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PRIVATIZATION OF WATER, HEALTH AND EDUCATION SECTOR IN RURAL INDIA; POSITIVES AND CONCERNS

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Abstract:

India opened her doors to liberalization, privatization and globalization, since the introduction of 1991 new economic reforms. Government gradually began to withdraw herself from its responsibilities and moving towards the role of indicator than provider of socio economic services. Today the privatization has gained momentum and is hugging all the sectors, now it is taking hold of water, health and education sectors.

Water is the nature's gift to mankind and hence a public good. But World Bank has cautioned that 2/3 of the world population will be struggling to get drinking water by 2025. When the demand for water is expected to rise, how do the private companies be far away from encashing it? The irony is the World Bank itself is lobbying to privatize water as solution to water crisis! As a boost to increase profits for MNCS, of developed world!

Commercialization, corporatization and marketization of health care have emerged as the order of the day. MNCs in order to increase their market share in health business; they are pumping in the money on research and development in health sector. Many end results are prefixed and the research begins! Education sector is gradually getting commercialized. These edupreneur aims at accumulating huge profits in the name of world class quality education. They bring in variety of syllabus branding them as international! The Government should not go back from providing the basic responsibilities of water, health and education to its citizens. If privatization can do better everywhere, then our redundant government and bureaucracy should also be outsourced to bring in efficiency. Probably private persons from USA or Europe can run the Government and bureaucracy better!

KEY WORDS:

Privatization, Education, Health, Water, Government Schools, Private Schools, Birth rate, Death rate, IMR Simple Mathematics, Ground water, Surface water, Apprehensions, Positives, Alternatives .

INTRODUCTION

India, since 1947 to 1991 believed in the role of a benevolent state. State strongly felt that providing the socio-economic services to all the Indians were its prerogative. They strongly felt it as the responsibility and duty of a welfare state. The people believed the state as they felt it can do no wrong. But since the introduction of 1991 new economic reforms India opened her doors to liberalization, privatization and globalization, Government gradually began to withdraw herself from its responsibilities and moving towards the role of indicator than provider. Privatization is the new order of the day. Government today is trying to confine itself to maintain internal law and order and protecting the country from external threats! Privatization refers 'to transfer of ownership, property or business from the government to the private sector. The Government ceases to be the owner of the entity or business' (Economic times, 2014) privatization is dubbed as 'peoplisation' as people, instead of government will own the resources and use it efficiently. The developed world feels this is truer with the case of the developing economies and hence

people the economy!

Privatization will optimally utilize the scarce resources, generate more employment and income, bring in best technology and practices, bring in competition, increase quality, reduce prices, give variety of choice to consumers and raises the state economy into a dynamic economy claims the supporters of privatization.

The developed world led by USA utilizing the IMF, World Bank, WTO and other global institutions patronize, encourage, boost and support privatization of all the sectors in developing economy. India which was in economic crisis in 1991, pledged its Gold to Bank of England and brought money; but it was not enough to revive the economy, hence India stood with the begging bowl in front of IMF, which promptly responded by asking India to shed its inhibitions towards privatization and hug the liberalization, privatization and globalization as the condition to get the loan. More the crisis, more seivour the conditionality's (similar to our money lenders attitude). Indian Government positively responded as if they did not have any other go!

Today the privatization has gained momentum and is hugging all the sectors, now it is taking hold of water, health and education sectors.

Water is the nature's gift to mankind and hence a public good. But World Bank has cautioned that 2/3 of the world population will be struggling to get drinking water by 2025. 'Overcoming the crisis in water and sanitation is one of the greatest human development challenges of the 21st century (Human development Report, 2006), Fortune magazine foresees 'water as the oil of 21st century'. When the demand for water is expected to rise, how do the private companies be far away from encashing it? The irony is the World Bank itself is lobbying to privatize water as solution to water crisis! As a boost to increase profits for MNCS, of developed world!

Commercialization, corporatization and marketization of health care have emerged as the order of the day. MNCs have entered the health market. Hence in order to increase their market share in health business, they are pumping in the money on research and development in health sector. Many end results are prefixed and the research begins! Finally they come out with the fact that consumption of x drug helps to reduce d significantly. The d will be produced, and distributed by them, market is already created! Medicines, drugs and vaccines of their own company are boosted by administering it to the patients. The patients are unnecessarily conducted many tests in the diagnostic centers and the report is slightly altered in few to bring in the fear of borderline; 'you are at risk of diabetes, blood pressure, heart ailments, and hence to rule out let us conduct few more tests or will advice to take a medicine every day and get rechecked after three weeks. Doctors, like a shrewd business man in these hospitals also speak of different prices for different varieties. Imported stints costs you 2 lakh, Indian costs you 1 lakh and local costs you 50 thousand, we cannot guarantee the local and Indian stints, but if you wish we will put the local or Indian as you desired!

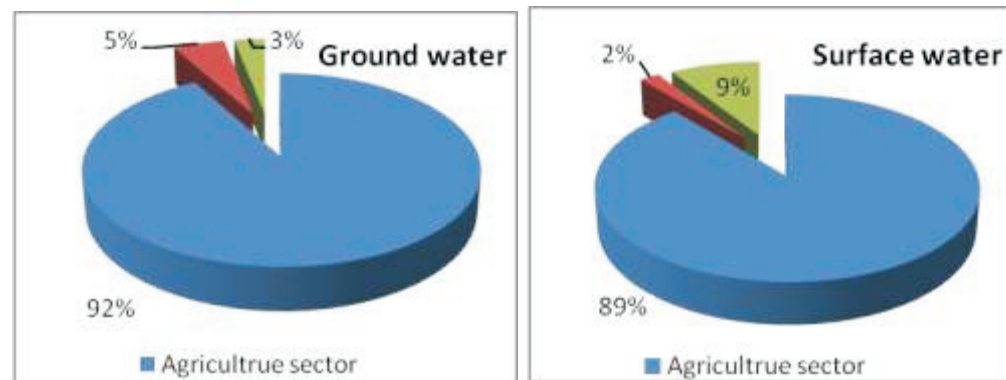
Education sector is gradually getting commercialized. The privatization of education has evolved a new concept called as edupreneur. These edupreneur aims at accumulating huge profits in the name of world class quality education. They bring in variety of syllabus branding them as international! Even a kinder garden seat in few prestigious intuition costs two to five lakh. The enrollments are made depending on the status, asset and job of the parents. The commercialized education has increased disparities. At many places hardly children schools have a decent room, blackboard and benches to sit and learn, but in few elite schools children's study in fully well furnished, air conditioned, smart classrooms. Now let us discuss the status existing in water, health and education sector, along with positive and apprehensions about privatization.

WATER

India has 16 percent of world population, but is endowed by nature with only four percent of fresh water resources. 1869 billion cubic meters (BCM) of surface and ground water availability is estimated in India. But due to geological and topographical reasons 747.6 BCM (40%) is not available for consumption. Fortunately 4000 BCM of fresh water is available due to precipitation in the form of rain and snow, out of which majority returns to sea via rivers (Gupta Akhilesh, 2006).

It is interesting to note that 92 percent of ground water and 89 of surface water is used by agriculture sector, 5 percent of ground water and 2 percent of surface water is used by industrial sector, whereas 3 percent of ground water and 9 percent of surface water is used by domestic sector.

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Source: Water Aid 2008

82.7 percent of rural households and 91.4 percent of urban households have access to safe drinking water claims the government (2011 Census). The water line and taps (proof of access!) have definitely reached the majority of household's doorsteps; whether potable water is available for the households, everyday, from these drinking water connections is a million dollar question!

Every year 37.7 million Indians are affected by water born diseases, more than 1.5 million children die of diarrhea every year. The major pathogenic organisms responsible for water borne diseases are bacteria (E Coli, Shigella, V Cholera), Viruses (Hepatitis A, Polio Virus, Rota Virus) and Parasites (E histolytica, Giardia, Hook worm) are looming large, all around! It is estimated that 73 million working days is lost, costing \$600 million every year due to water borne disease (www.noindia.org) in India added to it more than 66 million Indians are at the risk due to excess fluoride (www.fluroide.org) and 10 million are at risk due to excess arsenic in ground water. In total 1,95,813 households in the country are affected by poor water quality (www.ddws.nic.in).

It is unfortunate that India despite its 6 1/2 decades of planning is still unable to give potable drinking water to all its citizens. It is truer of rural India as many women walk miles to bring good drinking water. It is estimated that government of India has spent more than Rs.1,105 billion on providing safe and secure drinking water, since 1951's first five year plan (Action India 2008). But when millions of people are suffering from water contamination with fluoride, salinity, arsenic and bacteria and when 37.7 million Indians die of water borne diseases every year. The question is where did Rs. 1105 billion go? Of course everyone knows good portion of the sanctioned money went to few contractors, bureaucrats and politicians bellies!

If impurities are removed from water, it becomes drinking water. But, unfortunately in India the probability of drinking water getting adulated is high as sewage Industrial waste, runoff from agricultural fields, etc at many cases, is provided the opportunity of meeting clean drinking water and get salvation!. Hence privatization of water helps to purify water, distribute it properly and even collect the tariff efficiently from the households.

POSITIVES

Private sector is generally known for their efficiency and when they are given the task of purifying and distribution of water to ruralities in India, they will definitely be successful as they will go in for multistage filtration process and remove bacteria, virus and other impurities. The villagers can afford to bear the cost of such filtration process with the Government's assistance. The villages may also be forced to use water economically, as water is now priced good and not a free good! Moreover private sector is not only efficient in removing impurities from water but also efficient in collecting the tariffs. Government will subsidize the tariffs for consumers and private company will be paid the subsidized amount. There will be efficiency in services, they will plug the leakage immediately and there is every possibilities that the villages may get potable drinking water!

APPREHENSIONS

Privatization of water encourages the MNC participation and paves way for the exit of the public distribution. Once MNCs enter, gradually they increase the tariffs citing the increase in costs and inflation with the inflated numbers. The high tariffs will make the water out of reach of poor and disadvantaged

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sectors. The water will be available, but poor and disadvantaged will not be able to drink it. As they grease the wheels of government, they will agree to hike 50 percent of what was asked by private partner (private partners always ask 50 percent more than intended hike). Then despite subsidies, the portable drinking water will be out of reach of poor and disadvantaged sections. This exclusion will compel them to drink the unpurified water which will make the situation more pathetic. One of the most efficient capitalist economies France also tried to privatize the water purifying and distribution. But the greedy water MNCs tried to squeeze too much from Paris which bought disaster to its people. The government was forced to withdraw the privatization of water in Paris.

ALTERNATIVES

The community filtration plants managed by SHG or water co-operative of the respective village or group of village Panchayats together can be viable alternative.

HEALTH

India despite spending lakh of crores, since political independence, on health sector is unable to build a decent and adequate health care infrastructure in India. There are six doctors and nine hospital beds per 10,000 people in India (WHO, 2011). The rural population health infrastructure is given in below table. It can be observed that on majority of health infrastructure indicators, the present average coverage is higher than the fixed standard national norms.

Rural Health Infrastructure – Norms and Level of Achievements (All-India)

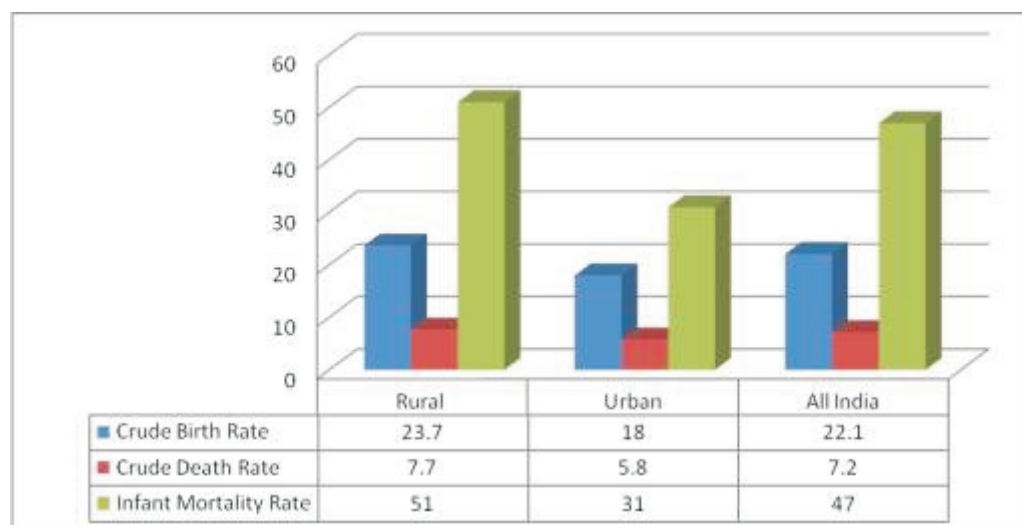
	Indicator	National Norms		Present Average Coverage
		General	Tribal/Hilly/ Desert	
1	Rural Population (2011) Covered by a:			
a	Sub-Centre	5000	3000	5624
b	Primary Health Centre (PHC)	30000	20000	34876
c	Community Health Centre (CHC)	120000	80000	173235
2	Number of Sub-Centers per PHC	6		6
3	Number of PHCs per CHC	5		5
4	Rural Population (2011) Covered by a			
	Health Worker (Female) (At Sub -Centers and PHCs)	5000	3000	4008
	Health Worker (Male) (At Sub -Centers)	5000	3000	15955
5	Ratio of Health Assistant (Male) at PHCs to Health Worker (Male) at Sub -Centers, PHC	1:6		1:3
6	Ratio of Health Assistant (Female) at PHCs to Health Worker (Female) at Sub Centers,	1:6		1:13

Source: GOI, Ministry of Health & Family Welfare, Health Statistics 2011.

The National Rural Health Mission was launched to improve availability and access of quality health care to poor. The programme though is holistic one; its success is dependent on the same person's integrity, honesty who has failed earlier programmes! Hence despite being optimistic, one cannot expect much from this programme also.

Rural health infrastructure is in bad position; hence birth rate, death rate and Infant mortality rate is higher than urban India.

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Source; Economic Survey (2012-2013)

When government health care sector was struggling, the private practice by government doctors boosted the privatization of health sector in India. It ultimately resulted in growth of private health care units; the privatization got major thrust after economic reforms in 1991. From simple clinics, hospitals to multispecialty hospitals, private health care units mushroomed all over, more so in urban areas, where money concentrated! It resulted in gross disparities in health services in rural and urban areas, rich and poor people. A clear-cut strategy to boost private hospitals at the cost of government hospitals is apparent. The ruralities and poor will suffer! For example, the new born babies face was eaten by rats in government hospitals claims the report from Karnataka, 83 children died due to lack of basic health facilities in West Bengal (HRI 2011)

The health infrastructure in rural India is in terrible bad position. The rural development minister Jai Ram Ramesh candidly admitted that public health care system has collapsed. Though his honesty in accepting and admitting the truth has to be appreciated, his follow up action, being in responsible position was of the usual policy maker!

POSITIVES

The private hospitals will provide the best physical and human health infrastructure will succeed in building the health infrastructure. The poor and ruralities will be benefitted, till the government subsidies most of the treatment costs. The poor and ruralities will definitely benefit, if the private health care sector work strictly in the way the health service sector is expected to work! But private health sector survives and expand in rural India only by squeezing the money (blood) from poor, disadvantaged classes and middleclass!

CONCERN

The PPP will initially do good work and gradually swallow the public health sector. Once the entire health infrastructure moves into their hands, they may indulge in corrupt practices and indulge in hidden charges or resort to delay tactics. The health sector will move from bad to worse. The weak and corrupt government may make it easier for corporate health sector to move from service to business, more so to corrupt and cut throat practices in health service sector. Then the poor will become more vulnerable and their health will be jeopardized.

The private health entity will definitely provide good hospitals, diagnostic center, and specialized services with latest technology. But the private health entity may tend to do unnecessary diagnostic tests and charge heavily. The government very soon will find it difficult to subsidize and will fix the reimbursement limit per patient. The private health entity then may resort to delay tactics, neglecting even the patient who really deserves the tests and treatment.

ALTERNATIVES

The government must give compulsory health insurance to all the ruralities, more so to poor and disadvantaged sections. The public health infrastructure must be strengthened in rural India. All the government medical colleges established in each district head quarters should be shifted to a rural area along with full-fledged hospital. The MBBS graduated from government medical colleges must be encouraged to take up their services in rural areas. Due monetary incentives should be given to them with adequate facilities, so that their stay in rural areas should not be felt as compulsion, but a pleasurable satisfying medical service. The best doctors serving in rural areas must be given appreciation and awards from the Government.

EDUCATION

Education is made as fundamental right through the 86th constitutional amendment Act in 2002. The right of children to free and compulsory education act, 2009 (RTE Act) guarantees the right to free and compulsory education to all the children between the age group of 6-14 years old.

The important features of RTE are enacted in its various sections:-

- Section 3: Right to free and compulsory education to all children in the age group of 6 to 14 years.
- Section 4: Admission to class appropriate to children age must be ensured by the school
- Section 8, 9: Government obligation to give Education to all children in the age group of 6-14.
- Section 12: Unaided private schools and private schools should reserve 25 percent seats for economically weaker section of their locality.
- Section 13: No capitation fee
- Section 14: Age proof should not be insisted for the students admitting to schools.
- Section 16: Management does not have any right to expel the student admitted under RTE under any guise.
- Section 17: corporal punishment awarded to students is abolished.
- Section 23: Qualified teachers should be appointed to ensure quality education
- Section 25: The teacher student ratio must be 1:30.

The prestigious schools are refusing to admit the students under RTE and government is not enforcing its whip to make them fall in line to obey the RTE; majority of prestigious schools belong to the influential rich persons, MPs, MLAs, of both ruling and opposition parties. Hence government hands are tied; moreover Government is also not willing to free itself on this issue!

The annual status of education report (rural) 2010 lists out the public schools infrastructure in India which is in terribly bad position;

- 1) One-third of all primary and upper primary schools faces acute shortage of classrooms and do not comply with the RTE requirement of one teacher one classroom ratio.
- 2) About half of primary and upper primary schools face shortage of teachers
- 3) 25% of schools lack office cum store, 48 % of schools lack playgrounds, 48 % of schools do not have a boundary wall or fence to their schools
- 4) 37 % of schools do not have a library
- 5) Mid day meals are not served in 17 % of schools, while 19 % of schools lack kitchen for mid day meals
- 6) 5.9 % of girls in the age group of 11-14 years are out of school compared to 4.9 % boys across India.

According to a recent study, only 75 % of schools have toilets, with merely 60 % of schools having girl's toilets. Even when toilets are available, half of them are not usable, thus a major deterrent for girls to attend schools (UCAN India, 2012). The RTE act is not enforced whole heartedly by many states. Even in the state where it is implemented, many prestigious schools are refusing to admit 25 % of the students from socially and economically backward sections residing in the area.

Majority of private schools forgets their social responsibility and remembers only accumulating profits. The prestigious schools do not admit the socially and economically backward poor children's, whereas the private schools with poor infrastructure with enroll the students, but they are worse than the existing government schools. Many of the prestigious private schools managements hardly care for the local government as they are more influential and powerful than them.

66.8 percent of children in the age group from 6 to 14 years study in government schools, where as 29 percent of children study in private schools and 3.3 percent are dropouts. The ASER study (2013) has

bought out very shocking and sorry state of affairs of our children studying in these primary schools. 47.3 percent of students studying in first standard, 23.1 percent in second standard, 12.7 percent of students studying in third standard, 8 percent of students studying in fourth standard, 5 percent of students studying in fifth standard cannot even read a letter!.

Reading Abilities of Children Reading- Schools in Rural Areas (2013) (%)

Standard	Nothing	Letter	Word	Level 1 (Std 1 Text)	Level 2 (Std 2. Text)	Total
I	47.3	32.3	12.6	4.4	3.6	100
II	23.1	33.4	20.8	11.8	11.0	100
III	12.7	25.0	22.2	18.5	21.6	100
IV	8.0	17.6	17.9	21.5	35.1	100
V	5.0	12.6	14.2	21.2	47.0	100
VI	3.0	9.0	10.8	20.1	57.1	100
VII	2.0	6.3	8.2	17.0	66.6	100
VIII	1.4	4.5	5.5	14.3	74.2	100
Total	14.1	18.5	14.4	15.8	37.2	100

Source: Annual Status of Education Report (Rural), 2013, Facilitated by ASER, January 16, 2013.

The another interesting finding is that only 4.4 percent students studying in I standard, 11.8 percent students studying in II Standard, 18.5 percent students studying in III Standard, 21.5 percent students studying in IV Standard, 21.2 percent students studying in V Standard, 17.0 percent in VII Standard, 14.3 percent in VIII Standard can read only I Standard text book, but not even second Standard text books. The other important finding is that 3.6 percent of students studying in I Standard, 11.0 percent of students studying in II Standard, 21.6 percent of students studying in III Standard, 35.1 percent of students studying in IV Standard, 47.0 percent of students studying in V Standard, 57.1 percent of students studying in VI Standard, 66.6 percent of students studying in VII Standard, 74.2 percent of students studying in VIII Standard can read second Standard text books. This shows the quality of education of children studying in primary schools.

Government vs. Private

The another important assessment is who is faring better, private or government schools in terms of reading level. The following table gives the comparative ability of children studying in Government and private schools.

Percentage of children in STD III and V at different Reading levels by schools type 2009-2013

Year	% children in Std III who can read at least Std I level text			% children in Std V who can read at least Std II level text		
	Government	Private	Govt. & Pvt.	Government	Private	Govt. & Pvt.
2009	43.8	58.2	46.6	50.3	63.1	52.9
2010	42.5	57.6	45.7	50.7	64.2	53.7
2011	35.2	56.3	40.4	43.8	62.7	48.3
2012	32.4	55.3	38.8	41.7	61.2	46.9
2013	32.6	59.6	40.2	41.1	63.3	47.0

Source: Annual Status of Education Report (Rural), 2013, Facilitated by ASER, January 16, 2013.

The alarming fact is that the quality of education is declining in government schools and marginally declining or stagnant in private schools. The percentage of children in III Standard who can read at least I Standard text book declined from 43.8 percent in 2009 to 32.6 percent in 2013 in government schools whereas it remained almost stagnant from 58.2 percent in 2009 to 59.6 percent in 2013. The private schools quality marginally declined in 2010 (57.6 %), 2011 (56.3%) and 2012 (55.3 %) compared to 2009(58.2%).

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The percentage of children in fifth Standard who can read III Standard text books declined from 50.3 percent in 2009 to 41.1 percent in during 2013 Government schools whereas in private schools, it remained stagnant during 2009 to 2013 at 63.1 percent. It implies the overall reading capability is bad in both government and private schools, relating worse in Government schools.

Simple Maths

The percent of children who cannot recognize the numbers from one to nine are 41.6 percent of student studying in I Standard, 17.7 percent of student studying in II Standard and 1 percent of student studying in VII Standard, whereas 36.6 percent of student studying in I Standard, 37.8 percent of student studying in II Standard and 5.5 percent of student studying in VII Standard can recognize only up to 1 to 9 numbers and not more. But 17.5 percent of student studying in I Standard, 31.2 percent of student studying in II Standard, 23.2 percent of student studying in VIII Standard can recognize numbers up to 99 but cannot subtract; 3.2 percent of student studying in I Standard, 10.3 percent of student studying in II Standard and 24.3 percent of student studying in VII Standard can subtract but not divide; Only 1.2 percent of student studying in I Standard, 3 percent of student studying in II Standard and 46.0 percent of student studying in VIII Standard can do division. There fact reveals us about the quality of education the Indian children's are getting in Indian schools.

Percentages children by class and Arithmetic level all schools 2013

Standard	Not even 1-9	Recognize numbers		Can subtract	Can divide	Total
		Govt	Private			
		1-9	10-99			
I	41.6	36.6	17.5	3.2	1.2	100
II	17.7	37.8	31.2	10.3	3.0	100
III	8.6	30.1	35.3	18.7	7.4	100
IV	5.2	21.0	32.8	25.3	15.8	100
V	3.3	15.0	29.5	26.7	25.6	100
VI	2.0	10.7	28.2	26.5	32.6	100
VII	1.4	7.5	26.4	26.0	38.8	100
VIII	1.0	5.5	23.2	24.3	46.0	100
Total	11.2	21.6	27.9	19.5	19.8	100

Source: Annual Status of Education Report (Rural), 2013, Facilitated by ASER, January 16, 2013

GOVERNMENT VS. PRIVATE IN SIMPLE MATHS

The percentage of children in Standard III who can do at least subtraction decreased from 36.5 percent in 2009 to 18.9 percent in 2013; in private school also it declined from 49.7 percent in 2009 to 44.6 percent in 2013. The percentage of children in V Standard who can do division also declined in both government and private schools. In government schools it declined from 36.1 percent in 2009 to 20.8 percent in 2013 whereas in private schools it declined from 46.2 percent in 2009 to 38.9 percent in 2013. It is disheartening that quality of education in India is at very substandard level, though Obama keep on praising India and Chinese education!

Percentage of children in STD III and V who can do at least Subtraction and Division respectively by school type 2009-2013

Year	% children in Std III who can do at least Subtraction			% children in Std V who can do at least Division		
	Government	Private	Govt. & Pvt.	Government	Private	Govt. & Pvt.
2009	36.5	49.7	39.1	36.1	46.2	38.1
2010	33.2	47.8	36.3	33.9	44.2	36.2
2011	25.2	44.6	30.0	24.5	37.7	27.6
2012	19.8	43.4	26.4	20.3	37.8	24.9
2013	18.9	44.6	26.1	20.8	38.9	25.6

Source: Annual Status of Education Report (Rural), 2013, Facilitated by ASER, January 16, 2013.

POSITIVES

The privatization of school is good as the best of teachers will train not only best students, the rest

of them too. But the mushrooming of schools without appropriate infrastructure is the cause of worry.

APPREHENSION

The basic infrastructure is absent in many private schools also, they pay very minimal salary to teachers and try to extract the maximum work from them. The quality automatically takes the beating. There are few private schools which are doing extremely well both terms of quantity and quality of school infrastructure, but their number is small! Privatization of education will harm the student community as many private schools are only behind the profit and not for providing quality education.

ALTERNATIVES

The viable alternative for privatization of education is strengthening the government's schools infrastructure, training the teacher's rigorously and following the result oriented incentives for teachers. There should be a uniform syllabus and nationalization of all the primary schools in India.

CONCLUSION

The Government should not go back from providing the basic responsibilities of water, health and education to its citizens. If privatization can do better everywhere, then our redundant government and bureaucracy should also be outsourced to bring in efficiency. Probably private persons from USA or Europe can run the Government and bureaucracy better!

Privatization is the life in capitalist economies like USA and European countries work well as there are strong governments which can regulate and govern privatization. The minimal corruption adds to the government efficiency. In order to conquer the expanding markets by their private corporations western Governments are pressurizing the developing like India to privatize everything including water, health and education. Government and all the citizens should get up from their deep slumber and say a big no to privatization in water, health and education sectors.

REFERENCES:

1. Water Aid India (2005), 'Drinking water and sanitation Status in India.
2. Ram Vaidyanathan Baru, (2006) 'Privatization of health care in India: a comparative analysis of Orissa, Karnataka and Maharashtra States, CMDR Monograph Series No – 43, Dharwad
3. Indria Khurana and Romit Sen, 'Drinking water quality in rural India: Issues and approaches', available at www.wateraid.org
4. Census (2011), Government of India, <http://censusindia.gov.in>
5. Gupta Akhilesh, Mall R.K., Singh Ranjeet (2006), 'water resources and climate change: an Indian perspective; current science, vol.90, No.12, June.
6. Aditya Ghosh, (2001), 'Privatization no remedy for health sector', Times of India, Kolkata edition, TNN/ October 5.
7. Human Rights in India Status Report (2012), Working group on human rights in India and the UN, Publication, New Delhi. Retrieved from www.wghr.org
8. World Health Statistics (2011) WHO, available at: <http://www.who.int/whostat/2011/en/index.html>
9. UCAN India (2012), lack of toilets keeps girls away from school, www.ucanindia.in/news/lack-of-toilets-keeps-girls-away-from-school/17644/daily
10. Government of India (2012) 'Rural Development statistics 2011-12', Edited by Hanumantha Rao K, NIRD, Ministry of Rural development, government of India, Hyderabad
11. Economic Surveys (2012-13), Ministry of Finance, Government of India, New Delhi
12. Annual Status of Education Report (Rural), (2013), Facilitated by ASER, January 16.
13. Keshava S.R. (2013), 'Socio-economic Exclusion of Indian farmers in Economic Growth; Policy interventions for inclusion', International Academic Journal of Applied Economics, Chennai, volume 4 page no. 43-62
14. www.noindia.org/safewater/default.asp
15. www.fluroide.org/health/bone/fluorosis/india.html
16. www.ddws.nic.in
17. www.censusindia.net

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