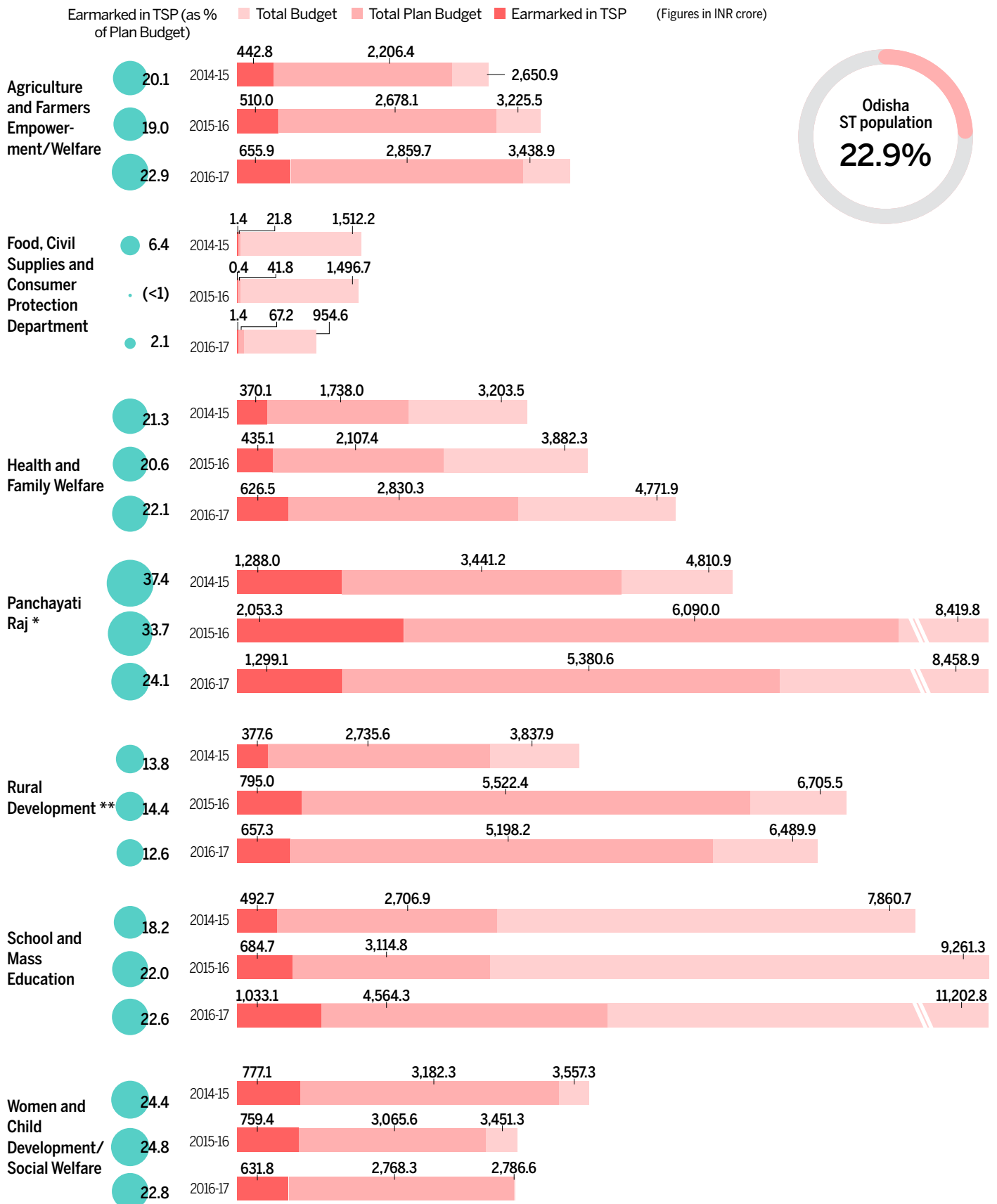
2014-15 data is AE, 2015-16 is RE and 2016-17 is BE. | Scaling for Union Budget Expenditure is different from that for other ministries. Figures in blue against ministry/department name are recommended values for the respective ministry/department | * It comes under the Ministry of Agriculture. | ** It comes under the Ministry of Human Resource Development. Source: Compiled by the authors from Union budget documents, 2016-17.

Figure 3: Madhya Pradesh: Total State Plan Budget and TSP earmarking of State Departments

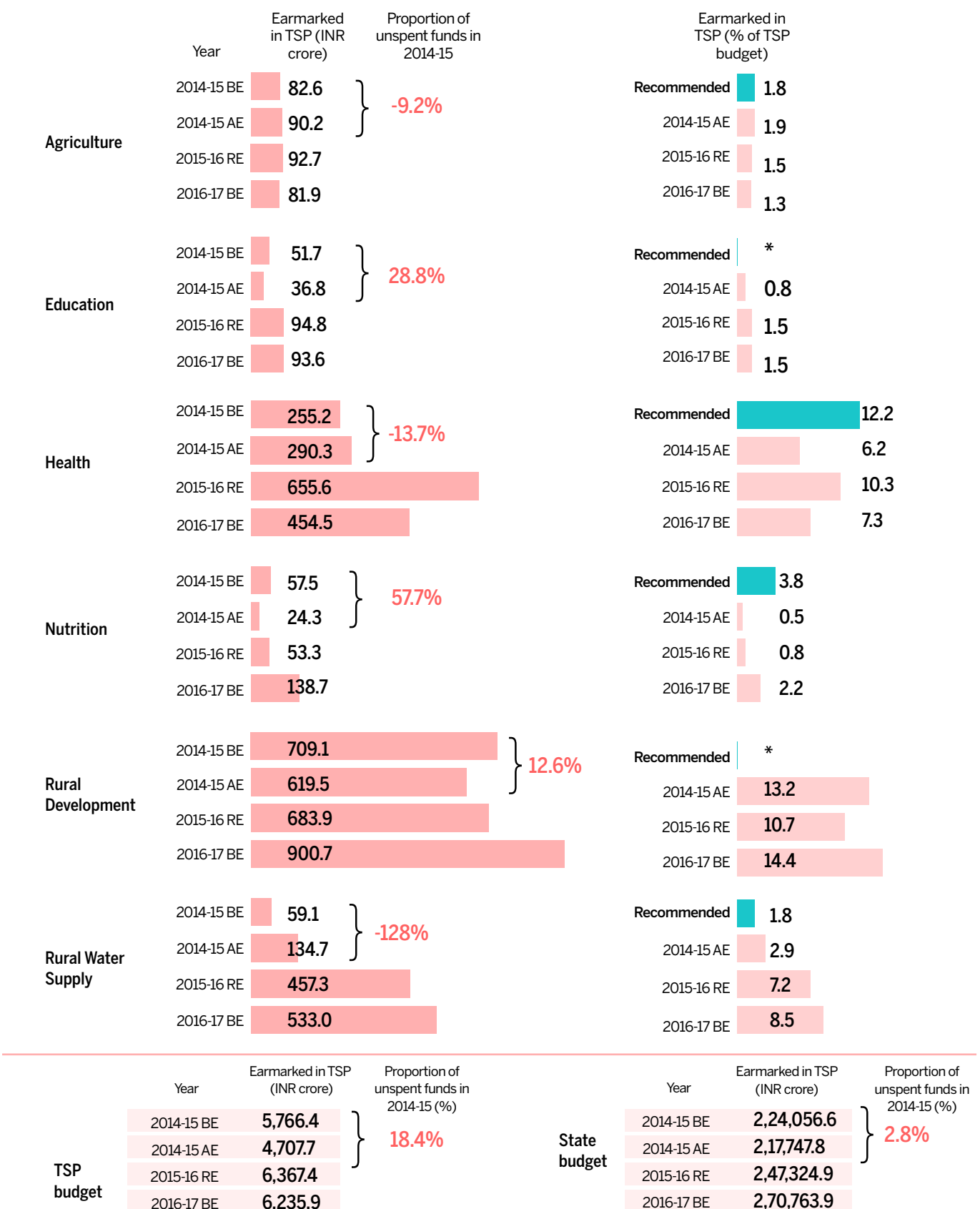


2014-15 data is AE, 2015-16 is RE and 2016-17 is BE | State departments listed in alphabetical order. Source: Compiled by the authors from budget documents of Government of Madhya Pradesh, 2016-17.

Figure 4: Odisha: Total State Plan budget & TSP earmarking of State Departments

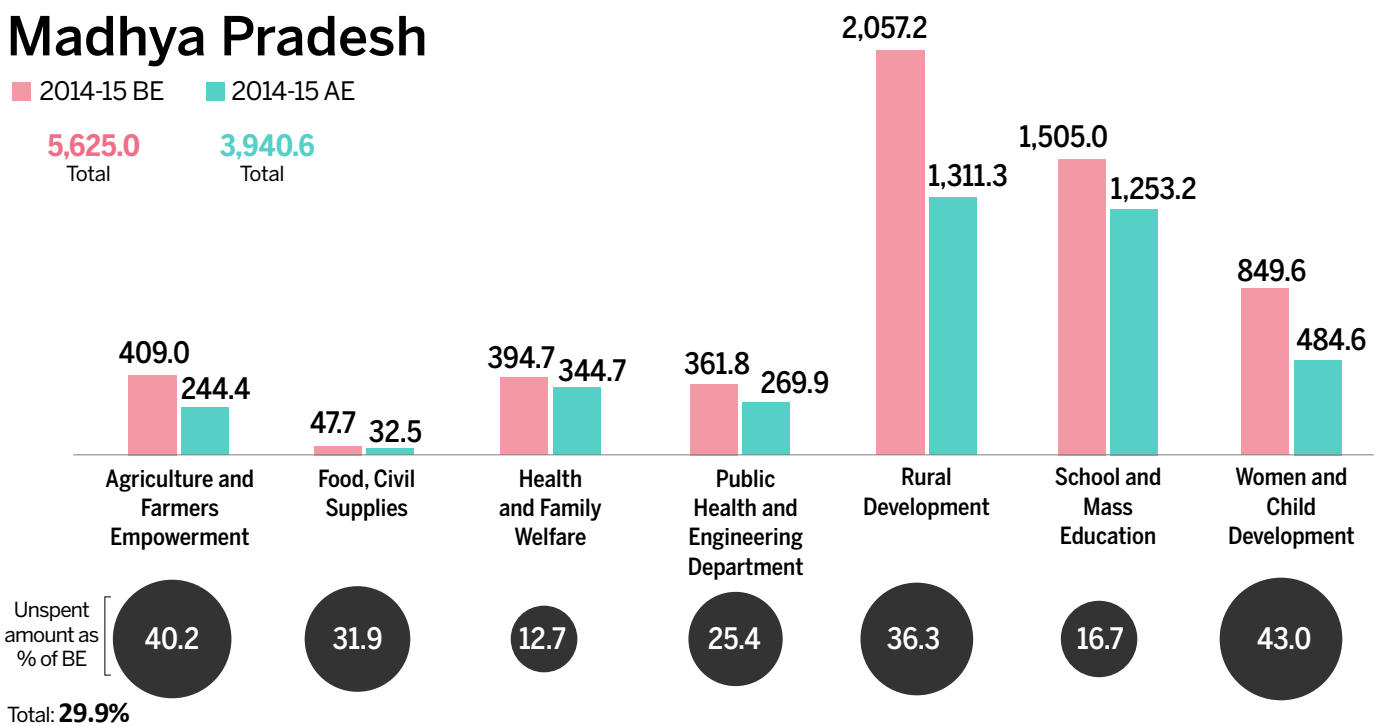
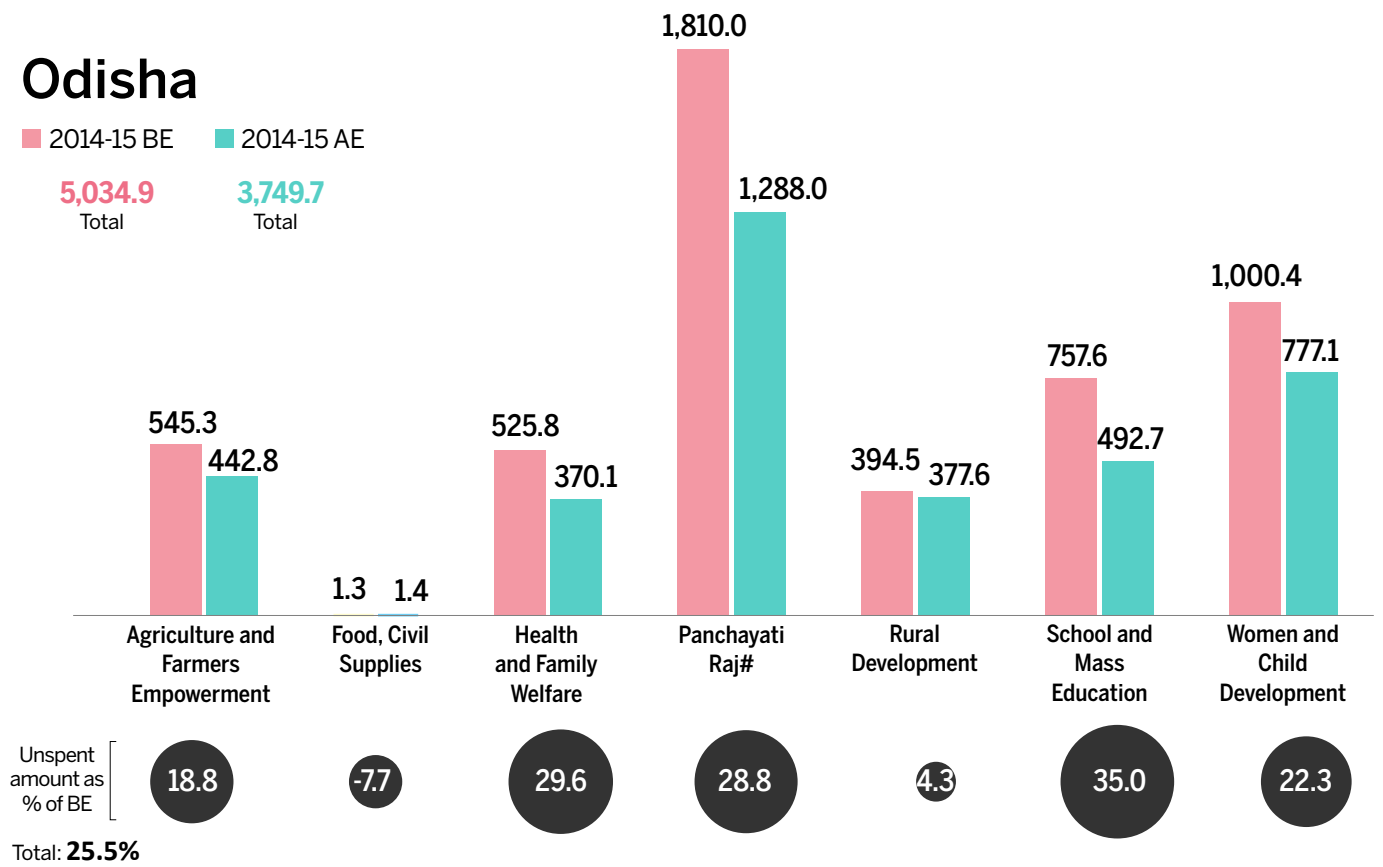


2014-15 data is AE, 2015-16 is RE and 2016-17 is BE | * In Odisha: livelihood and housing programmes such as National Rural Livelihood Mission, The Mahatma Gandhi National Rural Employment Guarantee Act, Swarnjayanti Gram Swarozgar Yojana, Backward Regions Grant Fund and Pradhan Mantri Gramin Awaas Yojana are under the domain of Panchayati Raj Department | ** In Odisha drinking water and sanitation programmes fall under the purview of Rural Development Department | State departments listed in alphabetical order. Source: Compiled by the authors from budget documents of Government of Odisha, 2016-17.

Figure 5: Maharashtra: Sector-wise ** TSP Budget, Proportion of Funds Unspent, and Percentage of Funds Recommended and Earmarked from TSP


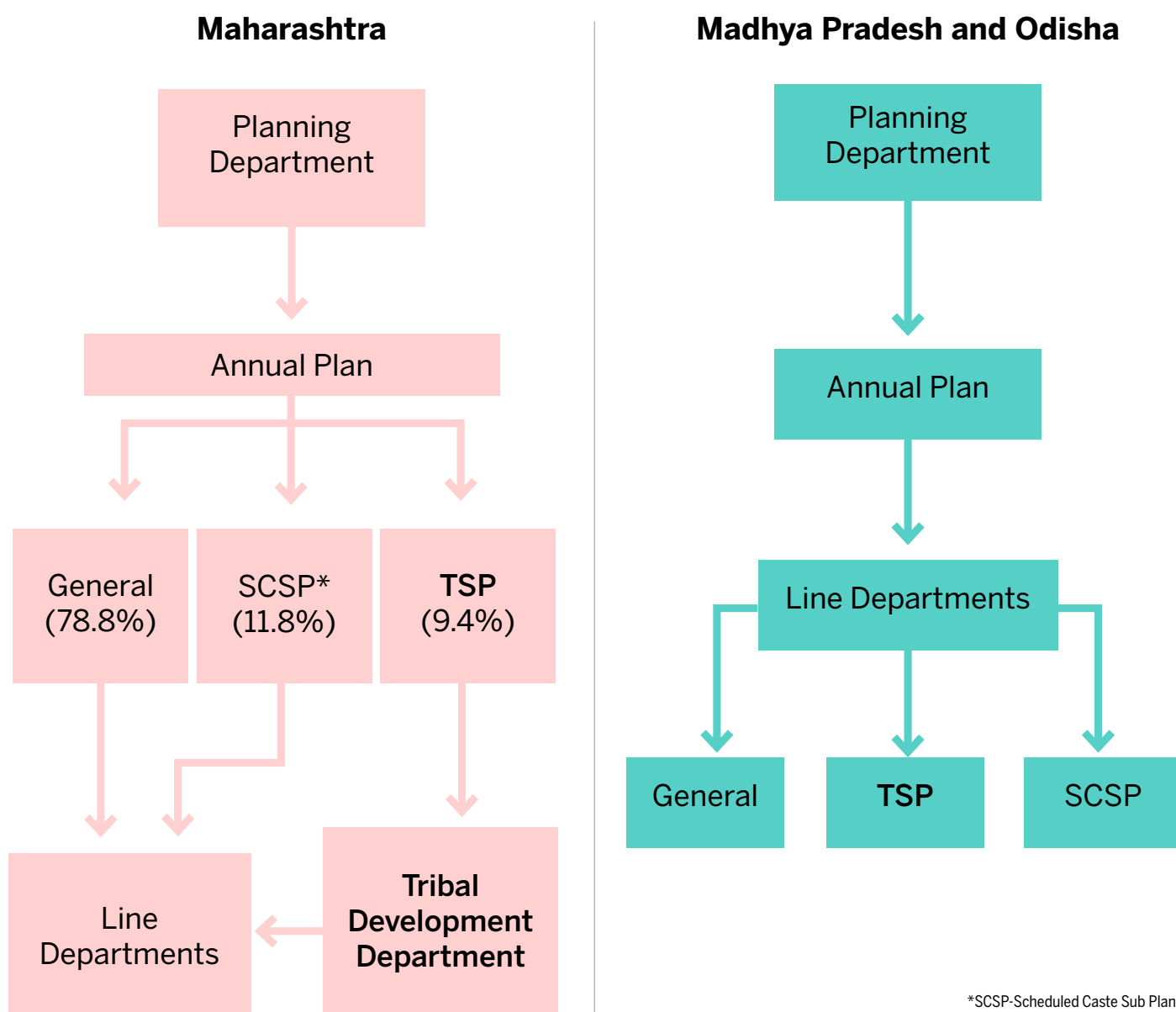
Ministries listed in alphabetical order. | Recommended earmarking for sector as percentage of TSP budget. | Negative values in 'proportion of unspent funds' indicate over expenditure. | * Guidelines do not specify earmarking for this component. | ** Sectoral allocations have been computed under the following Major Heads: Rural development: 2501 (Special programme for rural development) and 2505 (rural employment); Rural water supply 2215; Health 2210 and 2211; Agriculture 2401; Education 2202; Nutrition 2236. Source: Compiled by the authors from budget documents of Government of Maharashtra, 2016-17.

Figure 6: Total TSP Funds unspent by Madhya Pradesh and Odisha for FY 2014-15



Figures in INR crore unless mentioned | State departments listed in alphabetical order. | No TSP allocations by Odisha under PHED and by Maharashtra under Panchayati Raj.
Source: Compiled by the authors from budget documents

Figure 7: Comparing fund flow for TSP in Madhya Pradesh, Odisha & Maharashtra



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