1



Working Paper 380

DYNAMICS OF CASTE-BASED DEPRIVATION IN CHILD UNDER-NUTRITION IN INDIA

Rudra Narayan Mishra

Working Papers published since August 1997 (WP 279 onwards) can be downloaded from the Centre's website (www.cds.edu)

DYNAMICS OF CASTE-BASED DEPRIVATION IN CHILD UNDER-NUTRITION IN INDIA

Rudra Narayan Mishra

July 2006

This Paper was presented at a National Seminar on **Development of Scheduled Castes in India An Appraisal of Implementation of Programmes** held during January 17-19, 2005 at MPISSR, Ujjain, MP. My sincere thanks are due to my advisors Dr. Udaya S Mishra and Dr. D. Narayana for their encouragement and inspiration in completing this work. Especially to Dr. Mishra who introduced me the concept in one of the regular discussion. I also express my sincere gratitude to Dr. D. C. Sah and Dr. Indira for their useful comments during the discussion. Dr. P Sivanandan's comments helped me to link this paper to the larger issues concerning the marginalised people (people from scheduled caste and scheduled tribe) of India. Also I express my sincere thanks to Mr. Tilak Baker for editorial help. However nobody other than myself is responsible for whatever errors remain in the paper.

ABSTRACT

Nutritional deprivation among Indian children is one of the parameters of underdevelopment mentioned in development discourse in recent times. And such deprivation is more often associated with well known socio-economic indicators of deprivation; prominent among them is caste, which ranks the society into a hierarchy in terms of benefit and welfare. Though caste dimension has been frequently considered as a category of understanding deprivation, it is rare to find explicit disadvantage of caste in what is said as transforming capabilities into functioning. While caste disadvantage in any outcome shows a systematic pattern, it is never made clear as to what is the dynamics of this disadvantage in terms of characteristics bearing an association with a given outcome. This paper makes an attempt in illustrating the dynamics of caste-based deprivation considering the case of child under-nutrition. It essentially demonstrates the patterns of differentials in nutrition according to other potential correlates of under-nutrition within SC/ST and others and comments on the limits of translating a given set of capabilities in to functioning/outcome (child nutrition here). It finds that while deprivation gap according to potential correlates is higher in general compared with SC/STs, there is clear demonstration of differential translation of capabilities like education, residential status, work status into outcome like nutrition among the SC/STs vis-à-vis the others. The results are also confirmed with application of a logit model. The study uses the data from National Family Health Survey report (NFHS-2, 1998-99) for the purpose of this illustration.

Key Words: Health, Under-nutrition, Child Under-nutrition, Caste, Scheduled Caste, Scheduled Tribe, Inequality, Deprivation, India

JEL Classification:- I 12, I 32

I. Introduction

The phenomenon of child under-nutrition in India is of concern given the fact that India has a disproportionate share of nutritionally deprived children of the world. This nutritional deprivation in Indian children is often associated with other indicators of socio-economic deprivation. And caste and class form the core of socio-economic indicators of deprivation in the Indian context. This is mostly due to the observed disadvantages in relation to any socio-economic indicator, which is low among those lower in the caste-class hierarchy. The most recent statistics indicate that almost half of the Indian children below the age of three years are stunted. (NFHS-2, 1998-99) and one out of every three stunted children across the world lives in India. (WHO, 2000). These alarming levels of nutritionally deprived children in aggregate have its own socio-economic dimension reflected in caste/class differential which are reasonably wider and variant across different states of India.

Child under-nutrition in particular is diagnosed with a variety of focus by development researchers. In circumstances of resource constraint at the household level, women and children are said to be vulnerable in every regard. On this count, it is observed that resource constrained poor households of India too have women and children being victims of nutritional disadvantage among other disadvantages [Dreze and Sen, 1989; Deolalikar, 1988]. Such disadvantage in children originates from poorly fed mothers themselves being under nourished, who lack potential of required quality and intensity of breastfeeding

[Choe and Anandiaha, 2000]. As a result, early food supplementation in poor hygiene and sanitary conditions make children vulnerable to diarrhea and other childhood ailments frequently, which in turn reflect undernourishment in children [Brown et al, 1998; Black and Krishna Kumar, 1999]. This complex mechanism of poverty-disease and undernutrition is referred to as the vicious cycle of under nutrition. And therefore no single most explanatory factor responsible for child under nutrition can be figured out in the Indian circumstance. In fact, the complex interplay of socio-economic indicators that has a bearing on under-nutrition provides clues as regard the differential level of response of these indicators to under- nutrition across class/caste groups.

Based on this understanding, this paper makes an attempt towards verifying such differential response of well known correlates like the place of residence, maternal education, household economic status, parent's occupation to under nutrition according to caste categories.

The low castes in India are referred to as scheduled castes. The concept of scheduled caste is basically a statutory concept to refer backwardness in terms of overall economic, social and educational achievement compared to other castes [for details see the various reports based on recently conducted census in 2001, especially reports on household amenities for SC/ST households and socio-cultural tables for information on educational achievement in terms of male/female literacy ratio, school enrollment ratio among 0-6 year age group among the SC/ST population and also the reports on employment 1. They include the erstwhile untouchables also, who are discriminated on the basis of their birth and their occupation. [Deaton and Dreze, 2002] Along with them come the tribal populations who are left out of the mainstream society, as they are concentrated in their forest and remote areas of the country. Due to their inaccessibility, they also get left out of the mainstream

¹ Details of these reports and figures are presented in the discussion section

development process and are deprived of basic education, livelihood and sanitation. [Sundaram K. 2003] Though during the last fifty years India's economic growth has brought development to many of these communities they lag behind other communities with respect to the attainment of income, education, health and other requisites of a dignified life [Srinivasan and Mohanty, 2004].

One of the potential characteristics to measure human development is child nutritional status. [Dreze and Sen; 1989]. However one finds disparities in child well-being between urban and rural residents which is equally reflected in nutritional status of children [NFHS-2 1998-99; Smith et al, 2004] There is also evidence that children from households associated with agriculture as an occupation are more likely to be undernourished. [Saito et al, 1997; Foster et al, 1996] As agriculture is concentrated more in rural areas, the seasonality, low wage rate and larger dependence on it for livelihood (which is itself governed by Monsoon) fluctuate the availability of food in the household, which in turn might reduce the child's intake [Beherman and Deolalikar, 1989; Bidinger et al, 1986]. The children from poor households as already stated above, are also likely to be vulnerable to under nutrition [Svedberg, 2001; Hadad and Smith, 2002; and Beherman, 1988].

But what lacks in these literatures relates to how caste makes a difference to the nutritional outcome given the place of residence, occupation status of the household head and maternal education. The Table-1 demonstrates such difference. We can observe that the children from SC/ST households are reporting higher incidence of stunting when compared with children from non SC/ST household, in all states except Kerala, Haryana, Himachal Pradesh and opposite in case of Jammu and Kashmir. In an attempt towards addressing this question, we make an exposition of the differential levels of vulnerabilities to under-nutrition according to its potential correlates, namely rural-urban divide, household economic status, and occupational status of parents as well as maternal

education in different caste groups. The issues that is explored here relates to whether the extent of inequity/disparity as regard to child under nutrition widens or narrows within caste groups when read along the characteristics such as rural urban divide, maternal education, occupational status of the household head and economic status of the household etc. In other words, we intend to exhibit the differential translation of certain capabilities to outcome (i.e. absence of nutritional deprivation) across caste groups based on the inequity gaps that emerge in relation to stated capability categories. The data and methodology of the study is explained in the next section.

II. Data and Methodology

We have considered National Family Health Survey (NFHS-2: 1998-99) for our analysis. The nutritional status for children is reported in terms of height-for-age (stunting), weight-for-age (under weight), weight-for-height (waiting) and child anemia. The nutritional status information is available for children below three years of age only. Here we have considered only one indictor i.e. stunting, ² because it represents long-term nutritional achievement and is free from short-term fluctuations. Unlike weight-for-age, stunting is not affected by shortterm illness, change in quantity of dietary intake and seasonal variations. Thus it reflects a long-term growth faltering if any [Osmani; 1992]. As an indicator, it is also considered robust even against waisting because the latter only reflects acute nutritional deficiency, the incidence of which is due to severe inadequacy of food (in a famine like situation). The report shows a very low percentage among all the children who suffer from waisting. Anaemia as an indicator, which reflects the iron short fall among the children, is basically a clinical indicator. But weather it affects normal growth of the child, is still questionable.

To keep the arguement simple we have only focused on "stunting". However the results on "underweight" can be obtained from the author. In the logit models we have presented both the indicators.

Thus 'stunting' which records short fall in normal growth, given the age of the children, from ideal median height for that age group, is taken as the only indicator to describe child nutritional status in our study. We have considered 17 major states in our analysis, which represents approximately 90 percent of the total population of India.

Here we have taken only simple bi-variate and multivariate cross tabulations to know the prevalence of stunting among different categories. First, we have attempted simple cross tabulation to gauge the differential prevalence of stunting among children on the basis of broad characteristics like place of residence, maternal education, household occupation and economic status. Then we have calculated the relative risk for each group within a particular characteristic by placing its prevalence rate against group average. Thus we have calculated the difference between minimum and maximum values for each category across the states. Here minimum values refer to better off situation and maximum values indicate worse off situation. In other words when prevalence of stunting among a particular category is less than the over all prevalence of that category, the standardized figure (it is also referred to as relative risk in the following text) will be less than one and if the prevalence among the particular category is higher than the over all prevalence, then the standardized figure will be greater than one.

Then we have calculated a gap for each state on the basis of the broad categories. Suppose for example maternal education is one of the characteristics and state under consideration is Madhya Pradesh. It has four categories, namely no education, primary education, secondary education and higher education for the mother. First we have calculated the prevalence of stunting among the children across each of the four categories. Then we have divided the number representing prevalence of stunting across each category against the over all prevalence of under nutrition for that particular category as a whole (in this case maternal education) for Madhya Pradesh. Thus we got some standardised figures

for each category, which could be explained as relative risk for that particular category. Taking the minimum and maximum value we have calculated the gap in relative risk for maternal education.

Given the understanding of these gaps according to the set of characteristics, we attempt to examine the same in SC/ST group and non-SC/ST group to gauge the difference if any, in relation to this gap while compared with the population as a whole as well as the non-SC/ ST category. Such a comparison not only intimates the kind of prevailing gaps according to these well-known correlates/characteristics but also informs us on the extremities of disadvantages against the prevailing averages of different groups. We have divided the households into two broad categories, one consisting of all scheduled caste and scheduled tribe households (SC/ST households) and the other consisting of all non-SC/ST households, including 'Other back ward caste' as well as other non scheduled categories. The reason behind this broad categorisation is subject to possible disaggregation in NFHS-2, one can find out that the prevalence of child under nutrition is higher among SC/STs vis-avis others (generally above 60% compared with below 50%) for all the states taken into account. Then following the earlier methodology we have calculated prevalence of under nutrition among the children from SC/ST households and non-SC/ST households across categories for a given characteristic. For example considering maternal education as the characteristic, we compute the entire gap of most advantaged with better education and the most disadvantaged with worse level of education for these three groups of households SC/ST, non-SC/ST as well as the entire population. A similar computation of gap is made for each of the characteristics. This gap essentially is normalized and facilitates comparison as they are around unity where unity represents the overall prevalence of under-nutrition in the corresponding group. Further, the relative positioning of advantage/disadvantage for a given characteristic category like maternal education, standard of living could also be compared between SC/ST and non-SC/ST households.

Such a comparison essentially illustrates two aspects: one whether these potential characteristics/correlates of under-nutrition make a similar difference in nutritional status among SC/STs and others and secondly weather the most disadvantaged ordering according to under-nutrition is compared across groups. This adds to the understanding of characteristic bearing on nutritional advantage across groups, which in other words inform us on the translation of these capabilities (characteristics) to functioning (here in terms of nutritional outcome)³. We have also applied logistic models as a confirmatory exercise to know the robustness of caste disadvantage on nutritional achievement of children. For this purpose we have taken other correlates such as age of the mother at marriage, mother's nutrition status in terms of body mass index of the mother, birth size of the child, family size along with other socio-economic indicators like occupation of the households, household economic status, place of residence and maternal education. There exists ample literature and evidence to justify the inclusion of these variables. [Hadad and Smith, 1999; Hotchkiss et al, 2002; Smith et al, 2004; Mishra, 20031^4 .

III. Observation / Results

Our analysis shows that for characteristics like place of residence, in almost all the states the urban children have low risk compared to their rural counter parts. The rural-urban gap is the largest for West Bengal, about (0.33) and least for Assam (0.01). This otherwise informs us that the rural disadvantage in West Bengal is most severe while the same in Rajasthan is minimal with regard to child nutritional outcome.

The urban advantage in child under nutrition is universal across all the states excepting states like Jammu and Kashmir, Andhra Pradesh and Tamilnadu. The absolute difference which measures the gap between

³ Please look to the Appendix-1 for empirical illustration of the methodology.

⁴ For details on logit model specification please see the note given below the Table-10.

the difference among SC/STs on the basis of their location to the over all rural-urban difference shows that for states like Kerala, Assam, Bihar, Gujarat, Jammu and Kashmir, Maharastra, Orissa, Punjab, Rajasthan, Tamilnadu and Uttar Pradesh, it is very low, less than (0.1), which indicates the difference in prevalence of stunting among SC/ST households on the basis of their place of residence are more or less closer to the over all rural-urban difference in prevalence of stunting. For West Bengal the absolute difference is 0.33, which indicates that the gap between SC/ST is small, compared to rural-urban difference. While reaching such conclusion we are aware that, each of these states is at different stage of urbanisation. Where Maharashtra, Gujarat and Tamilnadu are highly urbanised states; Bihar, Orissa, Madhya Pradesh and Rajasthan are having lesser degree of urbanisation. At the same time the population composition shows that in these backward states, SC/ST constitute a very high share of the population, who are concentrated in villages. [see Table 2].

In the case of maternal education we found that the prevalence of stunting is higher among children of uneducated mothers across the states. Among the SC/ST households, too, uneducated mothers have higher prevalence of stunting compared to mothers with higher education, for all the states in the analysis. The gap in prevalence of stunting is very wide across the states among children of higher educated mothers and children with uneducated mothers (no education category). The gap or difference between no education category and higher educated category is also very high in the absence of any caste factor. It is true for all the states considered in the analysis. Since in both cases, gaps are very high, the absolute difference is below (0.1) for all states except Gujarat, Himachal Pradesh and Kerala where it is above (0.1). One can easily conclude that the maternal literacy rates in respective states have more to explain. This indicates that maternal education is a crucial determinant of nutritional outcome of the children irrespective of their caste affiliation. This is supported by a small absolute difference. [see Table 3].

The economic status of the household demonstrates an expected pattern of the children from low economic status households having higher prevalence of stunting (in terms of relative risk) against their counterparts from high economic status households. The pattern is clear for all the states.

A similar pattern is noticed among SC/ST households, where children from poor households have higher risk compared to their counterparts from rich households. But the gap in prevalence of stunting among children from SC/ST households on the basis of economic status is higher in states like Bihar, Gujarat, Kerala, Madhya Pradesh, Orissa, Tamilnadu, and West Bengal, which is above 0.50. This implies that in these states household economic status displays a larger influence on nutritional outcome of the children in SC/ST households. But in other states the role of household economic status is relatively less significant. [See Table 4].

With regard to mother's occupation, except for states like Uttar Pradesh, Rajasthan and Himachal Pradesh, in all other states children of mothers working in agriculture have a higher relative risk of being undernourished. The reason might be in those states the women from less privileged class or caste are engaged in agriculture as casual labourers. So the economic gain is very minimal. It might affect the care of children as well, which will have a bearing on their health outcome. Though Uttar Pradesh and Rajasthan are no different from other northern states like Madhya Pradesh, Bihar or Orissa; as far as women status is concerned, especially in agriculture, we found children of women working in the non-agriculture have higher risk of stunting. One has to carefully look at the employment pattern of the women in these states before making any further conclusion. Whereas mothers not engaged in any occupation have reported lowest prevalence of stunting among children compared to the mothers engaged either in agriculture or nonagriculture sector. Even among SC/ST households, we found evidence

that women not working have less prevalence of stunting among their children compared to those who work in either agriculture or non-agriculture sector. The gap among SC/ST households is the highest in Tamilnadu. The absolute difference in states like Assam, Haryana, Himachal Pradesh, Karnataka and Punjab indicates the gap in prevalence of stunting among the SC/ST household is relatively low compared to the over all difference in prevalence of stunting among different occupational categories irrespective of caste. In all other states the absolute difference is very low (not exceeding 0.1) this indicates that the occupational difference in prevalence of stunting among SC/ST households is closer to the gap in over all prevalence of stunting among different occupational categories irrespective of caste. [See Table 5].

In Tables 6, 7 and 8 we have presented the worst-off categories among SC/ST households and also among non-SC/ST households. We found for both social categories that the rural habitants have a higher relative risk of having stunting among their children. Only exceptions are Tamilnadu and Andhra Pradesh where SC/ST households from urban areas have higher relative risk of having stunted children. But for non-SC/ST households rural disadvantage is clear for all the states. Across all the states the SC/ST households have lower relative risk for stunting among their children compared to non-SC/ST households, which indicates that the impact of urban advantage is low for children of SC/ST households. [See Table 6].

In Table 7 we found that the prevalence of stunting is higher among children from households where mothers have no education. This is true for both SC/ST households and non-SC/ST households. We found the relative risk of stunting is higher among SC/ST households compared to non-SC/ST households, indicating the impact of illiteracy on nutritional outcome, which is higher for children from SC/ST households than for children from non-SC/ST households. [See Table 7]

As far as economic status is concerned the children from low economic status households have higher relative risk of being stunted between both SC/ST and non-SC/ST households. The only exception is Kerala where among SC/ST households, the middle-income category has the highest relative risk of being stunted compared to other categories. But one interesting observation is that the economic status makes a higher difference to relative risk of being under nourished in the case of non-SC/ST households than SC/ST households. This implies that living standard component is relatively less responsive to child stunting among SC/ST households. In other words, the difference in prevalence of stunting among children from SC/ST households across different economic status is lower compared to the children from non-SC/ST households. [See Table 8]. Table 9 summarizes finding from Tables 1 to 5, which indicates how the absolute difference across the states varies in a certain defined range. Results of this absolute difference for some of the states, from Table 9, are also presented in a graphic form [see Graph1] for the convenience of the reader.

Table 10 presents odds value for caste. It helps us to quantify the odds of experiencing under-nourishment in terms of stunting and underweight among SC/ST children vis-à-vis others. We have applied two logit (binomial) models each for stunting and under weight. We justified the use of bivariate logit models, since our dependent variable is dichotomous and categorical. [Hosmer and Lemeshow; 2000]. The model-1 tells us the odds of the caste (risk of being under nourished because the child is from SC/ST household) in general, while controlling for the socio-economic indicators like economic status, occupational status, place of residence of the household along with other demographic indicators like, family size, maternal education, age at marriage of the mother, maternal nutrition measured in terms of body mass index (BMI), religion and child's own health characteristic measured in terms of birth size. In model-2 we have considered only agricultural households and controlling for above-mentioned factors, we try to quantify the risk of

under nourishment for the child if he or she belongs to a scheduled caste. The basis of running the model-2 separately rests with the evidence that most of the households from scheduled caste category are engaged in agriculture. [Mutatkar 2005]. We choose to present only estimated odds ratios and associated standard errors for the covariate, caste (since it is the focus of our study).⁵

At All India level, in both the models for the twin indicators of under nutrition, caste is found to be statistically significant. In model-1 we found Andhra Pradesh, Bihar, Himachal Pradesh, Karnataka, Kerala, Madhya Pradesh, Maharastra, Orissa, Punjab, Rajasthan, Tamilnadu, West Bengal and Uttar Pradesh have the odds of 'greater than one' for children from SC/ST households to become stunted. The statistical significance is ensured in the case of Bihar, Kerala, Maharastra, Tamilnadu and Uttar Pradesh. In case of model-2, Tamilnadu and West Bengal are the states having statistically significant odds for children, being stunted, from SC/ST households engaged in agriculture. For other states except Gujarat, Jammu and Kashmir and Karnataka the odds are greater than one for children from SC/ST households, engaged in agriculture in reference to children from other social backgrounds.

With regard to under weight, we found that almost states except Gujarat, the odds for SC/ST children being stunted are greater than one in model-1. The statistical significance is confirmed in states like Assam, Kerala, Maharastra, Rajasthan, Tamil Nadu, West Bengal and Uttar Pradesh. In case of model-2 Bihar, Tamil Nadu, Rajasthan and West Bengal are the states showing statistically significant odds for children (being under weight) from SC/ST households engaged in agriculture. Except for Assam, Gujarat, Haryana, Jammu and Kashmir, Kerala and Orissa, all other states have odds of greater than one for children (being under weight) from SC/ST households, engaged in agriculture.

The results of other covariates are not presented to keep the argument simple. However interested person can contact the author.

IV. Discussion

These empirical results and regional comparison of caste dynamic of child undernutrition portray a clear caste-inhibiting component in the response of correlates of child under-nutrition. The advantage of place of residence in terms of urban habitat, maternal education, standard of living and occupational status are minimum for the SC/ST households compared to non SC/ST households which is reflected in smaller disparity (difference) for the SC/ST households. This observation is evidenced by the extent of relative disadvantage due to the categories of different characteristics being smaller in the SC/ST group vis-à-vis the aggregate situation as well as the non-SC/ST group. The fact is also reiterated in results presented in the Tables 6 to 8 where we found that the relative risk of stunting or (disadvantage) is low among SC/ST households if they live in rural areas, are from low economic households and depend upon agriculture for living compared to non-SC/ST households. Which in turn shows the advantage of a SC/ST household in terms of urban setting, better economic status and occupational status with regard to better nutritional status of their children is comparatively low when compared with the non-SC/ST households. In other words, the gains in nutritional status accrued due to positive characteristic/correlates are relatively lower for the SC/ST households for almost all the characteristics. There are striking exceptions in the pattern of these gains especially with maternal education. The relative advantage/disadvantage against a prevailing aggregate for different categories of maternal education sometimes reiterates the role of maternal education in determining nutritional status among children of SC/ST households. Thus our finding is on line with the findings of the earlier studies, which show advantage of maternal education in determining child health. [Engle, 1999; Hotchkiss et al; 2004]. This relative difference is also very close to the difference (gap) in relative risk for over all maternal education characteristics itself. [See Table 9].

Thus one can argue that locational, economic and occupational advantage help little to change the plight of children from SC/ST households in terms of under-nourishment and this pattern is universal across all the states under examination. In other words the achievement in terms of better urban habitation, economic status has brought little benefit to the children from these households. The reasons might be that the SC/ST households even if they live in urban areas and have better economic status may not be able to translate the fullest advantage of their opportunity due to their social identity constraints, which needs to be explored. For instance, maternal education makes the least of difference to child nutritional outcome in SC/ST households when contrasted with non-SC/ST households across the rural/urban spectrum in almost all the states. Thus it might affect the caring practice of these women towards their children, which is reflected in the stunting. Thus one has to go further to see what are the constraints that hamper the realisation of full benefit of these advantages for SC/ST households. Whereas in the case of non-SC/ST households we found the difference in relative risk for stunting in terms of rural-urban, maternal education, economic status and occupation to be very clear.

Another interesting observation is from maternal occupation category. This shows that across the states women not working have low relative risks of stunting of their children in both the social categories. This implies that the availability of the mother to take proper care of the children during childhood is significant. The earlier studies thus show the advantage and disadvantage of maternal work on nutritional outcome of their children. [Engel et al, 1999]. One of the indirect implications might be, in these households where women do not engage in any occupation, might be financially sound which do have an impact on the outcome of stunting.

However, the nutritional deprivation of scheduled caste and scheduled tribe children cannot be seen in exclusion from other related indicators of deprivation. These two social groups share an identity of deprivation given the major share of the deprived belonging to these groups in the country. Different survey reports published by the Census of India, National Sample Survey Organisation and Human Development Report of India have also reiterated that these groups fair poorly in other crucial social and economic indicators.

For instance, extent of poverty among these group is reasonably higher when compared with the average prevailing levels of poverty (India Human Development Report (1999), with 51 percent of the tribal households and 50 percent of the scheduled caste households are poor by 'Head Count Ratio⁶ ' against 39 percent at all India level. Other studies also report identical poverty level among these groups. [Thorat 2000; Despande et al 2004]. One of the most recent studies puts 45.83 percent of tribal population and 35.89% of the scheduled caste population below poverty line as against national average of 26.98 percent in Rural India. [Mutakar; 2005].

The recent census data shows the literacy level among these groups (especially among women) to be very low in almost all the Indian states excepting in a few states like Kerala, Goa and other Northeastern states For females among scheduled caste, the adult literacy rate is approximately 42 percent while for women from tribal communities it is below 35 percent. (Census 2001). As regard land holding, a substantial majority of these people are either land less and (or) agricultural labourers or marginal farmers (NSSO, 1999-2000). A study by Dubey et al (2004)

This is a measure of income - poverty and measures the proportion of the population below a level of income defined as a "poverty line". The poverty line in India is measured by taking the income (separately for rural and urban areas) necessary to buy a rudimentary food-basket, a basket that, when consumed, yields a minimum level of calories. The head-count ratio is computed on the basis of National Sample Survey (NSS) data on consumption expenditure; people with an income below the poverty line are "poor" and the proportion of the poor to the aggregate population is the head-count ratio. Frontline, Vol. 14, No. 16, Aug. 9-22, 1997

found that 33 percent of tribal and 56 percent of scheduled caste households are land less in rural India as per employment survey done by 'Central Statistical Organisation' in the year 1999-2000, against a rural average landlessness of 37 per cent at the national level. In rural India, more than 60 percent households from scheduled caste community and more than 50 percent households from scheduled tribe earn their livelihood from agricultural labour. Since the rural labour markets are largely unorganized the scope for exploitation of this vulnerable group is pretty high. (Dubey et al; 2004). Findings from recent census shows that 76.30 percent of scheduled caste households do not have latrine and 57.1% do not have any drainage facility in their homes. Among tribal households the corresponding figure stands at 82.4 percent and 78.1% respectively. Their access to health care is also limited given the inadequate health infrastructure in the country, especially in villages. Since most of these groups live in the remote forest areas (not having proper road, transport and modern communication), the benefit of health care and other welfare schemes remains beyond their reach. The infant mortality rate and maternal mortality rate are still very high among these social groups compared to any other social groups. National Family Health Survey-2; 1998-99, page 182-187, Mari bhat; 2002].

And since they have been socially excluded for a long period of time, not only do they lack proper organisation (social as well as political) in most of the states excepting a few, but also their capability to bargain or confront the government and other agencies for getting benefit from different welfare schemes is limited. Further, their incapability restricts their access to labour market, credit market and other income (asset) generating institutions (like co-operatives and banks). [Fourth Report; National Commission for scheduled castes and scheduled Tribes: 1996-97 and 1997-98]

So the existing welfare schemes in general or for the marginalised groups in particular has to be restructured in such a way that the maximum

benefit will reach to these communities. Therefore, reformulation of government strategy (both at administrative as well as political level) is necessary for implementation of 'affirmative action' carried out in form of several intervention programmes for these marginalised groups.

Thus the phenomenon of mal-nourishment among children from the scheduled caste and scheduled tribe households need to be viewed in the broader context of socio-economic exclusion of this community.

V. Policy Implication

This study brings to light the fact that caste serves as an agent of disadvantage not only in the aggregate outcome (i.e. child-undernutrition) but also this disadvantage is intense when compared along different categories of correlates of under-nutrition. And such evidence exemplifies the limitation in the translation potential of capabilities to outcomes across caste categories. In other words the characteristic based inequities are minimal among the SC/STs compared with the general population or the non-SC/STs. The potential gain due to improved capabilities like maternal education or standard of living not showing up in outcomes, point at differential intervention strategy towards addressing the problem of child under-nutrition among the disadvantaged caste groups. And perhaps such intervention strategies relate to mainstreaming them in all spheres as well as work against social-exclusion of any kind that inhibits their mainstreaming with the rest of the society.

Table 1: Prevalence of stunting among children by ethnicity of their household across Indian states

States	Prevalence of stunting among Scheduled caste (SC) (1)	Prevalence of stunting among Scheduled Tribe (ST) (2)	Prevalence of stunting among SC/ST children (3)=(1+2)	Prevalence of stunting among children from Other backward caste (OBC) (4)	Prevalence of stunting among children from Others (5)	Prevalence of stunting among Non SC/ST children 6 = (4+5)	Overall prevalence of stunting (7)	Gap between SC/ST and non SC/STs (8)	Total sample size (9)
Andhra Pradesh	42.7	44.2	43.45	39.8	32.3	36.05	38.6	7.4	933
Assam	45.1	42.6	43.85	31.7	55.6	43.65	50.2	0.2	644
Bihar	57.6	56.4	57.0	54.7	45.1	49.90	53.7	7.1	2,086
Gujarat	48.9	46.9	47.9	46.5	37.8	42.15	43.6	5.75	1,011
Haryana	56.3	-	56.3	55.3	44.6	56.30	50.0	0	877
Himachal Pradesh	54.9	-	54.9	42.4	35.7	54.90	41.3	0	808
Jammu and Kashmir	38.9	39.7	39.3	50.6	36.6	43.60	38.8	-4.3	815
Karnataka	43.7	41.2	42.45	34.4	35.0	34.70	36.6	7.75	1,047
Kerala	38.2	-	38.2	23.4	17.7	38.20	21.9	0	576
Madhya Pradesh	52.7	59.9	56.3	51.5	37.2	44.35	51.0	11.95	2,127
Maharastra	43.7	57.1	50.4	40.3	35.0	37.65	39.9	12.75	1,562

cont'd....

Orissa	50.7	49.4	50.05	44.2	32.4	38.30	44.0	11.75	1,282
Punjab	49.6	-	49.6	43.1	28.7	49.60	39.2	0	757
Rajasthan	55.0	60.0	57.5	51.4	48.3	49.85	52.0	7.65	2,353
Tamilnadu	41.2	-	41.2	25.1	-	25.10	29.4	16.1	1,196
West Bengal	45.6	46.6	46.1	27.0	40.1	33.55	41.5	12.55	1,111
Uttar Pradesh	63.1	69.3	66.2	55.7	50.3	53.00	55.5	13.2	2,387
All India	51.7	52.8	52.25	44.8	40.7	42.75	45.5	9.5	24,600

- > Source: NFHS-2 (1998-99), extracted from various state-wise reports
- > Figures in bracket refers to column numbers
- > In column 4 the figures refers to average prevalence of stunting among children from SC and ST households together.
- > In column 6 the figures refers to average prevalence of stunting among children from OBC and Other households together.
- Column 9 refers to the difference in prevalence of stunting among children between SC/ST house holds and their non-SC/ST counterparts.
- > For some states the total number of cases reported may not add up to the reported number. Also the total number of cases considered here for stunting might not be same to the reported total number of cases in the column 9 of the Table-1. The reason might be non availability of information in some cases or the package drops the cases if weight equals to zero, etc.

Table 2: Description of relative risk of stunting during childhood by Rural-Urban Residence, caste group and general Population, NFHS-2, 1998-99.

Characteristics	Rural-Urban Ga	ıp					Absolute
States	Risk for SC/ST children in urban ⁷	Risk for SC/ST children in rural ⁸	Absolute difference within SC/ST (a) ⁹	Risk of stunting among children in urban	Risk of stunting among children in	Absolute difference in risk of stunting	difference in risk of stunting between SC/ST and
	(1)	(2)	(1-2)	(3)10	rural (4) ¹¹	between rural and urban (b) ¹² (3-4)	overall (a-b)
Andhra Pradesh	0.99	1.00	0.01	0.77	1.08	0.31	0.30
Assam	0.76	1.01	0.25	0.74	1.02	0.26	0.01
Bihar	0.81	1.01	0.20	0.78	1.02	0.24	0.04
Gujarat	0.90	1.04	0.14	0.88	1.07	0.19	0.05
Haryana	0.93	1.02	0.09	0.81	1.06	0.25	0.16
Himachal Pradesh	0.91	1.01	0.10	0.72	1.02	0.30	0.20
Jammu and Kashmir	0.96	1.29	0.33	0.68	1.06	0.38	0.05
Karnataka	1.00	1.00	0.00	0.84	1.07	0.23	0.23
Kerala	0.87	1.02	0.15	0.86	1.03	0.17	0.02
Madhya Pradesh	0.94	1.01	0.07	0.78	1.07	0.29	0.21
Maharastra	0.84	1.10	0.26	0.83	1.11	0.28	0.02

cont'd....

Orissa	0.90	1.01	0.11	0.84	1.02	0.18	0.07
Punjab	0.78	1.04	0.26	0.74	1.08	0.34	0.08
Rajasthan	0.87	1.02	0.15	0.85	1.04	0.19	0.04
Tamilnadu	0.99	1.04	0.05	0.92	1.04	0.12	0.07
West Bengal	0.88	1.02	0.14	0.62	1.09	0.47	0.33
Uttar Pradesh	0.89	1.01	0.12	0.84	1.03	0.19	0.07
All India	0.87	1.03	0.16	0.78	1.07	0.29	0.13

Note: 'r' refers to households living in rural areas 'u' refers to households living in urban areas

^{7 &#}x27;Column 1' refers to the 'risk of stunting' among children from urban SC/ST households

^{8 &#}x27;Column 2' refers to the 'risk of stunting' among children from rural SC/ST households

^{9 &#}x27;Column 3' refers to the absolute difference in 'risk for stunting' between children from rural SC/ST households and urban SC/ST households.

^{10 &#}x27;Column 4' refers to the 'risk of stunting' among children from urban households. It includes both SC/ST and non-SC/ST households in the urban area of respective states.

^{11 &#}x27;Column 5' refers to the 'risk of stunting' among children from rural households. It includes both SC/ST and non-SC/ST households in rural area of respective states.

^{12 &#}x27;Column 6' refers to the absolute difference in 'risk for stunting' among the SC/ST children on the basis of their location to the overall ruralurban gap.

Table 3: Description of range of relative risk of stunting during childhood by Maternal Education, caste group and general Population, NFHS-2, 1998-99.

Characteristics			Maternal e	education			Absolute
States	Minimum Risk for SC/ST children ¹³ (1)	Maximum risk for SC/ST children (2)	Difference among SC/ST children (a) (1-2)	Minimum Risk of stunting for all children ¹⁴ (3)	Maximum Risk of stunting for all children (4)	Difference between minimum and maximum risk (b) (3-4)	difference in risk for stunting for SC/ST children vis-a-vis all children (a-b)
Andhra Pradesh	0.48 (H)	1.22 (N.E.)	0.74	0.47 (H)	1.19 (N.E.)	0.72	0.02
Assam	0.44 (H)	1.09 (N.E.)	0.65	0.43 (H)	1.12 (N.E.)	0.69	0.04
Bihar	0.31 (H)	1.11(P)	0.80	0.31 (H)	1.05 (N.E.)	0.74	0.06
Gujarat	0.4 (H)	1.38 (N.E.)	1.34	0.41 (H)	1.28 (N.E.)	0.87	0.47
Haryana	0.61 (H)	1.24 (N.E.)	0.63	0.61 (H)	1.18 (N.E.)	0.57	0.06
Himachal Pradesh	0.38 (H)	1.27 (N.E.)	0.89	0.55 (H)	1.20 (N.E.)	0.65	0.24
Jammu and Kashmir	0.34 (H)	1.26 (N.E.)	0.92	0.32 (H)	1.27 (N.E.)	0.95	0.03
Karnataka	0.57 (H)	1.37 (N.E.)	0.80	0.56 (H)	1.27 (N.E.)	0.71	0.09
Kerala	0.54 (H)	1.26 (N.E.)	0.72	0.42 (N.E.)	1.26 (S.E.)	0.84	0.12

cont'd....

Madhya Pradesh	0.52 (H)	1.18 (N.E.)	0.66	0.47 (H)	1.12 (N.E.)	0.65	0.01
Maharastra	0.75 (H)	1.25 (N.E.)	0.50	0.74 (H)	1.21 (N.E.)	0.47	0.03
Orissa	0.32 (H)	1.26 (N.E.)	0.94	0.32 (H)	1.16 (N.E.)	0.84	0.10
Punjab	0.34 (H)	1.42 (N.E.)	1.08	0.28 (H)	1.33 (N.E.)	1.05	0.03
Rajasthan	0.44 (H)	1.12 (N.E.)	0.68	0.44 (H)	1.08 (N.E.)	0.64	0.04
Tamilnadu	0.47 (H)	1.38 (N.E.)	0.91	0.46 (H)	1.37 (N.E.)	0.91	0
West Bengal	0.28 (H)	1.43 (N.E.)	1.15	0.26 (H)	1.34 (N.E.)	1.08	0.07
Uttar Pradesh	0.5 (H)	1.12 (N.E.)	0.62	0.50 (H)	1.10 (N.E.)	0.60	0.02
All India	0.58 (H)	1.10 (N.E.)	0.52	0.46 (H)	1.26 (N.E.)	0.80	0.28

Note: 'H' refers to Higher education 'N.E.' refers to no education

¹³ Here it indicates the lowest risk for stunting among children whose mothers are highly educated; even from SC/ST background; where as in the next column i.e. column 2 the risk is highest among children whose mothers are uneducated.

¹⁴ The same exercise is repeated to know the risk of stunting among the children for the education of the mother inclusive of all the social categories (See column 3 and 4).

Table 4: Description of range of relative risk of stunting during childhood by Standard of living, caste group and general Population, NFHS-2, 1998-99.

Characteristics			House	hold standard of	fliving		Absolute
States	Minimum Risk for SC/ST children ¹⁵ (1)	Maximum risk for SC/ST children (2)	Difference among SC/ST children (a) (1-2)	Minimum Risk of stunting for all children ¹⁶ (3)	Maximum Risk of stunting for all children (4)	Difference between minimum and maximum risk (b) (3-4)	difference in risk for
Andhra Pradesh	0.85 (M)	1.12 (L)	0.27	0.62 (H)	1.22 (L)	0.60	0.23
Assam	0.77 (H)	1.06 (L)	0.29	0.85 (H)	1.08 (L)	0.23	0.43
Bihar	0.4 (H)	1.06 (L)	0.66	0.66 (H)	1.07 (L)	0.41	0.25
Gujarat	0.48 (H)	1.15(L)	0.67	0.61 (H)	1.40 (L)	0.79	0.12
Haryana	0.96 (M)	1.06 (L)	0.10	0.78 (H)	1.20 (L)	0.42	0.32
Himachal Pradesh	0.85 (H)	1.02 (L)	0.17	0.72 (H)	1.40 (L)	0.68	0.51
Jammu and Kashmir	0.94 (H)	1.11 (L)	0.17	0.61 (H)	1.44 (L)	0.83	0.66
Karnataka	0.42 (H)	1.02 (L)	0.6	0.49 (H)	1.21 (L)	0.72	0.12
Kerala	0.55 (H)	1.08(M)	0.53	0.66 (H)	1.28 (L)	0.62	0.09
Madhya Pradesh	0.44 (H)	1.05 (L)	0.61	0.61 (H)	1.15 (L)	0.54	0.07

cont'd....

Maharastra	0.73 (H)	1.17 (L)	0.44	0.61 (H)	1.33 (L)	0.72	0.28
Orissa	0.50 (H)	1.08 (L)	0.58	0.47 (H)	1.16 (L)	0.69	0.11
Punjab	0.84 (H)	1.14 (L)	0.30	0.72 (H)	1.48 (L)	0.76	0.46
Rajasthan	0.97 (H)	1.11 (L)	0.14	0.71 (H)	1.13 (L)	0.42	0.28
Tamilnadu	0.56 (H)	1.14 (L)	0.42	0.41 (H)	1.31 (L)	0.90	0.48
West Bengal	0.35 (H)	1.14 (L)	0.8	0.36 (H)	1.26 (L)	0.90	0.10
Uttar Pradesh	0.98 (H)	1.05 (L)	0.07	0.70 (H)	1.13 (L)	0.43	0.34
All India	0.74 (H)	1.08 (L)	0.34	0.64 (H)	1.21 (L)	0.57	0.23

Note: 'M' refers to medium economic status 'L' refers to low economic status

'H' refers to High economic status

- Here it indicates the lowest risk for stunting among children is observed in high economic status households from SC/ST group; where as in the next column i.e. column 3 the risk is highest for the low economic status households among the same social group.
- The same exercise is repeated to know the risk of stunting among the children for the given economic status of their household inclusive of all the social categories (See column 3 and 4).

Table 5: Description of range of relative risk of stunting during childhood by Mother's Occupation, caste group and general Population, NFHS-2, 1998-99

Characteristics			Mother's occ	upation			
States	Minimum Risk for SC/ST children ¹⁷ (1)	Maximum risk for SC/ST children (2)	Difference among SC/ST children (a) (1-2)	Minimum Risk of stunting for all children ¹⁸ (3)	Maximum Risk of stunting for all children (4)	Difference between minimum and maximum risk (b) (3-4)	Absolute difference in risk for stunting for SC/ST children vis-a-vis all children (a-b)
Andhra Pradesh	0.82 (n.w.)	1.23 (n.a.)	0.41	0.79 (n.w.)	1.12 (agri)	0.33	0.08
Assam	0.95 (n.w.)	1.38 (agri)	0.43	0.99 (n.w.)	1.16 (agri)	0.17	0.26
Bihar	0.96 (n.w.)	1.09 (agri)	0.13	0.96 (n.w.)	1.18 (agri)	0.22	0.09
Gujarat	0.83 (n.w.)	1.23 (agri)	0.4	0.82 (n.w.)	1.38 (agri)	0.56	0.16
Haryana	0.99 (n.w.)	1.2 (agri)	0.21	0.84 (n.a.)	1.26 (agri)	0.44	0.23
Himachal Pradesh	0.94 (n.a.)	1.02 (n.w.)	0.08	0.60 (n.a.)	1.03 (n.w.)	0.43	0.35
Jammu and Kashmir	0.96 (n.a.)	1.03 (n.w.)	0.07	0.92 (n.a.)	1.14 (agri)	0.22	0.15
Karnataka	0.94 (n.w.)	1.06 (agri)	0.12	0.88 (n.w.)	1.31 (agri)	0.43	0.31
Kerala	0.85 (n.w.)	1.39 (agri)	0.44	0.73 (n.a.)	1.26 (agri)	0.53	0.09

cont'd....

Madhya Pradesh	0.90 (nw)	1.12 (n.a.)	0.22	0.87 (n.w.)	1.13 (agri)	0.26	0.04
Maharastra	0.88 (n.w.)	1.16 (agri)	0.28	0.86 (n.w.)	1.24 (agri)	0.38	0.10
Orissa	0.89 (n.a.)	1.1(agri)	0.21	0.96 (n.w.)	1.27 (agri)	0.31	0.10
Punjab	0.99 (n.w.)	1.34 (agri)	0.35	0.92 (n.a.)	1.91 (agri)	0.99	0.64
Rajasthan	0.96 (n.w.)	1.09 (n.a.)	0.13	0.95 (n.w.)	1.10 (n.a.)	0.15	0.02
Tamilnadu	0.78 (n.w.)	1.45 (n.a.)	0.67	0.86 (n.w.)	1.44 (agri)	0.58	0.09
West Bengal	0.91 (n.w.)	1.26 (agri)	0.35	0.92 (n.w.)	1.36 (agri)	0.44	0.09
Uttar Pradesh	0.97 (n.w.)	1.13 (n.a.)	0.16	0.97 (n.w.)	1.16 (n.a.)	0.19	0.03
All India	0.94 (n.w.)	1.09 (agri)	0.15	0.95 (n.w.)	1.24 (agri)	0.29	0.14

Note: 'n.w.' refers to not working 'agri' refers to agriculture 'n.a.' refers to non-agriculture

- 17 It refers to the occupation of those mothers whose children face minimum risk of stunting. This column focuses on the SC/ST households. On the contrary the column 2 refers to the occupation of the mother where risk of stunting is higher. It is applicable for the same SC/ST households as in column 1.
- The same exercise is repeated to know the risk of stunting among the children for the given occupation status of their mothers inclusive of all the social categories (See column 3 and 4).

Table 6: Inequity Gaps in risk of Stunting by Place of Residence between SC/ST and non-SC/ST children

Characteristics	1 0	Gap among children belong to SC/STs and Others (non SC/ST) according to place of residence							
States	SC/ST	Others	Gap						
Andhra Pradesh	1.00 (u ¹⁹)	$1.11 (r^{20})$	0.11						
Assam	1.01 (r)	1.03 (r)	0.02						
Bihar	1.01 (r)	1.03 (r)	0.02						
Gujarat	1.04 (r)	1.08 (r)	0.04						
Haryana	1.02 (r)	1.08 (r)	0.06						
Himachal Pradesh	1.01 (r)	1.03 (r)	0.02						
Jammu and Kashmir	0.96 (r)	1.08 (r)	0.12						
Karnataka	1.00 (r)	1.10 (r)	0.10						
Kerala	1.02 (r)	1.03 (r)	0.01						
Madhya Pradesh	1.01 (r)	1.10 (r)	0.09						
Maharastra	1.10 (r)	1.11 (r)	0.01						
Orissa	1.01 (r)	1.02 (r)	0.01						
Punjab	1.04 (r)	1.08 (r)	0.04						
Rajasthan	1.02 (r)	1.05 (r)	0.03						
Tamilnadu	1.04 (u)	1.05 (r)	0.01						
West Bengal	1.02 (r)	1.12 (r)	0.08						
Uttar Pradesh	1.01 (r)	1.03 (r)	0.02						
All India	1.03 (r)	1.08 (r)	0.05						

^{19 &#}x27;r' refers to the fact that highest risk of stunting is observed among the children from rural SC/ST household's visa-vie rural non-SC/ST households.

^{&#}x27;u' refers to the fact that highest risk of stunting is observed among the children from rural non-SC/ST households visa-vie urban non-SC/ST households

Table 7: Inequity Gaps in risk of child Stunting according to Maternal education among SC/ST and others

Characteristics		ldren belong to SC, g to maternal educa	
States	SC/ST	Others	Gap
Andhra Pradesh	1.22 (N.E ²¹ .)	1.19 (N.E.)	0.03
Assam	1.09 (N.E.)	1.13 (N.E.)	0.04
Bihar	1.11(P)	1.05 (N.E.)	0.06
Gujarat	1.38 (N.E.)	1.28 (N.E.)	0.10
Haryana	1.24 (N.E.)	1.18 (N.E.)	0.06
Himachal Pradesh	1.27 (N.E.)	1.28 (N.E.)	0.01
Jammu and Kashmir	1.26 (N.E.)	1.27 (N.E.)	0.01
Karnataka	1.37 (N.E.)	1.28 (N.E.)	0.09
Kerala	1.26 (N.E.)	1.26 (S.E.)	0
Madhya Pradesh	1.18 (N.E.)	1.12 (N.E.)	0.06
Maharastra	1.25 (N.E.)	1.21 (N.E.)	0.04
Orissa	1.26 (N.E.)	1.16 (N.E.)	0.1
Punjab	1.42 (N.E.)	1.34 (N.E.)	0.08
Rajasthan	1.12 (N.E.)	1.08 (N.E.)	0.04
Tamilnadu	1.38 (N.E.)	1.37 (N.E.)	0.01
West Bengal	1.43 (N.E.)	1.34 (N.E.)	0.09
Uttar Pradesh	1.12 (N.E.)	1.10 (N.E.)	0.02
All India	1.10 (N.E.)	1.26 (N.E.)	0.16

Note: 'N.E.' refers to no education.

Here we found the risk of stunting is always higher among the children whose mothers are uneducated, no matter what is the caste group. The statement is found valid for all the states (except Bihar where we found children of those mothers having primary education have the highest risk of stunting; but it may happen that the quality of primary education is so poor that it is not effective, even against no education to make a difference in the nutrition outcome).

Table 8: Inequity Gaps in risk of Stunting according to Standard of Living between SC/ST and non SC/ST children.

Characteristics	Gap among children belong to SC/STs and Others according to economic status of the household				
States	SC/ST	Others	Gap		
Andhra Pradesh	1.12 (L ²²)	1.22 (L)	0.10		
Assam	1.06 (L)	1.08 (L)	0.02		
Bihar	1.06 (L)	1.06 (L)	0		
Gujarat	1.15(L)	1.40 (L)	0.25		
Haryana	1.06 (L)	1.27 (L)	0.21		
Himachal Pradesh	1.02 (L)	1.53 (L)	0.51		
Jammu and Kashmir	1.11 (L)	1.63 (L)	0.52		
Karnataka	1.02 (L)	1.28 (L)	0.26		
Kerala	1.08(M)	1.31 (L)	0.23		
Madhya Pradesh	1.05 (L)	1.22 (L)	0.17		
Maharastra	1.17 (L)	1.36 (L)	0.19		
Orissa	1.08 (L)	1.17 (L)	0.09		
Punjab	1.14 (L)	1.89 (L)	0.75		
Rajasthan	1.11 (L)	1.13 (L)	0.02		
Tamilnadu	1.14 (L)	1.28 (L)	0.14		
West Bengal	1.14 (L)	1.32 (L)	0.18		
Uttar Pradesh	1.05 (L)	1.05 (L) 1.14 (L)			
All India	1.08 (L)	1.21(L)	0.13		

Note: Letters in brackets are same as in Table 3.

Here we found the risk of stunting is always higher among the children who come from the low economic status household irrespective of the household's caste group. Only exception is found to be in Kerala where in case of SC/STs the risk of stunting is highest for the children from middle economic status households. Now the aberration might be due to the fact that in Kerala most of the SC/ST households have access to basic minimum requirement of the life; especially to health and education.(the maternal education is near total). This might reduce the role of economic status as such to the outcome of the child stunting.

Table 9. A summary Description of range of inequity gaps in relative risk of Child stunting by potential correlates across Indian States, NFHS-2, 1998-99.

Characteristics	<.10	.1020	.2030	.3040	.4050	.50-1.0	>1.0
Rural-Urban	Assam, Bihar, Gujarat, Jammu and Kashmir, Kerala, Maharastra, Orissa, Punjab, Rajasthan, Tamilnadu, Uttar Pradesh	Haryana	Himachal Pradesh, Karnataka, Madhya Pradesh	Andhra Pradesh, West Bengal	-	-	-
Maternal education	Andhra Pradesh, Bihar, Himachal Pradesh, Haryana, Karnataka, Madhya Pradesh, Maharastra, Punjab, Rajasthan, Tamilnadu, West Bengal,	Assam, Gujarat, Jammu and Kashmir, Orissa	Himachal Pradesh	-	-	Kerala	-

Characteristics	<.10	.1020	.2030	.3040	.4050	.50-1.0	>1.0
	Uttar Pradesh						
Household economic	Kerala	Karnataka, Madhya Pradesh, Maharastra, Rajasthan, Tamilnadu,	Andhra Pradesh, Bihar, Haryana, Jammu and Kashmir	Orissa, Uttar Pradesh	Assam	Gujarat, Himachal Pradesh, Punjab, West Bengal	-
Mother's occupation	Gujarat, Rajasthan, Tamilnadu, Uttar Pradesh, Kerala	Andhra Pradesh, Bihar, Orissa, Maharastra, Jammu and Kashmir, Maharastra, West Bengal	Haryana, Assam	Himachal Pradesh, Karnataka	-	Punjab	-

Figure: Inequity Gaps in Relative risk of Child Stunting by Potential Correlates: Selected Indian States, NFHS-2, 1998-99

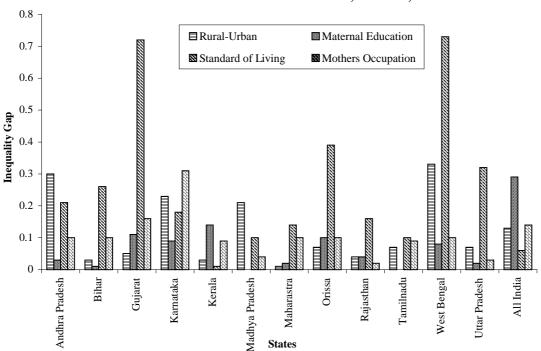


Table 10: Odds values for the children from SC/ST households for stunting and underweight

States	Height-for-age				Weight-for-age			
	Model 1		Model 2		Model 1		Model 2	
		Standard		Standard		Standard		Standard
	Odds	Error	Odds	Error	Odds	Error	Odds	Error
Andhra Pradesh	1.065	0.063	1.036	0.157	1.054	0.121	1.204	0.247
Assam	0.712	0.277	1.056	0.425	1.721	0.305***	0.839	0.454
Bihar	1.3	0.077***	1.03	0.029	1.080	0.096	1.261	0.136*
Gujarat	0.833	0.145	0.780	0.207	0.901	0.148	0.823	0.212
Haryana	0.941	0.249	1.042	0.436	1.172	0.258	0.998	0.527
Himachal Pradesh	1.743	0.459	2.541	0.253	1.17	0.467	1.68	0.8
Jammu and Kashmir	0.939	0.453	0.777	0.785	1.448	0.450	0.900	0.776
Karnataka	1.030	0.165	0.953	0.220	1.086	0.160	1.359	0.222
Kerala	2.129	0.359***	2.58	0.103	1.907	0.351*	0.850	0.260
Madhya Pradesh	1.106	0.1	1.079	0.124	1.139	0.102	1.051	0.126
Maharastra	1.703	0.103***	1.406	0.159***	1.268	0.109**	1.223	0.155
Orissa	1.133	0.159	1.234	0.224	1.007	0.161	0.879	0.232
Punjab	1.348	0.238	2.651	0.614	1.449	0.252	1.915	0.609
Rajasthan	1.113	0.116	1.048	0.157	1.268	0.116**	1.311	0.158*
Tamilnadu	1.802	0.143***	2.063	0.214***	1.587	0.139**	1.489	0.204**
West Bengal	1.123	0.123	1.376	0.174***	1.553	0.123***	1.865	0.174***
Uttar Pradesh	1.3	0.076***	1.184	0.121	1.272	0.078***	1.140	0.108
All India	1.127	0.031***	1.077*	0.043	1.151	0.031***	1.129	0.042***

cont'd....

Model Specification	N= 23055	N= 10016	N= 23057	N= 10022
	-2 log liklihood =			
	30510.267	14228.527	30234.220	14082.531
	Model chi-square =		Model chi-square =	Model chi-square =
	1395.632	353.765	11778.181	477.543

Note 1: Here we have presented the logit models for stunting (height-for-age) and under weight (weight-for-age) in this Table. For each indicator we have presented two models.

Model-1 refers to the fact that the odds for child under nutrition are calculated after controlling for following correlates i.e. place of residence (rural/urban), caste (SC/ST vs others), religion (Hindu / non-Hindu), economic status of the household (low, medium and high), occupation of the parents (agriculture/non-agriculture), maternal education (uneducated vs any education), age at fist marriage for the mother of the child (below 18 years of age/ after 18 years), family size (less than 4 or small/ 4-7 or medium/ 8 or large), body mass index of the mother (less than 18.5/>=18.5), birth size of the child (small/ normal size).

Model-2 is build to know the odds for undernourishment of the children from scheduled cast households engaged in agriculture. The agricultural household is defined in terms of either one of the parents of the child or both engaged in the agriculture²³. The model is controlled for all the correlates as in case of model 1 except occupation, because occupation is set to agriculture here.

Note 2: *** Refers to statistical significance at 1% level

- ** Refers to statistical significance at 5% level
- * Refers to statistical significance at 10% level

Here we have not distinguished between households engaged in agricultural labour, or doing agriculture on their own land or lease land. It does not show the relative land holding pattern among the agricultural households. This part has been taken care of while constructing the 'standard of living index or 'SLI' for a particular household.

APPENDIX

An Illustration of Methodology adopted in the paper

This is a well-known fact that there is certain gap in nutritional achievement among the children of different social backgrounds (say for example caste). But it does not tell us whether display of this castebased difference controlled for certain other characteristics like rural-urban residence remains the same as the aggregate rural-urban difference for the phenomenon in general. Now if that gap (or dispersion or spread within the group) is less; then it indicates the advantage of place of residence is little beneficial to the groups nutritional achievement. In other words homogeneity or less disparity confirms the limited role of place of residence (controlled attribute) in better nutritional outcome of the children and vise-versa. This is the reason why we avoid a comparison of SC/ST children and non-SC/ST children within the given set up; say rural. It tells us more about the role of the caste as a decider of nutritional achievement than the usual method of looking within a given set up.

Take Madhya Pradesh for example. We have total 2052 cases out of total 2,157 cases after cleaning the data. Out of these 2,052 children, 802 belong to SC/ST households and remaining (1250) belongs to non-SC/ST households. Now these children can be split according to their place of residence also; whether they live in urban areas or rural areas.

From Illustration-1 we can see that 61 out of 114 children living in urban Madhya Pradesh suffers from stunting. So the risk or incidence level for stunting among pre-school children from rural SC/ST households will be nothing but the ratio of 61 to 114, i.e. 0.54. In similar way the risk for the children from urban non-SC/ST households, is calculated to be 0.36 (ratio of 129 to 361).

Following the above formula the risk for SC/ST children from rural households with SC/ST background is calculated at 0.58. The corresponding figure for non-SC/ST children from rural households

stands at 0.52. However we are not interested in SC/ST and non-SC/ST comparison. So we will strictly limit ourselves to the discussion of risk of stunting among SC/ST children visa-vie the children in general.

It is simple to find out the risk of stunting for the children from SC/ST households; without taking in to consideration it's place of residence. So that is the average risk for children from SC/ST households. In other words it is the ratio of children with stunting from rural as well as urban areas from SC/ST background to the over-all prevalence of stunting among children from Madhya Pradesh. So it is the sum of 61 (number of stunted children from the urban households having SC/ST background) and 396 (number of stunted children from the rural households having SC/ST background) which will add up to (457); divided by the sum of all the SC/ST children taken together irrespective of their stunting status and place of residence. (114+688=802). Now this ratio will give us a figure of 0.57, which is nothing but the risk of being stunted for a child from SC/ST background.

Now we can calculate the risk of stunting among the children from SC/ST households, given their place of residence as well. This is nothing but the ratio of risk of a particular social category in a given place of residence to the over all risk for that group. In our case it is the ratio of 0.54 to 0.57; which comes out to be 0.90 for urban set up. For rural areas it will be 1.01 for SC/ST households

Now one can easily see the intra-caste dispersion in child stunting. We find in case of SC/ST children the dispersion is 0.07 between the rural and urban set up. Whereas for non-SC/ST households same figure stands at 0.35; between the rural and urban set up. So for non-SC/ST households the dispersion is higher compared to the SC/ST households; as far as child stunting is concerned in relation to residence criterion. It means change in place of residence might influence the nutritional outcome more favourably for the children from non-SC/ST households than children from SC/ST households. [See Illustration 1]

Now come to Illustration 2, where a more common measurement of inequality is presented in terms of place of residence. We found that the over all gap in risk for stunting by location stood at 0.28. But it does not tell us whether this 0.28 is identical for each social group within or across rural/urban set up. But our analysis provides some definite answers. We can see that the gap in risk for stunting in SC/ST children given their location visa-vie the total child population given their location is 0.07-0.28 = 0.21. This demonstrates that there is not much difference in nutritional achievement of the SC/ST children because of difference in residential characteristics; even the latter could have better access (theoretically) to food and health care.

However the illustration we have done has taken in to account only two categories of a given phenomenon. It can be extended for the characteristics or phenomenon having multiple categories or outcomes. For example while considering maternal education, there could be four possible categories. They are no education at all, completed primary education or secondary education or higher education. Now here one has to take in to consideration the spread or dispersion across each outcome for a given social category. Suppose we observe the highest risk of stunting among the children from uneducated mothers from SC/ ST households, where as the lowest risk is observed among women from same social background, but who are highly educated. So we will calculate the spread or gap or dispersion of risk by taking the highest and lowest risk groups in to account. Now we have a common risk of stunting for all the mothers from that social category (here SC/STs), irrespective of their education. So the relative risk of stunting for the children in a given social category (in this case children from SC/ST households), is nothing but the ratio of group specific incidence (or risk) of stunting (risk for the uneducated mother), to the common incidence (risk) of stunting for that group as a whole (common risk for all the SC/ ST mothers irrespective of their education). Then we will compare both spreads to know whether the maternal education have different role to play across different caste groups.

Type of place of residence	Caste groups	Number of stunted children	Number of NOT Stunted	Total	Over all risk for stunting among SC/ST Children	Over all risk for stunting among Non SC/ST Children	Risk of stunting among the SC/ST children given the place of residence	Risk of stunting among the non-SC/ST children given the place of residence ²⁴
	SC/ST	61 (0.54)	53	114			0.94 (urban)	0.76 (urban)
Urban	Non SC/ST	129 (0.36)	232	361				
	Total	190	285	475				
	SC/ST	396 (0.58)	292	688			1.01 (Rural)	1.1 (rural)
Rural	Non SC/ST	464 (0.52)	426	890				
	Total	860	718	1578	0.57	0.47		
Grand total for MP is Total no of children in urban (475) +Total no. of children in rural (1578) = 2054							Gap among SC/STs = 0.07 (a)	Gap among non SC/STs = 0.34 (b)
							children location vi child popula	stunting in SC/ST a given their sa-vie the total ation given their $.07-0.28 = 0.21^{25}$

However we not presented this column in main text, since we are looking in to the risk of stunting for SC/ST children visa-vie the risk of stunting in total child population given their location.

²⁵ This figure is taken from Illustration 2

Illustration 2: Calculation of the Gap (or distance) in child stunting across location (place of residence) ignoring the social composition

Madhya Pradesh	Type of place of residence	No. of Stunted Children	No. of Not Stunted Children	Total	Prevalence of stunting by place of residence	Risk of stunting by place of residence	Distance between risk of stunting for children in rural and urban areas
	Urban Rural Total	190 861 1051	285 718 1003	475 1579 2054	40.00 54.53 51.17	0.78 1.06 1.0	0.28

References

- Anandaiah, Ravilla and Minja Kim Choe (2000) "Are the WHO Guidelines on Breastfeeding appropriate for India?", National Family Health Survey Subject Reports No. 16. Mumbai: International Institute for Population Sciences; and Honululu: East-West Centre.
- Behrman, J R (1988) "Intra-household allocation of Nutrients in Rural India: Are boys Favored? Do Parents Exhibit Inequality Aversion?", Oxford Economic Papers, Vol. 40 (1).
- Beherman J.R. and Deolalikar Anil (1989) "Agricultural Wages in India: The Role of Health, Nutrition, and Seasonality." "Health and Nutrition." In *Handbook of Development Economics*, ed. by H. B. Chenery and T. N. Srinivasan. Amsterdam: North Holland, Vol. 1, pp. 631-711.
- Bidinger, P. D., B. Nag, and P. Babu, (1986) "Nutritional and health consequences of Seasonal Fluctuations in Household Food Availability." *Food and Nutrition Bulletin*, Vol. 8 (1), pp. 36.
- Census of India (1991, 2001), Published by Registrar General and Census Commissioner of India.
- Deaton, Angus and Jean Dreze (2002) "Poverty and Inequality in India: A Re-examination", *Economic and Political Weekly*, Vol. 37 (35).
- Dreze, J. and Sen, A. (1989) "Hunger and Public Action", *Oxford*, *Clarendon Press*, chapter 1-3, pp. 3-45 and chapter 9, 65-77.
- Dubey Amaresh, Jones Richard Palmer and Sen Kunal (July 2004), "Surplus Labour, Social Structure and Rural to Urban Migration: Evidence from Indian Data" Paper presented at the Conference on the 50th anniversary of the Lewis Model, page 21.
- Engle, P. (1999) "The Role of Caring Practices and Resources for Care in Child Survival, Growth, and Development: South and Southeast Asia", *Asia Development Review*, Vol. 17 Number 12, pp. 132-167.

- Engle, P, Menon P., and Haddad L. (1999) "Care and Nutrition: Concepts and measurement", *World Development* 27 (8): 1309-1337.
- Foster A, Rosenzweig MR. (1996) "Comparative Advantage, Information and the Allocation of Workers to Tasks: Evidence from an Agricultural Labour Market", *Review of Economic Studies*, Vol. 63, pp. 347-74.
- Hadad, L and Smith Lisa C. (1999) "Explaining Child Malnutrition in Developing Countries: A Cross-country Analysis", *International Food Policy Research Institute, Discussion Paper*, Number 60.
- Hotchkiss David R., Mock Nancy B. and Seiber E. Eric (2002) "The Effect of The Health Care Supply Environment On Children's Nutritional Status in Rural Nepal", *Journal of Biosocial Science*, Vol. 34, 173-192.
- Hosomer D.W. and Lemeshow S. (2000), Applied logistic regression (2nd edition), Wiley publication, New York, USA.
- India, National Commission for Scheduled castes and scheduled Tribes: Fourth Report 1996-97 and 1997-98' Vol. 1; page 18, 84, 90-91, 141, 143, 257-274.
- International Institute for Population Sciences (IIPS) and ORC Macro. (2000) *National Family Health Survey* (NFHS-2) 1998-99: India, Mumbai: IIPS.
- International Conference on Nutrition (1992) "Caring for the Socio-economically Deprived and Nutritionally Vulnerable. Major Issues for Nutrition Strategies, Theme Paper No. 3", ICN/92/INF/7. Rome: Food and Agriculture Organization of the United Nations and World Health Organization.
- Leslie, J. (1998) "Women's Work and Child Nutrition in the Third World", World Development 16 (11): 1341-1362.
- Lisa C. Smith, Marie T. Ruel, and Aida Ndiaye (2004), "Why is Child Malnutrition Lower in Urban than Rural Areas? Evidence from 36 Developing Countries", Food Consumption and Nutrition

- Division of the *International Food Policy Research Institute*, Discussion Paper 176.
- Maribhat P. N. (March, 2002) "Levels and Differentials in Maternal Mortality in Rural India: New Evidence from Sisterhood Data", Working Paper No. 87, *National Council for Applied economic research*, New Delhi, India.
- Mishra R.N. (June 2003) "Pattern and Determinants of Under Nutrition among Women and Children in Orissa: Evidence From NFHS-2, 1998-99", M.Phil Dissertation, *Centre for Development Studies*, Thiruvanthapuram, Kerala.
- Mutatkar Rohit (September 2005), "Social Group Disparities and Poverty in India" *Indira Gandhi Institute of Development Research*, Working Paper Series No. WP-2005-004; page 28.
- Saito K, Korzenik JR, Jekel JF, Bhattacharji S., (1997 March-April) "A Case-control Study of Maternal Knowledge of Malnutrition and Health-care-seeking Attitudes in Rural South India", Yale *Journal* of Biology and Medicine, Vol. 70(2): 149-60.
- Shariff, A (1999), *India: Human Development Report*, Oxford University Press, New Delhi.
- Srinivasan K and Mohanty S.K. (2004) "Deprivation of Basic Amenities by Caste and Religion: Empirical Study Using NFHS Data", *Economic and Political Weekly*, pp. 728-735.
- Sundaram K. (2003) "Poverty in India in the 1990s: An Analysis of Changes in 15 Major States", *Economic and Political Weekly*, pp. 1385-1393.
- Svedberg P. (2001) "Hunger in India-Facts and Challenges", New Delhi, *IIES Seminar Paper No. 699*.
- Osmani, S. R. (1997) "Poverty and nutrition in South Asia", In *Nutrition* and *Poverty: Papers from the ACC/SCN 24th Session Symposium, Kathmandu.* Geneva: United Nations.

- Osmani S.R. (1989). "Food Deprivation and Undernutrition in Rural Bangladesh", WIDER Working Paper No. 82.
- Osmani, S. R. (1992). "On Some Controversies in the Measurement of Undernutrition." In: S. R. Osmani, ed. *Nutrition and Poverty*. Oxford: Clarendon Press, pp. 121-164.
- Vinod K. Mishra; Subrata Lahiri, and Norman Y. Luther (1999), "Child Nutrition in India", National Family Health Survey Subject Reports, No. 14.
- WHO (1999) "The World Health Report: Making A Difference", World Health Organisation, Geneva, Chapter 2, pp. 7-10

Rudra Narayan Mishra is a Doctoral Scholar at the Centre for Development Studies, Thiruvananthapuram. His current areas of research interest are health, nutrition and poverty.

Email: rudranarayana@cds.ac.in

CENTRE FOR DEVELOPMENT STUDIES LIST OF WORKING PAPERS

[New Series]

The Working Paper Series was initiated in 1971. A new series was started in 1996 from WP. 270 onwards. Working papers beginning from 279 can be downloaded from the Centre's website (www.cds.edu)

- W.P. 379 P.L.BEENA, Limits to Universal Trade Liberalisation: The Contemporary Scenario for Textiles & Clothing Sector in South Asia. March 2006.
- W.P. 378 K.N. NAIR, VINEETHA MENON, Lease Farming in Kerala: Findings from Micro Level Studies. November 2005.
- W.P. 377 NANDANA BARUAH, Anti Dumping Duty as a Measure of Contingent Protection: An Analysis of Indian Experience.
 October 2005.
- W.P. 376 P. MOHANAN PILLAI, N. SHANTA Long Term Trends in the Growth and Structure of the Net State Domestic Product in Kerala. October 2005.
- W.P. 375 R. MOHAN, D. SHYJAN Taxing Powers and Developmental Role of the Indian States: A Study with reference to Kerala. August 2005.
- W.P. 374 K. C. ZACHARIAH, S. IRUDAYA RAJAN. Unemployment in Kerala at the Turn of the Century: Insights from CDS Gulf Migration Studies. August 2005.
- W.P. 373 SUNIL MANI, The Dragon vs. The Elephant Comparative Analysis of Innovation Capability in the Telecommunications Equipment Industry in China and India. July 2005
- W.P. 372 MOTKURI VENKATANARAYANA On The Non-Random Distribution of Educational Deprivation of Children in India. July 2005
- W.P. 371 DIBYENDU S. MAITI Organisational Morphology of Rural Industries in Liberalised India: A Study of West Bengal. June 2005
- W.P. 370 SUNIL MANI, Keeping Pace with Globalisation Innovation Capability in Korea's Telecommunications Equipment Industry. March 2005.

- W.P. 369 V.R. PRABHAKARAN NAIR, Determinants of Fixed Investment: A Study of Indian Private Corporate Manufacturing Sector. March 2005.
- W.P. 368 J. DEVIKA, Modernity with Democracy?: Gender and Governance in the People's Planning Campaign, Keralam. February 2005
- W.P. 367 VINEETHA MENON, ANTONYTO PAUL, K N NAIR

 Dynamics of Irrigation Institutions: Case study of a Village

 Panchayat in Kerala. February 2005
- W.P. 366 VIJAYAMOHANAN PILLAI N. Causality and Error Correction in Markov Chain: Inflation in India Revisited. December 2004.
- W.P. 365 R. MOHAN. Central Finances in India Alternative to Procrustean Fiscal Correction. November 2004.
- W.P. 364 SUNIL MANI. Coping with Globalisation Public R&D Projects in Telecommunications Technologies in Developing Countries. November 2004.
- W.P.363 K C ZACHARIAH, S IRUDAYA RAJAN. Gulf Revisited Economic Consequences of Emigration From Kerala, Emigration and Unemployment. September 2004.
- W.P.362 M. VENKATANARAYANA. Educational Deprivation of Children in Andhra Pradesh, Levels and Trends, Disparities and Associative Factors. August 2004.
- W.P. 361 K. P. KANNAN, VIJAYAMOHANAN PILLAI N. Development as a Right to Freedom: An Interpretation of the Kerala Model. August 2004.
- W.P. 360 VIJAYAMOHANAN PILLAI N. CES Function, Generalised Mean and Human Poverty Index: Exploring Some Links. July 2004.
- W.P. 359 PRAVEENA KODOTH, Shifting the Ground of Fatherhood: Matriliny, Men and Marriage in Early Twentieth Century Malabar. May 2004.
- W.P. 358 MRIDUL EAPEN. Women and Work Mobility: Some Disquieting Evidences from the Indian Data. May 2004.
- W.P. 357 K. RAVI RAMAN. The Asian Development Bank Loan for Kerala (India): The Adverse Implications and Search for Alternatives, March 2004.
- W.P. 356 VIJAYAMOHANAN PILLAI N. Liberalisation of Rural Poverty: The Indian Experience, March 2004.

- W.P. 355 P.L.BEENA Towards Understanding the Merger-Wave in the Indian Corporate Sector: A Comparative Perspective, January 2004.
- W.P. 354 K.P. KANNAN AND R. MOHAN India's Twelfth Finance Commission A View from Kerala, December 2003.
- W.P. 353 K.N. HARILAL AND P.L. BEENA The WTO Agreement on Rules of Origin Implications for South Asia, December 2003.
- W.P. 352 K. PUSHPANGADAN Drinking Water and Well-being In India: Data Envelopment Analysis, October 2003.
- W.P. 351 INDRANI CHAKRABORTY Liberalization of Capital Inflows and the Real Exchange Rate in India: A VAR Analysis, September 2003.
- W.P. 350 M.KABIR Beyond Philanthropy: The Rockefeller Foundation's Public Health Intervention in Thiruvithamkoor, 1929-1939, September 2003.
- W.P. 349 JOHN KURIEN The Blessing of the Commons: Small-Scale Fisheries, Community Property Rights, and Coastal Natural Assets, August 2003.
- W.P. 348 MRIDUL EAPEN, Rural Industrialisation in Kerala: Re-Examining the Issue of Rural Growth Linkages, July 2003.
- W.P. 347 RAKHE PB, Estimation of Tax Leakage and its Impact on Fiscal Health in Kerala, July 2003.
- W.P. 346 VIJAYAMOHANAN PILLAI N, A contribution to Peak load pricing theory and Application. April 2003.
- W.P. 345 V.K. RAMACHANDRAN, MADHURA SWAMINATHAN, VIKAS RAWAL Barriers to Expansion of Mass Literacy and Primary Schooling in West Bengal: Study Based on Primary Data from Selected Villages. April 2003.
- W.P. 344 PRADEEP KUMAR PANDA Rights-Based Strategies in the Prevention of Domestic Violence, March 2003.
- W.P. 343 K. PUSHPANGADAN Remittances, Consumption and Economic growth in Kerala: 1980-2000, March 2003.
- **W.P. 342 D NARAYANA** Why is the Credit-deposit Ratio Low in Kerala? January 2003.
- W.P. 341 MRIDUL EAPEN, PRAVEENA KODOTH Family Structure, Women's Education and Work: Re-examining the High Status of Women in Kerala. November 2002.
- **W.P. 340 J. DEVIKA,** Domesticating Malayalees: Family Planning, the Nation and Home-Centered Anxieties in Mid- 20th Century Keralam. October, 2002.

- W.P. 339 M PARAMESWARAN, Economic Reforms and Technical Efficiency: Firm Level Evidence from Selected Industries in India. October, 2002.
- W.P. 338 PRAVEENA KODOTH, Framing Custom, Directing Practices: Authority, Property and Matriliny under Colonial Law in Nineteenth Century Malabar, October 2002.
- W.P. 337 K.NAVANEETHAM, Age Structural Transition and Economic Growth: Evidence From South and Southeast Asia, August 2002.
- W.P. 336 PULAPRE BALAKRISHNAN, K. PUSHPANGADAN, M. SURESH BABU, Trade Liberalisation, Market Power and Scale Efficiency in Indian Industry, August 2002.
- W.P. 335 J. DEVIKA, Family Planning as 'Liberation': The Ambiguities of 'Emancipation from Biology' in Keralam July 2002.
- W.P. 334 E. ABDUL AZEEZ, Economic Reforms and Industrial Performance an Analysis of Capacity Utilisation in Indian Manufacturing, June 2002.
- W.P. 333 K. PUSHPANGADAN Social Returns from Drinking Water, Sanitation and Hygiene Education: A Case Study of Two Coastal Villages in Kerala, May 2002.
- W.P. 332 K. P. KANNAN, The Welfare Fund Model of Social Security for Informal Sector Workers: The Kerala Experience. April 2002.
- W.P. 331 SURESH BABU, Economic Reforms and Entry Barriers in Indian Manufacturing. April 2002.
- W.P. 330 ACHIN CHAKRABORTY, The Rhetoric of Disagreement in Reform Debates April 2002.
- W.P. 329 J. DEVIKA, Imagining Women's Social Space in Early Modern Keralam. April 2002.
- W.P. 328 K. P. KANNAN, K. S. HARI, Kerala's Gulf Connection Emigration, Remittances and their Macroeconomic Impact 1972-2000. March 2002.
- W.P. 327 K. RAVI RAMAN, Bondage in Freedom, Colonial Plantations in Southern India c. 1797-1947. March 2002.
- W.P. 326 K.C. ZACHARIAH, B.A. PRAKASH, S. IRUDAYA RAJAN,
 Gulf Migration Study: Employment, Wages and Working
 Conditions of Kerala Emigrants in the United Arab Emirates.
 March 2002.

- W.P. 325 N. VIJAYAMOHANAN PILLAI, Reliability and Rationing cost in a Power System. March 2002.
- W.P. 324 K. P. KANNAN, N. VIJAYAMOHANAN PILLAI, The Aetiology of the Inefficiency Syndrome in the Indian Power Sector Main Issues and Conclusions of a Study. March 2002.
- W.P. 323 V. K. RAMACHANDRAN, MADHURA SWAMINATHAN, VIKAS RAWAL, How have Hired Workers Fared? A Case Study of Women Workers from an Indian Village, 1977 to 1999. December 2001.
- W.P. 322 K. C. ZACHARIAH, The Syrian Christians of Kerala: Demographic and Socioeconomic Transition in the Twentieth Century, November 2001.
- W.P. 321 VEERAMANI C. Analysing Trade Flows and Industrial Structure of India: The Question of Data Harmonisation, November 2001.
- W.P. 320 N. VIJAYAMOHANAN PILLAI, K. P. KANNAN, Time and Cost Over-runs of the Power Projects in Kerala, November 2001.
- W.P. 319 K. C. ZACHARIAH, P. R. GOPINATHAN NAIR, S. IRUDAYARAJAN Return Emigrants in Kerala: Rehabilitation Problems and Development Potential. October 2001
- W.P. 318 JOHN KURIEN, ANTONYTO PAUL Social Security Nets for Marine Fisheries-The growth and Changing Composition of Social Security Programmes in the Fisheries Sector of Kerala State, India. September 2001.
- W.P. 317 K. J. JOSEPH, K. N. HARILAL India's IT Export Boom: Challenges Ahead. July 2001.
- W.P. 316 K.P. KANNAN, N. VIJAYAMOHANAN PILLAI The Political Economy of Public Utilities: A Study of the Indian Power Sector, June 2001.
- W.P. 315 ACHIN CHAKRABORTY The Concept and Measurement of Group Inequality, May 2001.
- W.P. 314 U.S.MISHRA, MALA RAMANATHAN Delivery Complications and Determinants of Caesarean Section Rates in India An Analysis of National Family Health Surveys, 1992-93, March 2001.
- W.P. 313 VEERAMANI. C India's Intra-Industry Trade Under Economic Liberalization: Trends and Country Specific Factors, March 2001
- W.P. 312 N. VIJAYAMOHANAN PILLAI Electricity Demand Analysis and Forecasting –The Tradition is Questioned, February 2001

- W.P. 311 INDRANI CHAKRABORTY Economic Reforms, Capital Inflows and Macro Economic Impact in India, January 2001
- W.P. 310 K.K. SUBRAHMANIAN. E. ABDUL AZEEZ, Industrial Growth In Kerala: Trends And Explanations November 2000
- W.P. 309 V.SANTHAKUMAR, ACHIN CHAKRABORTY, Environmental Valuation and its Implications on the Costs and Benefits of a Hydroelectric Project in Kerala, India, November 2000.
- W.P. 308 K. P. KANNAN, N. VIJAYAMOHANAN PILLAI, Plight of the Power Sector in India: SEBs and their Saga of Inefficiency November 2000.
- W.P. 307 K. NAVANEETHAM, A. DHARMALINGAM, Utilization of Maternal Health Care Services in South India, October 2000.
- W.P. 306 S. IRUDAYA RAJAN, Home Away From Home: A Survey of Oldage Homes and inmates in Kerala, August 2000.
- W.P. 305 K. N. HARILAL, K.J. JOSEPH, Stagnation and Revival of Kerala Economy: An Open Economy Perspective, August 2000.
- W.P. 304 K. P. KANNAN, Food Security in a Regional Perspective; A View from 'Food Deficit' Kerala, July 2000.
- W.P. 303 K. C. ZACHARIAH, E. T. MATHEW, S. IRUDAYA RAJAN, Socio-Economic and Demographic Consequenes of Migration in Kerala, May 2000.
- W.P. 302 K. PUSHPANGADAN, G. MURUGAN, Gender Bias in a Marginalised Community: A Study of Fisherfolk in Coastal Kerala, May 2000.
- W.P. 301 P. L. BEENA An Analysis of Mergers in the Private Corporate Sector in India, March, 2000.
- W.P. 300 D. NARAYANA Banking Sector Reforms and the Emerging Inequalities in Commercial Credit Deployment in India, March, 2000.
- W.P. 299 JOHN KURIEN Factoring Social and Cultural Dimensions into Food and Livelihood Security Issues of Marine Fisheries; A Case Study of Kerala State, India, February, 2000.
- W.P. 298 D. NARAYANA, K. K. HARI KURUP, Decentralisation of the Health Care Sector in Kerala: Some Issues, January, 2000.
- W.P. 297 K.C. ZACHARIAH, E. T. MATHEW, S. IRUDAYA RAJAN Impact of Migration on Kerala's Economy and Society, July, 1999.
- W.P. 296 P.K. MICHAEL THARAKAN, K. NAVANEETHAM Population
 Projection and Policy Implications for Education: A Discussion with
 Reference to Kerala, July, 1999.
- W.P. 295 N. SHANTA, J. DENNIS RAJA KUMAR Corporate Statistics: The Missing Numbers, May, 1999.

- W.P. 294 K. P. KANNAN Poverty Alleviation as Advancing Basic Human Capabilities: Kerala's Achievements Compared, May, 1999.
- W.P. 293 MRIDUL EAPEN Economic Diversification In Kerala: A Spatial Analysis, April, 1999.
- W.P. 292 PRADEEP KUMAR PANDA Poverty and young Women's Employment: Linkages in Kerala, February, 1999.
- W.P. 291 P. K. MICHAEL THARAKAN Coffee, Tea or Pepper? Factors
 Affecting Choice of Crops by Agro-Entrepreneurs in Nineteenth Century South-West India, November 1998
- W.P. 290 CHRISTOPHE Z. GUILMOTO, S. IRUDAYA RAJAN Regional Heterogeneity and Fertility Behaviour in India, November 1998.
- W.P. 289 JOHN KURIEN Small Scale Fisheries in the Context of Globalisation. October 1998.
- W.P. 288 S. SUDHA, S. IRUDAYA RAJAN Intensifying Masculinity of Sex Ratios in India: New Evidence 1981-1991, May 1998.
- W.P. 287 K. PUSHPANGADAN, G. MURUGAN Pricing with Changing Welfare Criterion: An Application of Ramsey-Wilson Model to Urban Water Supply, March 1998.
- W.P. 286 ACHIN CHAKRABORTY The Irrelevance of Methodology and the Art of the Possible: Reading Sen and Hirschman, February 1998.
- W.P. 285 V. SANTHAKUMAR Inefficiency and Institutional Issues in the Provision of Merit Goods, February 1998.
- W.P. 284 K. P. KANNAN Political Economy of Labour and Development in Kerala, January 1998.
- W.P. 283 INDRANI CHAKRABORTY Living Standard and Economic Growth: A fresh Look at the Relationship Through the Non- Parametric Approach, October 1997.
- W.P. 282 S. IRUDAYA RAJAN, K. C. ZACHARIAH Long Term Implications of Low Fertility in Kerala, October 1997.
- W.P. 281 SUNIL MANI Government Intervention in Industrial R & D, Some Lessons from the International Experience for India, August 1997.
- W.P. 280 PRADEEP KUMAR PANDA Female Headship, Poverty and Child Welfare: A Study of Rural Orissa, India, August 1997.
- W.P. 279 U.S. MISRA, MALA RAMANATHAN, S. IRUDAYA RAJAN Induced Abortion Potential Among Indian Women, August 1997.

- W. P. 278 PRADEEP KUMAR PANDA The Effects of Safe Drinking Water and Sanitation on Diarrhoeal Diseases Among Children in Rural Orissa, May 1997.
- W. P. 277 PRADEEP KUMAR PANDA Living Arrangements of the Elderly in Rural Orissa, May 1997.
- W. P. 276 V. SANTHAKUMAR Institutional Lock-in in Natural Resource Management: The Case of Water Resources in Kerala, April 1997.
- W.P. 275 G. OMKARNATH Capabilities and the process of Development March 1997.
- W.P. 274 K. PUSHPANGADAN, G. MURUGAN User Financing & Collective action: Relevance sustainable Rural water supply in India. March 1997.
- W.P. 273 ROBERT E. EVENSON, K.J. JOSEPH Foreign Technology Licensing in Indian Industry: An econometric analysis of the choice of partners, terms of contract and the effect on licensees' performance March 1997.
- W.P. 272 SUNIL MANI Divestment and Public Sector Enterprise Reforms, Indian Experience Since 1991 February 1997.
- W.P. 271 SRIJIT MISHRA Production and Grain Drain in two inland Regions of Orissa December 1996.
- **W.P. 270 ACHIN CHAKRABORTY** *On the Possibility of a Weighting System for Functionings* December 1996.

BOOKS PUBLISHED BY THE CDS

Biodiversity, Sustainable Development and Economic Analysis

J. Hans B. Opschoor

CDS, 2004, Rs. 100/\$11

Plight of the Power Sector in India: Inefficiency, Reform and Political Economy

K.P. Kannan and N. Vijayamohanan Pillai CDS, 2002, Rs. 400/\$40

Kerala's Gulf Connection: CDS Studies on International Labour Migration from Kerala State in India

K.C. Zachariah, K. P. Kannan, S. Irudaya Rajan (eds)

CDS, 2002, pp 232, Hardcover, Rs. 250/\$25

Performance of Industrial Clusters: A Comparative Study of Pump Manufacturing Cluster in Coimbatore (Tamil Nadu) & Rubber Footwear Cluster in Kottayam (Kerala)

P. Mohanan Pillai

CDS, 2001, pp 158, Paperback, Rs. 175/\$18

Poverty, Unemployment and Development Policy: A Case Study of Selected Issues With Reference to Kerala

United Nations, 2000 (reprint), pp 235 (available for sale in India only), Rs. 275

Land Relations and Agrarian Development in India: A Comparative Historical Study of Regional Variations

Sakti Padhi

CDS,1999. pp 335, Hardcover, Rs. 425/\$48

Agrarian Transition Under Colonialism: Study of A Semi Arid Region of Andhra, C.1860-1900

GN Rao

CDS,1999. pp 133, Paperback, Rs. 170/\$19

Property Rights, Resource Management & Governance: Crafting An Institutional Framework for Global Marine Fisheries

John Kurien

CDS & SIFFS, 1998. pp 56, Paperback, Rs. 50/\$10

Health, Inequality and Welfare Economics

Amartya Sen

CDS. 1996. pp 26, Paperback, Rs. 70/\$ 10

Industrialisation in Kerala: Status of Current Research and Future Issues

P Mohanan Pillai & N Shanta

CDS. 1997. pp 74, Paperback, Rs. 110/\$12

CDS M.Phil Theses (1990/91-1993/94): A Review Vol.II

T T Sreekumar

CDS. 1996. pp 99, Paperback, Rs. 120/\$ 14

Trends In Agricultural Wages in Kerala 1960-1990

A A Baby

CDS. 1996. pp 83, Paperback, Rs. 105/\$12

CDS M.Phil Theses (1975/76-1989/90): A Review Vol.1

G N Rao

CDS. 1996. pp 162, Paperback, Rs. 155/\$ 18

Growth of Education in Andhra - A Long Run View

C Upendranath

CDS. 1994. pp 158, Paperback, Rs. 135/\$15

Growth of Market Towns in Andhra: A Study of the Rayalseema Region C 1900-C.1945

Namerta

CDS. 1994. pp 186, Paperback, Rs.125/\$ 14

Floods and Flood Control Policies: an Analysis With Reference to the Mahanadi Delta in Orissa

Sadhana Satapathy

CDS. 1993 pp 98, Paperback, Rs. 110/\$ 12

Growth of Firms in Indian Manufacturing Industry

N Shanta

CDS. 1994. pp 228, Hardcover, Rs. 250/\$ 28

Demographic Transition in Kerala in the 1980s

K C Zachariah, S Irudaya Rajan, P S Sarma, K Navaneetham,

P S Gopinathan Nair & U S Mishra,

CDS. 1999 (2nd Edition) pp 305, Paperback, Rs.250/\$ 28

Impact of External Transfers on the Regional Economy of Kerala

P R Gopinathan Nair & P Mohanan Pillai

CDS 1994. pp 36, Paperback, Rs.30/\$ 10

Urban Process in Kerala 1900-1981

T T Sreekumar

CDS. 1993. pp 86, Paperback, Rs.100/\$11

Peasant Economy and The Sugar Cooperative: A Study Of The Aska Region in Orissa

Keshabananda Das

CDS. 1993. pp 146, Paperback, Rs.140/\$16

Industrial Concentration and Economic Behaviour: Case Study of Indian Tyre Industry

Sunil Mani

CDS. 1993. pp 311, Hardcover, Rs. 300/\$ 34

Limits To Kerala Model of Development: An Analysis of Fiscal Crisis and Its Implications.

K K George

CDS. 1999 (2nd edition) pp 128, Paperback, Rs. 160/\$ 18

Indian Industrialization: Structure and Policy Issues. (No Stock)

Arun Ghosh, K K Subrahmanian, Mridul Eapen & Haseeb A Drabu (EDs).

OUP. 1992. pp 364, Hardcover, Rs.350/\$40

Rural Household Savings and Investment: A Study of Some Selected Villages

P G K Panikar, P Mohanan Pillai & T K Sundari CDS. 1992. pp 144, Paperback, Rs. 50/\$ 10

International Environment, Multinational Corporations and Drug Policy

P G K Panikar, P Mohanan Pillai & T K Sundari CDS. 1992. pp 77, Paperback, Rs.40/\$ 10

Trends in Private Corporate Savings

N Shanta

CDS. 1991. pp 90, Paperback, Rs. 25/\$ 10

Coconut Development in Kerala: Ex-post Evaluation

D Narayana, K N Nair, P Sivanandan, N Shanta and G N Rao

CDS. 1991. pp 139, Paperback, Rs.40/\$ 10

Caste and The Agrarian Structure

T K Sundari

Oxford & IBH. 1991. pp 175, Paperback, Rs.125/\$ 14

Livestock Economy of Kerala

P S George and K N Nair CDS. 1990. pp 189, Hardcover, Rs. 95/\$ 10

The Pepper Economy of India (No Stock)

P S George, K N Nair and K Pushpangadan Oxford & IBH. 1989. pp 88, Paperback, Rs. 65/\$ 10

The Motor Vehicle Industry in India (Growth within a Regulatory Environment)

D Narayana

Oxford & IBH. 1989. pp 99, Paperback, Rs. 75/\$ 10

Ecology or Economics in Cardamom Development (No Stock)

K N Nair, D Narayana and P Sivanandan Oxford & IBH. 1989. pp 99, Paperback, Rs. 75/\$ 10

Land Transfers and Family Partitioning

D Rajasekhar

Oxford and IBH. 1988. pp 90, Hardcover, Rs. 66/\$10

Essays in Federal Financial Relations

I S Gulati and K K George

Oxford and IBH. 1988. pp 172, Hardcover, Rs. 82/\$ 10

Bovine Economy in India

A Vaidyanathan

Oxford & IBH. 1988. pp 209, Hardcover, Rs. 96/\$11

Health Status of Kerala

PG K Panikar and CR Soman

CDS. 1984. pp 159, Hardcover , Rs.100/\$11 & Paperback, Rs. 75/\$10

This work is licensed under a Creative Commons
Attribution – NonCommercial - NoDerivs 3.0 Licence.

To view a copy of the licence please see: http://creativecommons.org/licenses/by-nc-nd/3.0/