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SOCIAL INCLUSION THROUGH COMMUNITY BASED ORGANIZATIONS IN KARNATAKA

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Abstract:

Panchayath Raj Institutions (PRIs) are often observed as a necessary condition for transforming lives and livelihoods of people living in the rural areas of developing countries. This article tries to addressing how community-based organizations (CBOs) shape the way services are delivered by local government agencies in Karnataka. Also, the article explores how the community's, specifically women's, demands and interests are being negotiated at local political institutions. In doing so, the research focuses on CBOs and Grama Panchayath's (GPs) as the core institutions of the local power structure and more than 12 GPs as the case of a woman led GPs. It has been observed that all GPs have progressed as a full-fledged CBOs over the years and currently mobilizes marginalized groups to establish their rights and access to various government and non-government organizations. In addition to ensuring gender responsive governance, GPs are also creating space for participation and developing an interactive relationship between the people and power at the grassroots in Karnataka.

Keywords: PRIs, Community based organization, SHGs, local governance, local government, grassroots development.

Introduction:

Empowerment of Panchayath Raj Institutions plays a significant role in shaping the socioeconomic structures of any society. The PRIs based on women SHGs shape incentives of the political executive and regulate the distribution of power which includes the ability to shape economic institutions and the distribution of resources (Acemoglu & Robinson, 2008; Braunfels, 2014; Lam, 2010). There is a wide agreement among the researchers that local government plays a crucial role behind the development of political institutions at the grassroots in less developed countries.

A strong and decentralized local government can build local leadership, ensure participation, promote efficient service delivery and develop accountable administration, all of which foster the implementation of participatory community development (Islam, 2015; Stoker, 2011; Vadeveloo & Singaravelloo, 2013). However, the development experience during the 1980s and 1990s in the Asian and African countries often exhibits a growing dissatisfaction among people and the development practitioners with regard to the functioning of local government institutions (LGIs).

This crisis at the grassroots prompted the non-government organizations to promote people's participation in the PRIs through the formation and mobilization of community-based organizations (CBOs) (Abegunde, 2009; Datta, 2007; Putnam, 2000; Wahab, 2000). Although most of the CBOs have been facilitated by the external organizations in the early stages of formation, a few of them appear to survive as independent entities in the long run (Datta, 2007; Mansuri & Rao, 2004).

The Government of Karnataka (G o K) has reliably emphasized the importance of PRIs as key vehicles of local democracy, service delivery and participatory development at the grassroots. Though G o K has taken several reform initiatives to strengthen PRIs over the years, gaps and weaknesses still remain evident (Rahman & Ahmed, 2015). Besides the government-led initiatives, development partners and non-governmental organizations have facilitated community-based development through CBOs. In Karnataka, CBOs have been found to contribute in wide-ranging aspects, that is, management of natural resources, community empowerment, access to service delivery, rural infrastructure development, and so on. (Datta, 2007; Thompson, 2013). This article seeks to answer how women-led CBOs shape the way services are being delivered by local government agencies.

Furthermore, the article explores how communities, especially women's, demands and interests are being negotiated at the local political institutions in Karnataka. The research focuses on Grama Panchayathi (GPs) as the core institution of the local power structure and Grama Panchayathis (GPs) as the case of a PRIs.

Review of Literature:

(S. M. Kamrul Hassan2,2018): The existing literature on defining and measuring governance broadly refers to the definitions and indicators developed by RDPR, Karnataka. Their idea was later adopted by the PRIs of the concerned district. The indicators are: voice and accountability, political stability and absence of violence, government effectiveness, regulatory quality, rule of law and control of corruption (Kaufmann, Kraay, & Mastruzzi, 2010). The idea of Panchayat Raj Institutions (PRIs) is multifaceted, which encompasses the process of governing and the exercise of authority through formal and informal institutions in the management of resources at the grassroots. The indicators were: participation and

accountability. Several other studies have also tried to measure PRIs by using indicators like quality of service delivery, state of inclusion in decision-making procedures, degree of power devolution, state of transparency, and so on. (Blair, 2000; Center for Democracy and Governance, 2000; Lok, 2006; Wilde et al., 2009). A lot of literature on PRIs tried to measure the state of RDPR from contextual perspectives. The state team has used several indicators, namely, people's participation, demand-driven activities, transparency in administration, and equity and social justice in service delivery to measure the grassroots governance in India.

This research brings in the ideas of Palanithurai for measuring the state of PRIs in the context of Karnataka due to the similarity of rural socioeconomic structures and institutions between the two states. Hence, three fundamental indicators adopted for this study are: participation, transparency and accountability, and pro-poor service delivery. In the context of the present study, people's participation in the decision-making process has been measured by examining the village court sessions, ward meetings and meetings of the GP-standing committees. (S. M. Kamrul Hassan, 2018).

Transparency and accountability have been analyzed by observing, first, the openness of budget sessions and ward meetings regarding the disclosure of financial information of GP. Second, people's access to information from GP office has also been considered. Pro-poor service delivery has been assessed by focusing on the beneficiary selection process for social safety net programs.

There are 91,402 elected GP members in the state. Out of 91,402 GP members, 16,999 belong to scheduled caste members which constitute 18.61 per cent of total members, 9,880 members are scheduled tribe which constitute 10.80 per cent, 29,944 members belong to other backward community which constitute 32.76 per cent, and 34,581 are belong to other communities which constitute 37.83 per cent. Women elected members to the GPs number 39,318, which is about 43 per cent of the total elected members in the State (Ashok Kumar, H and Dr. T.M. Mahesh 2013.)

Rationale of the Study:

Today decentralization is playing an important role in local governments and is the most significant theme in the development discourse. In the present context of rapid social change and development activities, DE bureaucratization and decentralization have been found to be much more appropriate to deal with contemporary trends of globalization, liberalization and privatization. There are several meanings attributed to decentralized governance.

The following meaning is generally accepted by all; Decentralized Governance has been used interchangeably with concepts like 'local governance', 'local self-governance', 'panchayat administration', 'decentralization panchayat governance' all imply the same phenomenon of decentralization as a political reform process aimed at further democratizing of the state.

Presently, there are many PRIs in Karnataka, in Chitradurga district Zilla Parishad (ZP) at the taluk of Holalkere block level and more than 12 GPs at the village level. Although decentralization has been identified as the most popular mechanism for strengthening PRIs, Karnataka is yet to experience any substantial development in this regard Abdul Aziz (2002). Research shows that persistent corruption, limited power of locally elected representatives, financial constraints and low level of accountability have restrained the successful functioning of the GPs. Government, donors and NGOs have been working, separately as well as in collaboration, to ensure democratic practices in the PRIs of Karnataka since the 2010s. NGOs are well-known for implementing community-led projects to empower the marginal groups, alleviate poverty, promote participatory governance through their projects.

Methodology:

The study takes a case study approach and follows the qualitative research design. As a case of twelve PRIs / GPs and few SHGs, it purposively draws on the more than 12 SHGs, a local CBO, to see its effects on and interactions with the lowest unit of local government system, that is, GPs of one block. It is a women-led CBO which operates in the Chitradurga district, Karnataka. One of the federations of SHGs grassroot level people's organization, which can be considered as parallel to the GP. The uniqueness of GP as a CBO lies in its democratic nature of leader selection, participatory nature of decision-making and transparent allocation of benefits.

The purposive selection of this case is justified considering the study objectives which require a well-established CBOs for a comprehensive understanding of its interaction with the PRIs. Several data collection tools including focus group discussions (FGDs), key informant interviews (KIIs) and in-depth interviews have been used in this research. Key informants include the GP President, four Members of GP, the Secretary of GP, five GP office bearers, five officials from the NGOs, five villagers and five direct beneficiaries who have received some kind of assistance from the GP as a result of GP activities. FGDs have been conducted among the common villagers, beneficiaries of the SHGs, GP members, GP officials and community service providers. Apart from the KIIs and FGDs, official documents of GP and GP have been extensively reviewed. The study has been carried out in the Holalkere taluk of Chitradurga district, Karnataka, where the GPs operate.

Key Results and Findings:**1. Participation;**

GPs has been mobilizing the marginalized groups for establishing their rights by ensuring participation in decision-making processes of the PRIs. Field research reveals that GP members are actively participating in the activities of the village court, ward meetings and in the meetings of the GP standing committees. In addition, they are encouraging the participation of other non-member male and female from the marginalized groups as well. The village women SHGs in the same block has four male and one female member. Inclusion of the only female member in the court has been possible due to the activism of GP. The Presidents of GPs mentioned that, 'Being motivated by the persistent advocacy of GP, and decided to incorporate one female member in the Panel Board for the first time'. It has been found that more women are seeking justice in the village ward after the inclusion of the female member.

SHGs women members as elected GP members:

In the study block, more than 83 SHGs women members were elected as ward members of their respective village representing GPs. Because of enhanced knowledge and skills in their self-help groups like participating in public meetings, asking questions, confidently speaking and awareness of government schemes, and converging those programs for vulnerable section of the community in their village as a ward member. Among these SHGs women members few of them were selected as president for more than 12 GPs in the study block.

Several female respondents pointed to the trust and confidence issues in the matters of divorce and domestic violence where women can comfortably share sensitive information regarding inconvenient incidents with the female member of the ward. GP members are also creating space for participation of women as well as the common people in ward meetings and standing committee meetings. Earlier, there were irregularities in holding the meetings while a few women participated.

GP members have been actively organizing and facilitating female participation in the meetings since 2010. GP regularly arranges a special ward meeting to discuss on gender responsive budget every year. According to GP members and local residents, participation of citizens has almost been doubled from a 100 people in 2015 to more than two hundred in 2019. Participation of females in the budget meetings has reportedly been almost fourfold in the same period. A local resident of the area who attended the meeting in 2019 told that, 'I saw more than 200 people attended the meeting of which 50 per cent were female'. A draft budget is prepared based on the opinions of local people in the meeting. In addition, GP has leveraged the rule for co-option of members from the common people in the standing committees to make it more inclusive; 10 GP members were co-opted as members in 10 out of 13 standing committees in 2019.

2. Transparency and Accountability;

PRIs arranges open budget sessions to disclose financial information every year. Owing to regular ward meetings and open budget sessions in recent years, people now have an avenue to make the local government representatives accountable for their activities. Moreover, the beneficiary selection of the programs is held publicly during the ward meetings since 2019. Referring to this changed scenario, a local resident informed, 'earlier, the distribution of social security benefits was completely dependent on the desire of the GP members and the President'. GP also arranges several awareness trainings through SHGs for the community people regarding their social rights and encourages people to raise their voice on societal issues. Due to the continuous advocacy of the GP, people now participate in the ward meetings and ask questions on the beneficiary selection process of programs. Besides ward meetings, GP members organize different 'interactive meetings' in the locality.

Representatives from GP, VHSCs, SDMC of primary schools and service providers such as family planning officers and agriculture officers are invited to attend the meetings. It helps local people to talk about as well as complain against the status of service delivery of local service providing bodies.

3. Pro-poor Service Delivery;

Field study exposes that GP members work to ensure fair and pro-poor service delivery at the grassroots. Previously, there were several allegations against the UP members regarding the distribution of social security benefits and other allowances. In recent years, GP members have been actively promoting the deserving candidates for schemes in different ward meetings since 2017 which resulted in distribution of Programs among the deserved citizens. A local beneficiary who is also a widow stated that, 'I couldn't pursue the GP members myself to get the widow allowance to support my family few years back. Later, a GP leader helped me to get the widow allowance'. Moreover, GP arranges training for the service providers, that is, health care providers, family planning officers and agriculture officers to ensure improved service delivery that benefits the poor. Along with the training programs, GP also organizes the 'interactive meetings' for service providers and community members to open up avenues for marginalized people to seek public services.

Analysis of the Findings:

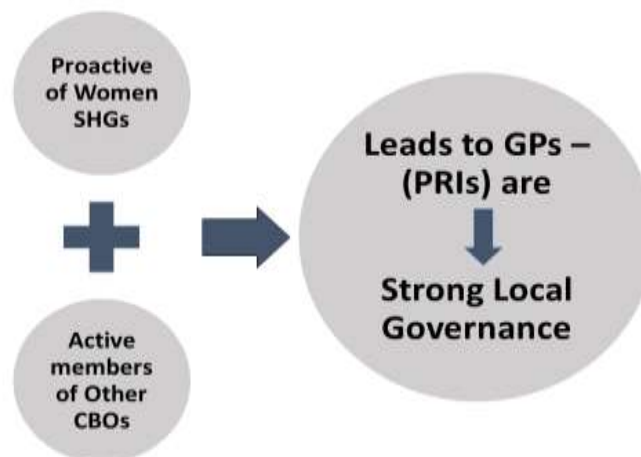
Based on the empirical findings presented in the previous section, following points summarize the role of CBOs and GPs in promoting self-local governance at the grassroots.

1. Participation of common people increased: People’s participation in the GP meetings has doubled in 5 years as about 200 people reportedly participated at the annual budget meeting in 2015. Number of female (including both GUP members and non-members) participants has also increased by almost four times during the same period.

Moreover, the GP members have been able to find their foothold in the village court and in UP standing committees with the inclusion of 1 GP member in the five-member panel board of the village ward and the co-option of 10 GP members in the GP-standing committees.

The inclusion of GP members in different forums and the mass awareness campaigns run by GP have vastly motivated common people to appear in different formal meetings of the PRIs. Mass participation has also expanded the chances for poor women and other marginalized groups to raise their voices in decision making forums at the grassroots.

2. Transparency and accountability of GP enhanced: Public disclosure of financial and other information through annual budget meeting and other ward meetings have helped the GP to attain greater legitimacy since 2016. Besides the GP meetings, people now take part in open and interactive meetings with representatives of the local service providing bodies (e.g., community clinic) and can make the representatives accountable for any sort of underperformance. Needless to say that people’s meaningful participation has made the GP and other local service providing bodies more transparent and accountable, and vice versa (see Figure 1).



Pro-poor service delivery promoted: GUP has helped the UP to identify deserving candidates for various safety net programs by organizing public meetings at ward and union level. GUP promoted the rights of women and marginalized groups and assisted the GP in making proper allocations of benefits for them. In addition, GP arranged training programs to sensitize the local service providers to work for the poor and marginalized groups.

Moreover, people’s conscious participation to make the UP and other local service providing bodies accountable has finally paved the way for ensuring pro-poor service delivery at the grassroots (see Figure II)



Strengthened relation: Over the years, GP has attained reasonable degree of legitimacy among the local people of the block, especially among the poor and the marginalized. As a result, it has become a bridge between the society and state, that is, UP as the smallest unit of the state. From this perspective, the relation between citizens and the state agency has been stronger over this period.

Platform for mass mobilization: It has been observed that GUP has been turned to an effective platform for common people, both members and nonmembers, to be engaged in negotiation with various state and non-state institutions including GP. In doing that, GP has become an alternative channel for the marginalized population to exert their power over the local political and service providing institutions.

Delegation and better performing Powers:

With the influencing of members of CBOs specially elected women members of Grama Panchayat shall have powers to do all acts necessary for or incidental to the carrying out of the functions entrusted, assigned or delegated to it and in particular and without prejudice to the forgoing powers, to exercise all powers specified under this Act. Cheques for payment have to be signed jointly by the President and Panchayat Development Officer.

Where the relationship between the two is not cordial, the Deputy Commissioner (DC), in his capacity as Inspector of Panchayats can designate any other member of the GPs as joint cheque signing authority along with the President. The GPs do not need external approval for taking up works up to Rs. 5.00 lakh from their general fund. The GPs have been given necessary delegation of powers to enable them to attend to repairs and maintenance of hand pumps, power pumps and street lights promptly. They can buy street light materials meeting the prescribed quality norms on their own.

Conclusion:

Democratic nature of leader selection, proactive role in mass mobilization and promotion of knowledge-based participation can help a CBO to become one true people's organization. With all these positive attributes, Holalkere taluk GPs has been successful in promoting mass participation of the community people in various decision-making forums of PRIs. As an informed citizen group, GP members both actively participate and motivate other community people to participate towards ensuring a transparent and accountable local governance system.

However, the sustainability question of this initiative has not been gone through serious test yet, though the political sustainability of Holalkere taluk GPs seems to be attained so far as it has been well rooted within the society. Deceptively, effective participation of all members and partnership with all other stakeholders can help PRIs like GP, Federations and SHGs becoming viable community organization for the poor and marginalized in the long run for empowerment of rural community.

References:

1. Acemoglu and Robinson (2008) discussed how PRIs shape political institutions and distribution of resources.
2. Braunfels (2014) emphasized the importance of PRIs in regulating power distribution and economic institutions.
3. Lam (2010) mentioned the significance of women SHGs in shaping political incentives within PRIs.
4. According to Islam (2015), Stoker (2011), and Vadeveloo and Singaravelloo (2013), strong local governance fosters community development and accountability.
5. Abegunde (2009) and Datta (2007) highlighted the role of NGOs in promoting people's participation in PRIs through CBOs.
6. Putnam (2000) and Wahab (2000) discussed the early stages of CBOs facilitated by external organizations.
7. Mansuri and Rao (2004) explored the long-term independence of some CBOs.
8. Rahman and Ahmed (2015) noted the gaps and weaknesses in Karnataka's PRIs despite government reforms.
9. Thompson (2013) observed the contributions of CBOs in managing natural resources and community empowerment.
10. Kaufmann, Kraay, and Mastruzzi (2010) provided indicators for governance, such as voice and accountability, which PRIs have adopted.
11. Blair (2000), Center for Democracy and Governance (2000), Lok (2006), and Wilde et al. (2009) measured PRIs' service delivery and inclusion in decision-making.
12. S. M. Kamrul Hassan (2018) identified key indicators like participation, transparency, accountability, and pro-poor service delivery in evaluating PRIs.
13. Ashok Kumar and Dr. T. M. Mahesh (2013) reported on the composition of elected GP members in Karnataka.
14. Abdul Aziz (2002) indicated challenges like corruption and low accountability that affect PRIs in Karnataka.