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A Case Study on Social and Economic Development of Rural Areas over Last Three Decades: Bangladesh Perspective

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7 Abstract

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- 8 Bangladesh is an over populated country with an approximate population of 154.7 Million [1].
- Presently it is moving forward to catch the line of mid income countries from the low income
- country in a steady pace. This progress can be perceived from the improvement in the
- education, health, GDP, GNI as well as in other basic development indicators over the years.
- The main focus of this study is to find out the changes in the rural economic and social
- development over last three decades and appraise the situation of the rural areas (three
- 4 villages) comparing to the overall development of Bangladesh. As per World Bank report,
- 15 current primary enrolment is 114

17 Index terms—rural development, social development, economic development, development indicators, GDP, GNI.

1 Introduction

he world Bank report announced in June 2013 shows that Bangladesh had reduced the number of people living in poverty from 63 million in 2000 to 47 million in 2010 which indicates a significant progress towards the first Millennium Development Goal which is to eradicate extreme poverty and hunger. Gross National product per capita in Bangladesh is around 600 USD and it averaged 311.60 USD from 1960 until 2012 [1].Bangladesh is also making progresses in reducing its poverty rate and an average GDP of 5.5% has been also increased in the time period of 1994 to 2012 [2]. There has been a reduction of poverty by 1% of the population by each year since 1990. Most of these poor peoples are living in rural areas of Bangladesh with very little opportunities and lack of skills except the one they are doing for years to maintain their daily needs. Although the statistics of different organizations have been showing constantly that the number of populations living below \$1 earning per day has been reduced by almost fifty per cent, but this study focuses to identify the deficiencies of the rural people earnings to the average earnings of the country itself. Bangladesh is now a country with approximately 150 million populations and about 71.11% of the total population is living in rural areas [3]. Among these vast numbers of rural population about 36% of them are living under the poverty line [4]. They suffer from persistent food scarcity, inadequacy of land, paucity of potable water supply, lack of education, health and sanitation knowledge as well as serious illness or disabilities. There are also a large percentage of rural populations who are considered moderately poor. Although Bangladesh is progressing towards the mid income nations in a steady pace, rural peoples are far behind than the urban dwellers in every aspect of development. Their lack of knowledge, education, limited resources as well as limited water supply and health awareness are the main reason behind this variance in development. Even with this unfavourable living condition, they are not standing still and watching the progress of the country but are trying hard to improve their conditions within their limits. Their improvement in primary education over the years has been impressive.

Although there is lack of opportunity and inequity in education systems, the literacy rate of rural areas is booming through Technology. Technology helps the rural students to think that they are no less than any students who are studying at city schools and colleges which motivate them to work harder to achieve their goals [5].

2 II.

3 Methodology and Data Collection Procedure

This study has been conducted in three villages named Bhugli, Kawnia and Lakhsmipur. These villages are located in Mymensinghsadar Upazila in the district of Mymensingh (Latitude: N24° 51′9.155′′ and Longitude: E 90°12′56.068′′). Data was collected from mostly primary sources, which was collected directly from the villagers as well as some local representatives through face-to-face structured interviews. A total number of 30 respondents from these villages have been selected based on their age and number of years they are living in these villages. Most of these respondents are living in this area from their childhood and their families are living here for generations which ensure the real pictures of these areas during the study periods. As this study focuses on the social and economic development of this rural area in last three decades, the respondents selected are of age 50-60 years. They have been asked specific questions about the changes of their living conditions, main professions, sanitations, water supply etc. within the study period.

After collecting and processing of these raw data's within the study period, the calculation of the development indicators has been done and compared with the development of Bangladesh based on the World Bank report.

4 III.

5 Results and Discussion

Population of the study area has not been changed significantly over the study period. Although the population of Bangladesh has been increasing at a steady pace, but due to the death of the older peoples and the movement of the adults towards the urban areas helping to keep the population approximately same over the last three decades. Total population of study area is about 300 approximately.

The age distribution of the populations shown in the table-1 represents the large numbers of working age population in these areas. From the age distribution table, it can be inferred that about 60% of total population aged below 40 years and the percentage of population between 60-80 years is very low (about 8%) and there is no person who is 80 or more years old at present. Although local people confirmed that the villagers who have been deceased in the last 20 years are of mostly aged between 70-100 years. The reason behind long life of the last generation is very simple and straight forward to the villagers. They think that at the past, there was less contamination in foods; food supply was abundance as well as the environment was less polluted which ensured a long life. But presently it seems the life span of the population of the area has been decreased significantly. According to local people, this happens due to the contaminated foods and the scarcity of nutrition which were in abundance in the past. Among all the peoples, nearly 55% are men and the rests are women.

Next when they have been asked about the main professions and income sources of them, the response from these peoples are not unusual. The income sources of the families are different to each other. Most of the family's incomes come from the male head of the family and most females work as housewives and manage family and children. But in recent years it has been observed that female members also coming out to work or to help their husbands to ensure their family's prospect. Figure -1 shows that about 50% of the total families depend directly on agriculture for their living and about 20% (small business) or more families depend on agriculture indirectly because, small businesses in the study area are largely depended on agricultural products. Local people say that dependency on agriculture is decreasing over the years due to the unavailability of power sources, fertilizer and proper irrigation when needed. Also the increased cost of production and the uncertainty of the yield product market are also forcing the villagers to shift to other way of earning their livelihood. Although they are trying to moving forward to other professions, agriculture still remains as the major source of their incomes and as there is very little chance of the area to be industrialized soon, it will take time, better water supply system, education as well as development of human skills to be able to dependent in other profession. Along with income sources, water supply, sanitation and health awareness are some of the major defining factors of social prospects. As the survey results show the water supply system of these areas at present is not the worse of the country but there is enough space for improvement. Water is life and life on earth is linked to water. Our existence is dependent on water. In the recent past, peoples of this area were used to collect water from open dug wells for their drinking purposes and ponds and other surface water bodies for daily uses. In the nineties there were no such open dug wells in the study area but shallow hand operated tube well and three hands operated deep tube wells. Most of the people of the area used to collect tube well water only for drinking purposes but in the recent years they are changing that trends of water uses and also started to use tube well water for washing, taking bath, animal feeding and for other daily purposes because, nowadays it is almost obvious to have at least one tube well in every households. So it seems they are well prepared for their water demands. But when it comes to the dry seasons all shallow tube wells are becoming useless for the past few years and numbers of deep tube wells are also not too much. On an average every five or six households use one tube well for their drinking water and they go back to their old trends to use tube well only for drinking water. Table-2 shows the sources of water of the study area in the last three decades and the limitations as well. To improve the water supply during dry season, rain water harvesting may be considered as one of the most important sources. The water can be stored, used for washing and cleaning purpose and most importantly to recharge the ground water. It can also help the villagers to live a sanitary life and keep them safe from waterborne diseases.

Sanitation and health awareness is the key factor of social class. These villages used to have small brushes here and there until past 5 or 10 years. Peoples of these villages also were not fully aware of sanitation and health problems due to open defecation. Due to this habit of excretion many of the villagers used to have water borne diseases by using open surface water bodies filled with contaminated water. Table-3 shows that in 1990s there were less than 20% of peoples used any type of latrines and about 30% of the total population were somewhat aware of sanitation but due to lack of motivation they did not use latrines. But due to government's good intentions and advertising programs as well as different non government's awareness programs, people's perspectives changed a lot and now about 95% of the total population uses latrines and almost all of them are aware of health and sanitation. Also they wash hands before taking meals as well after using latrines with hand washing liquids or soap which has reduced the water borne diseases significantly.

As they have been aware about their health, pure drinking water, and sanitation during the last decades, they have changed their social and economic conditions a lot. But they are not unaware of education too. Although the main income sources does not show any hint of the educational background of these areas, the study shows amazing records of primary education from the early nineties. The enrolment in primary schools data shows that these areas are ahead by significant percentage than the gross primary enrolment of the country itself. For an instance, in 1980 overall primary enrolment of the country was 70 per cent but these areas enrolment to primary schools was approximately 90 per cent of the population who were aged between five to seven and this data was collected by inquiring the information about the basic literacy of the peoples aged around 40 years old. Moreover that, enrolment in secondary education was also good which is clear from the table-4. But the percentages of drop out from the secondary schools were significantly high during the period of 1980 to 2000. In this time period, the percentage of drop out students has been decreased in a steady pace and now it is minimized to its optimum. Although the primary education and secondary education rate is fair enough for a rural area, the percentage of enrolled students in primary schools who enrolled or completed higher education is very low. In 1980's about 5 per cent of the enrolled students in primary school had enrolled or completed higher studies which are rare but true scenario for the study area where the public concern about primary education is so decent. There may be a lot of reasons behind these huge numbers of high school dropouts but most important ones are, the limited knowledge about the higher study, the cost of higher study which is fearful to the rural people, the trend of following the parental business, the lack of opportunity available at the areas etc. But even after all these limitations people are now more cognizant about their children's future and also aware of the benefits of higher studies which includes but not limited to the financial benefits but also the social status of a family. The recent data shows that about 50 per cent of the population enrolled in primary school are enrolling or completing the higher education which is a significant improvement in the last three decades.

From the above information and discussion it is clear that the villagers of these areas have been improved their living standard by a significant margin. They have been aware of the need of education, pure drinking water, sanitation to improve their living conditions for quite some times. They are trying to change their life standard by working hard, using their limited resources to educate their children and taking the advantage of government's scholarship program. This is very clear from the above statistics as well as on field experience. They are now thinking of the future of their children and dreaming for an educated life which they do not have. They want to provide the best opportunities for their children within their capacity. But the financial aspects of these areas are not satisfactory as education or sanitation or consciousness of pure drinking water supply. Their income per person in a year is far behind than the Gross National Income (GNI, US dollar). This situation has not been changed during the last three decades and even now they live under the poverty line which is clear in the figure-2. The main reasons behind this is, less opportunity of work, the lack of craftsmanship, trends of following their ancestors which preclude them from entering a new working environment.

6 Conclusion

The overall improvement of the study area in the fields of education, sanitation as well as public consciousness has been found impressive. At present, almost all of the families are using a safe and potable source of water, 100% students aged between 5-6 years are going to primary schools, more than ninety five per cent of the total populations are aware of sanitation and health. They have changed their social views about education, women empowerment, sanitation and many other old issues. But the improvement of their earning is not as satisfactory as other development indicators. They are still living under the poverty line and it will take a good amount of time as well as some thoughtful steps to improve their financial condition. Even after that the future prospect of the study area is better than many other rural peoples who have not achieved the prospect they have already grasped under their control. The number of educated person has been increasing in a balanced way which will change the livelihood of the peoples as well as will help them to cross the borderline of poverty and dream for a better future.

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Figure 1: Figure 1:

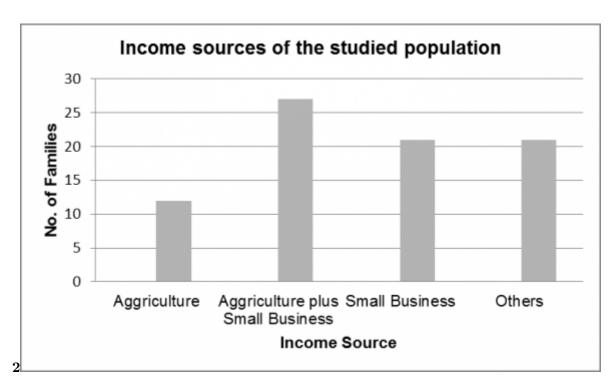


Figure 2: Figure 2:

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Age	No. of People	No. of	No. of
Range		Men	women
0 -<10	51		
10 -<20	21		
20 -<30	48		
30 -<40 40 -<50	54 54	159	132
50 -<60	39		
60 -< 70	9		
70 -<80	15		
Total	291	54.6%	45.4%

Figure 3: Table 1 :

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Time Period	d	No.	Source of water No. of Hand	No. of Hand	Rain	Electric
		of	10. of Hand	110. Of Halla	100111	Licetiic
		Ponds	operated	operated	Water	Motors
			Tube well	Deep Tube	system	/Pump
				well		
1980-1990		5	6	3		
1990-2000	2000-	5 5	$15\ 27$	4 7	Not Avail-	Not
2010					able	available
2010-2014		5	32	11		

Figure 4: Table 2:

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Time Period	No. of	No. of Households	Percentage of	Percentage of people
	Households	have a sanitary	people uses	aware of sanitation and
	have a latrine	latrine	latrine	Health
1980-1990	15	3	< 20	?30
1990-2000	36	9	28-30	45-50
2000-2010	45	32	65-67	?70
2010-2014	58	54	>95	95-99

Figure 5: Table 3:

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Time Period	Primary Education (% of population of	Secondary Education (% of primary educated population)		Higher Study (approximate % of population with secondary	
	official Primary			education)	
	Education Age)	Enrolment	Comp	lettorrolment Completion	
1980	90	70	30	5	2
1990	94	80	50	8	3
2000	100	100	60	14	10
2010	100	100	90	40	35
2014	100	100	100	52	50

Figure 6: Table 4:

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