

Chapter - VII

Social Facilities

1. Education

I. School Education

A. Current Scenario

Chennai, being the State capital, the educational facilities available are very good as well as specialized when comparing with the rest of the State. Some of the relevant statistics relating to literacy and educational infrastructure are given in the Table below.

Table No. 7.1: Literacy & Educational Infrastructure in the Districts Covered in CMA				
Sl.No	Description	Chennai City	Kancheepuram District	Thiruvallur District
1	Life expectancy at birth (yrs) (2005)	M-77.14% F-77.56%	N.A	N.A
2.	Literacy rate (2001)	76.81	67.84	67.73
	Male	81.10	74.73	74.98
	Female	72.35	60.78	60.26
3	Sex ratio (2001)	95.10	96.10	97.10
4	Gross enrolment rate (2005)			
	(a) Primary	93.97	93.88	96.17
	(b) Upper Primary	94.58	97.91	93.81
	Total	93.85	95.29	95.25
5	Gross Dropout rate (2005)			
	(a) Primary	6.75	3.61	7.43
	(b) Upper Primary	6.02	7.04	8.02
6	Pupil-teacher ratio (2005)			
	(a) Primary	47	42	42
	(b) Upper Primary	39	56	55
7	Enrolment of girls in primary schools as % of enrolment of boys (2005)			
	(a) Primary	97.14	96.49	97.00
	(b) Upper Primary	98.60	92.66	94.51

Source : General Education Statistics of Tamil Nadu, Directorate of School Education

B. Principal Stakeholders

7.2 The Directorate of School Education, Directorate of Elementary Education, Directorate of Matriculation Education, Directorate of Non-formal and Adult Education and the Directorate of Teacher Education, Research and Training are the principal

stakeholders from Government. There are a number of private organizations, trusts and charitable institutions in the field.

C. Projection

7.3 Because of family planning and population control measures taken in the country, and especially in Tamilnadu, from 1971 there is large variation in age structure including the school going children age group. It is estimated that in the future years the school going age group will stabilize at 7.5 % for primary school going age group, 5.19% for middle school going age group and 3.71% for high school going age group and 3.96% for the higher secondary going age group. Based on these estimates, the future demand for schools has been worked out and tabulated in table below.

Table No 7.2: Number of Schools Required 2026							
	2001 No. of Schools	Average No of Students 2001	Average Strength assumed	2011	2016	2021	2026
Primary	1427	370	500	1329	1493	1677	1885
Upper Primary	775	471	500	920	1034	1161	1305
High School	998	261	400	822	923	1037	1165
HSC School	662	210	400	438	492	553	621

D. Strategy

- a) Five year and annual plans should take into account the projection made in the Master Plan; decision should be taken on the share of government sector and public sector in the opening of new schools.
- b) Spatial distribution of schools as per standards should be ensured.
- c) Further reduction in the drop-out rate and increase in enrolment, especially of girls should be pursued.
- d) Recruitment of trained teachers should be done on a regular basis.
- e) In-service training at periodic intervals especially in science subjects and in English should be given priority.

II. Higher education:

E. Current Scenario

7.5 As regards collegiate, technical and other professional higher educational institutions in CMA, they serve not only the CMA region, but also the State apart from catering to the demand at the national level for certain specialized fields. However periodical reviews of change in demand for this category of educational institutions should be made at least once in 10 years and necessary infrastructures have to be provided. Attention should be paid to improving the quality of teaching in all subjects. Human resource development for the present and future demands and also research and development for economic development depend on investment and improvement on this higher education sector.

F. Principal Stakeholders

7.6 The Directorate of Collegiate Education, Directorate of Medical Education, Directorate of Technical Education, Directorate of Legal Education, Universities, etc. are the principal stakeholders from the Government sector. There are a number of private players running self-financing colleges and autonomous institutions of higher learning.

G. Strategy

- 7.7(a) Considering the emerging scientific and technological developments, specialized institutions, which can be supported by the metropolis should be assessed by a competent authority and proposed in and around CMA.
- (b) Location of a business school in Chennai like the IIM should be planned.
- (c) Considering the growth in the vehicle manufacturing units in and around Chennai a separate college for automobile engineering may be planned.

2. Health

H. Current Scenario

7.8 Planning for health becomes an integral part of metropolitan planning and health status of population is an important indicator of human resource development. Investments in health sector have direct relationship with longevity and improvements in physical and mental development of people. Tamil Nadu's health indicators place it near the top among the States of India. Policy of the Government is to provide a healthy and disease-free life to the people of Tamil Nadu.

7.9 Indian systems of medicine (Siddha, Ayurveda, Unani, Homeopathy and Yoga and Naturopathy) has regained its importance and the Government have attached special importance to the growth and development of Siddha system, which is part of Tamil culture.

7.10 The Tamil Nadu Health Systems Project (TNHSP), a 5-year project is being implemented since Jan. 2005, with a total outlay of Rs.597 crores. It aims to improve the effectiveness of the health care system, both public and private in the State through increased access to and utilization of health services (particularly by poor and disadvantaged) development of effective interventions to address key health challenges including non-communicable diseases, improved oversight and management of the health care system (both public & private), and increase effectiveness of public sector hospital services.

7.11 Chennai has established itself as the health capital of the country and is fast becoming the health destination of choice for people all over the world with its excellent facility, competent specialists and good nursing care.

I. Principal Stakeholders:

7.12 The Director of Medical & Rural Health Services (DMRH) is in charge of planning and implementation of programmes of medical services This Directorate provides the health services in the districts except in Chennai City. The Dept. of Public Health and Preventive Medicine (DPHPM) is providing primary health care services. Directorate of Medical Education deals with medical colleges and the Directorate of Family Welfare is in charge of planning and implementation of family welfare programmes. Directorate of Indian Medicine and Homeopathy deals with teaching as well as providing health care system of Indian Medicine. The National Institute of Siddha established at Tambaram developed at a cost of Rs.47 Crores is a joint venture of GOI and GTN and it has been established with the objective of imparting post graduate education in Siddha system and to provide medical care through Sidha system of medicine.

7.13 A large number of private hospitals deliver health care in CMA; Apollo Hospitals, Sri Ramachandra Medical College Hospital, Malar Hospital, Vijaya Hospital, Devaki hospital, CSI Rainy Hospital, CSI Kalyani Hospital etc. are the major hospitals. According to the approved Government list, as many as 130 private hospitals function in the City area itself.

7.14 From the Census figures, it appears that the total number of beds given relates only to Government hospitals and not private. Bed availability in private hospitals may be about 100% more than in Government ones.

J. Projection

7.15 Considering the longevity in life, improved health conditions predicated, it is assumed that the number of beds required in future may be at the rate of one in 500 population. The number of beds required for the projected population, for the year 2006, 2011, 2016, 2021, and 2026 are 15,800, 17,700, 19,900, 22,400 and 25,100 respectively.

7.16 The existing facilities particularly the specialized & higher order ones, serve not only the CMA population, but also the rest of Tamil Nadu and the adjoining states population; as regards private sector, it attracts patients from all over India and also some of the foreign countries. It would be difficult to assess the adequacy of these facilities. Because of accessibility of good infrastructure including specialist manpower, technology, private sector investments in health sector is high in recent times, and the trend is expected to continue.

K. Strategy

- 7.17a) A detailed study on the health infrastructure in CMA, delivery to poor, accessibility spatially, future requirements, contribution by private sector, modernisation requirements in govt. sector etc. has to be made which may be a basis for formulation of Master Plan for health infrastructure in CMA. The position may be reviewed every 10 years and suitable measures taken on health infrastructure investments.
- b) Considering that in the plan period, majority of population will be in the rest of CMA, Govt. / Govt. agencies should concentrate on provision of more higher order / specialty hospitals in the rest of CMA. For human resource development in this field, complementing colleges should be located in the rest of CMA.

3. Tourism

L. Current Scenario

7.18 Chennai Metropolitan Area is bestowed with a number of tourist spots ranging from renowned temples to beach resorts, heritage buildings and amusement parks. Chennai is also the cultural capital of the south where music and dance find a special place in the hearts of the people. The dance and music festival season in December attracts a number of non-resident Indians as well as foreigners. The tourist arrivals in Chennai has shown a steady increase in the last three years as seen in the table below:

Year	Domestic	Foreign	Total
2004	5531103	429988	5961091
2005	6028582	499071	6527653
2006	7312540	564780	7877320

M. Strategies

7.19 The Department of Tourism has the following proposals on hand to attract tourists

- i) Construction of a Convention Centre: With the advances in the industrial front, Chennai offers plenty of scope for MICE (Meetings, Incentives, Convention and Exhibitions) Tourism in a big way. Construction of a Convention centre within the CMA with suitable parking lots, infrastructure facilities, attractive layouts, etc. will attract business tourists in a big way.
- ii) Pleasure boating at Buckingham Canal: Cruise tourism can be enthralling and exhilarating for both foreign and domestic tourists. Buckingham Canal from Sholinganallur to Muttukadu can be an excellent route for pleasure boating facilities. Desiltation of the Canal, strengthening the bunds and beautification with avenue trees, ornamental shrubs and flowering herbs will render it a delight for the tourists.
- iii) Exhibition Ship: Exhibiting a ship for the tourists in a prominent place like Marina will be informative, educative and entertaining. This will be a value addition in fostering tourism in the City.

- iv) *Sun-et-Lumiere*: Chennai has got an interesting history after the advent of the British. It has played a significant role in the freedom struggle. Organising a sound and light show highlighting freedom struggle at Rajaji Hall with certain additional constructions may inculcate patriotic fervour in the young minds apart from alluring the tourists to visit this historic building.
- v) **Lighting of Memorials**: Illumination of memorials of great leaders can attract tourists in large numbers. Flood-lighting heritage buildings with more than 150 years of existence and monuments like the War Memorial would also attract tourists in large numbers.
- vi) **Art Gallery in Fine Arts College**: Showcasing the artistic wealth of Tamil Nadu by displaying the works of outstanding personalities in an art gallery would be a fitting tribute to the genius of several artists who have enriched the culture and tradition of Tamil Nadu. Different types of paintings that have evolved over a period of time, specimens of mural paintings, etc. can be part of the gallery.
- vii) **Butterfly Park and Night Safari**: Establishment of a Butterfly Park and introduction of Night Safari in Vandalor Zoological Park will attract a large no. of tourists to visit the Zoo in the night time.

7.20 The Department of Tourism may prepare a comprehensive tourism development plan to attract domestic as well as foreign tourists and to develop tourism infrastructure providing for hotel accommodation, bed and breakfast facilities, paying guest accommodation and transport facilities and implement within a timeframe.

4. Recreation

N. Current Scenario

7.21 Recreation is a broad function which may be organised or unorganised, indoors or outdoors, daily or intermittent, local or distant. Sometime even sidewalks could be an important recreational facility in a residential area. Television viewing has become a major daily recreational facility within houses apart from music, hobbies & crafts. Indoor recreation activity pursued by people include the ones provided by cinemas, drama halls, music sabhas (halls), clubs, indoor stadium, exhibition and fairs; outdoor recreation facilities includes parks, playgrounds, beaches, zoos etc.

7.22 In order to provide for the preservation and regulation of parks, playfields and open spaces in the State of Tamil Nadu, the 'Tamil Nadu Parks, Playfields and Open Spaces (Preservation and Regulation) Act, 1960' was enacted. Parks, playfields & open spaces are periodically notified under the Act by the local bodies concerned.

7.23 Chennai is endowed with the second longest straight sandy beach in the world, called *Marina*. Elliots Beach, another major beach in Chennai attracts large number of people. Thiruvanmiyur Beach, Kottivakkam Beach, Neelankarai Beach and small beaches at Thiruvottiyur are also being used by people in these areas. These beaches are used by the people throughout the year and the Marina & Elliots Beaches attract thousands of people every day.

7.24 In Chennai City, there are about 195 parks with extent varying from 150 sq.m. to 3.5 hectares and totalling to more than 60 hectares. Playgrounds maintained by the Chennai Municipal Corporation number more than 200 with a total extent exceeding 50 hectares. In the rest of CMA, unlike the City, the parks & playfields are a very few. A world class cricket stadium is proposed to be located near Mamallapuram by a private agency.

7.25 CMA also boasts of a number of theme parks developed commercially in and around CMA, which attract not only the local population but also tourists.

7.26 CMA is dotted with a number of lakes (with minimum water spread in non-monsoon seasons), which may be developed as recreational spaces in a planned way taking into account its environmental aspects also. It will not only help in conserving these water bodies but also preventing encroachments and pollution.

O. Strategy

7.27 Maintenance of existing parks / playgrounds and provision of new parks and playgrounds in the rest of CMA require attention. A database on the existing parks & playgrounds within CMA can be created which is required for planning and its development.

7.28 CMDA can create OSR fund out of the OSR charges collected apportioning proportionately with reference to the amounts collected in the jurisdiction of the local bodies concerned, reserving a certain percentage for overall recreational facility development at CMA level.

7.29 The local bodies concerned should identify lands for development as open spaces and initiate and complete action for acquisition/alienation and provide these facilities. For acquisition of lands for parks / playgrounds and development of new facilities project proposals can be prepared by the local bodies concerned and financial assistance availed from the said OSR Fund to be created.

P. Monitoring and Review

7.30 A committee to be known as “Shelter and Infrastructure Committee” with representation of Government and non-government stakeholders and experts will be constituted to monitor the implementation of policies and strategies in this sector including social facilities and to initiate such studies and assemble such information as needed for the purpose. This committee will meet at least once in three months or as many times as needed. It will draw up detailed terms of reference for its work in consultation with the concerned stakeholders.

7.31 This committee may work through special working groups created for the purpose for the different sub-sectors under it.