

# **The Power of Convergent Action: Accelerating Rural Development in Karnataka State by Integrating Rural Adolescents Empowerment**

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## **ABSTRACT**

India is one of the world's youngest countries with 21 per cent of its population in the adolescent age group and census data shows that this population is only increasing (Sivagurunathan C, 2015). In the State of Karnataka, the adolescent population stands at 18.9 per cent of its total population (census 2011), which is a significantly large number. The reality offers us the opportunity to think deeply about the development of this sub population which is closely intertwined with the development and progress of the region. However, the adolescents face several barriers across levels; regional, economic and social disparities can be seen in the opportunities available for adolescent especially adolescent girls to access services, demand their rights and experience transformative change at individual, familial and community levels. Evidences show that these disparities are driven by the challenges that are contextual, related to unequal gender norms, deep rooted discrimination against the girl child, and negative social and cultural practices like child marriage. The schemes and programs for adolescents implemented by the government are fragmented and do not adequately address the issues of adolescents holistically. These gaps point to the need for strong convergence at the community level. Horizontal and synergistic relationships and coordination across the departments of health, education, women and child development and social welfare will help view the barriers faced by adolescents more holistically across their developmental continuum. Therefore, in order to facilitate sustainable development of rural Karnataka, adequate attention to the developmental needs of this massive cohort of young people in the State is critical. Creating opportunities for them to realise their potential to the fullest, to be healthy, educated and equipped with information skills and confidence would enable them to contribute to their communities and the State's socio-economic growth of the State.

## **Keywords**

Adolescents, rural, development, structural barriers, disparities, empowerment, gender norms, growth

## **1. INTRODUCTION**

Adolescents constitute more than 1.2 billion of global population, and about 21 per cent of Indian population (about 243 million) [1]. There are more adolescents in India today than ever before, and more than in any other country. Their numbers are set to grow as India's largest ever young population is projected to grow rapidly for more than a decade [1]. This large cohort of young people represents a great demographic dividend with the potential to contribute to India's economic growth and development.<sup>1</sup> Census data shows that there has been steady rise in the adolescent population in rural India compared to the urban areas. According to Census 2011 data, the percentage of adolescents (10-19 years of age) formed 21.7 per cent of the rural India's population compared to the 19.2 per cent of the population in urban areas. In the State of Karnataka, the adolescent population stands at 18.9 per cent of its total population [2], which is a significantly large number. A new study, the 2019 Rural Development Report, just added a dimension to unemployment among the rural youth, not only in India but also the world [3]. "Their numbers are growing far more rapidly in lower-income countries than in higher-income countries, particularly in rural areas," according to the report. Two-thirds of the rural youth of the

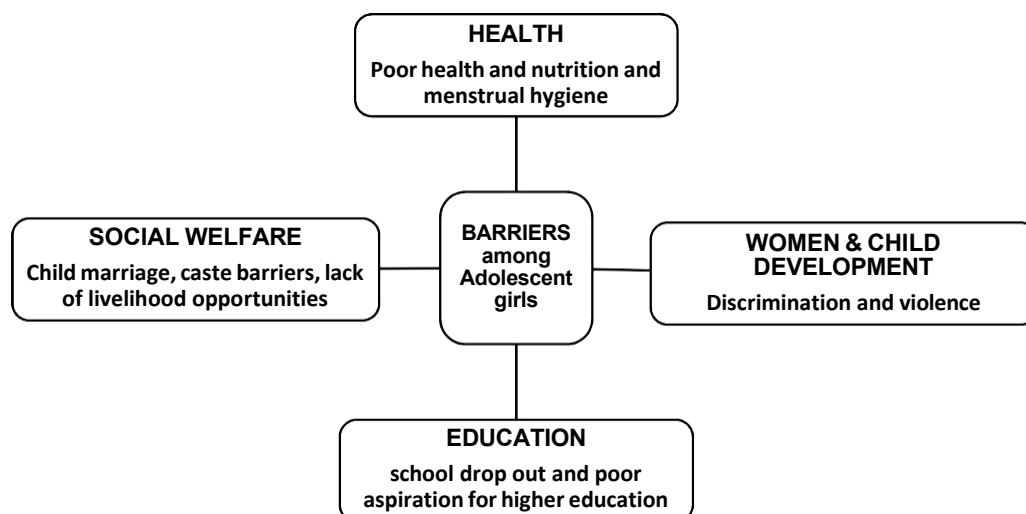
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world are in Asia and the Pacific followed by 20 per cent in Africa [4]. This bulge in these rural young population comes at a time when these areas neither have impressive economic growth nor diversified livelihood sources. Most young people inherit agrarian sources of livelihoods. Therefore, it is impossible to conceptualise about Karnataka's rural development without paying adequate attention to the developmental needs of this massive cohort of young people in the State. Creating opportunities for them to realise their potential to the fullest, to be healthy, educated and equipped with information skills and confidence would enable them to contribute to their communities and the State's socio-economic growth.

The objective of this paper is to examine the barriers faced by adolescents in rural Karnataka and to present a perspective on the connectedness of rural development with the progress and wellbeing of its youth (Adolescents). The paper draws from secondary academic literature, commentary/opinions of functionaries working with adolescents and development related evidences in the context of rural Karnataka.

## 2. THE PROBLEM: BARRIERS AND CHALLENGES OF ADOLESCENTS IN RURAL CONTEXTS

Evidence shows that when adolescent girls and boys are supported and encouraged by caring adults, along with policies and services attentive to their needs and capabilities, they have the potential to break long-standing cycles of poverty, discrimination and violence [5]. However, adolescents in the State face several barriers, largely structural, at individual, community and societal levels that impedes their growth and development. Examining these barriers closely is critical to understand possible ways in which they can be mitigated and usher in a new synergy within the State's development programs to steer adolescents to the path of progress. Regional, economic and social disparities can be seen in the opportunities available for adolescents especially adolescent girls to access services, demand their rights and experience transformative change at individual, familial and community levels. While there are challenges such as poor health, anaemia, mental health and lack of opportunities for livelihood among adolescent boys, the degree of barriers and challenges faced by adolescent girls are particularly deep rooted and more complex to resolve. Adolescent girls tend to have lower self-esteem, in both the domains, than boys because of cultural and gender inequalities, and the differentiated action and input of parents, peers, and their communities [6]. Evidences show that these disparities are driven by the challenges that are contextual, related to unequal gender norms, deep rooted discrimination against the girl child, and negative social and cultural practices like child marriage. These barriers lead to poor individual development of the girls leading them to have a low level of knowledge and awareness, low level of mobility, poor confidence, low aspirations, poor parent child relationships, lack of communication and negation skills. This disempowers them and the same perspective gets passed on from one generation to another forming a cultural norm and acceptance of disempowerment of adolescent girls [7]. In Northern Karnataka which is largely rural, female empowerment is highly undervalued but is critical for women to gain the agency to act on inequality and earn a living [8]. In Rural India, gender-related norms intersect with other important structural factors, such as caste and rural residence to influence age at marriage and limit women's access to formal education and economic opportunities [9].



### 3. THE KARNATAKA STATE SCENARIO

Karnataka is India's 8th largest out of 28 States and has a population of about 53 million (2011) It accounts for about 5.8 per cent and 5.3 per cent of India's land and population, respectively. The State contributes to about 5.5 per cent of country's GDP. Karnataka is one of India's fastest growing States. A World Bank report suggests that Karnataka is well on track at achieving some of the MDGs and in fact trends performance better than required on indicators such as child malnutrition, school enrolment, infant mortality and access to safe water [10]. The State of Karnataka has made several strides in efforts to enhance the overall wellbeing and development of all sections of the society across health, social, educational and nutrition indicators over past decade. The proactive leadership and the local reforms by the Government of Karnataka coupled with support of several national and international agencies has been responsible for this growth. Karnataka has pioneered the cause of making human development participatory, democratic and accessible through good governance, efficient service delivery and people's participation [11]. Karnataka boasts of being the first State to initiate Gender Budgeting in 2006-07 that reckoned the gender perspective in human development looking at the impact of gender on opportunities, social roles and interactions [12]. Karnataka is the first State to pass the Panchayat Raj Act in 1993, and its development efforts is ahead of many States in terms of the powers and functions that have been delegated to the Panchayat Raj Institutions (PRI) that are: (i) devolution of powers, functions, functionaries and funds; (ii) creation of a participatory environment through reservation of seats and authority positions; (iii) community participation especially participation of people's organisations and NGOs; and (iv) decentralised governance and planning. The Karnataka Model of Development is a fine one combining the positive traits of industrialization, schemes and service provision and peoples' participation [12]. Data from the NFHS- 4 (2014 -15) shows promising improvement in the last five years on some overarching indicators across various programme areas of health, socio-economic status, education and nutrition.

- The percentage of literate women has increased from 60 per cent to 72 per cent;
- Increase in more than 10 years of girls' schooling from 29 per cent to 45 per cent;
- Decrease in maternal mortality ratio from 178 to 144 per lakh live births;
- Under 5 mortality rates from 54 to 32 per thousand live births;
- Increase in institutional birth from 65 per cent to 94 per cent;

While Karnataka's performance in human development indicators is improving, though still rather average, the State has a long way to go to catch up with the comparator States of Tamil Nadu, Andhra Pradesh and Kerala.

Figures related to gender disparities are particularly disheartening in the State especially in its rural pockets. In Karnataka, 21.3 per cent of the girls aged 20-24 were married before their 18th birthday and 5.4 per cent of the married girls aged 15-19 gave birth before their 20th birthday [13]. In the context of northern rural Karnataka, among the disadvantaged groups (i.e., families headed by a single mother, below the poverty line, or belonging to scheduled castes or scheduled tribes), inequitable gender norms and traditional restrictions that discourage and limit female aspirations, expression, and liberty diminish girls' quality of life through early discontinuation of their education; early marriage, pregnancy, and motherhood; and discriminatory upbringing that deprives daughters of adequate nutrition, health care, and hygiene. The consequences of underage marriage, teenage pregnancy, withdrawal from education, and neglect throughout childhood are severe for the girls, for their children, and for society. Northern parts of the State of Karnataka has a high degree of under development in various socio-cultural dimensions compared to other part of the State [14]. Adolescent girls from this region face multiple forms of marginalization like lack of higher education, early marriage soon after menarche, high social discrimination and exclusion for belonging to disadvantaged social groups like scheduled castes, financial insecurity and poor livelihood status [15]. According to the child marriage prohibition cell, which prevented 1214 child marriages in the past two years in Karnataka, the often-cited reasons for underage marriages were financial constraints and lack of security for women even in the domestic sphere. The cell also States that north Karnataka is a significant trafficking hub with several young girls being exploited. Karnataka's northern districts still lag heavily behind on human development. The Nanjundappa committee set up by the State clearly indicated evident and significant regional disparities within the State. Hyderabad Karnataka (Gulbarga division) has been found to be the most backward division [15, 16]. Intensive development activities and resources for driving this development also have been inequitably distributed within the State. Therefore, regional and gender disparities continue to persist.

### 4. THE KOPPAL EXPERIENCE: EXAMINING ONE RURAL DISTRICT OF NORTHERN KARNATAKA

Koppal district in Northern Karnataka is one of the low-ranking districts in developmental aspect (HDI report 2014). As per Census 2011, population of the Koppal district is about 13.89 lakhs, which is about 2.28 per cent

of the State population. Sex ratio is 986, whereas child sex ratio is 958. The overall literacy rate is about 68 per cent, whereas, male and female literacy rates are 78.5 and 57.6 per cent, respectively. About 16.8 per cent of population is urban population. The district has about 18.6 per cent of population as SC population and about 11.8 per cent of its population is ST population. The proportions of SCs, STs and Children in Koppal district are higher than those observed for Karnataka State. As regards regional backwardness, there is no change in the status of taluks of the district as compared to what was their status as ascertained by the Nanjundappa Report on regional inequalities in Karnataka. All the taluks are either backward, more backward or most backward. As it is known that Hyderabad Karnataka (Kalaburagi Division) is the most backward region in comparison with other three divisions of the State. The present district's performance in different human development indicators also reinforces this fact. (HDI report, 2014). Census data shows that, in Koppal, in rural areas the sex-ratio has declined from 985 (2001) to 983 (2011). deficits in female literacy rates across the two genders. It can be seen from this Table that inequalities across the gender persist, despite the plethora of schemes and efforts to seek basic equality and convergence in literacy rates. Since the degree of urbanization is rather low in Koppal district, it is primarily the low literacy rates in rural areas that have driven down the female literacy rate for the district as a whole.

In North Karnataka's Koppal district, two in five of girls drop out from school while transitioning to secondary education. Half of the adolescent girls aged 10-19 are anaemic (Hb<11.0 g/dl) and one in three girls deliver a child before in reaching age 20 (District Level Household and Facility Survey 2013-14). The district of Koppal is also characterized by high rates of poverty, unemployment and illiteracy which heightens the vulnerability of adolescent girls in terms diminished quality of life and lack of opportunity to participate in major decisions. The rural district of Koppal is an example of how disparities still exist and reflect through the data that shows poor gender integration and empowerment. Upon further examination of the barriers faced by adolescents, we find that they are across sectors and can be categorised under the broad developmental areas such as health, education, Social welfare, Women and Child Development. This is illustrated in the figure below.

## 5. THE NEED FOR CONVERGENCE

There are several schemes and programs for adolescent girls implemented by the Government of Karnataka. The Department of Women and Child Development (WCD) implements the SHUCHI scheme which involves free distribution of sanitary napkins to adolescent girls under a menstrual hygiene programme covering around 17 lakh girls studying at government schools in the State. The SABLA program which involves provision Take Home Ration (THR) to two adolescent girls per Anganwadi in 9 high burden Districts of Karnataka and also provision of life skills training.

The Health department implements the Vit A & Iron supplementation program which involves the weekly Iron supplementation to school dropout girls. It also implements the RKSK (Rashtriya Kishori Swastha Karyakram), a flagship program that provides health education and counselling to adolescent girls. The SNEHA CLINICS which offers adolescents confidential counselling services and the RBSK (Rashtriya Bal Swastha Karyakram) program, that offers free Medical examination for children in school at Primary health Centres and Community Health Centres. The scheme offers students and parents 1000 Rs as travel expenses.

A critical examination of the implementation of the various schemes in the light of the persisting developmental lag among the adolescents in the State points to the need for further strengthening and contextualisation of the programs and schemes to their specific needs. While these schemes are helpful address some of the immediate needs of the adolescent population, their implementation and reach to the neediest groups especially in the most backward pockets of the State is still sub optimal. There is a need for addressing the issues of adolescents more holistically and not in a fragmented manner with focus on over all development of the adolescents. Adolescents is an age of physical, social, psychological changes and they need to be addressed in toto. The current programs and schemes by the different departments do not adequately consider all of these change factors. The issues of this group are also context specific and most of the responses barely make provision to acknowledge these diversities [19]. Current scheme implementation adopts multiple platforms to reach and engage with the adolescents and similarly, the service delivery platforms are not identified from an adolescent's perspective but rather from an implementer's convenience. Example: The school is the platform for IFA tablet distribution, the Anganwadi centres for Take Home Ration and the PHC for health counselling services. Moreover, the developmental programs and schemes do not effectively consider the social segregation of adolescents. This can be done only by the creation of a common platform that brings all adolescents together.

These gaps point to the need for strong convergence at the community level. Horizontal and synergistic relationships and coordination across the departments of health, education, women and child Development and social welfare will help view the barriers faced by adolescents more holistically across the developmental

continuum. The convergence efforts will lead to greater ownership and participation by the community, harmonization of efforts between the departments, improved accountability thereby leading to enhanced development outcomes.

Approximately half of the global adolescent population – 900 million – are adolescent girls and young women [20]. When educated, healthy, and equipped with the right skills and opportunities, they hold the key to unlocking the solutions for many of the world's most pressing problems: reducing poverty, advancing gender equality, catalysing countries' social and economic development, halting the spread of HIV, reducing maternal mortality, and ending violence against women, among many others. As educated mothers, they will invest in the survival, education and success of the next generation. As leaders of today and tomorrow, they can be a force for social change. Yet despite their potential the most marginalized, vulnerable and hard to reach adolescent girls are often invisible. They are not prioritized in many development programmes [21]. Supporting improved learning is particularly important in the case of rural youth, especially young rural women, who tend to lag behind the rest of the population. Better learning outcomes among rural youth embedded in a supportive environment will play a direct role in boosting their productivity and will also improve their sense of agency, thereby feeding into a virtuous spiral of improving welfare [22].

## 5. CONCLUSION

The productivity of rural young people is central to their well-being and to the broader development and prosperity of society [23]. With the right policies and investments, those young people can drive economic growth in rural areas and improve life in their communities. (2019 Rural Development Report). Rural Karnataka's growth and progress is dependent on the developmental opportunities and empowerment of its adolescents. Progressive and convergence action through well thought policy frameworks and strong implementation mechanisms, closely monitored and supervised by the State can help us realize the goal of Suvarna Karnataka.

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