

Regional Issues and Challenges in India



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Population Policy in India and Role of Educators at Glance

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The population problem, in India is part of the world problem. As far as the size of population is concerned, India ranks second in the world next only to China. China by its successful implementation of one child family norm has turned the cancer, India inspire of being first country in the world to adopt family planning as a national programmed in 1952 has yet to reach the desired goal. Over population of our country naturally puts a strain on the available resources and the country faces a numbers of problems and difficulties. These can be broadly classified as follows:

- i) Difficulties in improving the standard of living
- ii) Difficulties in national development activities
- iii) Strain on resources
- iv) Difficulties in improving the quality of life

Many social reformers and thinkers had advocated the need for adopting family planning programme in the interest of not only the children born but in the interest of the mother also. Shri.PyareKishanWattal was the first Indian person to advocated birth control in his book on "The population problem of India", published in 1916. Where as "Thomas Malthus" was probably the first thinker in the modern world to discuss population problem systematically. In 1798 he published his 'Essay on the Principles of Population'.

In India in 1925, Prof. R.D. Karve-, started the first clinic in Bombay, but he had to face great opposition. A few years later the Neo-Malthusionleage was founded

in Madras. The first birth control clinic under the Govt. Patranage was opened at Bangalore, by the Mysore Govt. in 1930. In 1933, the All India Women's Conference at Lucknow passed a resolution recommending the Men and women should be instructed in methods of birth control in recognized clinics and is birth control be included in all municipal polio health services. Similarly, in 1930, the All India Medical conference, also passed should form part of the curriculum in medical college and school'. In 1936 the Women's first free clinic was opened in cotton mill area in Parel, Bombay. D.R.K., Mukherjee in 1938, Dr. A.P. Pillai in 1937, Shrei. B.G. Kher in 1938, Col. B.L. Raina in 1939, Shri P.N. Sapru in 1940, Shri. Joseph Bhore 1943 has some other names, of eminent persons who engraved their name in the path of solving the problem of population explosion.

After independence in 1949 Family Planning Association of India was formed at Bombay with Smt. Dhanvantri Rama Rao as its first president. In appointed, with viewed functions of a family planning center in comprehensive terms as including Sex education, marriage counseling, marriage hygiene, health and nutrition education and advice to overcome sterility. Therefore in various five year plans has given special attention towards this problem. The first five year plant described it as "The recent increase in the population of India and the pressure exercised on the forefront the urgency of the problem of family planning and population control It is therefore, apparent that population control can be achieved only by the reduction of the birth rate to the extent necessary to stabilize the population at a level consistent with the requirements of national economy. And accordingly time to time financial supports have also declared by the planning commission. (Table 1)

For the first time National Population Policy Statement was made by Dr. Karan Singh, Minister of Health and Family Welfare on April 16, 1976, during the fifth five year plan period. The other mile-stone in this regards:

- a) The Medical Termination of Pregnancy (MTP) Act – 1971.
- b) Population reduction by NCERT at College and school level, 1971
- c) National Population Policy 1976 – with special measures age of marriage, population size, educational efforts among females, and improvement in nutritional status of children etc.

- d) National Population policy April 1972, had aimed at Family welfare viz. Nutrition, food clothing, Shelter, drinking water and education and women's welfare, the research for new method of contraception etc.

Table 1- Indian Investment in Family Planning

Five year plan period	F.P. Outlay (Rs.in Crores)	F.P. Outlay as % of total public sector outlay	Actual Expenditure as % of allocation
First plan (1951-56)	0.95	0.03	21.5
Second plan (1956-61)	4.97	0.10	43.5
Third plan (1961-66)	27.00	0.43	92.1
Fourth plan (1969-74)	315.00	1.98	88.2
Fifth plan(1974-79)	497.00	1.26	98.9
Sixth plan (1980-85)	1010.00	1.12	-
Seventh plan (1986-90)	4000.00	-	-

Indian Population – Facts and figures at glance

Table 2 – Indian Population characteristics (1991):

Persons	Male	Female	Sex ratio (female per 1000 males)	Density (Persons per Sq.Km)	Urban population as % of total population
8,46,303	4,39,230	4,07,072	92.7	274	25.73 (6,28,692)

Table 3 – Indian Population characteristics (1998):

Crude birth rate	Crude death rate	Infant Mortality rate	Total fertility	Average Annual growth rate (1970- 95)
27	9	72	3.4	2.1

In 1991, the govt. appointed a committee on population headed by Mr. Karunakaran. This committee submitted a report to the National Development Council 1993 in which it pleaded for a National Population Policy.

In 1993, the Govt. appointed Dr. N.S. Sawaminathan as Chairman of a expert group of draft population policy. It submitted the Draft population policy in May 1994. From 1994 to 2000, because of unsalable politics at Centre and draft population policy dormant. In 1999, the Govt. asked a group of Minister to economics the policy drafted by the Minister of Health and family Welfare.

In Feb. 2000, the govt. announced the National Policy for population, 2000. Observations on National Population Policy – 2000 has three objectives, four new structures, 12 strategic themes, 14 national socio demographic goals for 2010, 16 promotional and motivation measures for adoption of the small family norms and 101 generational strategic or in all 150 interventions.

A member of committee on Vision 2000, Dr. Ashish Bose, had suggested plan of action for NPP 200, in his article 'Population stabilization in India: Progress and Pitfalls'- summarized as follows:

- i) There should be a strong managerial input to ensure that every district hospital, community health – center, primary health center and sub-center is fully functional.
- ii) Each Zilla parishad puts forward on Action Plan which would spell out the people's contribution and involvement at the local level.
- iii) Co-ordinating center should be established in National institute of Health and Family Welfare for research and the research should be on translating research results into policies and programmers'.
- iv) The Dept. of Family Welfare should get in touch with the Census Commission for 2001 in ensure that the census data are made available with the minimum time lay on priority items which have a bearing on health and family welfare and should make additional funds available to the census commission for the same.
- v) The Dept. of Family Welfare should get in touch with the Ministry of Information and Broadcasting to work out a communication strategy so

that the people are empowered through such information to demand the services promised to them-

- vi) To check corruption and all complaints should be looked into immediately and the corrupt officers exposed and punished.
- vii) The planning commission should prepare a vision 2020 document so as to make India free from poverty and population explosion and provide the way for India to emerge as Super Power by the Year 2020.

Review of the Population Policy and Role of Educator:

After 75 years of independence, despite the damaging repercussions of over population on the quality of economic life and lively talk on the subject the Govt. in India is moving with a conspicuous slowness! Indian population has reached such an appalling size and rate of growth that it is no exaggeration to describe the situation as a crisis. Population has an important bearing upon the quality of economic life of the rate industrial and social progress. I wish to emphasize population problem is a social problem, a matter which in a 'Welfare Society' cannot be only rely upon the Govt. alone but at the social and individual level also and should be linked with social programmes'. Accordingly it is very essential that we must change the mental outlook of the people. Educational sector is a useful instrument in this regard and accordingly the role of educator is also an important one. The educator of today needs to change his culturally embedded deep-rooted attitude of omniscience and dominance. Educators must have a clear view of the expected outcome in cognitive as well as affective domains of knowledge. Their social duties are too much important. It needs a lot of in-depth understanding and critical thinking and working accordingly. This criterion is applicable even at the individual level as the strength of a nation is built upon the solid foundation of duties first and foremost. It needs to change the individual's attitude 'I cannot to I can'.

From the front of educators work relating to adult literacy, population education, village uplift, environmental awareness and a number of other subjects have been required to be undertaken for society's prolong. With this regard community extension approach has an essential part. This approach has involved an approach working with the people for whom the programme was meant. Many demographers,

researchers and executives in the field “population control” felt that the official programme of Minister of Health and Family welfare has not made any significant dent; They specifically emphasis the crying need for evolving alternative strategies, for population stabilization.

The following observations are worth notice -

Our family planning programme was conceptually unsound it started at the wrong end by sterilizing women who was 35 plus and already had five as six children. Therefore, there was no basis to look for a significant dept on the birthrate, regardless of the seemingly impressive performance figures dished out by the Dept. of family welfare. The Ministry does a simplistic statistical exercise in fixing targets for family planning just as target for steel or cement, are set by the Ministry concerned. In this process, the propels are left out: No consideration is given to the religious susceptibilities of the people, the caste structure, the level of education, the overall health situation, the level of fertility and mortality and in particular infant and child mortality, the gender bias reflected in favour of the same complex, the neglect of the girl child, the problem of immigration & out – migration, the physical and financial resources of the region & so on.

At the same time the nature of the Indian demographic problem varies immensely from one part of the country to another. Similarly family planning programme in India has been a game of chasing people in order attain ‘targets’ for sterilization & most couples accept the method when the wife crosses thirty years of age and when couples have more than three living children. On the other front, there is an element of growing pressure on the medical staff and some other government employee, such as – primary teachers, Z.P. staff etc. to fulfill the target. This has led to two malpractices –

- i) Tendency to over- report, the performance.
- ii) Tendency to pressurize the people to come forward for sterilization.

Despite of all our efforts, the program remains essentially an official one & not as ‘propels’ programme. Actual the success of the program depend upon the personal decision of individual human being. What we need is a convergence of the national objective of population stabilization & the couples especially the women’s

perception of the desired the desired family size. Thus perception is most influenced by the values & this of the local community. Therefore there is also an urgent need of undertaking population education on the widest possible scale at the school & college level. Such programmes concentrate more on younger & futures couples so that acceptance is largely women of high fertility span. Now it's a proper time to design a new family and welfare planning programme with 'the lesser quantity of population but of greater the quality'. So as the part of population conce 'it will turn from the crisis into blessing to our country". In this regard rising approach is 'Manage the quantity & quality would take care of itself'.

As a educator. I personally would like to suggest a comprehensive five level plan:

- a) It is necessary to evolve an adequate & efficient administrative machinery to deal permanently with the multifarious problems directly with the proper financial backing.
- b) Proper prescription should be discovered and applied for the manipulation of the quantity of population and also more healthy population i.e. continuous research is essential in medico sector, according to the need of the situation of different level.
- c) Thirdly a population policy must attend the qualitative aspect with active participation of educator, social workers, club members and other formal and informal groups of the society.
- d) An assault from the side of the production and distribution front must also be intensified. After all the size of population, taken by itself done nit make it and over- population or under-population.
- e) Different magical incentives. To the masses i.e. concession to small size families, income tax concessions (effectively used in China) over size family charge, medical, educational & housing facilities to small size family, some suitable public health programmers'.

Wide awareness and publicity are essential tool to make above plan more successful. Lastly unless public opinion approves family planning and control, it

would remain ineffective, hence population education is emerging need. Whereas the objective of population education have been

- i) Size and structure of population
- ii) Population and resources
- iii) Population and process of development
- iv) Population and standard of living
- v) Population and socio-cultural standard
- vi) Population and ecological balance

Lastly, we need to fulfill our true destiny and that can be achieved only if we “Arise, awake and stop not till the goal is achieved”. Or else, it will be said of Indian as nation with,” too many laws-to little justice, too many public servants- too little public service, too much of educations-too little wisdom, too many values-too little in practice, too much of promise-too little of delivery, gigantic in potential illipretation in reality” Have we woken up? are any Indian listening?

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Industrial Planning and Development in Alwar District in NCR

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Abstract

Rajasthan sub-region abounds in natural, human and other resources essential for industrial development. Sub-region has industrial opportunities for agro based industries, livestock, mineral, engineering industries etc. The growth of industries started as early as 1952 when there were only 7 registered factories in the whole district of Alwar. Subsequently, more industries were set up in the district raising the total to 28 in 1961 and 40 in 1971. The development of industries made a further headway and 6 industrial units were added to Alwar town and 12 in the district as a whole in 1971. By 1993 there were in all 279 registered factories in Alwar district employing 8106 persons. In 2010 - 2011 there were 512 large and 337 medium scale units in the district employing 65300 persons in Alwar district.

Key Words - abounds, natural, human, resources, industrial development and employing.

Introduction -

Major employment generators in Delhi which need to be dispersed within the National Capital Region fall under three categories: Government and public sector offices, wholesale trade and commerce and industry. For the dispersal and development of economic activities in the Region, a three tier policy approach has been envisaged in the plan: A policy of strict control for

Editor's Introduction



Dr. Hema Ram Dhundhwal was born in a Nayagaon (Ala) in Nagaur district. His university education goes with the University of Rajasthan, Jaipur. He is awarded Ph.D degree from the University of Rajasthan, Jaipur. Presently, he is working as an assistant professor in the Department of Geography S.B.R.M. Government College, Nagaur (Rajasthan). He participated in many national and international level seminars and presented research papers. Most of his research papers are published in national and international journals. He is a lifelong member of "The National Association of Geographers India" and "Rajasthan Geographical Association". He takes keen interest guiding and supporting many students.

Published Books -

1. पर्यावरण : अवधारणा, चुनौतियाँ और संरक्षण
2. भौतिक भूगोल (Physical Geography)
3. समकालीन भारतीय परिदृश्य : मुद्दे एवं चुनौतियाँ
4. Contemporary India: Issues and Challenges
5. समकालीन भारत में पर्यावरणीय मुद्दे एवं चुनौतियाँ
6. समकालीन भारतीय समाज : मुद्दे एवं चुनौतियाँ
7. Emerging Global Issues and Challenges

Co-editor Introduction



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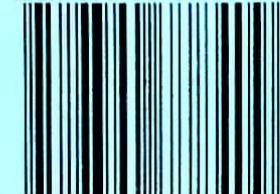


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