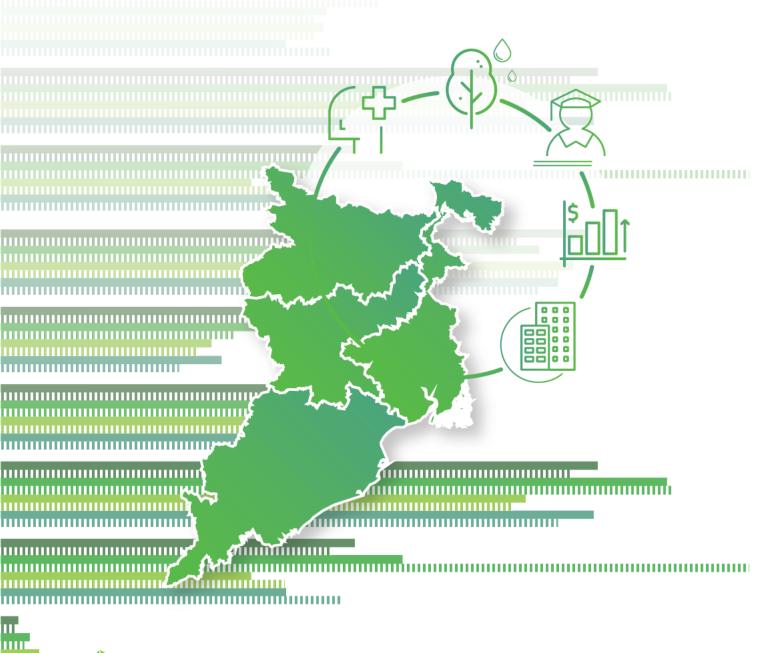
BHARAT EAST REPORT

AN OVERVIEW OF EASTERN STATES





AUGUST 2022

Sources and Contributors

Sources for secondary research:

- Ministry of Health and Family Welfare (MoHFW)
- Ministry of Corporate Affairs (MCA)
- <u>Ministry of Mines</u>
- Mission Antyodaya 2020
- India Data Insights

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We would like to thank the following for their contribution to and support during the preparation of this report:

- Srikrishna Sridhar Murthy
- Meenakshi Iyer
- Sansidha Pani



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Executive Summary

The Bharat East report explores the performance of the eastern states (Bihar, Jharkhand, Odisha and West Bengal), across various indicators and themes, using data points from the NFHS-IV, NFHS-V and Mission Antyodaya resources. Accounting for 22% of the country's population, the **East region alone accounts for 47** of the 117 Aspirational Districts (ADs) identified by NITI Aayog. The region cumulatively accounts for over 40% of all ADs in India: Jharkhand (19), Bihar (13), Odisha (10), and West Bengal (5). This, combined with the relatively low ranking of the states across development indicators, presents many potential areas for the three I's: Investment, Intervention and Implementation.

Overall, certain trends emerge in this zone, with certain states being consistent laggards, across funding, performance in development indicators and even in intra-state performance between ADs and other districts. The states of the East zone jointly **received 6% of India's total CSR funds between 2014 and 2021**. Odisha, single-handedly accounts for 3% of the country's CSR spending, almost half of the entire CSR funding received by the East zone. It is followed by West Bengal, and far behind are Jharkhand and Bihar. **Education emerges as the top sector for CSR spending in the region**. Not only does **Odisha emerge as the top recipient of CSR funds**, it also receives 75% of the East zone's (and 32% of India's) share of the District Mineral Fund (DMF). West Bengal and Bihar both receive significantly lower DMF allocations and are among the bottom five recipients of DMF allocations in the country.

The eastern zone is performing almost on par with the national averages across certain NFHS-V indicators but still leaves many major areas for improvement. **Odisha and West Bengal are outperforming the National and East averages across Child and Maternal & Reproductive health indicators.** The performance of Bihar **and Jharkhand is lagging behind the National and East zone averages across almost all healthcare themes.** Overall East zone scores are higher with respect to the consumption of injurious substances, resulting in an increased risk of health emergencies. The Mission Antyodaya data captures cross-thematic performance of districts and states across 26 selected developmental indicators. Across the East zone, **West Bengal is the only state delivering better results than the national cumulative score across the 26 developmental indicators leaving Bihar, Jharkhand and Odisha far behind the national score**. When comparing the growth from NFHS-IV to NFHS-V, the eastern states record only marginal growth from NFHS-IV to NFHS-V. Jharkhand, Odisha and West Bengal all record relatively similar trends across indicators, in this regard only Bihar's often downward trend from NFHS-IV to NFHS-V is alarming and indicates a decline.

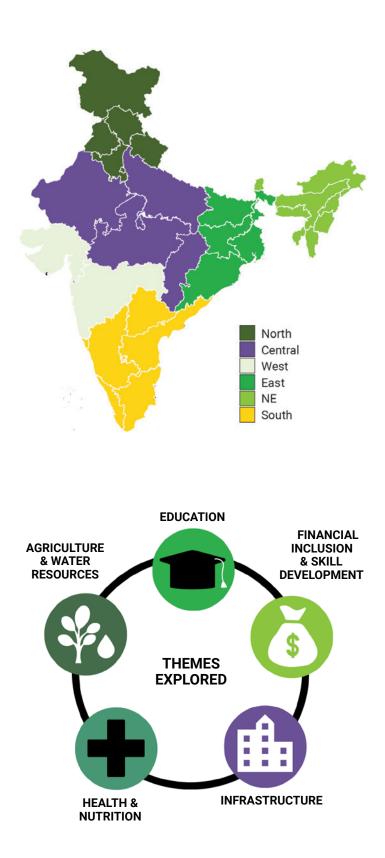
All states have a deep urban-rural divide, with urban areas performing significantly better than rural areas. In Bihar and Jharkhand, this difference is starker than in other states. Odisha is seen to excel across certain specific indicators and themes such as maternity care. West Bengal displays selectively good performance, across certain themes and indicators such as maternity and delivery care. **The difference in AD, and other districts' performance is also stark in eastern states**. The East performs relatively well, on par with the national average, across certain indicators where the AD and other districts' difference in performance is minor. All the eastern states **require intervention in the areas of Gender-Based Violence, Women Empowerment, Prevalence of Anaemia, Screening for Cancer**, etc, to name a few.

This report provides a comprehensive analysis of the Eastern states through the analysis of publicly available secondary data. This information may be utilised in a myriad of ways, as a knowledge base to validate hypotheses, especially from the Aspirational District ecosystem perspective.

Introducing Bharat Initiative

The Bharat initiative at Sattva emerged from the overwhelming need to focus on the backward districts in India. Many basic requirements for human development, such as access to clean water, healthcare facilities etc are severely lacking in many districts in the country. States such as Bihar, with relatively much lower SDG scores as compared to the national average, receive lower attention than many other better performing states. States with low GDP and high population still continue to receive low CSR funding, which is biased toward commercial hubs, with states like Maharashtra receiving eleven times the funding of all Seven Sister States of the North East combined. Funding continues to go to the top states, with already high GDP and SDG scores. The spend across districts is disproportionate, with only ~1.45% of total CSR spend mapped to Aspirational Districts. The spending across sectors is also disproportionate, with most funding going toward Education.

Hence the idea emerged to take a geographyspecific, regional approach to impact in order to build block-district-state level expertise in working in difficult-to-approach terrains and territories in India, through the Bharat initiative. As the Aspirational Districts Programme introduced in 2018 by the NITI Aayog provides a helpful, predetermined framework and comprehensive list of lowperforming districts to function as a point of launch, the Bharat initiative kicks off in the aspirational districts of the country, in a zonal and phased manner. The initiative will eventually branch out to work in most backward areas across regions (North, South, East, West, North East) as well as demanding terrains and areas (hilly, coastal, tribal, Left Wing Extremism (LWE) etc) of the country.



Understanding Eastern India

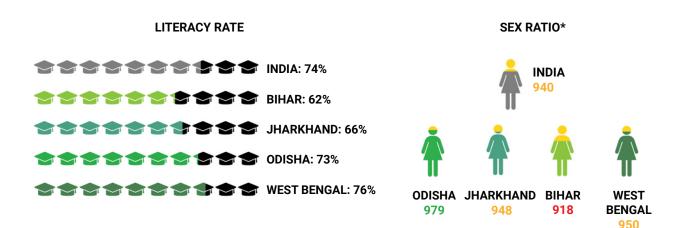
The eastern states collectively account for 22% of the country's population. The four states combined occupy 12% of the country's area and account for 22% of the country's households as well.

The main criterion for the selection of the eastern region for the launch of district-level Aspirational District Forums (ADF), is the concentration of aspirational districts in the eastern block. The East is the largest zone for ADs, cumulatively accounting for over 40% of all ADs in India: Jharkhand (19), Bihar (13), Odisha (10), and West Bengal (5). The selected eastern states rank relatively lower across human development indicators as compared to other states in the country.



West Bengal records the highest literacy rate of the eastern states, ranking higher than the national average, while Bihar records the lowest literacy rate across states. Odisha records extraordinarily high enrolment in schools for students aged 6-13, followed by Jharkhand, West Bengal, and Bihar.

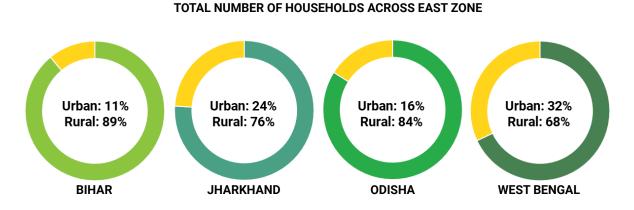
In terms of sex ratio, a similar trend emerges, with Bihar being a laggard, and Odisha topping the national average. Bihar reports a drastic difference between the male and female populations.



The East zone alone accounts for 25% of the country's rural population. The urban-rural divide across the eastern states is stark, with a bulk of the population falling under the rural domain; the difference is most pronounced in Bihar and Odisha with a vast urban-rural divide.

^{*} Based on Census 2011 data

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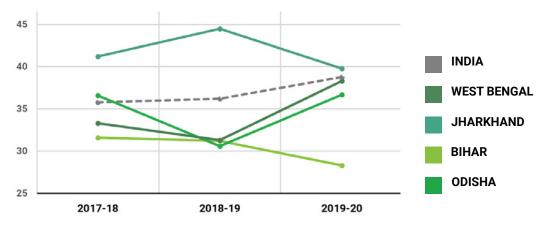


All states record low female workforce participation, with Bihar ranking the lowest; men make up the majority of the workforce across urban and rural backgrounds in all eastern states. The rural workforce participation is also uniformly higher than urban workforce participation across all eastern states. Jharkhand records the highest worker-population ratio (WPR) among the eastern states, higher than the Indian average as well. Barring Bihar, the states, as well as the national average, have experienced an upward trend from 2018-19 to 2019-20. Out of the total working population, age 15 years and above, the female working population is only 35% as against 64% working males in Jharkhand and West Bengal. In Bihar, the female working population is only 27% against 73% of working males; and the female working population is only 14% against 85% of working males in Odisha.



TOTAL WORKING POPULATION IN EAST ZONE

COMPARISON OF WPR* FOR AGE 15 YEARS AND ABOVE: HIGHER SECONDARY AND ABOVE (TOTAL: URBAN + RURAL)



* WPR: Worker Population Ratio

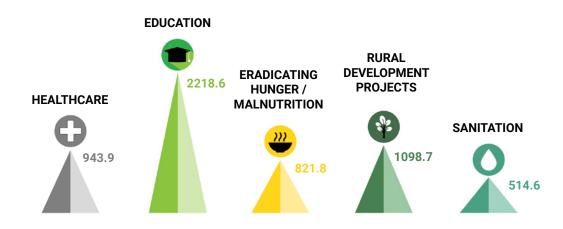
Corporate Contributions in Eastern India

The states of the East zone have jointly accumulated Rs. 7668 crore in CSR funds, which is 6% of India's total CSR funds between 2014 and 2021¹. The state receiving the highest amount of CSR funds in the East is easily Odisha, single-handedly accounting for 2.98% of the country's CSR spending. It is followed by West Bengal. Far behind are the laggard states in terms of CSR funding, Jharkhand and Bihar. Here it is evident that even though Bihar and Jharkhand rank low on SDG scores (50 and 53 respectively, as compared to the national average of 60), they are receiving disproportionately low CSR funds in comparison to their needs.



The top sector for CSR spending in the East region emerges as Education, with a collective amount of Rs. 2,349 crores, approximately 30% of the CSR spend in the East. Even though it is the largest sector for CSR spending in the East, it accounts for only 6.6% of the country's overall CSR spending on Education.

It is to be noted that in every state, the district that is the top recipient of CSR funds is not an aspirational district, but consistently a major/metro city in the state. In Bihar, Patna emerges as the top recipient, as do Ranchi in Jharkhand, Khordha in Odisha and Kolkata in West Bengal. This further highlights the disproportionate CSR fund disbursal in states. Within aspirational districts itself, Nadia in West Bengal, Koraput in Odisha, Ranchi in Jharkhand, Kalahandi in Odisha and Sitamarhi in Bihar, receive the highest funding in the East zone.



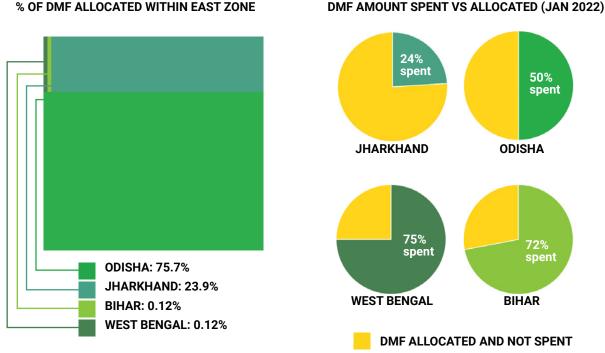
¹ Here it is important to note that in the recording of CSR spending, the top recipient geography across the country is not one particular state, but recorded as 'pan-India'. This means that a significant portion of CSR funds, Rs. 47,334 crore or 38% of the country's total CSR spend, is disbursed across states and geographies across the country.

Understanding District Mineral Fund Allocations in Eastern India

The District Mineral Fund (DMF) is a monetary fund that comes through contributions from the mining companies operating in districts. These mining companies are required to allocate at least 10-30% of the royalty amount that is paid to the government to be given to the DMF Trust of the district they are operating in. This fund is directed toward districts that are affected by mining-related activities to ensure that local communities can derive benefit from the natural resources extracted in their districts.

The implementation of the funds and the trust that executes them are governed by the Ministry of Mines. Under Pradhan Mantri Khanij Kshetra Yojana (PMKKKY), 60% of the fund collected is allocated to high priority sectors such as drinking water supply, environment preservation, pollution control, health care, education, women and child welfare, the welfare of aged and disabled people, skill development and sanitation; the remaining 40% of the funds are allocated to other priority sectors.

It is clear that Odisha receives the highest amount of DMF by a large margin. It accounts for 75% of the East zone's DMF shares and 32% of India's. West Bengal and Bihar both receive significantly lower DMF allocations and are two of the bottom five recipients of DMF allocations in the country. Bihar records over Rs 20 crores of unutilised DMF. It can also be observed that Odisha has utilised just a little over half of the DMF allocation to the state.



% OF DMF ALLOCATED WITHIN EAST ZONE

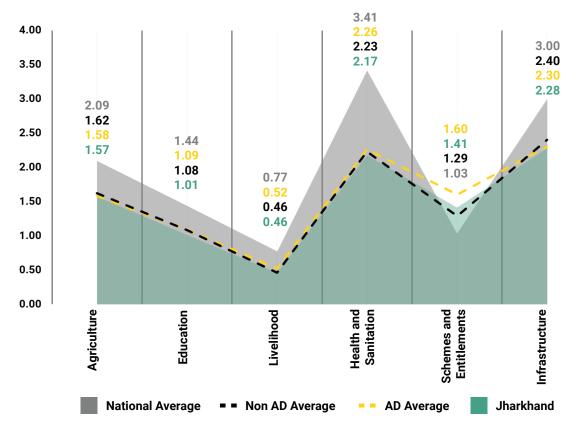
State-Level Analysis Across Key Themes Under Mission Antyodaya

This section covers a state-wise comprehensive analysis of six thematic areas across 26 developmental sub-indicators, highlighting state and district-level variance from the national standard. For each of the states, a concrete analysis of aspirational districts is conducted and further benchmarked for their absolute performance compared to their peer districts. The ADs are also compared to the non-ADs, to obtain visibility on variation, if any. This view allows us to capture the performance of ADs, mapped against non-ADs, across selected themes, ultimately helping to intervene sectorally, if required.

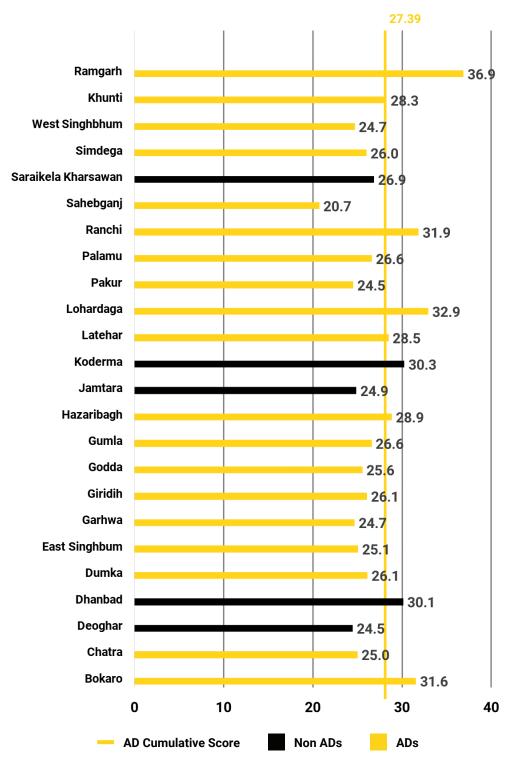
Jharkhand



WEIGHTED SCORES ACROSS 6 THEMES (NATIONAL VS. STATE VS. AD & NON AD): JHARKHAND



- Jharkhand, with a cumulative score of 26.40, considerably falls behind the national score of 36.66.
- Jharkhand is underperforming across all themes as against national average scores, with only the Schemes and Entitlement theme delivering slightly better results (with a weighted score of 1.41 for the state versus a national score of 1.03).
- For all thematic areas, there is only a slight variation between results delivered by ADs, non ADs and state scores.



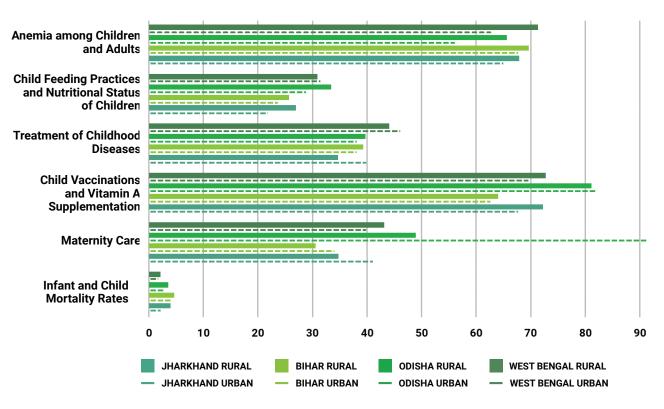
CUMULATIVE SCORES OF ALL DISTRICTS VS. AD CUMULATIVE SCORE: JHARKHAND

Comparing Urban Versus Rural Performance in East Zone

There is almost uniformly better state performance in the urban areas as compared to rural areas. This could be due to a myriad of reasons, primarily due to the fact that access and adoption rates are significantly higher in urban areas. There is often also a focus on urban areas by government bodies as well as philanthropic organisations owing to the concentration of population in these areas. Through this section of the report, the performance of states across themes and indicators is plotted, with a specific focus on the urban-rural divide.



Child Health



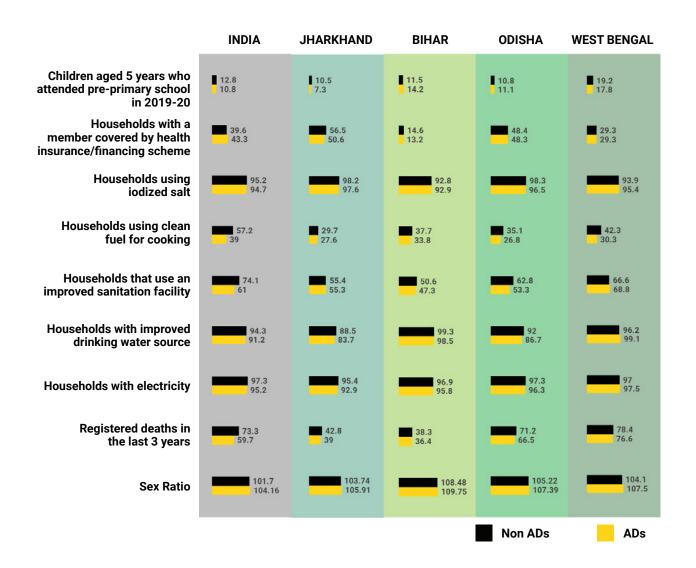
COMPARING URBAN-RURAL PERFORMANCE ACROSS CHILD HEALTH INDICATORS

- When it comes to medical care, urban areas are almost unanimously better-performing.
- The quality of maternity care is far superior across all urban areas as compared to rural areas, with especially Odisha having record maternity care scores (91.2).
- In the Treatment of Childhood Diseases, barring Bihar and Odisha, urban areas are better-performing than rural areas. West Bengal and Odisha are often better-performing than the national average as well.
- Barring Infant and Child Mortality Rates and Anaemia among Children and Adults which are uniformly lower in urban areas as compared to rural, it can be observed that there is no consistent better performance across states in urban areas.
- Across Child Vaccinations and Vitamin A Supplementation for children, it can be observed that rural penetration is actually higher across states.
- Across Child Feeding Practices and Nutritional Status of Children, rural areas are better-performing across all states except West Bengal.

Comparing the Performance of AD and Non AD Districts in the East Zone

In order to compare and contrast the performance of aspirational districts (AD) with the scores of other districts (non-ADs¹) and derive insights based on NFHS-V, the averages of ADs and non-ADs have been taken at a national and state level. When the average scores of ADs in a state are compared with the average scores of non-ADs in East zone states, the overall trend is that the non-ADs are performing significantly better across indicators than the ADs, further emphasising the need for focused efforts in aspirational districts.

POPULATION AND HOUSEHOLD PROFILE



¹ For ease of reference, other districts in the country, which have not been deemed aspirational districts as per NITI Aayog ranking, have been referred to as non ADs in this section.

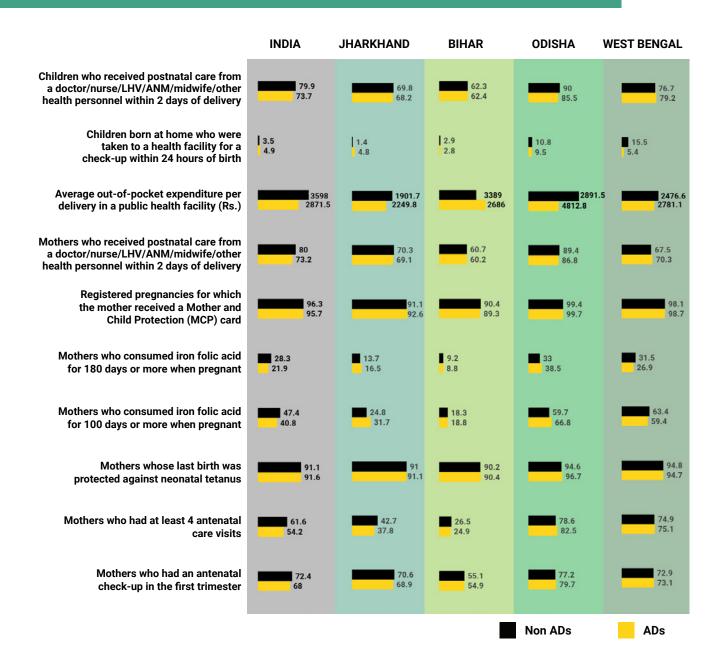
- Across states, and across indicators, the performance observed is almost at par with the national average.
- In indicators such as Households Using Clean Fuel for Cooking, there are significantly lower scores across the states as compared to the national average.
- In Jharkhand, ADs have significantly lower insurance coverage compared to the non ADs.
- Across indicators like sex ratio and population below 15 years, it is clearly observable that non-ADs are performing better.
- The difference between AD and non-AD performance in Children aged 5 years attending Pre-Primary School is stark, especially across Jharkhand and West Bengal, where ADs are performing considerably worse. Surprisingly, ADs are performing better than non ADs in the same indicator in Bihar and Odisha.



CHARACTERISTICS OF WOMEN

- The literacy rates of women in ADs are also uniformly lower across Jharkhand, Odisha, and Bihar, when compared with the national average, the difference being more pronounced in ADs than in non ADs.
- West Bengal notably performs better than the national average across both ADs and non-ADs in the Women Literacy front.
- The literacy rate of women is almost uniformly high across all states, barring Jharkhand.
- Across East zone states, Women with 10 or more years of Schooling is an alarmingly low performing indicator, both in ADs and non-ADs when compared to the national average. Non-ADs perform better in three states compared to ADs.

MATERNITY CARE (FOR LAST BIRTH IN THE 5 YEARS BEFORE THE SURVEY)



- The difference between ADs and non-ADs is most pronounced in the average out-of-pocket-expenditure
 per delivery in a public health facility, with Odisha having a difference of almost Rs.2000 between ADs
 and non-ADs. Surprisingly in this indicator, ADs in Bihar show greater expenditure on delivery in a public
 health facility.
- It is also surprising that in Jharkhand, the percentage of children taken to a health facility shortly after home birth is higher in ADs than non-ADs.
- Some indicators are almost uniformly ill-performing (such as 'Children born at home who were taken to a health facility within 24 hours of birth' or 'Mothers who consumed iron-folic acid').
- · Across the East zone states, Odisha has performed exceptionally well across Maternity Care indicators,

recording some of the highest scores compared to the national average.

- West Bengal has also recorded scores across indicators which are higher than the national average.
- Bihar, followed by Jharkhand, recorded significantly lower scores across Maternity Care, especially when compared with the national average. Hence, all maternity care indicators emerge as a potential area for focused intervention in these states.

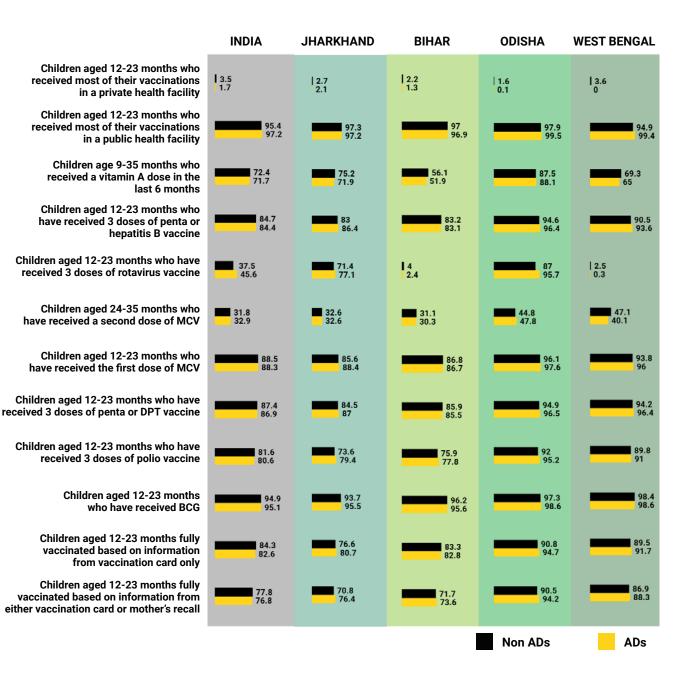
DELIVERY CARE (FOR BIRTHS IN THE 5 YEARS BEFORE THE SURVEY)

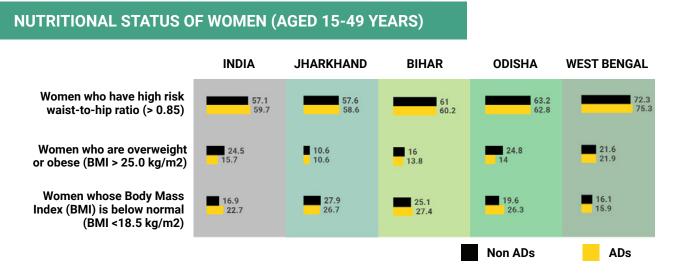
	INDIA	JHARKHAND	BIHAR	ODISHA	WEST BENGAL
Births in a public health facility that were delivered by caesarean section	18.5 11.4	7.3 6.6	3.9 3.4	17.6 11.5	23.3 20.4
Births in a private health facility that were delivered by caesarean section	49.7 48.8	48.4 48.7	41.2 40.1	48.4	80 92.1
Births delivered by caesarean section	24.4 15.5	15.5 11.2	10.7 9	26 12.7	32.2 32.1
Births attended by skilled health personnel	90.4 85.6	84.4	81.3 78.5	93.8 89.	94.6 93.2
Home births that were conducted by skilled health personnel	2.7 4.9	7.7 8.8	5.4 6.3	1.5 2.9	2.4 2.5
Institutional births in public facility	64.3 67.9	53.7 60.8	58.5 57.6	77. 81.	9 73.1 4 71.2
Institutional births	89.8 82.9	77.7 75.8	79.3 75	<u>94</u> . 87.	92.7 5 90.8
				Non ADs	ADs

- Bihar records low scores across indicators as against the national average, especially in births delivered by C-section.
- When it comes to home births conducted by skilled health professionals, Jharkhand and Bihar both record scores higher than the national average. Correlated to the same, the percentage of institutional births in both Bihar and Odisha are lower than the national average, indicating a relatively higher occurrence of home births.
- In all indicators, AD scores are significantly lower than non-AD scores.

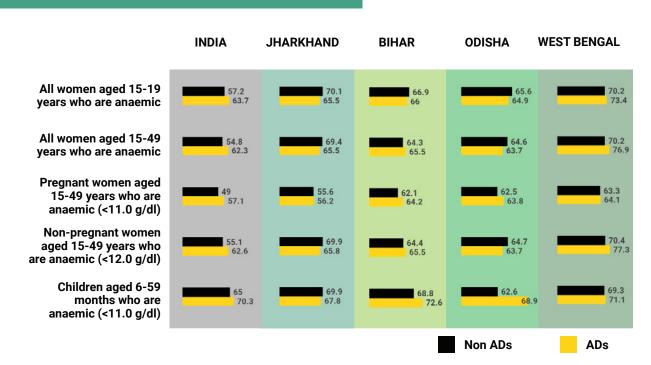
CHILD VACCINATIONS AND VITAMIN A SUPPLEMENTATION

- The most striking difference is in the Children aged 12-23 months who have received 3 doses of rotavirus vaccine indicator, which is alarmingly low in Odisha and West Bengal when compared to the national average.
- Across child vaccinations, namely BCG, Polio, DPT, the vaccination rate in ADs is almost consistently higher across states as compared to non-ADs.
- The issue arises when it comes to subsequent doses of vaccines. For example, the first dose of the MCV is successfully administered to children in ADs, however, when it comes to the second dose, the rate of follow-through is often rather low, especially in states like West Bengal and Bihar.





- Jharkhand, Odisha and Bihar record higher scores than the national average in below-normal BMI for women, with Odisha and Bihar recording much higher scores in ADs than non ADs.
- Obesity in women is higher in non ADs than ADs, across states and the national average.



ANAEMIA AMONG CHILDREN AND WOMEN

- Younger women, aged 15-19, record higher incidences of anaemia, and children, aged 6-59 months, record the highest incidence of anaemia across groups, with ADs recording consistently higher scores across the latter.
- ADs, however are surprisingly almost on par with the non-AD average, and in some cases even better (eg. Jharkhand), going against the existing trend of poor-performing ADs.
- The inadequacy in the provision of iron supplements emerges rather clearly across eastern states, especially with West Bengal recording fairly high incidences of anaemia among children and women.
- Amongst pregnant women who are anaemic, ADs have a markedly higher recording of anaemia than non-ADs, across all the states.

About Sattva

We are an organisation driven by the mission to end poverty in our lifetime. Our work focuses on scalable solutions for sustainable social impact. We work with our clients - corporations, philanthropists, foundations and social organisations - to achieve social impact goals effectively and maximise the social return on their investment.

Our newest initiative to drive impact is the Bharat model, where we are looking to build a systematic framework for change in aspirational districts through advisory, knowledge and on-ground implementation. The idea to take a geography-specific, regional approach to impact in order to build block-district-state level expertise in working in difficult to approach terrains and territories in India. By leveraging our deep understanding across sectors and collaboration with multiple stakeholders, the Bharat initiative will be propelled by Sattva to solve some of our country's most critical societal problems.

We offer end-to-end support covering:

Research			
Strategy consulting			
Implementation support			
Programme design and management			
Monitoring and Evaluation			
Impact assessment			
Social audit			
Talent solutions			
Organisation development programmes			
Data and technology products and more as needed in our quest for better solutions.			

Stay tuned for the full version of the report to release soon. Write to <u>bharat@sattva.co.in</u> with your queries and questions.





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