Understanding the scope of Corporate Social Responsibility (CSR) Intervention in the backward district of India

(Chatra District)





Submitted to CENTRAL COALFIELDS LIMITED (CCL)

Conducted By

National Corporate Social Responsibility Hub

Tata Institute of Social Science

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ABBREVIATIONS

CSR Corporate Social Responsibility

CPSE Central Public Sector Enterprises

CCL Central Coalfields Limited

NCSR Hub National Corporate Social Responsibility Hub

TISS Tata Institute of Social Sciences

DPE Department of Public Enterprises

SC Scheduled Caste

ST Scheduled Tribe

OBC Other Backward Class

PHC Primary Health Centre

SHC Sub-Health Centre

ODS Open Defecation System

RMP Registered Medical Practitioner

NPS Navsarjit Primary School

UMS Utkarmit Madhyi Vidyalae School

AWC Anganwari Centre

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EXECUTIVE SUMMARY

The following report is an outcome of the association between National Corporate Social Responsibility Hub (NCSR Hub) and Central Coalfields Limited (CCL) - a Public Sector Enterprise (PSE) and subsidiary of Coal India Limited, bound by a Memorandum of Understanding (MoU) signed between CCL & NCSR Hub. The report is an attempt to understand the current status, facilities and existing systems in the area of livelihood, health, water and sanitation, and education as well as to assess the needs of the communities in areas around Piparwar and Magadh & Amrapali areas in Tandwa block of Chatra District, Jharkhand. The study was conducted in 41 villages.

The report is a result of an in-depth secondary and primary data research of the identified villages. Data for the study was collected through quantitative (household survey, village profile) tools.

The main objectives of the study were-

- 1) To identify the community's needs in the area of health, education, livelihood, sanitation, drinking water and resource management.
- 2) To provide baseline information for the impact assessment of CSR interventions of CCL in studied villages.
- 3) To identify the basic facilities available in the studied villages.

Chapters from 4.1 to 4.41 do a situational analysis of the villages selected in afore mentioned areas. These chapters end with suggested areas of intervention/recommendation. Results of this analysis throw light on the following issues-

SUPPLY OF DRINKING WATER

As most of the community depends on open sources of drinking water, the lack of it is considered as one of the major issues in most of the villages. It is advisable if CCL can install water purifier in schools with continuous water supply. Majority of the villages demanded Hand Pump with deep boring for drinking water. Various watershed management techniques or rainwater harvesting can be considered to solve the problem of water.

Some villagers also expressed the demand for drinking water supply through pipelines to the household. CCL can collaborate with district and local administration to ensure the piped water supply. It can be done only through the convergence model where administration can take the responsibility of maintaining the piped supply system.

COMMUNITY TOILET

Community toilets need to be constructed in all 41 villages as people in all these villages go for ODS which gives rise to various health issues. It is a pre requisite to consult all the Panchayats and to request them to be an active partner of the project and to bear the responsibility of maintaining the toilets if provided by the company. The key stakeholders especially the Panchayat officials are in view that increasing the community toilets with proper water supply will help to improve the sanitation situation .Panchayats should be given the responsibility of community toilets.

MATERNAL HEALTH

Absence of institutional delivery and maternal health emerged as one of the issues of the community. Thus, they should be given importance under CSR work. Company can involve its existing Mobile Medical Van (MMV) in this particular CSR intervention. MMV can work in collaboration with Anganwadi Centers to address the lack of general health care and maternal health in particular. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women and children also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. Also CCL should prepare the schedule for a year well in advance regarding the dates on which MMVs shall be available in particular villages and that it should be shared with ASHA well in advance. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

LIVELIHOOD

Unemployment emerged as one of the major concerns for the community. Lack of market oriented skills is one of the reasons stated by key informants. The role of higher education is also emphasized as the demand for highly skilled workers is growing in the local market. Skills building in areas like computer education, hotel management, ticketing and interior decoration could be considered. Also, skill building in areas of sewing and stitching for women can be considered as a possible CSR intervention.

DRAINAGE SYSTEM

Construction of drainage system was requested in majority of the villages where there is a problem of water logging especially during the rainy seasons. Various health related issues can be curbed by having better drainage system in the villages.

POLLUTION

Air pollution emerged as a major problem in the villages where transportation of coal passes through these villages because of which all respondents complained about the problem of dust pollution. It was found that villagers are suffering from breathing related problems, reportedly caused by dust and pollution. Reduction in air pollution can be taken as one of the major projects of CCL where it can try to reduce pollution through plantation and installing Water Sprinklers. Starting a major drive for tree plantation and involving schools and other stakeholders including the administration can be one of the approaches to address this.

1. INTRODUCTION

1.1. NATIONAL CORPORATE SOCIAL RESPONSIBILITY HUB (NCSR HUB)

In the wake of rapid globalization and pressing ecological issues, the perception towards the role of corporate in the broader social paradigm is undergoing a sea change. In the recent years, society and the state have put forward an expectation before public sector corporate to integrate the social responsibility aspects in their business persuasion. This scenario not only affects large scale public sector undertakings, but also includes firms of small scale. The underlying assumption that Corporate Social Responsibility (CSR) is one way through which companies can demonstrate their commitment towards being socially responsible. In fact, CSR as an integral aspect of corporate has a double edged effect in terms of creating goodwill for the company and acting as a social and economic intervention to bring about large scale change in the life of people from different walks. It is in this context, Tata Institute of Social Sciences (TISS), Mumbai and Department of Public Enterprises (DPE), Government of India have come to realize that there is a need to have centralized system where core functions of CSR including learning and knowledge dissemination take place. As a result, TISS, a pioneer educational institution in social sciences with decades of experience in teaching, research, publications, and field interventions has come forward to host the National CSR Hub. This Hub is coordinated at the School of Management and Labor Studies (SMLS) at TISS. The Hub carries out activities in a partnership mode i.e. TISS, civil society organizations, and the concerned PSEs. Broadly, core functions of CSR Hub at TISS include inter alia Research, Publication and knowledge dissemination, Capacity Building, and Advocacy¹.

The core objective of the CSR Hub is to enable PSEs to define, design and implement holistic CSR initiatives that are integral to its organizations' vision, mission, values and goals. In this endeavor TISS, the Ministry and the PSEs have a role in defining the next Generation CSR for the business sector as a whole at a national and global level for both the public and private sector²

¹ http://tisscsrhub.org/abous-us/from-the-directors-desk (Accessed on September 21, 2013)

² Source http://www.csr.tiss.edu/ (Accessed on September 21, 2013)

1.2. CENTRAL COALFIELDS LIMITED – THE HISTORICAL MARCH

Central Coalfields Limited is a Category-I Mini-Ratna Company since October 2007. During 2009-10, coal production of the company reached its highest-ever figure of 47.08 million tones, with net worth amounting to Rs. 2644 crore against a paid-up capital of Rs. 940 crores. Formed on 1st November 1975, CCL (formerly National Coal Development Corporation Ltd) was one of the five subsidiaries of Coal India Ltd. which was the first holding company for coal in the country (CIL now has 8 subsidiaries).³

Presently CCL Has:

No. of Mines	58 operative mines (21 underground & 37 opencast mines)		
Washeries	7 Washeries,		
	4 Coaking Coal Washeries (Kathara, Rajrappa, Kedla & Sawang)- throughput capacity of 9.35 MTPA		
	3 Non-Coking Coal Washeries (Piparwar, Kargali & Gidi) - throughput capacity of 11.72 MTPA		
Operating	6 Coalfields (East Bokaro, West Bokaro, North Karanpura,		
Coalfields	South Karanpura, Ramgarh & Giridih)		

1.3. MAJOR CSR ACTIVITIES OF CCL

- ➤ CCL has adopted 2 villages in the nearby vicinity in which Rs. 50 lac was provided for setting up a Solar Light Generating Unit.
- > CCL has organized 25 medical camps in the adopted villages, in which 2644 persons were benefitted.
- CCL has constructed/ repaired 17 rural roads, built/ repaired 21 rural schools and 20 community centers have been constructed/ repaired.
- ➤ 11 visually impaired girl students of Brajkishore Netrahin Balaika vidyalia have been adopted by CCL for their education and Healtyh Care.

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³ http://www.ccl.gov.in Accessed on 18/11/2013

- ➤ For providing the supply of drinking water, 84 works with respect to digging of hand pumps, installation of hand pumps, wells, ponds etc. were undertaken by CCL giving benefit to 105 villages.
- ➤ 335 health camps were organized in different villages of CCL in which 52309 people were benifitted.
- ➤ CCL has started operation JYOTI to eradicate reversible blindness in command areas and 2511 persons have been operated so far.
- An amount of Rs. 3.70 Cr. was provided to state Govternment for construction of Bridge on Ray-Tandwa- Khilari Road.
- ➤ Rs. 81.38 lac was provid ed to Jharkhand state for De-Silting of Kanke Dam, Ranchi ⁴

1.4. FULFILLMENT OF THE MANDATE OF DPE GUIDELINES

According to the Clause 1.8.1 of Guidelines on Corporate Social Responsibility for Central Public Sector Enterprises, "In fact, it is at the time of impact assessment that a well documented and detailed baseline survey or need assessment study done at the commencement of the activity, comes in handy for Comparison of data. Conversely, the absence of a baseline survey or a need assessment study is sorely missed at the stage of impact assessment." The study is an attempt to follow the guideline with earnest.

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⁴ http://ccl.gov.in/intiatives/coprate_social/corpte_social.htm Accessed on 29/10/2013

2. METHODOLOGY

2.1. CONTEXT OF THE STUDY

According to new CSR guidelines issued in the year 2010, CSR interventions should start with the identification of activities/projects based on the needs of the affected communities. This research study is an effort directed towards identifying needs of the communities in the project areas of CCL. The geographical locations were selected by the company Central Coalfields Ltd. (referred henceforth as CCL) in accordance of Article 2.1 of the CSR Guidelines 2010 which mentions 'CSR projects/activities may be undertaken in the periphery where a company carries out its commercial activities'. Emerging areas of intervention broadly are drinking water, sanitation, health and livelihood which are in accordance with the possible areas of CSR interventions (Annexure-I/II/III). It is to be noted that an effective CSR intervention is one which not only supports the communities in their socio-economic and environmental development but also builds a positive image of the company in the eyes of the masses. It is also important to avoid any kind of duplication in the intervention in order to provide maximum benefit to the communities. Collaboration with different stakeholders and especially with government departments, therefore, is a must.

2.2. OBJECTIVE OF THE STUDY

- > To assess the needs in the area of health, education, livelihood, sanitation, drinking water and resource management of the community.
- > To identify the basic facilities available in the villages.
- ➤ To provide baseline information for the impact assessment of CSR interventions of CCL in studied villages.

2.3. RESEARCH DESIGN

The research design of this study was exploratory. Exploratory studies help the researchers to acquaint themselves with the characteristics of a research problem. Data was collected on the basis of sample household survey as well as in depth interviews with 12 Panchayats and school authorities. Also, qualitative methods were applied as and

when required.

2.4. STUDY TOOLS

Primarily the tools employed in the study are quantitative tools; a Household questionnaire and Village questionnaire.

- **Household Questionnaire:** The Household Questionnaire seeks information from the household about their socio-economic background.
- Village Questionnaire: The Village Questionnaire obtains information about the facilities available in and around the village. The information was collected from the Panchayat level officials and people's representatives.

2.5. SAMPLING

The method of sampling used was *Systematic Random Sampling*. In this method of sampling, each and every unit has an equal chance to get selected in the sample. Systematic Sampling provides a more even-spread of the sample over the population list and leads to greater precision.⁵ In order to select the households to be interviewed; voter's list of every village was referred. From this list desired sample size was obtained.

2.6. RESEARCH PROCESS

After the research team received a list of villages from CCL, the study started with secondary data research. Government reports, official web portals and other official information were referred for the study. This was followed by primary data collection on field. After data was collected, it was analyzed with the help of SPSS. This was followed by data interpretation and report writing.

The study was facilitated by CCL. The Research team with the representative of CCL visited all the concerned Gram Panchayats and Block offices for the initial round of interaction before commencement of the study. This helped to build trust in the community and facilitated the entry of the research team in the studied villages.

2.7. ETHICAL CONSIDERATION

All ethical considerations were taken into account during the study. Prior to interview the consent was taken from all research participants. The respondents/research participants were informed about purpose of the study. They were also told that the data or

⁵Page 147, Social Work Research, School of Social Work, IGNOU, Ibid, Page 209

Hindi. Responde	ents were also giv	en a choice to	respond or not	respond to the qu	estions
asked.					

3. CONTEXT OF THE FIELD: SECONDARY DATA RESEARCH

3.1. ABOUT CHATRA (JHARKHAND)

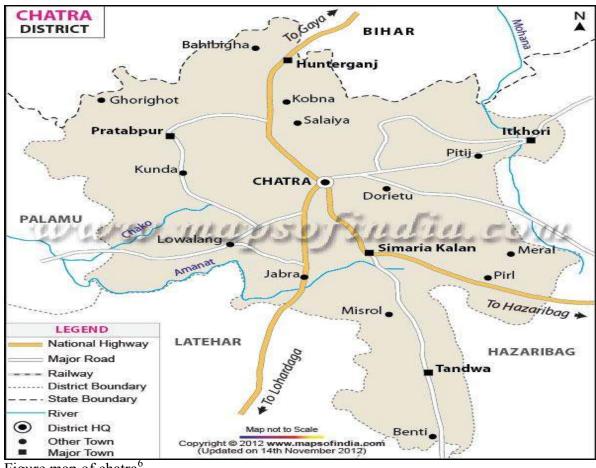


Figure map of chatra⁶

The district of Chatra, gateway of Jharkhand is abundant in scenic picnic spots and rich in fountains, waterfalls and in flora and fauna. Chatra is situated in the North-west of Jharkhand State at latitude of 23044'44"N - 24031'43"N and longitude of 84027'00"E – 85021'03"E. Chatra was carved out of Hazaribagh district as a separate district in the year 1991. It has largest area under forest in Jharkhand (236197 ha.) The district has also little reserve of minerals like coal, mica and limestone. Kunda fort nearby Pratappur, Bhadrakali temple of Itkhori block and Kalua hill are the places of historical importance in the district. It comprises one subdivision with 10 Community Development Blocks,

⁶ http://www.mapsofindia.com/maps/jharkhand/districts/chatra.htm Accessed on 27-10-2013

viz. Itkhori, Chatra, Hunterganj, Pratappur, Simariya, Tandwa, Kunda, Lawalaung, Giddhaur and Pathalgadda. There are altogether 159 village panchayats and 1479 villages in the district. Total population of the district is 1,042,304 (2011 census). The district has a population density of 275 inhabitants per square kilometre (710 /sq mi). Chatra has a sex ratio of 951 females for every 1000 males,[6] and a literacy rate of 62.14 %. The population of Scheduled Castes and Scheduled Tribes is 255884 and 30251 respectively.⁷

3.2. GEOGRAPHICAL LOCATION

Chatra district is located in the Hazaribag plateau. It is bounded by the district of Gaya of Bihar state in the north, Palamu district in the west and Latehar in the South and Koderma and Hazaribag district in the East. Major parts of the geographical area of the district are formed of red laterite acidic soil. The inhabitants of this area depend primarily on agriculture and forest products for their livelihood. Almost 90% of the total population depends on agriculture. The main crop of this area is paddy. The main forest products are Mahuwa, Chironjii, Lah, Kendu leaves, Jack fruit, Black berry etc.

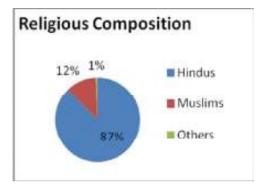
3.3. CLIMATE

The district receives an annual rainfall of 1250 mm. and most of the rainfall occurs during the rainy season. During winter season the area receives 1 to 2 mm rainfall. The mean annual temperature remains about 25C but in summer season it reaches up to 46C and in winter season it comes down to 2 to 30C.

3.4. AGRICULTURE AND LAND USE:

The forest is full of variety of medicinal plants, kendu leaves, bamboo, sal, teak and other timber species. Major crops grown in the district are rice, wheat and pulses. Only 12.21 percent area of agricultural use are net irrigated and major source of irrigations are well

and tube wells. Major crop of Chatra is Paddy and it is cultivated on 33000 hectares followed by Maize which is grown on 5080 Hectares. The other crops grown are wheat, pulses and vegetables.



⁷ http://chatra.nic.in/profile.html Access on 29/10/13

3.5. RELIGIOUS COMPOSITION

Hindus consist of 87% of total population, Muslims consist of 12% of total population besides other religious groups consist of only 1% of the total population of Chatra.⁸

3.6. STATUS OF EMPLOYMENT UNDER MGNREGA⁹

Households issued job cards#	157,412
Cumulative person days employment generated#	951,008
Households completed 100 days employment#	178

3.7. HEALTH FACILITY IN THE DISTRICT

TYPE OF HEALTH CENTRE	NUMBERS
MATERNITY HOMES	2
FAMILY PLANNING CENTRE	15
TB CENTER	4
OTHER CENTER	15
SUBSI. MEDICAL PRACTIONER	3
REGD. PRIVATE PRACTIONER	41
NURSING HOME	0
DISPENSERY	15
PRIMARY HEALTH SUBCENTRE	42
HEALTH CENTRE	16
CHILD WELFARE CENTRE	5
MAT. & CHILD WELFARE CENTRE	12
HOSPITAL	14
PHC	16

⁸ http://www.atmachatra.org/SREP_Chapter%20III.pdf Accessed on 29/11/13

⁹ http://chatra.nic.in/census.html Accessed on 29/10/2013

3.8. DEMOGRAPHY CHART

DESCRIPTION ¹⁰	2011
ACTUAL POPULATION	1,042,886
MALE	533,935
FEMALE	508,951
POPULATION GROWTH	31.77%
AREA SQ. KM	3,718
DENSITY/KM2	280
PROPORTION TO JHARKHAND POPULATION	3.16%
SEX RATIO (PER 1000)	953
CHILD SEX RATIO (0-6 AGE)	967
AVERAGE LITERACY	60.18
MALE LITERACY	69.92
FEMALE LITERACY	49.92
TOTAL CHILD POPULATION (0-6 AGE)	195,321
MALE POPULATION (0-6 AGE)	99,312
FEMALE POPULATION (0-6 AGE)	96,009
LITERATES	510,061
MALE LITERATES	303,902
FEMALE LITERATES	206,159
CHILD PROPORTION (0-6 AGE)	18.73%
BOYS PROPORTION (0-6 AGE)	18.60%
GIRLS PROPORTION (0-6 AGE)	18.86%

http://www.census2011.co.in/census/district/94-chatra.html

4. VILLAGE ANALYSIS

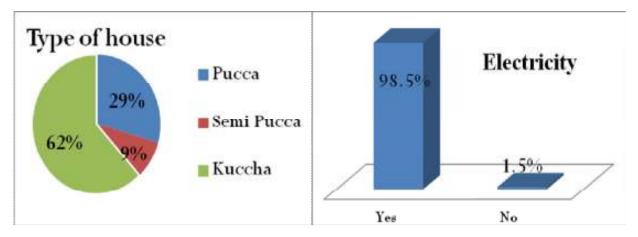
4.1. Bachra Basti Village

Caste		нн	Facilities	Facilities	Facilities located at the
Mahato(OP	3C)	225	located in	located within	distance of
Thakur(OB	BC)	15	ndHa ana	5 KMs	more than 5 KMs
Karmali(S	C)	10	villages	Bus stop, public	more man 5 KMs
Kumar(OB	(C)	02		telephone	
Munda(S)	Γ)	0.2	Cement/ tar road, PDS	booth daily/evening	
			shop, grocery	market, weekly	
			shop.	market.	
YEAR		2011	,		Block development office, taluk
				Post office,	headquarters, district
HOUSEHOLDS		254		railway station,	headquarters,
DODIN IMON		1200	Gram panchayat office	police station, bank,	warehouse, APMC / mandi
POPULATION		1208		Pre-pri/nursery school,	Charitable primary, charitable secondary,
Religion	Hous	e holds	Govt. primary school.	govt. secondary school,	higher secondary school, degree college,
HINDU	254	The state of the s	private primary	private	ITI/ Polytechnic, VOC
	-04		school	secondary school	training centre
Crop Name		Area		Health sub	
Paddy		50		centre, pvt	
Pulse		10		Clinic(RMP),	
Maize		15		private clinic(MBBS/B AMS),	Primary health centre, CHC Gov gen
Soil Erosion	Yes			veterinary clinic, medical	hospital, private hospital, Ayush
Drought Proneness	Yes		ASHA worker, Dai	shop.	hospital.

Land Distribution (in Acres)					
Total Area Non-Irrigated Irrigated Grazing Forest Wasteland					
4105	1061	2957	49	2928	126

Figure poster 1: Bachra Basti

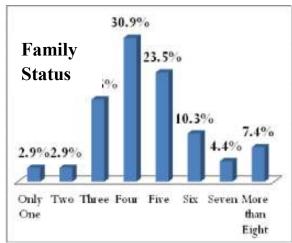
4.1.1. Household Status



In the village a majority of people reported that they have Kuccha Houses in the village. Approximately 62 percent of the people said that they live in Kuccha houses. Followed by which it was found that 29 percent of the people live in Pucca houses. The remaining 9 percent of the people said that they live in the Semi Pucca Houses. The important aspect is that in the village no-body reported of having an RCC Houses. Alongwith this, all the houses are registered and all the respondents said that they have their registered land papers. In the Village all the people said that they have electricity in their houses which is approximately 98.5 percent of the total. Only a minimum or very few percent of the people said of not having 'No Electricity', which is approximately 1.5 percent.

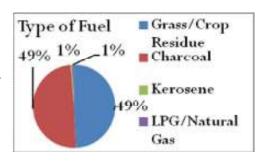
4.1.2. Family Size

In the Village it was found that majority of families in the village reported of having four members in the family. Around 30 percent people said that they have four members in their families, followed to which 23.5 percent of the people said that they have five members in the family. In the village there is a diverse range of family size ranging from only one to More than eight.

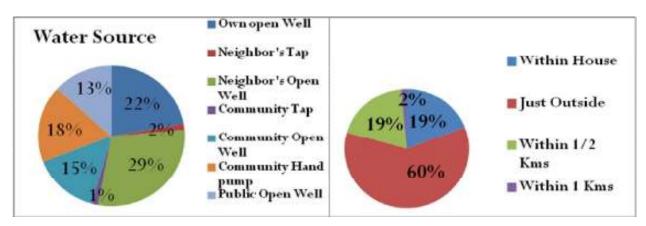


4.1.3. Type of Fuel

In the village two types of fuels are used which are Grass/Crop Residue and Charcoal which almost equal around 49 percent each. There are also other sources of fuel in the village which are Kerosene and LPG/Natural Gas. But these are very low in availability in the village approximately less than 1 percent in the village.



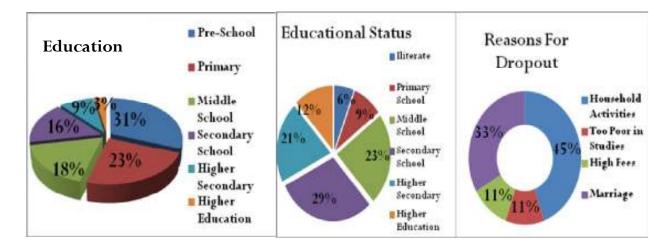
4.1.4. Water Source



Approximately 29 percent of the people said that they use Neighbor's Open well in order to get drinking and water for domestic purposes. In the village 22 percent of the people also have their own open well. Around 18 percent of the people are also dependent upon the Community Hand Pump for getting water. In the village people have a wide range of diversity of the water sources but then water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village are Community Open Well and Public open well which are 15 percent and 13 percent respectively.60 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc.

In the village 19 percent of the people have the water sources in their houses and similar to that another 19 percent of people said that they have water sources within ½ kms. The important aspect is that 2 percent of the entire population has to go within a kms to get water.

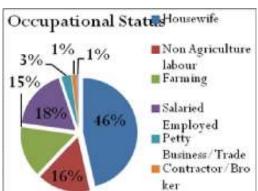
4.1.5. Education



With regard to education, majority of studied sample (approximately 29 Percent) were found to have completed their Secondary Level education. Followed by which Middle is level Schooling, which comprises of 23 percent. 21 percent of people also reported that they have completed their Higher Secondary education. In the village people also reported that 16 percent of population have completed their Middle Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 6 percent. With regard to those who have done their Higher Education is 12 percent in the village. In the village majority of students reported of being involved in their pre-schooling which is approximately 31 percent. Followed by which is those who are into Primary Level Schooling which is approximately 23 percent of the total. In the village percentage of students who are involved in the Middle Education is 18 percent. Higher Secondary and Secondary level schooling comprises of 9 and 16 percent respectively in both the standards. In the village getting involved in the household activities is the major cause for the Dropout. Following that 33 percent of the students left their education due to early marriage. The other causes of dropout are high fees and being too poor in studies because of which students leave their education.

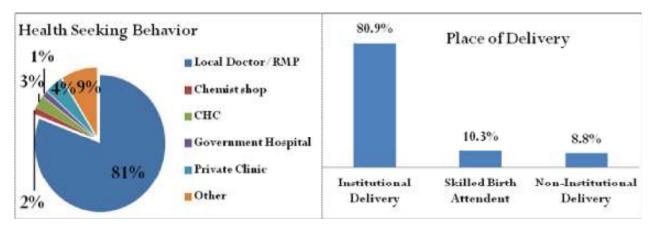
4.1.6. Occupation

Apart from the 46 percent women being housewives, in the village Salaried Employees are dominant which almost 18 percent of the population is. Approximately 16 percent of people are engaged in Non-Agriculture



Labour. Farming in the village comprises of 15 percent in the village which is followed by Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

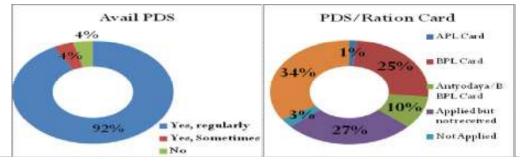
4.1.7. Health Seeking Behavior



In the village more than 80 Percent of the sample population prefers to go to the Local Doctor/RMP in case of any illness and disease. At the same time 9 percent of the people agreed that they go to the Other Sources for the treatment of their minor and major ailments. Followed by this was 4 percent of the sample agreed on visiting Private clinics in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 80.9 percent. Followed by this is a home delivery which is assisted by the Skilled Birth Attendant which is approximately 10.3 percent of the total. In the village around 8.8 percent of the deliveries are non-Institutional deliveries.

4.1.8. PDS/Ration Card Availability

Of the total, 34 percent of the sample does not have any PDS/Ration Card. 27 percent of people have applied but haven't received the card. 25 percent of the people have BPL Card and 10 percent have Antyodaya/BPL Card. Only 1 percent of the people have APL Card. Approximately 92 percent of the people have agreed that they avail PDS regularly.



4.1.9. Recommendations

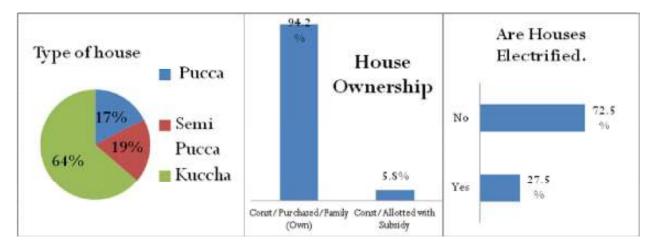
- ➤ Drinking water problem is the major problem in this village. People use hand pumps and open wells for drinking purposes. Water shed management can be an effective tool for making water available to the village by which the water table can reach at an optimal level and in the long run the problem of water scarcity can be dealt with and the problem of irrigating and drinking water can be solved. Portable drinking water facility should be provided to UMS Bachra and Anganwari Upper Tola Bachra. Anganwari Upper Tola has requested for boundary wall.
- ➤ In the village in order to improve the status of education educational materials shall be provided in the school in order to develop interest of the students towards education. Also the students and the parents should be provided awareness regarding the importance of education. As we can see from the above data the main reason for high dropouts is because students get involved in household activities to earn livelihood. CCL may consider providing scholarships to poor students to lessen the dropout rate in the schools.
- ➤ In Chatra District, Sports Competitions in schools should be conducted by CCL, and prizes shall also be distributed which will encourage students more towards developing their extra-curricular skills. Also CCL should identify the sportsman on the basis of their performance in particular sports with the help of teachers. Those found interested in sports and performing well should be linked to district or state sports authority wherein they can make their carrier in sports.
- As the data suggests, most of the villagers go for ODS. CCL may consider construction of community toilets as various health related issues are related to it. CCL should take Panchayat into consideration for identification of place for construction of toilet. Also Gram Panchayat be asked to run and maintain the community toilets.
- ➤ Boundary wall needs to be constructed in UMS Bachra and Anganwari Upper Tola.

4.2. Badgaon village

YEAR 2011	Facilities Facilities Facilities located
	located in located at the distance of
HOUSEHOLDS 1500	within
POPULATION 8090	villages 5 KMs more than 5 KMs Cement/tar
POPULATION 0090	road, bus Ranway station,
Forest Produce	stop, police station, bank,
Cultivation Yes	Weekly block development
Firewood Yes	market PDS
Fruits/ Leaves Yes	grocery shop, headquarters, district
Coal Collection Yes	
	t traces to
	centre house, APMC/Mandi
	Gram Post office, govt secondary
RELIGION House holds	panchayat cooperative school, pvt.
LIMEN TARR	office Secondary
HINDU 1100	society Charitable primary, charitable secondary,
Muslim 400	Pre-pri/ school, higher
	nursery secondary school, school, degree
Chief Crop Area	govt primary college, school, pvt ITI/Polytechnic,
Name	VOC training
Paddy 600 acres	Primary centre.
Maize 300	school Health sub PHC, CHC/ Govt.
Maize 300	centre, Pvt. Gen. hospital, Pvt. Clinic(RMP). Clinic(MBBS/BAM
CASTE HH	medical shop, S), private hospital,
	ASHA worker ayush hospital, veterinary clinic
Brahmin(Gen.) 25	Land Distribution (In Acres):
V 1 (000)	Land Distribution (in Acres).
The state of the s	Total Non- Irrigate Grazin Fore Wastela
Kumhar(OBC) 50	Area Irrigat d g st nd
Muslim(OBC) 400	ed
Kurmi(OBC) 400	2392 - 84 - 507 279

Figure poster 2: Badgaon Village

4.2.1. Household Status

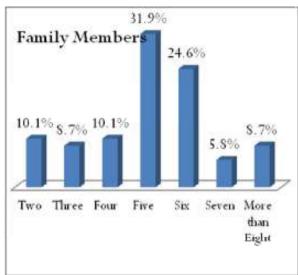


In the village a majority of the people reported that they have Kuccha Houses in the village. Approximately 64 percent of sample population said that they live in Kuccha houses.

It was found that 19 percent of the people live in Semi- Pucca houses. The remaining 17 percent of the people were found to be living in Pucca Houses. As seen in Bachra Basti, even in this village no-body reported of having any RCC Houses. Also, all the houses are registered and all the respondents said that they have their registered land papers. In the village around 94.2 percent of the people have reported that they have their own houses and remaining 5.8 percent of the people have been allotted with subsidy. Of the total 72.5 percent of the respondents agreed that they have electricity in their houses.

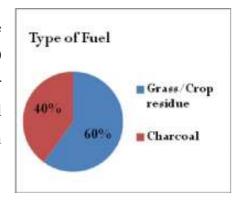
4.2.2. Family Size

In the Village it was found that majority of families (31.9%) in the village reported of having five members in the family. Followed by 24.6 percent of the people who have six members in the family. In the village there is a diverse range of family size ranging from two to More than eight.

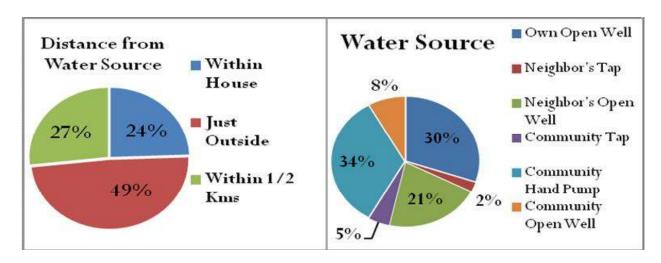


4.2.3. Type of Fuel

In the village two types of fuels are used which are Grass/Crop Residue and Charcoal which are around 60 percent and 40 percent respectively. There are also other sources of fuel in the village which are Kerosene and LPG/Natural Gas. But these are very low in availability in the village approximately less than 1 percent in the village.

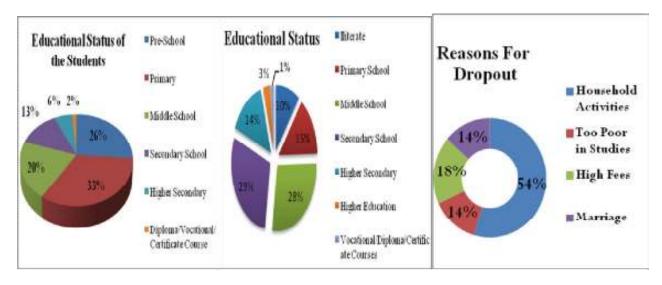


4.2.4. Water Source



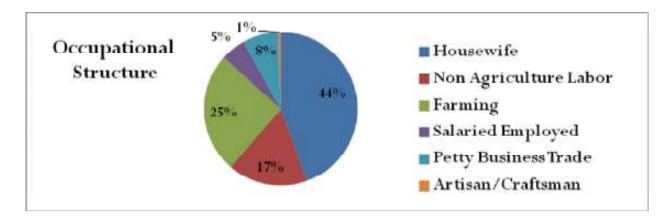
In the village 34 percent of the people use community Hand Pump to get water. Followed to which 30 percent of the people have their own open well which they use for getting water. 21 percent of people have said that they get water from the Neighbor's open well. Other sources are Community open well, Community Tap and Neighbor's tap. Approximately 49 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 24 percent of the people have the water sources in their houses and similar to that another 27 percent of the people said that they are having water sources within ½ Kms. The important aspect is that 2 percent of the entire population has to go within a kms to get water.

4.2.5. Education



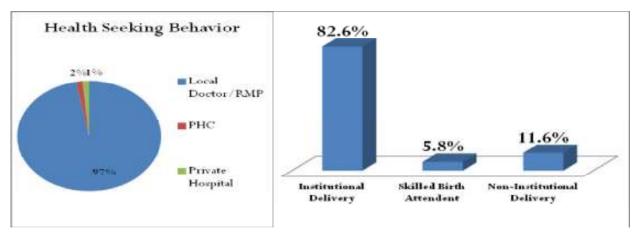
With regard to education, majority of the people which is approximately 29 Percent found to be in the categories that have completed their Secondary Level education. Followed by this comes Middle level Schooling, which comprises of 28 percent. In the village 15 percent of the people also reported that they have completed their Primary education. In the village people also reported that 14 percent of the people have completed their Higher Secondary Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 10 percent. With regard to those who have done their Higher Education is 3 percent in the village. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 33 percent. Followed to which is those who are involved in the Pre Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Middle Education is 20 percent. In the village Secondary and Higher Secondary level schooling comprises of 13 and 6 percent respectively in both the standards. In the village getting involved in the household activities is the major cause for the Dropout. 54 percent of the population dropped out for this reason. Following that 18 percent of the students left their education due to High fees. The other causes of dropout is being too poor in studies because of which students leave their education (14%) Early Marriage was also reported by approximately 14 percent of population as one of the reasons in the village

4.2.6. Occupation



Apart from the 44 percent women's reporting being Housewife, in the village those engaged in Agriculture are dominant which almost comprised of 25 percent of the people. Approximately 17 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Petty Business/Trade in the village comprises of 8 percent in the village which is followed by the Salaried Employees and Artisan/Craftsman which are approximately 5 percent and 1 percent respectively in the village.

4.2.7. Health Seeking Behavior

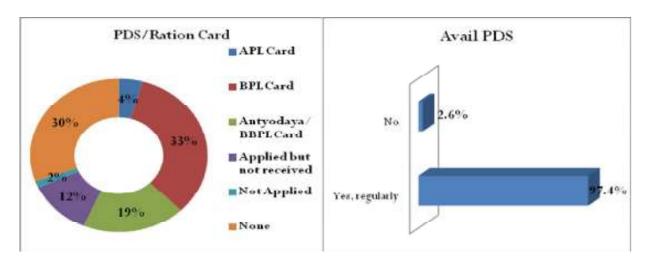


In the village more than 97 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 2 percent of the people agreed that they go to the PHC for the treatment of their minor and major ailments. Followed by this was 1 percent of people who agreed on visiting Private Hospitals in case of any health related issue

Almost 82 percent of the births which have taken place in the village are Institutional in nature and followed by which was 11.6 percent women who had non-Institutional deliveries. In the village there is also prevalence of skilled birth attendant which is around 5.8 percent of the total.

4.2.8. PDS/ration Card Availability

In the village around 33 Percent of the people have the BPL Card and 30 percent of the people do not have any card available with them. 12 percent of the people have applied but have not received the Card. In the village only 4 percent of the people have the APL Card with them. On asking to the people it was found that 97.4 percent of the people avail PDS.



4.2.9. Recommendations

- As per the discussion with villagers availability of drinking water has emerged as one of the major concern especially during summer season. The majorities of the villagers has their own agricultural land and are involved in various agricultural activities. Thus the problem of water can be solved by introducing the water shed management method/Rain Water Harvesting.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month

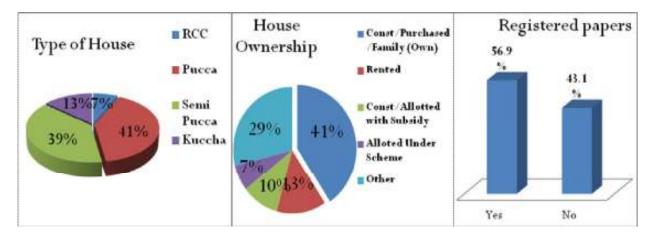
- where in people from all the command villages of CCL can come and take consultation.
- As per the data only 1% of the studied sample is involved in Vocational courses, CCL can tie up with some organization having expertise in it and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- There is high rate of dropouts in the village, reasons being poverty and early marriage. Implementing partner to be involved in educational intervention should also be asked to aware community regarding ill effects of early marriage and dropouts.
- ➤ Village reflects extremely discouraging figure in terms of sanitation. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ NPS (Amba Toli), Anganwari Centre (Amba Tola) and AWC Nayak Tola has requested for drinking water facility.
- Saraswati Public School, UMS (Ulay Hatu), Anganwari Centre (Amba Tola, Nayak Tola) have requested for construction of toilets.

4.3. Bahera Villlage

YEAR	2011	Facilities	Facilities	Facilities located at		
HOUSEHOLD	S 500	located in	located within	the distance of		
POPULATION	2700	villages Cement road, bus stop,	5 KMs	more than 5 KMs police station, block Railway station,		
Frest Pre	oduce	PDS shop, grocery shop,		Charitable primary, govt. secondary		
Coal Collection	Yes	DTP/ Xerox centre	Weekly marke	t		
Cultivation	Yes	Post office, gram		dev. Office, taluk headquarters, distt.		
Firewooood	Yes	panchayat office, bank,		Headquarters,		
		Pre-pri nursery		school, charitable		
		school,		secondary, higher sec.		
Chief Crop Name	Area	govt primary school, pvt.		school, degree college, ITI/Polytechnic,		
		Primary	Private	VOC training centre.		
Paddy	50Acres	school,	secondary			
RELIGION	House	Health sub centre, Private clinic RMP, medical shop,	school	PHC, CHC/ Gen hospital, Pvt. Clinic (MBBS/BAMS), private hospital, ayush		
	holds	ASHA worker,		hospital, veterinary		
HINDU	150	Dai		clinic.		
	100		d Distribution	(In Acres):		
		Total Non-	Irrigat	Grazi Fores Wastela		
MUSLIM	350	Area Irrigat	ed ed	ng t nd		
		479	132	105 28		
Migration I	Pattern					
Within the	state (No	on-Agricultural L	abour)	Yes		
		-Agri Labour)	COLUMN ASSESSMENT ASSE	Yes		
Outside St	ate (14011	Agri Labour)		162		

Figure poster 3:Bahera village

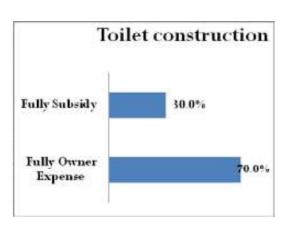
4.3.1. Household Status



In the village a majority of people reported that they have Pucca Houses in the village. Approximately 41 percent of the people said that they live in Pucca houses. Followed by which it was found that 39 percent of the people live in Semi Pucca houses. The remaining 13 percent of the people said that they live in the Kuccha Houses. The important aspect is that in the village only 7 percent of the people reported of having an RCC Houses. Along with this, 41 percent of the houses are Constructed/Purchased or owned by themselves. 29 percent of the houses come in the category of other followed to which 13 percent are the rented Houses and other 10 percent are the rented houses. 7 percent of the houses are allotted under the schemes. In the village approximately 57 percent of the houses are having registered Papers.

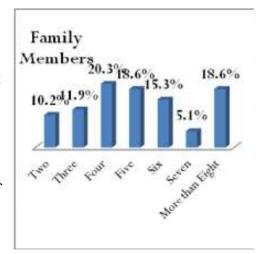
4.3.2. Sanitation

In the village 60 percent of the people having toilet facility in their houses reported of having Flush toilet and remaining 40% said that they have Pit toilet in their houses. It was also found that out of those people who had toilets 70 percent of toilets were constructed with their own expenses and remaining 30 were provided full subsidy.

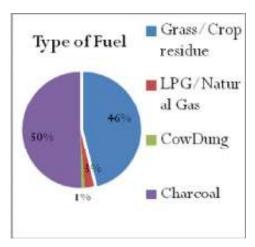


4.3.3. Family Size

In the village on an average four to five members are there in the family which was reported by around 21 and 19 percent of the people respectively. Followed by which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 15.3 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.



4.3.4. Type of Fuel

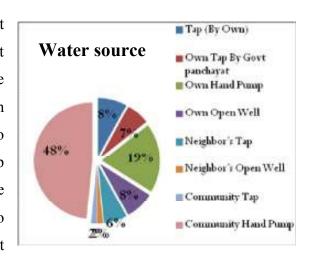


In the village mostly charcoal is used as a major fuel as 50 percent of the people have reported of using it. Followed to which we have the Grass/Crop Residue which is used by approximately 46 percent of the people.

There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but a small number uses them.

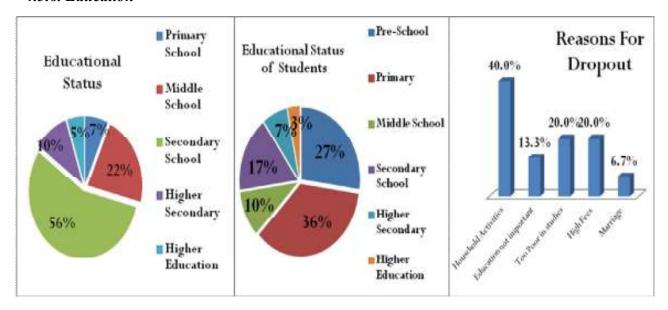
4.3.5. Water Source

Approximately 48 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 19 percent of the people also have their own Hand Pump. Around 8 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not



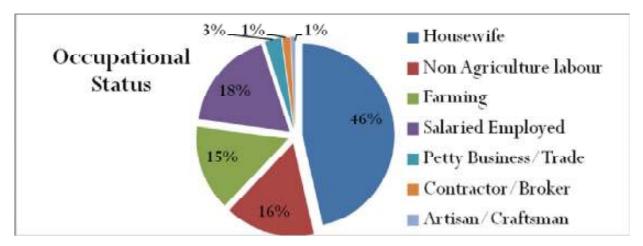
available throughout the year. Other sources available in the village are Neighbor's Tap and Own Tap Provided by the Government or Panchayat which are 6 percent and 7 percent respectively. Other remaining sources are Neighbor's Open Well, Community Tap etc.

4.3.6. Education



With regard to the education majority of the people which is approximately 56 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 22 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of studying in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 27 percent of the total. In the village percentage of students who are into Secondary Level Education is 17 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 7 percent respectively in both the standards. In the village the major reason for which the students left education was due to getting involved in the Household Activities. Approximately 40 percent of the students said that they left education due to getting involved in the Household Activities. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, High Fees and Marriage.

4.3.7. Occupation



Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people.

Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

4.3.8. Health Seeking Behavior



In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village.

4.3.9. Recommendations

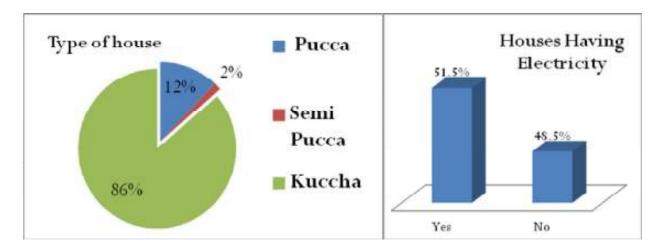
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ In the village in order to improve the status of education, educational materials shall be provided in the school in order to develop interest of the students towards education.
- ➤ 40% of the studied sample left schools because of household activities as they are poor. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Imadul Uloom Madrasa and Anganwari centre Bahera have requested for drinking water facility.
- ➤ Community has mentioned sullage nuisance as the major problem during the interview. The demand for drainage system is quite evident from the community and same can be taken up under CSR work.

4.4. Banhe Village

YEAR	2011	Facilities	Facilities	Facilities located at
HOUSEHOLDS	185	located in	located within	the distance of
TIGOGETIGEES	100	villages	5 KMs	more than 5 KMs
POPULATION	980		Bus stop, daily/ evening	
Public/Commo	on 00		market, weekly market,	
HH Tap Connections	00		PDS shop, Grocery shop,	Health sub centre, PHC, CHC/Govt.
Forest Pro	oduce	Cement/tar road	DTP/Xerox centre.	Gen. hospital, Private
Coal Collection	Yes		Private primary school,	Post office, railway station, police
Chief Crop	Yes Area		private secondary school,	station, bank, block development office,
Name Paddy	320 acres		Gram panchayal office	taluk headquarters, district headquarters.
RELIGION	House holds		higher secondary	Govt. secondary school,
HINDU	185	Govt. primary school	school, degree college.	ITI/Polytechnic, VOC training centre.
CASTE	нн	Private clinic(RMP).		clinic(MBBS/BAMS) , private hospital,
Mahato(OBC)	50	ASHA		veterinary clinic.
Ganju(SC)	50	worker, Dai		medical shop.
Sahu(OBC)	08	Land	Distribution	(In Acres):
Munda(ST)	12	Total Non-	Irrigated	Forest Wastel
Oraon(ST)	50	Area Irrigat		and
Singh(Gen.) Karmali(SC)	01 04	2601	24	1440 48
rtarman(50)				

Figure poster 4:Banhe village

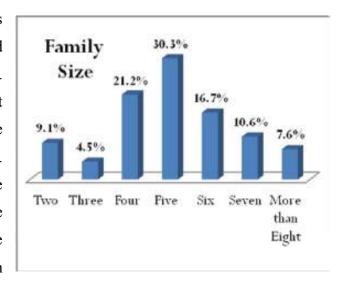
4.4.1. Household status



In the Banhe Village people reported that 86 percent of the houses are Kuccha and remaining 14 percent are divided into Pucca and Semi Pucca houses. 12 percent of the houses are Pucca and 2 percent of the houses are Semi Pucca. In the village no RCC made Houses were found as per reported by the people. Along with these the important aspect of the houses in the village is that all the houses are owned by the people themselves, nobody in the village reported of staying in the rented houses or allotted under any schemes as such. On asking the people with regard to the registered papers of houses all respondent have agreed on having it. With regard to having electricity in the houses approximately 51.5 percent of the houses have said that they have it in their houses.

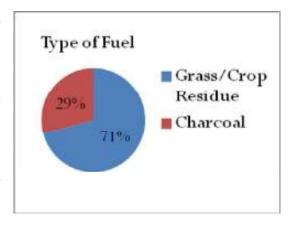
4.4.2. Family Size

In the village on an average five members are there in the family which was reported by around 30 percent of the people. Followed to which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 16.7 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.

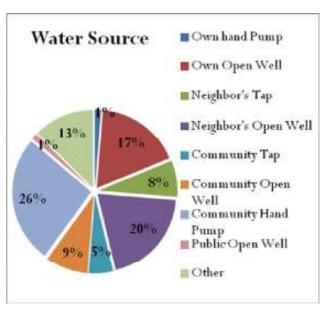


4.4.3. Type of Fuel

In the village mostly Grass/Crop Residue and Wood is used as a major fuel as 71 percent of the people have reported of using it. Followed to which we have the Charcoal which is used by approximately 29 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they very less in Prevalence.



4.4.4. Water Source



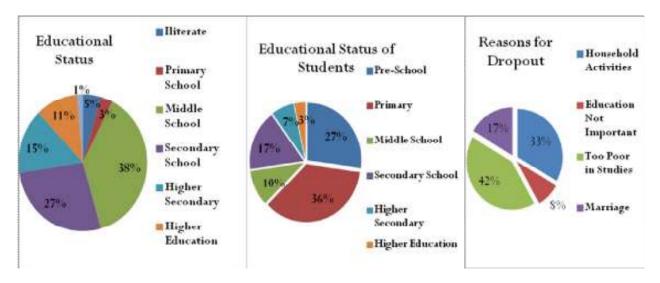
Approximately 26 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 20 percent of the people also have their own Neighbor's Open Well. Around 17 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available

throughout the year. Other sources available in the village Community tap, Community Open Well, Those drawing water from Neighbor's Tap etc but their availability is very low such as 9 percent, 8 Percent and 5 percent respectively.

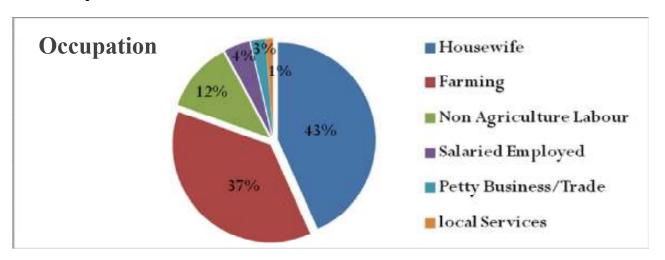
4.4.5. Education

With regard to the education majority of the people which is approximately 56 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 22 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village.

In the village majority of the students reported of being involved in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre-Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 17 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 7 percent respectively in both the standards. In the village the major reason for which the students left education was due to getting involved in the Household Activities. Approximately 40 percent of the students said that they left education due to being too poor in studies. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, High Fees and Marriage.

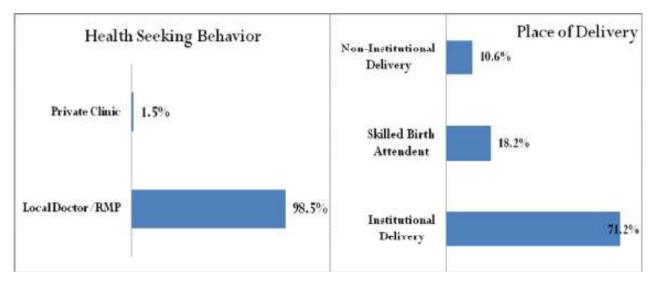


4.4.6. Occupational Status



Apart from the 43 percent women's reporting being Housewife, in the village Farming is the dominant occupation which is almost comprised of 37 percent of the people. Approximately 12 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Salaried Employed in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

4.4.7. Health Seeking Behavior

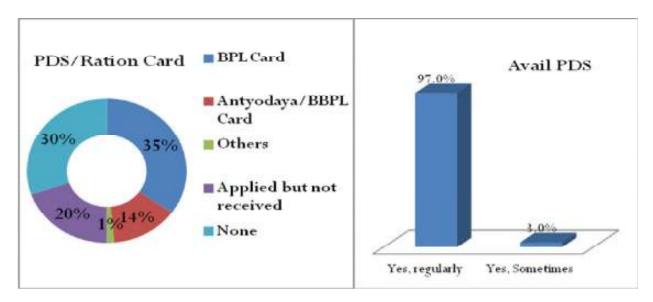


In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 98.5 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 1.5 percent of the people which is very low said that they visit to private clinic in case of any health related issue. The women who have given any birth in last three years reported that out of the total 71.2 percent of the births have taken place in any health Institution. In other words majority of the births are institutional in nature. Followed to that there is also prevalence of skilled birth attendant which is around 18.2 percent of the total births, in the village there was also identified the Non-Institutional Deliveries which was around 10 percent.

4.4.8. Availability of PDS/Ration Card

Thirty five percent of the people in the village have reported that they have their BPL card available with them. Similar to that 30 percent of the people also said that they do not have any card with them. Along with that, 20 percent of the people also reported that they have applied but haven't received their card.

Those having the Antyodaya/BPL Card are very low in percentage such as 14 percent of the total. Of the total 97 percent of the people reported that they avail PDS regularly.



4.4.9. Recommendations

- As the data suggests only 3% of the studied sample go for higher studies. 33% of the studied sample left education because of various household activities. CCL can introduce scholarships for poor and needy students so that they can continue their education.
- ➤ Only 1% of studied sample are engaged in vocational courses. CCL can tie up with some organization having expertise skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Provisioning of teaching aids is requested with special focus on computer education to increase the qualitative aspect of the education as well as to provide them necessary exposure towards computer and internet. In the village at primary level and High School quarterly competitions shall be conducted by CCL and prizes shall also be provided which will encourage students more towards developing their extra-curricular skills.
- Anganwari centre Banhe has requested for drinking water facility.
- In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- > Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be

- taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets
- > During the interview the villagers have requested for construction of bridge on GHAHRI River because the village gets cut off from the rest of area during rainy seasons and they have to face a lot of problems during these days.

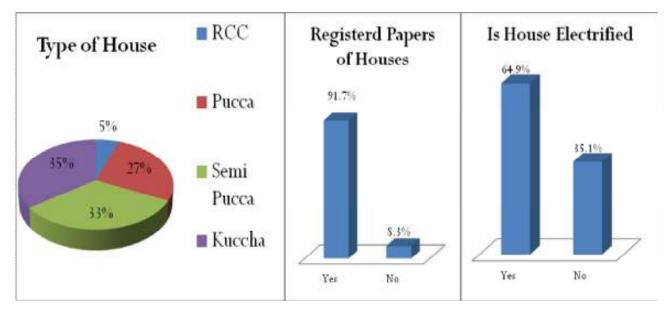
4.5. Barkute Village

YEAR 201	Facilities located in villages	Facilities located within 5 KMs	Facilities located at the distance of more than 5 KMs
HOUSEHOLD 114	Cement/tar road, bus stop,	O Nivio	Public telephone booth, daily/evening
POPULATION 560	Grocery shop, PDS shop	Weekly market	market, DTP/Xerox centre Railway station, police station, bank, block development office, taluk
Chief Area		Post office, gram panchayat	headquarters, district headquarters,
Name		office	warehouse,
Paddy 200acres			APMC/Mandi
raddy 200acres			Charitable primary, charitable secondary
			school, govt.
			secondary school.
RELIGI House			pvt.
ON holds			Secondary school, higher secondary
HINDU 114	Pre-		school, degree
	pri/nursery		college,
	school.,	20.020	ITI/Polytechnic,
	govt. primary school	Pvt. Primary school	VOC training centre
Forest Produce			Health sub centre, PHC, CHC/Govt.
Cultivation Yes			Gen. Hospital, Pvt. Clinic(RMP), Pvt.
Coal Yes			Clinic(MBBS/BAAMS), private
Collection Yes			hospital, ayush hospital, veterinary
Firewood		Medical shop, DAI	clinic.

	Land [Distribution	(In Acre	s):	
Total Area	Non- Irrigated	Irrigated	Grazing	Forest	Wasteland
264		22		16	80
Migration Pa Within the st	ittern ate (Non-Agricultu	ral Labour)		Y	'es
Outside state	e (Non-Agri Labou	r)		Y	'es
Within the st	ate(Agricultural La	bour)		Υ	'es

Figure poster 5:Barkute Village

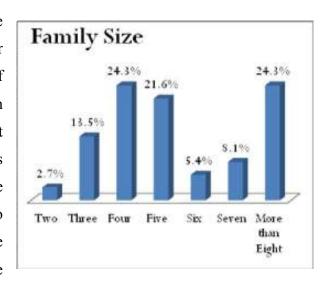
4.5.1. Household Status



In the village majority of the houses are Kuccha which is approximately 35 percent and 33 percent of the houses are Kuccha as per reported by the people of the village. In the village 27 percent of the people also have Pucca houses and remaining 5 percent of the houses are of RCC. With regard to the ownership of houses 94 percent of the respondent said that they have their own houses. Remaining three percent each are comprised of Rent free houses and those allotted under Scheme. In the village 91.7 percent of the people have the registered papers of their houses and with regard to having electricity, approximately 65 percent of the people have in their houses.

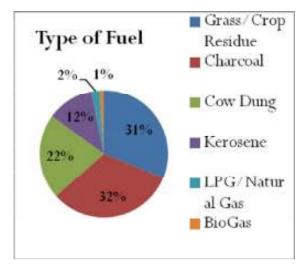
4.5.2. Family Size

In the Village it was found that majority of the family in the village reported of having four members in the family. Around 24.3 percent of the people said that they have four members in their families, followed to which 21.6 percent of the people said that they have five members in the family. In the village there is a diverse range of family size ranging from only one to More than eight. The important thing to be noticed in the village is that there is also large



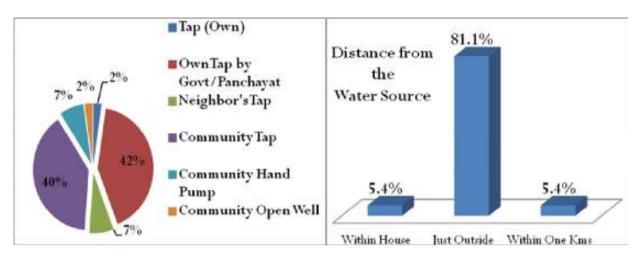
percentage of large families in the village.

4.5.3. Type of Fuel



In the village there are various types of fuels used such as Charcoal, Grass/Crop Residue and Cow dung. It was reported that 32 percent of the people used charcoal as fuel. Followed to which are Grass/Crop Residue and Cow Dung which are 31 percent and 22 Percent respectively. 12 percent of the people use Kerosene as fuel and other remaining sources are LPG/Natural Gas and Biogas.

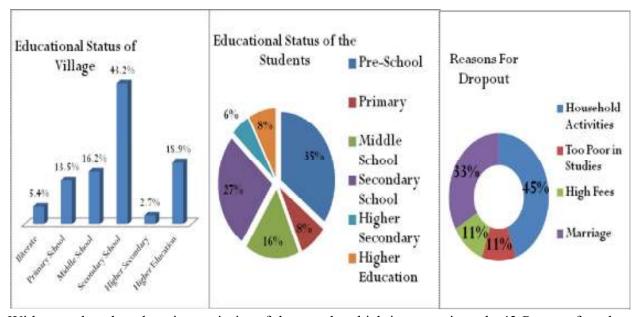
4.5.4. Source of Water



Approximately 42 percent of the people said that they use Own Tap provided by the Govt/Panchayat in order to get drinking and water for domestic purposes. In the village 40 percent of the people use Community Tap to get water. Around 7 percent of the people are also dependent upon the Community Hand Pump and Neighbor's Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Approximately 81 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 6 percent of the people have the water sources in their houses and similar to that another

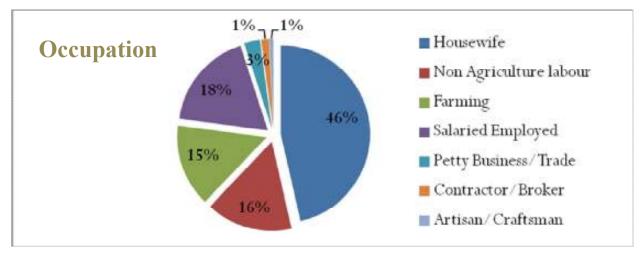
5 percent of the people said that they are having water sources within a Kms. The important aspect is that 6 percent of the entire population has to go within a Kms to get water.

4.5.5. Education



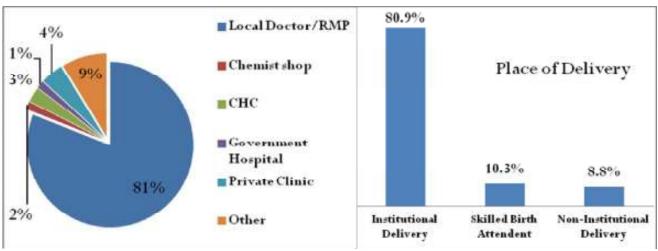
With regard to the education majority of the people which is approximately 43 Percent found to be in the categories that have completed their Secondary Level education. Followed to which the Higher Education, which comprises of 18.9 percent. In the village 16 percent of the people also reported that they have completed their Middle Level education. In the village people also reported that 16 percent of the people have completed their Middle Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 6 percent. In the village majority of the students reported of being involved in their pre-schooling which is approximately 35 percent. Followed to which is those who are involved in the Secondary Level Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Middle Education is 16 percent. In the village Higher Secondary and Primary level schooling comprises of 8 percent each in both the standards.nIn the village getting involved in the household activities is the major cause for the Dropout. Following that 33 percent of the students left their education due to early marriage. The other causes of dropout are High Fees and Being too poor in studies because of which students left their education.

4.5.6. Occupation



Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

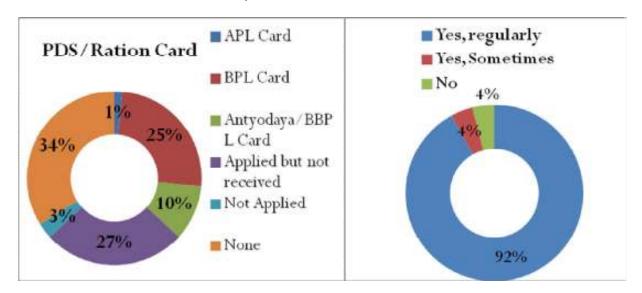
4.5.7. Health Seeking Behavior



In the village more than 80 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 9 percent of the people agreed that they go to the Other Sources for the treatment of their minor and major ailments. Followed to this it was also reported that 4 percent of the people agreed on visiting Private clinics in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 80.9 percent. Followed to which is

home deliveries which are assisted by the Skilled Birth Attendant which is approximately 10.3 percent of the total. In the village around 8.8 percent of the deliveries are non-Institutional deliveries.

4.5.8. PDS/Ration Card Availability



Of the total 34 percent of the people do not have any PDS/Ration Card followed to which is the 27 percent of the people who have applied but haven't received the card. 25 percent of the people have BPL Card and 10 percent have Antyodaya/BBPL Card. Only 1 percent of the people have APL Card. Approximately 92 percent of the people have agreed that they avail PDS regularly.

4.5.9. Recommendations

- In the village it was reported that majority of the people prefer going to the Local Doctor/RMP in case of any health related issue. The suggested strategy with regard to this is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- According to the data, 33% and 45% of the studied sample left their studies due to early marriage and other household activities respectively. Scholarships should be given to children from BPL families, from the time they enter secondary school. This initiative will lessen the financial burden from the families and give an encouragement to students to study further.
- ➤ CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- NPS Barkute has requested for toilet and drinking water facility with extra 3 class rooms.
- Anganwari centre has requested for toilet and drinking water facility.
- Village reflects extremely discouraging figure in terms of sanitation. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ During an interview with the villagers, they have requested for construction of Dam on *Sadbahni* River. If a dam is constructed on *Sadbahni* River, it can supply water to villages like Koed, Soparam, and Barkute for irrigation which in turn will solve the problem of water in these villages.

4.6. Benti Village

YEAR	2011
HOUSEHOLDS	1006
POPULATION	5286
Public/Common	00
Tap Points HH Tap	00
Connections	

	noids
HINDU	906
MUSLIM	100
Chief Crop Name	Area
Paddy	15

House

Total Area Grazing Forest

172

Land Distribution (In Acres):

1516

RELIGION

2800

Facilities Available in
the village
Samaaj Mandir
Cement/Tar Road
Bus Stop
Pre-Pri Nursery School
Govt Primary School
Public Telephone
Booth
PDS Shop
Grocery Shop
DTP/Xerox Centre
Post Office
Higher Secondary
School
Health Sub Centre
ASHA Worker
Dai (Trained/Untrained)

Facilities Existing within 5 kms. Post Office Bank

Facilities Existing more than 5 Kms Railway Station Police Station Degree College Block development Office Taluka Headquarters District Headquarters Charitable primary Govt Secondary School Charitable Secondary Medical Shop ITI/Polytechnic Vocational Training Centre CHC/Govt Gen Hospital Pvt Hospital Ayush Hospital Veterinary Clinic

Private Clinic

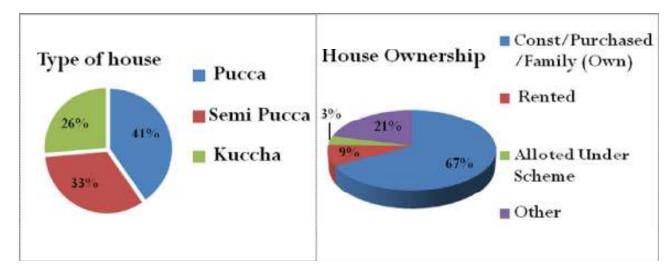
Migration Pattern		Forest Produ	ice
Within the state (Non-Agricultural Labour)	Yes	Coal Collection	Yes
Outside state (Non-Agri Labour)	Yes	Cultivation	Yes
		Firewood	Yes

Wasteland

139

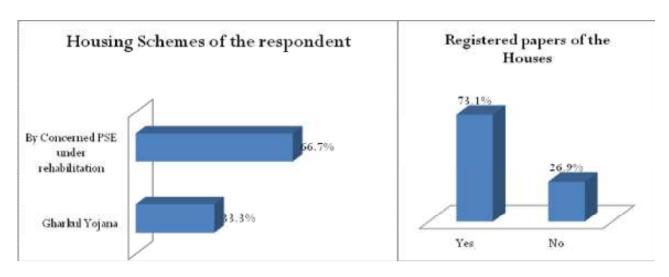
Figure poster 6:Benti Village

4.6.1. Household Status



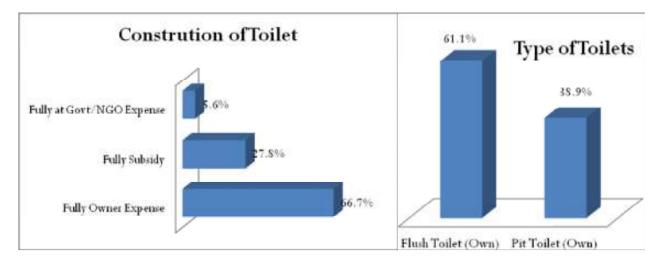
In the Benthi Village majority of the people reported that they have Pucca houses which are approximately 41 percent of the total. On the other hand 33 percent of the people also said that they have the Semi Pucca Houses in the village. The remaining 26 percent of the total houses fall in the category of Kuccha houses. Similar to that 67 percent of the people said that they own their houses, remaining 21 percent of the people's houses fall in the category of other.

House Schemes and Registered Papers of the Houses



In the village of the total houses which have been allotted under any governmental scheme and other category 66 percent are by Concerned PSE under rehabilitation and remaining have been given under Gharkul Yojana.

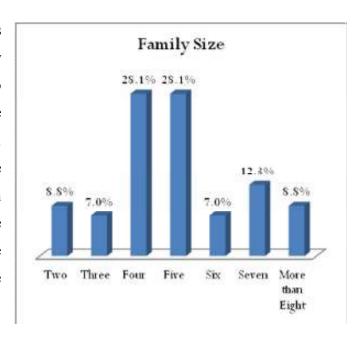
4.6.2. Sanitation



In the village those people are having the Household toilets it was found that 61.1 percent of the total are having flush toilet of their own and remaining 39 percent of the people said that they have Pit toilet of their own. Those having toilets in their houses it was found that 66.7 percent of the people have toilets at their own expense and around 27 percent are fully subsidized.

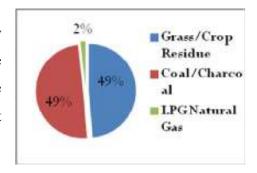
4.6.3. Family Size

In the village on an average four to five members are there in the family which was reported by around 28 percent of the people. Followed to which it was also found that 12.3 percent of the total families have 7 members in their families. Approximately 7 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight. In the village 9 percent of the people said that they have more than 8 members in their families.

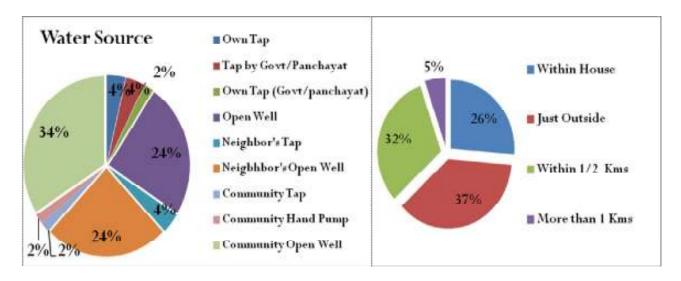


4.6.4. Type of Fuel

In the village grass crop reside and Charcoal are used by majority of the people. It was reported that 49 percent of the total people use Grass crop residue and wood as fuel in the village. In the village LPG/Natural gas is also used as fuel but it is very less which is around 2 percent of the total.

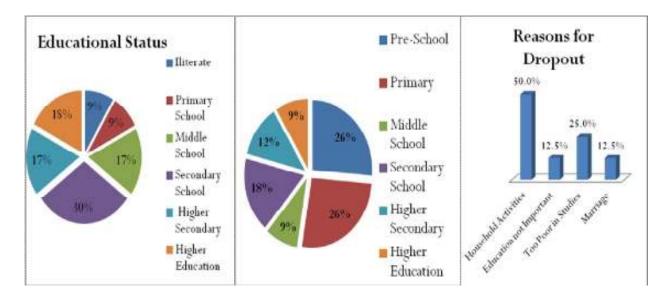


4.6.5. Water Source



Approximately 34 percent of the people said that they use Community Open Well in order to get drinking and water for domestic purposes. In the village 24 percent of the people also have the Open Well. Around 8 percent of the people are also dependent upon the Neighbor's Open Well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village are Neighbor's Tap and Own Tap Provided by the Government or Panchayat, Neighbor's Open Well, Community Tap etc. In the Benthi Village 37 percent of the total population have their source of water Just Outside their house which includes community Taps and Hand Pumps. Followed by that 32 percent of the people said that they have within ½ Kms. 26 percent of the people also said that they have their water source within house which includes household taps, Taps provided by the Government/Panchayat, Own Open wells and hand pump. In the village serious concern is that 5 percent of the people also have to go more than 1 Kms to get water.

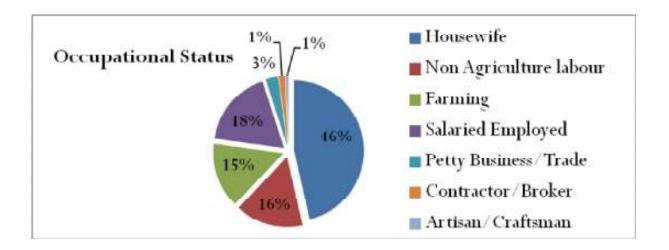
4.6.6. Education



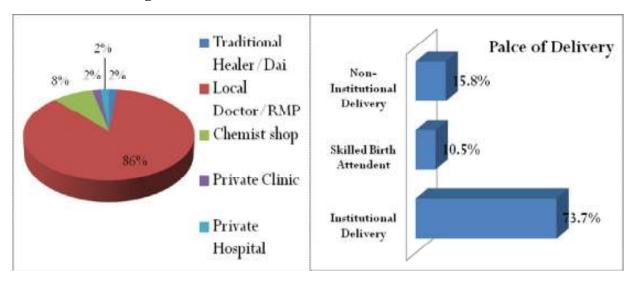
With regard to the education it was said that 30 percent of the total people have completed their Secondary Level Education. Followed to which 17 percent each have reported that they have completed their education upto Higher Secondary and Middle Level Education. In the village 9 percent of the people also reported of being Illiterate. On the other hand 18 percent of the people also said they have attained education upto Higher Education in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 26 percent. Followed to which is those who are involved in the Pre-Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 18 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 9 Percent and 12 percent respectively in both the standards. In the village on asking to the students who left their education in between due to some reasons is Getting Involved in the Household activities which are the major. Approximately 50 percent of the people have said that they left their education in between was due to pressure of household activities. Other dominating reasons for the dropout in the village were Being too Poor in studies, considering education not Important and Marriage. 25 percent of the people said that they left education due to being not good in studies, considering education not important and Marriage comprise of 12.5 percent each in both the category.

4.6.7. Occupation

Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.



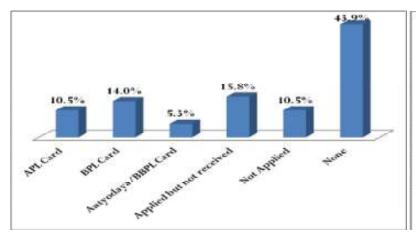
4.6.8. Health Seeking Behavior

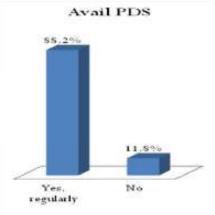


In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit to the Local Doctor/RMP.Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village. On asking the women about the place of delivery it was reported that out of total births in the village in the past three years 73.7 percent of the births have taken place in any health institutions. In other words 73 percent of the births are institutional in nature. In the village 16 percent of the total births are Non-Institutional in Nature. It was also reported that 10.5 percent of the births were attended by the skilled Birth attendant.

4.6.9. Available PDS/Ration Card and people availing it

In the village 49 percent of the people do not have any card with them. Followed to which 16 percent of the people have applied but haven't received it. With regard to avail it, 88 percent of the people avail it regularly.





4.6.10. Recommendations

- ➤ Education facility for the children- providing the village primary school with Educational Materials will be a very nice initiative to develop interest of the students towards education. It is important to have understanding about the social and psychological condition to ensure the success of school.
- ➤ 50% of the studied sample left schools because of household activities as they are poor. CCL can introduce scholarships for poor and needy students so that they can continue their education. Also 12.5% of the studied sample left education because of early marriages.
- ➤ UHS Benti, mini Anganwari center Pahan Tongri Jogiya, faces problems of drinking water and toilet facility. Teachers have requested for the teaching aids such as toys and books. CCL can help them by providing library which in turn will improve the quality of education. It was found in the village that no students are engaged in some vocational/Certificate courses. With the involvement of students in such courses can bring new and generate economic activities for the students in the village.
- ➤ During the interview Nehru Arts High School has requested for construction of extra 5 classrooms because they have to teach students in combined classes.

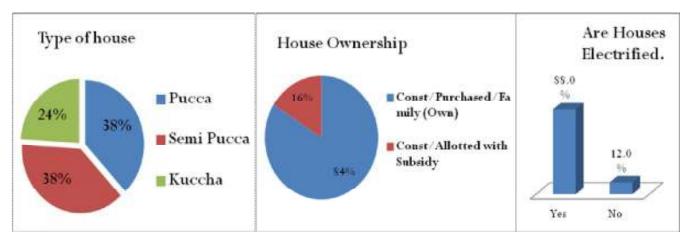
- > In order to improve the environment and eco-system of the village plantation shall be done along the roadside and in open areas in the village.
- As data suggests the employment level among the community is extremely low, especially among the women. The youth and women living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

4.7. Binglaat Village

YEAR 2011 Facilities Existing Facilities Availa within 5 kms.	
WILLIAM SKITS.	
HOUSE 81 Cement Tar Road	
Public Telephone Booth	nool
HOLDS Della Fareira Madad	
Pyt Secondary Sch	
Weekly Market	
Forest Produce Block Development	
Firewood Yes Office PDS Shop DTP/Xerox Centre ASHA Worker	
Coal Collection, Yes, Doct Office	
Grocery Shop	
Cultivation Yes Police Station Pre-Pri Nursery Sch Gram Panchayat Office	1001
Bus Stop	
Bank for S/B Account	
Public/Comm 00 Cooperative Society Facilities Exist	ing more
on Tap Points Health Sub- Centre than 5 K	ms
HH Tap 00 Charitable Primary Railway Station	
Connections School	
Govt Secondary School Warehouse	
Chief Area PHC/ CHC	
Crop Higher Secondary Taluk Headquarter	
Name School District Hoodayarta	8
Paridy 200	r:
Veterinary Cirilo	
acres Pvt Clinic (RMP +) Charitable Seconda	ry School
Pvt Clinic (BAMS RELIGION House MBBS)	
holds Medical Shop Chemist Private Hospital	
HINDU 81	
Dai	
Land Distribution (In Acres): Ayush Hospital	
Total Irrigated Grazing Forest Wasteland	
Area APMC/Mandi 817 27 9 458 43	
817 27 9 458 43	

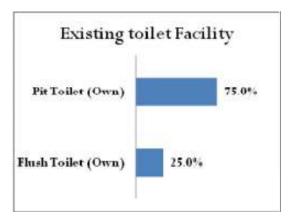
Figure poster 7:Binglaat Village

4.7.1. Household Status



In the village both Pucca and semi Pucca houses are equally distributed (38%). The remaining 24 percent of the houses were reported as the Kuccha houses. With regard to the House Ownership 84 percent of the people said that they own their house and remaining houses have been allotted or given under Subsidy. In the village 88 percent of the houses are having electricity in their Houses. Along with these it was also said that almost all the houses have the registered papers of their houses.

4.7.2. Sanitation



In the village those having toilets in their household 75 percent of them are having Pit toilet of their own and remaining have flush toilet in their houses. The important aspect is that all those having toilets in their houses, only 20 percent have their toilets in their own expenses. Remaining 80 percent have been distributed into those provided by fully subsidized and provided by the government.

4.7.3. Family Size

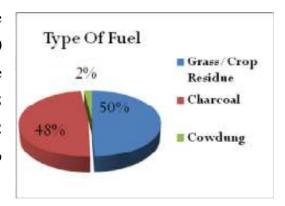
In the village majority of the people which is approximately 28 percent of the total has reported that they have five members in their family. Followed to which another set of people which is 16 percent have reported that they have on an average four members in



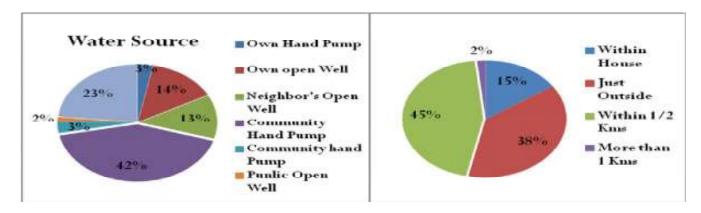
their houses. In the village there is also prevalence of large families which is 14 percent of the total.

4.7.4. Type of Fuel

In the village primarily two types of fuels are used which are Grass/Crop residue and Charcoal. In the village almost 50 percent of the people said that they use Grass/Crop residue and wood as fuel. Followed to which it was reported that 48 percent of the people use charcoal as fuel. In the village 2 percent of the people also said that they use Cow dung also as a fuel for cooking and other domestic purposes.

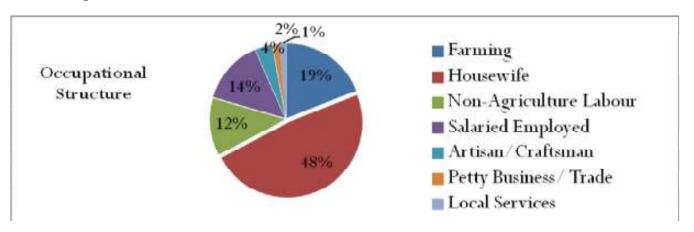


4.7.5. Water Source



The major source of water in the village is the community Hand Pump on which approximately 42 percent of the people are dependent for drinking water and for domestic purposes. Twenty three percent of the people also fall in the category of those taking or drawing water from unspecified sources. 14 percent of the people in the village are having their own taps. 13 percent of the people reported of having Neighbor's open well from where they use to draw water. There are also other sources available in the village such as Own Hand Pump, Public Open well, Community Hand Pump etc. In the village it was reported that 45 percent of the people have to go within ½ Kms in order to get drinking water and water for other domestic purposes. Followed to which it was said that 38 percent of the people draw water from just outside. In the village 15 percent of the people said that they have water source within their house which includes Own Tap, Own Open well and tap allotted or given by the Government/Panchayat etc. The remaining two percent of the people reported that they have to go around more than 1 Kms to get water.

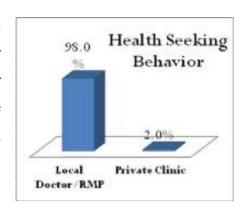
4.7.6. Occupation



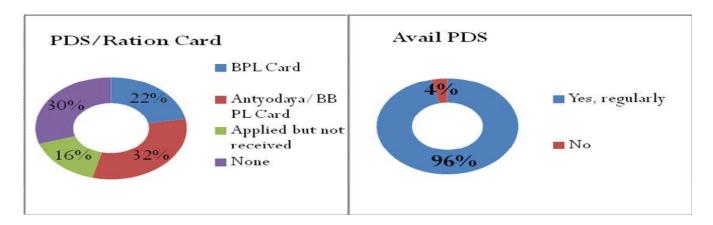
Approximately 48 percent of the women in the village were reported as Housewife and followed to which 19 percent of the people are engaged as farmers. Similarly 14 percent of the people said that they are engaged as salaried employed and 12 percent as Non-Agriculture Labour. In the village there is also prevalence of other occupations available such as those engaged as Artisan/Craftsman, Petty Business Trade Local Services etc.

4.7.7. Health Seeking Behavior

In the village it was reported that majority of the people visit Local Doctor/RMP in case of any health related problem. Approximately 98 percent of the people agreed that they visit to the Local Doctor available if anybody fells sick. The remaining 2 percent of the people said that they visit to the private clinic to take health services.



4.7.8. PDS/Ration Card



Around 32 percent of the people in the village is having the Antyodaya BPL Card followed to which 30 percent do not having any card available with them. In the village 22 percent of the people said that they have the BPL Card and remaining 16 percent of the people have applied but they have not received any card. With regard to avail PDS in the village 96 percent of the people avail it regularly and remaining 4 percent of the people said that they don't avail it.

4.7.9. Recommendations

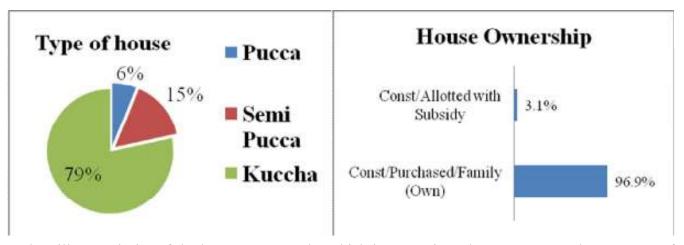
- > Skill building should be taken up as a priority in the village. The village is lagging behind in of having market oriented skills. Only terms one person the among interviewed households was found having vocational training. Also 48% women of studied sample were found to be house wives. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- There is a lack of drinking water in the village. One of the problems is that most of the tube wells are dry during summers. During summers they have to face more problems as scarcity of drinking water increases. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Providing the teaching aids to the schools can be taken up to improve the quality of education in the school. Establishing library in the school can be taken up as intervention.
- ➤ Mobile Medical Van shall be provided in the village. Along with this MMV should function in collaboration with ASHA/Anganwari Worker. MMV which can encourage people to specially women and children also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- > NPS Binglaat has requested drinking water facility.

4.8.Chaura Village

YEAR 201 1 HOUSEHOLDS 100 POPULATION 560	Facilities A the vil Bus Stop Asha Worker Cement Tar F	llage Road.	Grocery PDS Sho	km: Shop op	ting within 5 s.
Forest Produce Coal Yes Collection Firewood Yes Cultivation Yes Chief Crop Area Name Paddy 50 acres	Facilities more than Railway Stat Taluk Headq District Head Daily Evenin Police Statio ITI Polytechr Degree Colle Block Develo	Existing 5 Kmster ion uarters lquarters g Market n nic	Post Offi Medical Gram Pa Bank for Govt. Pri	ox Centro ce Shop anchayat S/B Acco	Office
RELIGION House holds HINDU 100	Office PHC CHC/ Govt. 6 Hospital	Seneral	Private F	le Primar Primary S condary S	chool
Migration Pattern Within the state Y (Non- e Agricultural s	Vocational Training Centre. Private Clinic (MBBS/ BAMS) Private Hospital Veterinary hospital		Private Secondary School Higher Secondary School Health Sub Centre Private Clinic(RMP)		
Labour)	Land Distribution (In Acres):				
Outside State (Non- Agricultural Y	Total Area	Irrigated	Grazing	Forest	Wasteland
Labour) e s	741	252	2	355	10

Figure poster 8: Chaura Village

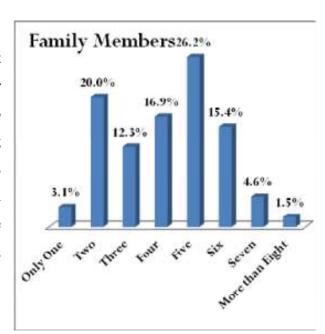
4.8.1. Household Status



In the village majority of the houses are Kuccha which is approximately 79 percent and 15 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 6 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 96.9 percent of the respondent said that they have their own houses. Remaining 3.1 percent is comprised of those allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana. With regard to the registered papers of houses and those houses which are having electricity the reporting was hundred percent.

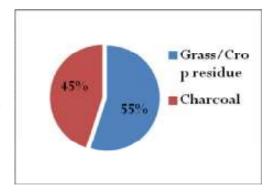
4.8.2. Family Size

In the village a majority of the people have said that they are having on an average five members in their families. Since as per reported by the people 26 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having only two members in the family. Those families having more than 8 members were found very less in the village which is around 1.5 percent.

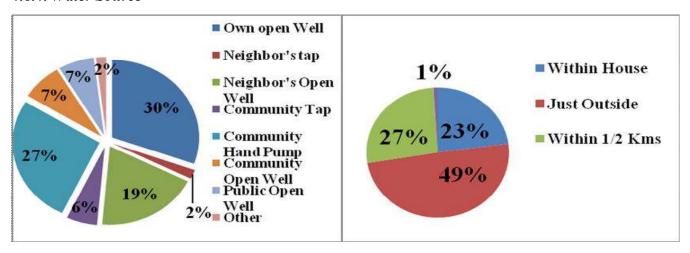


4.8.3. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 55 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 45 percent of the people use charcoal as fuel in their houses.

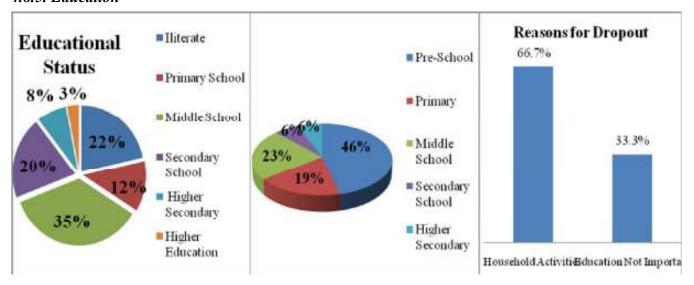


4.8.4. Water Source



Approximately 30 percent of the people said that they use Own open well in order to get water for drinking and water for domestic purposes. In the village 27 percent of the people use Community hand Pump to get water. Around 19 percent of the people are also dependent upon the Neighbor's Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well which are both 7 Percent reported by the people. Neighbor's Tap and Community tap are also available. Approximately 49 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 23 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

4.8.5. Education

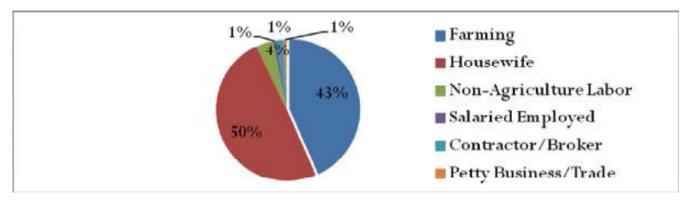


With regard to the education majority of the people which is approximately 35 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 22 percent of the people reported of being Illiterate. In the village 20 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 8 percent of the people have completed their Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 46 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 19 percent. In the village Higher Secondary and Secondary level schooling comprises of 6 percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 66.7 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

4.8.6. Occupation

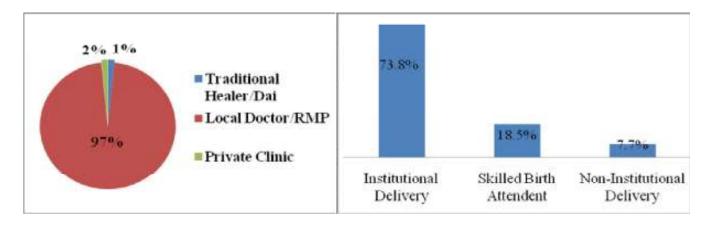
Apart from the 50 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 43 percent of the people. Approximately 4 percent of the

people are involved in the village are engaged in Non-Agriculture Labour. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.



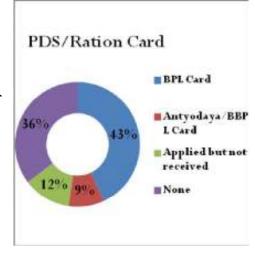
4.8.7. Health Seeking Behavior

In the village more than 97 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 2 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 1 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 73.8 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 18.5 percent of the total. In the village around 7.7 percent of the deliveries are non-Institutional deliveries.



4.8.8. PDS/Ration Card

In the village around forty three percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 36 percent of the people do not have any card available with them. At the same time around 12 percent of the people have applied but they haven't received any card. The remaining 9 percent of the people reported that they have Antyodaya/ BPL Card with them. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it.



4.8.9. Recommendations

- Education facility for the children- providing the village primary school with Educational Materials will be a very nice initiative to develop interest of the students towards education. It is important to have understanding about the social and psychological condition to ensure the success of school. Scholarships should be provided to poor students so that they can continue their education. There is high rate of dropouts in the village, reasons being poverty and early marriage. Implementing partner to be involved in educational intervention should also be asked to aware community regarding ill effects of early marriage and dropouts.
- Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women and children also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ Village reflects extremely discouraging figure in terms of sanitation. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This

can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

- > During the interview UMS Chaura has requested for portable drinking water and 3 extra class rooms because the teachers have to teach the students in combined classes.
- > Villagers have requested for check dam on river for irrigational purposes.

4.9. Gariloung village

YEAR 2011 HOUSEHOLDS 1030 POPULATION 6036	Facilities Existing within 5 kms. Private Clinic (MBBS/ BAMS) Bus Stop
	Private Clinic (RMP)
Forest Produce	Daily Evening Market
Coal Yes Collection	Weekly Market
Cultivation Yes	Block Development Office
Firewood Yes	DTP/Xerox Centre
	Post Office
Chief Area	Police Station
Сгор	PHC
Name	Bank for S/B Account
Paddy 500	CHC Govt. General Hospital
acre	Govt Secondary School
RELIGION House	Higher Secondary School
holds	Degree College
HINDU 980	Medical Shop/Chemist
Muslim 50	Private Hospital
anottaantti (1454)	Health Sub Centre

Land Distribution (In Acres):				
Total Area	Irrigated	Grazing	Forest	Wasteland
596	54	28	255	

Facilities Available
in the village
Cement/ Tar Road

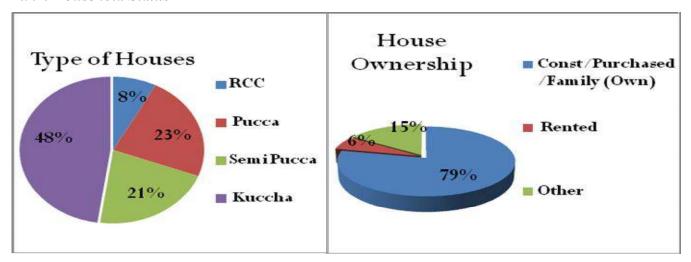
PDS Shop
Gram Panchayat Office
Grocery Shop
Pri-Pre Nursery School
Govt Primary School
Private Primary School
Veterinary Clinic
Dai (Trained/Untrained)
ASHA Worker

Facilities Existing more than 5 Kms

Railway Station
Taluk Headquarters
District Headquarters
Warehouse
APMC/Mandi
Charitable Primary
Charitable Secondary
ITI/Polytechnic
Vocational Training Centre

Figure poster 9: Gariloung Village

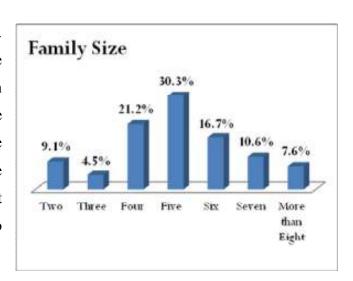
4.9.1. Household Status



In the Garilong Village people reported that 48 percent of the houses are Kuccha and remaining 23 percent of the houses are Pucca. 21 percent of the houses are Semi-Pucca and remaining 8 percent of the houses are of RCC. Along with these the important aspect of the houses in the village is that 79 percent of the houses are owned by the people themselves. Six percent of the houses are rented and 15 percent of the totals are in the category of 'other'. With regard to having electricity in the houses approximately 51.5 percent of the houses have said that they have it in their houses.

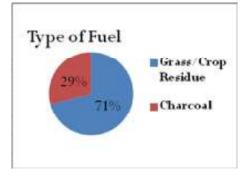
4.9.2. Family Size

In more than 8 members in their families. Approximately 16.7 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight. the village on an average five members are there in the family which was reported by around 30 percent of the people. Followed to which it was also found that 18.6 percent of the total families have

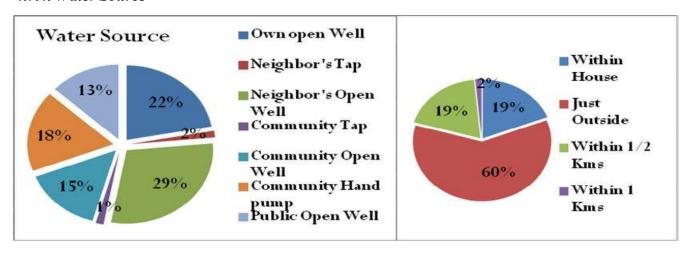


4.9.3. Type of Fuel

In the village mostly Grass/Crop Residue and Wood is used as a major fuel as 71 percent of the people have reported of using it. Followed to which we have the Charcoal which is used by approximately 29 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they are very less in Prevalence.



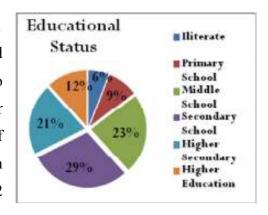
4.9.4. Water Source



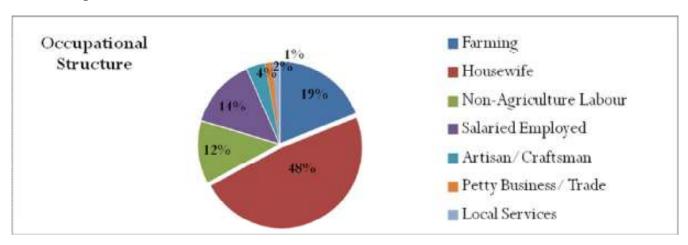
Approximately 29 percent of the people said that they use Neighbor's Open well in order to get drinking and water for domestic purposes. In the village 22 percent of the people also have their own open well. Around 18 percent of the people are also dependent upon the Community Hand Pump for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village are Community Open Well and Public open well which are 15 percent and 13 percent respectively. 60 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 19 percent of the people have the water sources in their houses and similar to that another 19 percent of the people said that they are having water sources within ½ Kms. The important aspect is that 2 percent of the entire population has to go within a Kms to get water.

4.9.5. Education

With regard to the education majority of the people which is approximately 29 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is middle level Schooling, which comprises of 23 percent. In the village 21 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 16 percent of the people have completed their Middle Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 6 percent. With regard to those who have done their Higher Education is 12 percent in the village.



4.9.6. Occupation



In the village approximately 48 percent of the women were Housewives and followed to which 19 percent of the people are engaged as farmers. Similarly 14 percent of the people said that they are engaged as salaried employed and 12 percent as Non-Agriculture Labour. In the village there is also prevalence of other occupations available such as those engaged as Artisan/Craftsman, Petty Business Trade Local Services etc.

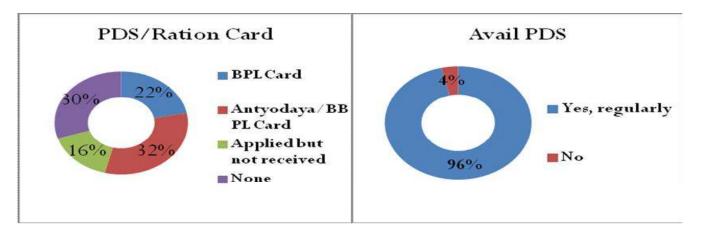
4.9.7. Health Seeking Behavior

In the village it was reported that majority of the people visit Local Doctor/RMP in case of any health related problem. Approximately 98 percent of the people agreed that they visit to the Local Doctor available if anybody fells sick. The remaining 2 percent of the people said that they visit to the private clinic to take health services.



4.9.8. PDS/Ration Card

Around 32 percent of the people in the village are having the Antyodaya/ BPL Card followed to which 30 percent do not having any card available with them. In the village 22 percent of the people said that they have the BPL Card and remaining 16 percent of the people have applied but they have not received any card. With regard to avail PDS in the village 96 percent of the people avail it regularly and remaining 4 percent of the people said that they don't avail it.



4.9.9. Recommendations

- Skill building should be taken up as a flagship intervention in the village. The village is lagging behind in terms of having market oriented skills. Provisioning of skill building facilities will enhance the Placement of the youths. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Providing the teaching aids to the schools can be taken up to improve the quality. Establishing library in the schools can be taken up as intervention.
- ➤ Villagers have demanded a mobile medical van for health related issues because 98% of studied sample population goes to local RMP for medical consultation. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

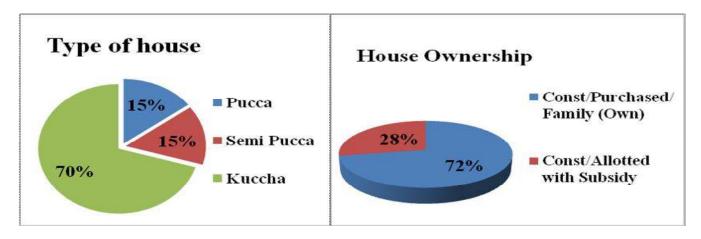
- > This village has a serious problem of drinking water especially during summers. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Lack of proper sanitation facility has emerged as major issue in the village which will have major effect on the health of the villagers and especially kids. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ During the interview, Anganwari centre, UMS Gariloung, Anganwari centre(6,2) Chatti Gariloung and UPS Chatti Gariloung have requested for providing drinking water and toilet facility to them.
- > Request for sports items has come from all schools and Anganwari centers of the village.

4.10. Ghagra village

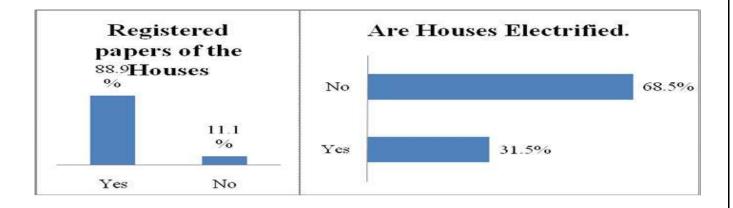
0 8		2 200 2000		
YEAR	2011	Facilities Available in	Facilities Existing more	
HOUSEHOLDS	68	the village Pre-Pri Nursery School	than 5 Kms	
		Govt Primary School	Railway Station	
POPULATION	408		Block development Office	
	1712-0-21		Taluk Headquarters	
		Facilities Existing	District Headquarters	
Forest Produce		within 5 kms.	Warehouse	
1.010311110		Cement/Tar Road	Police Station	
Cultivation	Yes	Bus Stop	APMC/Mandi	
Coal Collection	Yes	PDS Shop	Daily evening market	
Firewood	Yes	Grocery Shop	Charitable Primary	
Filewood	res	Weekly Evening	Charitable Secondary	
		Market	VOC Training Centre Govt. Secondary School	
RELIGION	House	DTP/Xerox Centre		
RELIGION	holds	Post Office	ITI/Polytechnic	
HINDU	68	Medical Shop	CHC/Govt Gen Hospital	
11000000000000000000000000000000000000		Gram Panchayat Office	PHC Private Hospital	
		Dai (Trained/Untrained)	Private	
			Clinic(MBBS/BAMS)	
Chief Crop	Area	Private Secondary	Ayush Hospital	
Name		School School	Higher Secondary School	
Daddy	1Eagrag	Pvt Primary School Health Sub Centre	Degree College	
Paddy	15acres	Pvt Clinic (RMP+)	Veterinary Hospital Public telephone booth	
		PVI CIIIIIC (RIVIP+)	Bank	
Migration Patte	ern			
CHANGE STREET, THE PARTY		ricultural Labour)	Yes	
Within the state (Non-Agricultural Labour)			a de la companya de	
Within state (Agricultural labour)			Yes	
Outside state (Non-Agri Labour)			Yes	
Outside state (Agricultural labour)			Yes	
- Albania (Ingliadia albani)				

Figure poster 10: Ghagra Village

4.10.1. Household Status



In the village majority of the people have said that 70 percent of the people have Kuccha Houses and remaining 30 percent of the people have been divided into Semi Pucca and Pucca houses in the village. With regard to the ownership status it was found that 72 percent of the people have their own houses and remaining 28 percent of the houses have been constructed with subsidy. All the houses which have been constructed under subsidy have been allotted under the Indira aawas yojana.

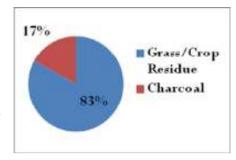


4.10.2. Family Size

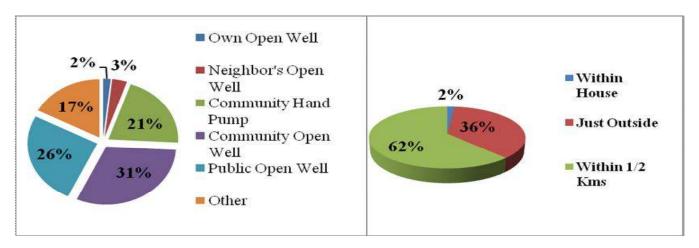
In the Ghagra Village it was found that majority of the families are having five members in the families. With regard to this it was reported by the 20.4 percent of the people that they have five members in the family. In the village there is a diverse range of family size ranging from only two to more than eight.

4.10.3. *Type of Fuel*

In the village there are two types of fuel used in the village which are Grass/Crop residue which is around 83 percent. Followed to which there is also 17 percent of the people who uses charcoal as fuel.



4.10.4. Water Source

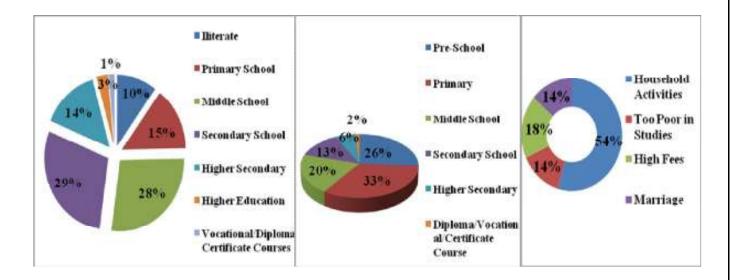


In the village majority of the people are dependent upon the Community Open Well upon which 31 percent of the people are dependent on it for water. Similarly 26 percent and 21 percent of the people use Public open well and Community Hand Pump respectively to fetch water for drinking and Domestic purposes. Other sources are Neighbor's Open well and Own Open Well in the village. Water is a scarce resource in the entire area and in the Ghagra Village it was reported that 62 percent of the people have to go within Half Kms in order to get water. Similarly 36 percent of the people have water sources just outside their houses. Only 2 percent of the people said that they have the water sources within their houses.

4.10.5. Education

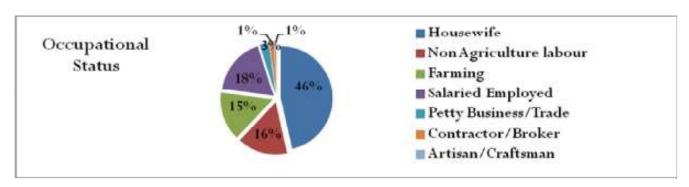
With regard to the education majority of the people which is approximately 29 Percent found to be in the categories that have completed their Secondary Level education. Followed to which comes Middle level Schooling, which comprises of 28 percent. In the village 15 percent of the people also reported that they have completed their Primary education. In the village people also reported that 14 percent of the people have completed their Higher Secondary Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 10 percent. With regard to those who have done their Higher Education is 3 percent in the village. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 33 percent. Followed to

which is those who are involved in the Pre Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Middle Education is 20 percent. In the village Secondary and Higher Secondary level schooling comprises of 13 and 6 percent respectively in both the standards. In the village getting involved in the household activities is the major cause for the Dropout. Following that 18 percent of the students left their education due to High fees. Being too poor in studies and Marriage are the other two reasons in the village which was reported by approximately 14 percent each in the village.



4.10.6. Occupation

Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.



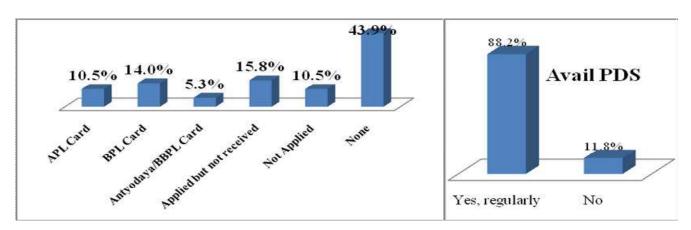
4.10.7. Health Seeking Behavior



In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village. On asking the women about the place of delivery it was reported that out of total births in the village in the past three years 73.7 percent of the births have taken place in any health institutions. In other words 73 percent of the births are institutional in nature. In the village 16 percent of the total births are Non-Institutional in Nature. It was also reported that 10.5 percent of the births were attended by the skilled Birth attendant.

4.10.8. Available PDS/Ration Card

In the village 49 percent of the people do not have any card with them. Followed to which 16 percent of the people have applied but haven't received it. With regard to avail it, 88 percent of the people avail it regularly.



4.10.9. Recommendations

- ➤ It was found in the village that only one percent of studied sample is engaged in some vocational/Certificate courses. People of this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- As data suggests that 54% of studied sample of students left education because of household activities and poverty. CCL can introduce few scholarships for the backward and poor students in the village, which can provide both support and motivate the students towards Higher Education.
- > 86% of the studied sample goes for RMP's for medical consultation. The suggested recommendation would be providing MMV. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- Skill building should be taken up as a flagship intervention in the village. The village is lagging behind in terms of having market oriented skills. Provisioning of skill building facilities will enhance the Placement of the youths. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- Lack of proper sanitation facility has emerged as major issue in the village which will have major effect on the health of the villagers and especially kids. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

- Nav Sarjit Primary School Ghagra has requested for providing drinking water facility while as Anganwari centre has requested for Boundary wall.
- > During the interview with the villagers they have requested for construction of Canal on Panghat River which will solve the problem of drinking water and irrigation problem.
- ➤ Besides having different sources of drinking water, village has shortage of water during summers. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.

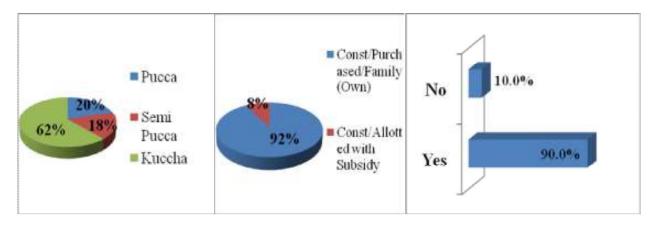
4.11. Hechabalia village

4.11. Hecnaba	na vinage		
YEAR HOUSEHOI S POPULATIO		Facilities Existing wit 5 kms. Cement/ Tar Road Post Office Cooperative Society	than 5 Kms Railway Station Police Station Bank DTP/ Xerox centre
Forest Pr		Weekly Market Veterinary Clinic	Public Telephone Booth Daily Evening Market
Coal Collection Firewood Cultivation	Yes Yes Yes	Facilities Available in village ASHA Worker Gram Panchayat Office	the Taluk Headquarters District Headquarters Ware House
Chief Crop Name Paddy	Area 150 acres	Health Sub Centre Bus Stop PDS Shop Grocery Shop	Veterinary Clinic (Asansol) APMC/Mandi Charitable Primary School Charitable Secondary School
RELIGION HINDU	House holds 90	Pre-Pri Nursery School Govt Primary School Pvt Primary School	Pvt Secondary School Higher Secondary School Degree College
Migration Pa		Govt Secondary School Agricultural Labour) Yes	ITI/Polytechnic Vocational Training Centre Dai (Trained/Untrained) PHC
Outside stat	e (Non-Agı	ri Labour) Yes	CHC/Govt Gen Hospital Ayush Hospital Medical Shop
	Land Dis	tribution (In Acres):	Private Hospital
Total Area	Irrigated	Grazing Forest Wastela	The second secon
370	21	201 6habalia 02	Private Clinic (MBBS/BAMS)

Figure poster 11: Hechabalia Village

(MBBS/BAMS)

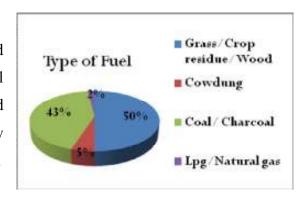
4.11.1 Household Status



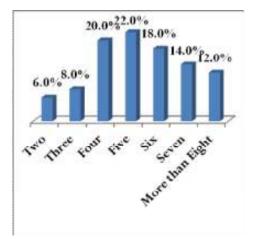
In the village it was reported that there are 62 percent of the houses which are Kuccha in nature. Followed to this it was also found that there are 20 percent of the houses which were reported as Pucca houses. The remaining 18 percent of the houses were reported as the Semi Pucca houses. With regard to the house ownership it was found that 92 percent of the people own their houses and remaining 8 percent of the houses have been Constructed/Allotted with subsidy. In the village 90 percent of the houses are having electricity in their houses.

4.11.2. *Type of Fuel*

In the village primarily two types of fuels are used which are Grass/Crop residue and Coal/Charcoal which are used in almost all the houses. Followed to this it was also reported that people also use Cow Dung and LPG Natural Gas as fuels in their houses.

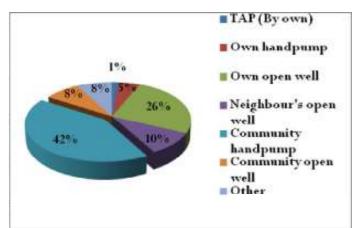


4.11.3. Family Size



In the village there are families having five members are in majority. Almost 22 percent of the people said that they are having five members in their family. Followed to this around 20 percent of the people reported that they are having four members. There are also families having six members in the families and with regard to the large families having more than 8 members are also available.

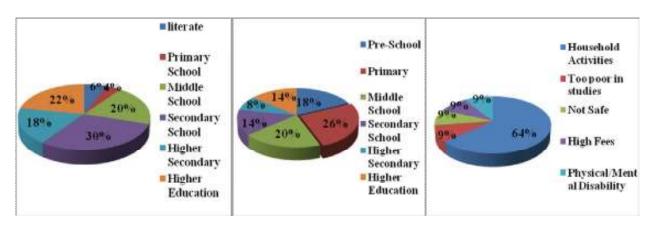
4.11.4. Water Source



For drinking water in the village majority of the people are engaged in the community hand pump which comprises of around 42 percent of the total. This implies 42 percent of the people are dependent upon the Community Hand Pump to get water. Similarly 26 percent of the people are having their own open well

as their water source. In the village 10 percent of the people are dependent upon the Neighbor's Open well. Community Open Well and other sources of water are comprised of 8 percent each in the village. Approximately 5 percent of the people in the village are having their Own Hand Pump as their water source. Only 1 percent of the people are having their own Tap.

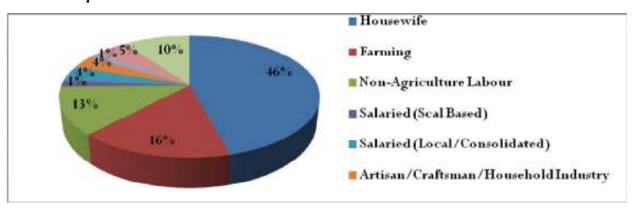
4.11.5. Education



In the Hechabalia village it was reported by the people that majority among them have completed their Secondary Level Schooling and followed to this there are those people who have completed their Higher Education. Middle level schooling and Higher Secondary level Schooling is comprised of 20 percent and 18 percent respectively. Around 6 percent of the people in the village are found as illiterate and approximately 4 percent of the people have completed their Primary level schooling. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 26 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 20 percent of the total. In the village percentage of students who are involved in the Pre-Schooling Education is 18 percent.

Similarly, In the village Higher Secondary and Higher Education is comprised of 8 and 14 percent respectively in both the standards. With regard to the reasons why students in the village left education in between various reasons were reported by them. Among them the dominating reason was found to be as getting involved in the Household activities which comprises of 64 percent. Other reasons are Not Safe, Too Poor in Studies, High fees etc.

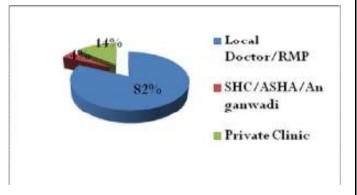
4.11.6. Occupation



In the village with regard to the occupational status of the people it was reported by them that around 46 percent of the women reported as being house wife. Followed to this there are 16 percent of the people who are engaged in the Farming and after that there are 13 percent of the people who have been earning their livelihood from doing non-agriculture labour. Approximately 10 percent of the people are engaged in the local Services (including traditional services). There are many other occupational activities available in the village which is Petty Business/Trade, Salaried Employed, and Contractor/Broker etc.

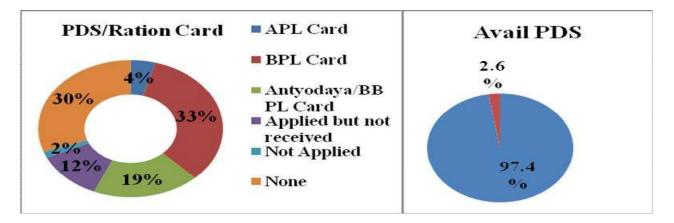
4.11.7. Health Seeking Behavior

In the village approximately 82 percent of the people prefer to visit Local Doctor/RMP in case of any health related Problem. Followed to which it was also reported that 14 percent of the people visit Private clinic to get health Services. Similarly 4 percent of the people said that they visit SHC/ASHA in case of any health related problem.



4.11.8. PDS/ration Card Availability

In the village around 33 Percent of the people have the BPL Card and 30 percent of the people do not have any card available with them. 12 percent of the people have applied but have not received the Card. In the village only 4 percent of the people have the APL Card with them. On asking to the people it was found that 97.4 percent of the people avail PDS.



4.11.9. Recommendations

- ➤ It was also found that there is a high dropout rates in the village, reasons mainly being poverty and 9% of the studied sample of students left education because of disability. CCL can introduce few scholarships for the poor students in the village and can adopt disable students by providing them free education, fooding and lodging, which can provide both support and motivate the students towards Higher Education.
- Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women and children also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. As 82% of the studied sample goes to RMP's for medical consultation. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- In the village in order to improve the situation of sanitation households shall be provided with the toilets and prior to that they shall be also motivated with regard to the benefits of

using toilets. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

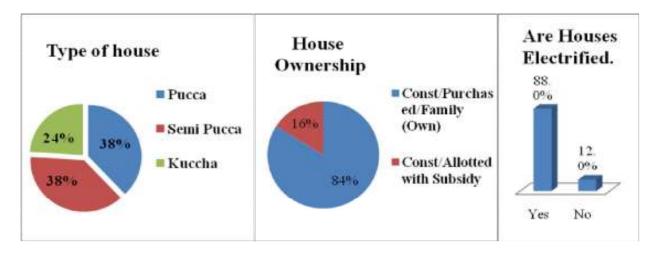
- > During the interview, villagers have demanded construction of check dam on Devalgarha River for irrigational purposes.
- ➤ People living in these villages need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

4.12. Honhe Village

Forest Produce	YEAR	2011 Facilities Existing more		
Coal Collection Yes	and the second s	than 5 Kms		
	HOUSEHOLDS	Daily Evening Market Bus Stop		
Cultivation Yes		Public Telephone Booth		
Firewood Yes	POPULATION	1300 Weekly Market		
		Grocery Shop		
	Facilities Available	in the DTP/Xerox Centre		
Public/Common 08	village Cement/Tar Road	Railway Station		
Tap Points		Police Station		
HH Tap 00	Pre- Primary School	Bank		
Connections	PDS Shop	Block development Office		
Chief Crop Area	Dai(Trained/Untrained))		
Name		Taluka Headquarters		
	ASHA Worker	District Hedquarters		
		Warehouse		
Maize 700	Facilities Existing wi	Company of the Compan		
acres	kms. Post Office	Charitable Primary		
	Section 1997	Govt Secondary School		
	Cooperative Society	Charitable Secondary		
RELIGION House	Pvt Primary School	Private Secondary School Degree College		
holds	Gram Panchayat Office	and Barrier Santa Commencer and the Commencer an		
HINDU 219	Graffi Farionayat Office			
	Govt, Primary School	ITI/Bolstochnic		
1 1691		ITI/Polytechnic		
Land Dist	ribution (In Acres):	Vocational Training Centre		
Total Area Irrigated	Grazing Forest Waste	and Primary Health centre		
76.775.Wei		CHC/Govt Gen Hospial		
2077 61	103 1194 85	Pvt. Clinic(MBBS/BAMS)		
		Private Hospital		
Migration Pattern		Health Subcentre		
Within the state (Non-Agricultural Labour) Yes Ayush Hospital				
		Veterinary Clinic		
Outside state (Non-Agri	Labour) Ye	The state of the s		

Figure poster 12: Honhe Village

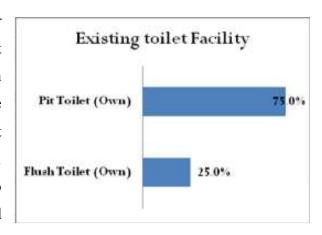
4.12.1. Household Status



In the village both Pucca and semi Pucca houses are equally distributed as 38 percent in each category people reported that they have Kuccha and Semi Pucca Houses. The remaining 24 percent of the houses were reported as the Kuccha houses. With regard to the House Ownership 84 percent of the people said that they own their house and remaining houses have been allotted or given under Subsidy. In the village 88 percent of the houses are having electricity in their Houses. Along with these it was also said that almost all the houses have the registered papers of their houses.

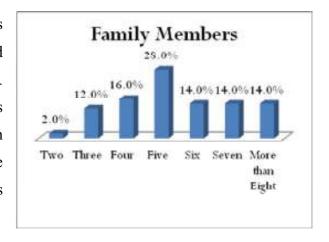
4.12.2. Sanitation

In the village those having toilets in their household 75 percent of them are having Pit toilet of their own and remaining have flush toilet in their houses. The important aspect is that all those having toilets in their houses, only 20 percent have their toilets in their own expenses. Remaining 80 percent have been distributed into those provided by fully subsidized and provided by the government.

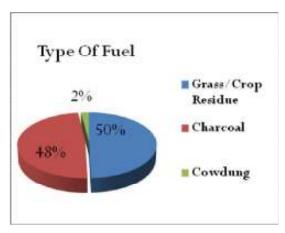


4.12.3. Family Size

In the village majority of the people which is approximately 28 percent of the total has reported that they have five members in their family. Followed to which another set of people which is 16 percent have reported that they have on an average four members in their houses. In the village there is also prevalence of large families which is 14 percent of the total.

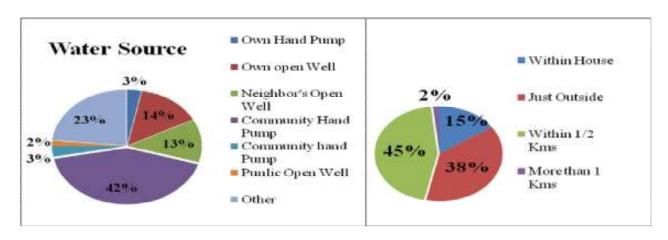


4.12.4. *Type of Fuel*



In the village primarily two types of fuels are used which are Grass/Crop residue and Charcoal. In the village almost 50 percent of the people said that they use Grass/Crop residue and wood as fuel. Followed to which it was reported that 48 percent of the people use charcoal as fuel. In the village 2 percent of the people also said that they use Cow dung also as a fuel for cooking and other domestic purposes.

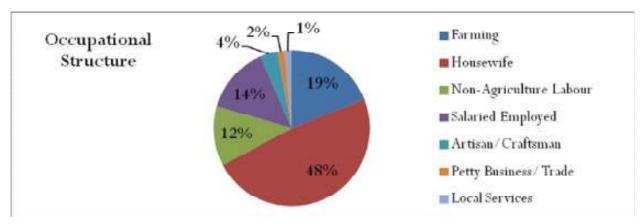
4.12.5. Water Source



The major source of water in the village is the community Hand Pump on which approximately 42 percent of the people are dependent for drinking water and for domestic purposes. Twenty three percent of the people also fall in the category of those taking or drawing water from

unspecified sources. 14 percent of the people in the village are having their own taps. 13 percent of the people reported of having Neighbor's open well from where they use to draw water. There are also other sources available in the village such as Own Hand Pump, Public Open well, Community Hand Pump etc. In the village it was reported that 45 percent of the people have to go within ½ Kms in order to get drinking water and water for other domestic purposes. Followed to which it was said that 38 percent of the people draw water from just outside. In the village 15 percent of the people said that they have water source within their house which includes Own Tap, Own Open well and tap allotted or given by the Government/Panchayat etc. The remaining two percent of the people reported that they have to go around more than 1 Kms to get water.

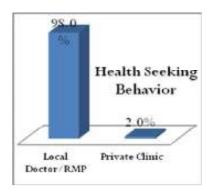
4.12.6. Occupation



Approximately 48 percent of the women in the village were reported as Housewives and followed to which 19 percent of the people are engaged as farmers. Similarly 14 percent of the people said that they are engaged as salaried employed and 12 percent as Non-Agriculture Labour. In the village there is also prevalence of other occupations available such as those engaged as Artisan/Craftsman, Petty Business Trade Local Services etc.

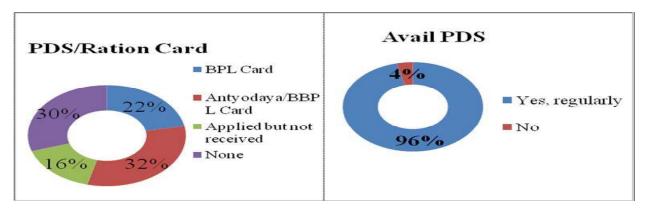
4.12.7. Health Seeking Behavior

In the village it was reported that majority of the people visit Local Doctor/RMP in case of any health related problem. Approximately 98 percent of the people agreed that they visit to the Local Doctor available if anybody fells sick. The remaining



2 percent of the people said that they visit to the private clinic to take health services.

4.12.8. PDS/Ration Card



Around 32 percent of the people in the village is having the Antyodaya BPL Card followed to which 30 percent do not having any card available with them. In the village 22 percent of the people said that they have the BPL Card and remaining 16 percent of the people have applied but they have not received any card. With regard to avail PDS in the village 96 percent of the people avail it regularly and remaining 4 percent of the people said that they don't avail it.

4.12.9. Recommendations

- In the village in order to improve the status of education, educational materials shall be provided in the school in order to develop interest of the students towards education.
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ In the village it was reported that 98% of studied sample prefer going to the Local Doctor/RMP in case of any health related issue. The suggested strategy with regard to this is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women also to take the benefit of it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

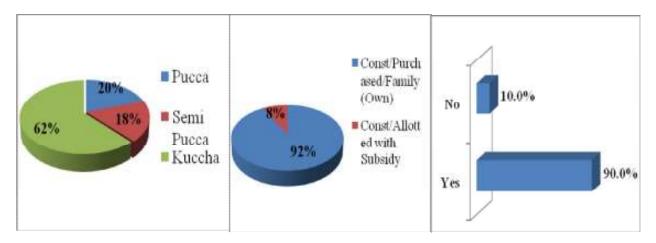
- During the interview with community, they have requested for lift irrigation scheme for irrigational purposes. In the village Rainwater Management methods shall be introduced so that the water table can be brought above and in long run water scarcity problem can be dealt with.
- > UMS and Anganwari center have requested for toilet and drinking water facility.
- ➤ Sanitation has emerged as another major issue for the community. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

4.13. Huseer Village

YEAR	2011		THE THUS DESIGN IS NO.
TEAR	2011	Facilities Available in the village	Facilities Existing more than 5 Kms
HOUSEHOL	DS 106	Cement Tar Road	Bus Stop Weekly Market
		Grocery Shop	Public Telephone Booth
POPULATIO	N 686	PDS Shop	Daily/ Evening Market
		Govt Primary School	Block Development Office Bank
Forest Pr		ASHA Worker	Taluk Headquarters
Coal Collection		Dai (Trained/Untrained)	Post Office
Cultivation Firewood	Yes Yes	Facilities Existing within 5 kms.	District Headquarters Police Station
Firewood	EGS	racinoes existing within 5 kms.	Warehouse
RELIGION	House	Railway Station Gram Panchayat Office	APMC/Mandi Higher Secondary School
	holds	Uniel Crop Name Area	Charitable Primary
HINDU	106	Paddy 150acres	Private Primary School
			Charitable Secondary Pre-Primary Nursery School
	Land Dis	inbution (In Acres):	
Total Area	Irrigated	l Forest Wasteland	ITI/Polytechnic Vocational Training Centre
2501		1127 275	Degree College
			Primary Health Centre
Migration Pattern			CHC/Govt Gen Hospital
Within the state (Non-Agricultural Yes			Pvt Clinic (RMP+) Pvt Clinic (MBBS BAMS)
Labour) Yes			
Outside State (Non-Agricultural Labour)			Ayush Hospital Veterinary Clinic

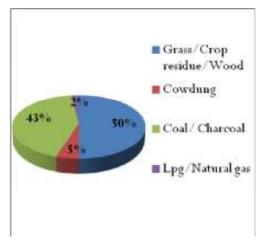
Figure poster 13: Huseer Village

4.13.1. Household Status



In the Hechabalia Village 62 percent of the people said that they are having Kuccha Houses and followed to which are Pucca houses which are 20 percent of the total houses. There are also 18 percent of the houses which are Semi Pucca in nature. With regard to the house ownership 92 percent of the people have said that they own it. Remaining 8 percent of the houses are constructed/allotted under subsidy. In the village out of total houses 90 percent of the houses have reported of having electricity in their houses. Remaining 10 percent of the houses do not have electric facility in the house.

4.13.2. Type of Fuel

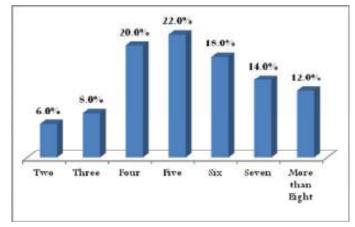


In the village there are four types of fuels which have been reported among which there are two types of fuels which are used in a majority basis. Among all the fuels Grass/Crop residue and Wood is used by around 50 percent of the total population. Followed to which it was also agreed that 43 percent of the people used Coal/Charcoal as fuel in the household. Other types of Fuels used in the village are Cow dung and LPG/Natural Gas which are 5 percent and 2 percent used respectively.

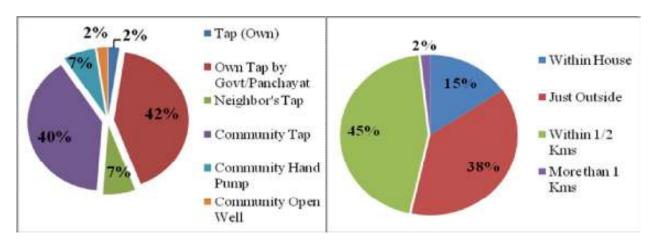
4.13.3. Family Size

With regard to the family size in the village it was reported that majority of the families in the village are having five members. Twenty Two percent of the people agreed that they are having five members in their family. Similarly 20 percent of the people said that they have four

members in their family. In the village there is also prevalence of large families such as 14 percent and 12 percent of the people have said that they have seven and more than 8 members in their families.

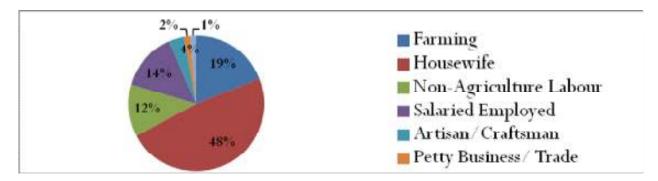


4.13.4. Source of Water



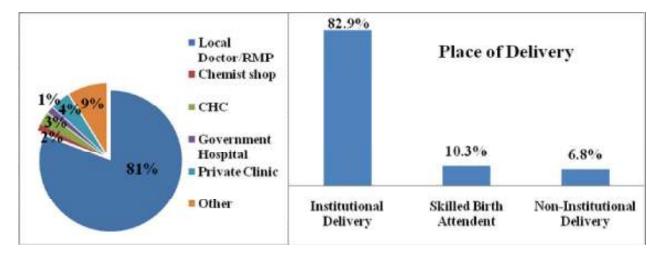
Approximately 42 percent of the people said that they use Own Tap provided by the Govt/Panchayat in order to get drinking and water for domestic purposes. In the village 40 percent of the people use Community Tap to get water. Around 7 percent of the people are also dependent upon the Community Hand Pump and Neighbor's Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. In the village it was reported that 45 percent of the people have to go within ½ Kms in order to get drinking water and water for other domestic purposes. Followed to which it was said that 38 percent of the people draw water from just outside. In the village 15 percent of the people said that they have water source within their house which includes Own Tap, Own Open well and tap allotted or given by the Government/Panchayat etc. The remaining two percent of the people reported that they have to go around more than 1 Kms to get water.

4.13.5. Occupation



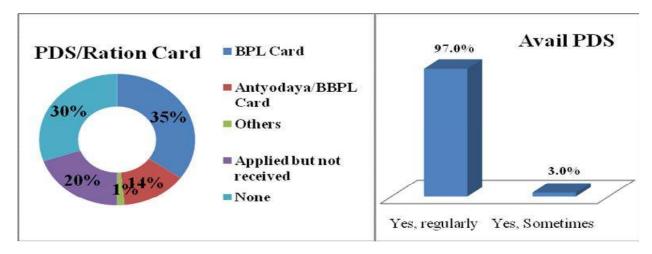
Approximately 48 percent of the women in the village were reported as Housewives and followed to which 19 percent of the people are engaged as farmers. Similarly 14 percent of the people said that they are engaged as salaried employed and 12 percent as Non-Agriculture Labor. In the village there is also prevalence of other occupations available such as those engaged as Artisan/Craftsman, Petty Business Trade Local Services etc.

4.13.6. Health Seeking Behavior



In the village more than 82 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 9 percent of the people agreed that they go to the Other Sources for the treatment of their minor and major ailments. Followed to this it was also reported that 4 percent of the people agreed on visiting Private clinics in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 82.9 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 10.3 percent of the total. In the village around 6.8 percent of the deliveries are non-Institutional deliveries.

4.13.7. Availability of PDS/Ration Card



Thirty five percent of the people in the village have reported that they have their BPL card available with them. Similar to that 30 percent of the people also said that they do not have any card with them. Along with that, 20 percent of the people also reported that they have applied but haven't received their card. Those having the Antyodaya/BPL Card are very low in percentage such as 14 percent of the total. Of the total 97 percent of the people reported that they avail PDS regularly.

4.13.8. Recommendations

- ➤ Education facility for the children- providing the village primary school with Educational Materials will be a very nice initiative to develop interest of the students towards education.
- It was also found that there is a high dropout rates in the village. CCL can introduce few scholarships for the poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Mobile Medical Van shall be provided in the village, approximately three days in a week as 81% of the studied sample goes to local RMP for consultation. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women and children also to take the benefit of it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

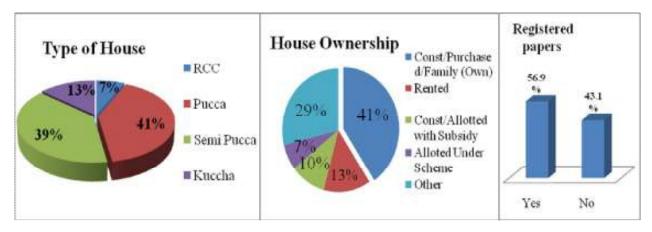
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- > During the interview villagers have requested for deepening of pond and its boundary construction for irrigational purposes.
- > UMS Huseer has requested for providing toilet and drinking water facility.
- ➤ Despite being various sources of water, community faces water crisis during summers. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- The problem of hygiene and sanitation is also major concern in the villages visited; the problems included massive scale open defecation, lack of toilets in the houses. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

4.14. Jhulandiha Village

YEAR	2011		
HOUSEHOLD		Facilities Available i	TOTAL MENTAL CONTRACTOR AND A STREET OF THE
HOOSEHIGEBS 100		the village	Kms
		ASHA Worker	Railway Station
POPULATION	586	Dai (Trained/Untraine	Post office
			Taluk Headquarters
		Grocery Shop	Police Station
		Government Primary	
Chief Crop	Area	School	District Headquarters
Name			Gram Panchayat Office
		Facilities Existing within	
Paddy	10	kms.	Private Primary School Pre-Primary Nursery School
	acres	Private	rie-rimary nuisery school
	MAN SOURCE STORY	Clinic(MBBS/BAMS)	
RELIGION	House	PDS Shop	Charitable Secondary School Charitable Primary School
	holds	Weekly Market	Charitable Frimary School
HINDU	100		CAMPAGNA SI NI NI
		Medical Shop	ITI Polytechnic Secondary School
		Forest Produce	Higher Secondary School
Public/Comm	ion 03	and the state of t	
Tap Points		Coal Collection	es Block Development Office
НН Тар	00	Cultivation	res
Connections	10-00	Firewood	Bus Stop
Connections		riiewood	DTP/Xerox Centre
			BOTTO BOTTO
La	nd Distribu	tion (In Acres):	Degree College
			Vocational Training Centre
Total Area Irr	igated Gr	azing Forest Wastela	ind Private Clinic(RMP)
			No. 117701 (2)
			Health Sub Centre
392		103 14	CHC/Govt Gen Hospital
			Private Hospital
Migration Pattern			1111acc 1103pmi
			Ayush Hospital
Within the state	e (Non-Ag	ricultural Yes	Veterinary Clinic
Labour)			

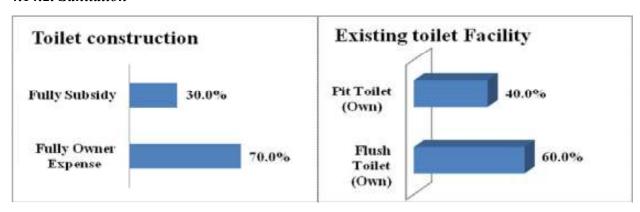
Figure poster 14: jhulandiha Village

4.14.1. Household Status



In the village a majority of the people reported that they have Pucca Houses in the village. Approximately 41 percent of the people said that they live in Pucca houses. Followed to which it was found that 39 percent of the people live in Semi Pucca houses. The remaining 13 percent of the people said that they live in the Kuccha Houses. The important aspect is that in the village only 7 percent of the people reported of having an RCC Houses. Along with this, 41 percent of the houses are Constructed/Purchased or owned by themselves. 29 percent of the houses come in the category of other followed to which 13 percent are the rented Houses and other 10 percent are the rented houses. 7 percent of the houses are allotted under the schemes. In the village approximately 57 percent of the houses are having registered Papers.

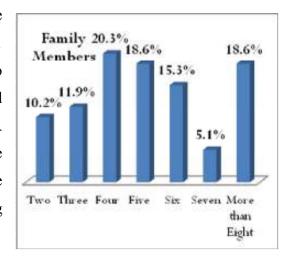
4.14.2. Sanitation



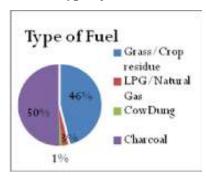
In the village 60 percent of the people having toilet facclity in their houses reported of having Flush toilet and remaining 40 said that they have Pit toilet in their houses. It was also said that those having toilet it was reported that 70 percent of the total toilets have been constructed by their own expenses and remaining 30 were provided full subsidy.

4.14.3. Family Size

In the village on an average four to five members are there in the family which was reported by around 21 and 19 percent of the people respectively. Followed to which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 15.3 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.



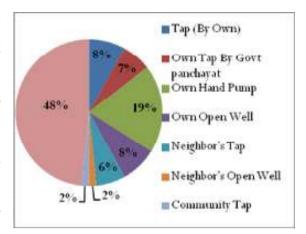
4.14.4. Type of Fuel



In the village mostly charcoal is used as a major fuel as 50 percent of the people have reported of using it. Followed to which we have the Grass/Crop Residue which is used by approximately 46 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but them very less in Prevalence.

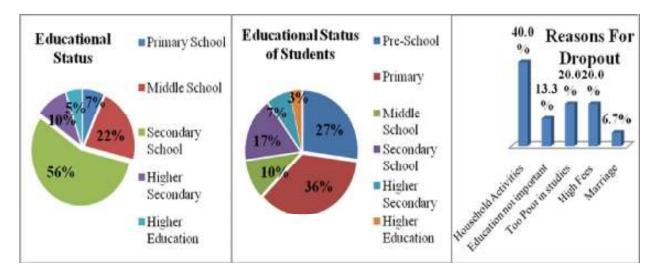
4.14.5. Water Source

Approximately 48 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 19 percent of the people also have their own Hand Pump. Around 8 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the water



sources but then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village are Neighbor's Tap and Own Tap Provided by the Government or Panchayat which are 6 percent and 7 percent respectively. Other remaining sources are Neighbor's Open Well, Community Tap etc.

4.14.6. Education

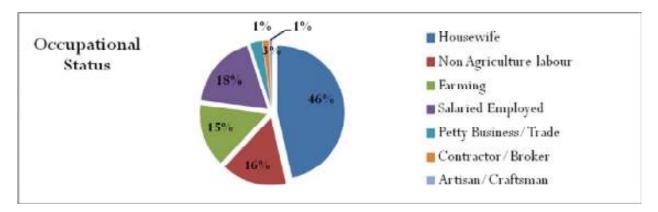


With regard to the education majority of the people which is approximately 56 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 22 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 17 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 7 percent respectively in both the standards. In the village the major reason for which the students left education was due to getting involved in the Household Activities. Approximately 40 percent of the students said that they left education due to getting involved in the Household Activities. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, High Fees and Marriage.

4.14.7. Occupation

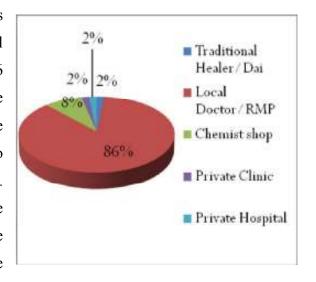
Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the

village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.



4.14.8. Health Seeking Behavior

In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village.



4.14.9. Recommendations

- ➤ In the village in order to improve the situation of sanitation households shall be provided with the toilets and prior to that they shall be also motivated with regard to the benefits of using toilets. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets
- Education facility for the children- providing the village primary school with Educational Materials will be a very nice initiative to develop interest of the students towards

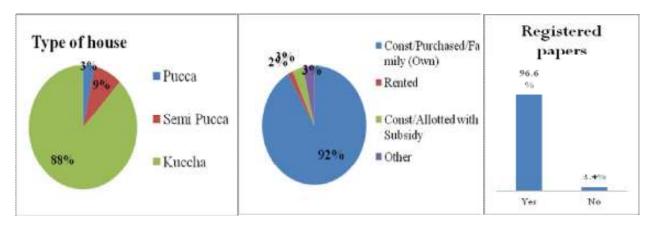
- education. CCL can help them by providing library which in turn will improve the quality of education.
- ➤ It was also found that 40% of the studied sample of students is dropouts, the reason being poverty and early marriage. CCL can introduce few scholarships for the poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Villagers have demanded a mobile medical van for health related issues because 86% of studied sample of villagers prefer to go to local RMP for medical consultation. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- > UPS and Anganwari has requested for water and toilet facility.

4.15. Kalyanpur Village

Facilities Existing within 5 kms. Post Office Bank for S/B Account Govt Primary School	Facilities Available in the village Cement/Tar Road PDS Shop ASHA Worker	Facilities Existing more than 5 Kms Railway Station Block Development Office Taluk Headquarters	
Charitable Secondary School Higher Secondary School YEAR 2011	Bus Stop Weekly Market Medical Shop Grocery Shop	District Headquarters Warehouse APMC/Mandi Govt. Secondary School Police Station Degree College	
HOUSEHOLDS 273	DTP/Xerox Centre Dai(Trained/Untrained) Private Clinic(RMP)		
POPULATION 1306 Public/Common 22 Tap Points HH Tap 00 Connections RELIGION House holds HINDU 273	Pvt. Primary School Gram Panchayat Office Private Primary School ASHA Worker Coopeartive Society Pre-Primary Nursery School Private Secondary School Health Sub Centre	ITI/Polytechnic Voc Training Centre PHC CHC/Govt Gen Hospital Private Hospital Veterinary Hospital Chief Crop Name Area	
Land Distribu Total Irrigated Grazin Area 1870 349 128	tion (In Acres);	Paddy 400Acres Forest Produce	
Migration Pattern Within the state (Non-Agri Within the State (Agricultu		Cultivation Yes Coal Collection Yes	

Figure poster 15: Kalyanpur Village

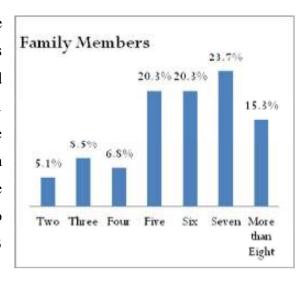
4.15.1. Household Status



In the village it was reported that around 88 percent of the houses are Kuccha in nature. Followed to which it was also found that 9 percent of the houses are Semi Pucca in nature and remaining three percent of the houses are Pucca. In the village no houses were reported as of RCC. With regard to the house ownership it was found that 92 percent of the houses are registered and remaining 8 percent of the houses fall in the category of rented and Constructed/Allotted under subsidy. In the village it was reported 96.6 % of the study sample had registered papers.

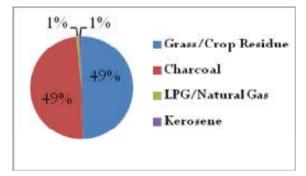
4.15.2. Family Size

In the village it was reported that majority of the families are having approximately seven members in their families. 23.7 percent of the people said that they are having seven members in their family. It was also reported by 20 percent each in the category of those having five and six members in their family. In the Kalyanpur Village large families having more than eight members are also available which was reported by around 15.3 percent of the people.



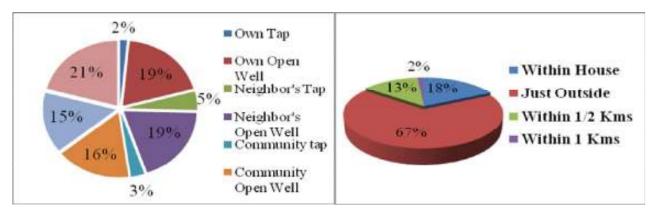
4.15.3. *Type of Fuel*

With regard to the major fuels used in the village majority of the people said that they use Charcoal and Grass/Crop Residue as fuel in their houses. Approximately half of the population use both Charcoal and grass/Crop residue as fuel. There are also other sources available in the village which is Kerosene and LPG/Natural Gas but very few people in the village use it.



4.15.4. Water Source

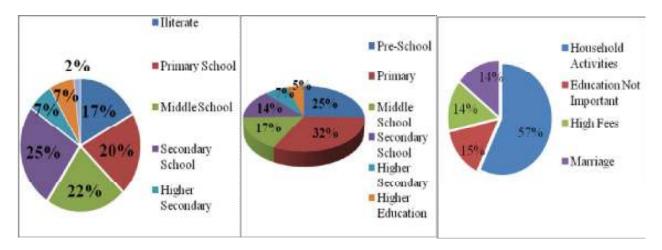
In the village it was reported that majority of the population use Public open tap to get drinking water and water for other domestic purposes. Own open well and Neighbor's Open well are also available in the village which is approximately 19 percent of the total in the village. 16 percent of the population reported that they use community open well to get water and followed to that we have other sources of water which are Community hand Pump, Neighbor's Tap, Own Tap etc. On asking the people with regard to the distance of the water source from their houses it was found that around 67 percent of the people have their source of water just outside their houses. Sources of water which are available just outside the houses are Public Open Well, Community Open Well, Neighbor's open well etc. In the village 18 percent of the households agreed that they have the water source within the house. Remaining 15 percent of the households have to go within half Kms and within 1 Kms also to get water.



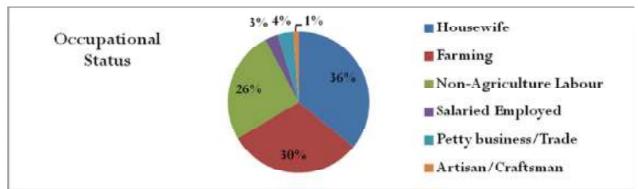
4.15.5. Education

With regard to the educational status of the village it was identified that 25 percent of the people have completed their higher secondary level education. Followed to which it was also reported that 20 percent of the people have completed their Primary level Schooling. The issue of concern in the village which was identified is that around 17 percent of the population was reported as illiterate. Remaining 7 percent each have completed their Higher Secondary and Higher education in the village. Two percent of the people were also identified as completed their

Vocational/Diploma/Certificate courses. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 32 percent. Followed to which is those who are involved in the Pre Schooling which is approximately 25 percent of the total. In the village percentage of students who are involved in the Middle Education is 17 percent. In the village Secondary and Higher Secondary level schooling comprises of 14 and 7 percent respectively in both the standards. In the village with regard to the major reasons for the dropout four were identified. Among the major cause identified for dropout in the village is getting engaged in the household activities which were reported by approximately 57 percent of the people. Followed to which it was also reported that other reasons for the dropout in the village are Considering education not important, High Fees and Marriage.



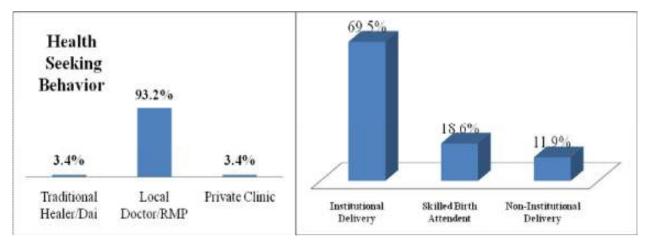
4.15.6. Occupation



Apart from the 36 percent women's reporting being Housewife, in the village those engaged in Farming are dominant which almost comprised of 30 percent of the people. Approximately 26 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Petty Business/Trade in the village comprises of 4 percent in the village which is followed by the

Salaried Employed and Artisan/Craftsman which are approximately 3 percent and 1 percent respectively in the village.

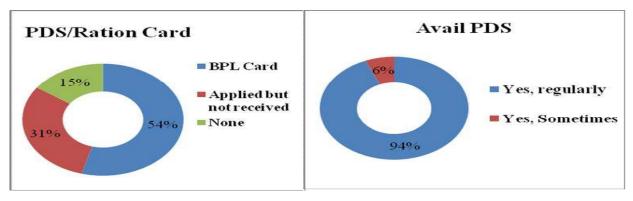
4.15.7. Health Seeking Behavior



In the village more than 93 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time around 3 percent of the people agreed that they go to the Traditional Healer/Dai for the treatment of their minor and major ailments. Followed to this it was also reported that 3.4 percent of the people agreed on visiting Private Hospitals and Clinics in case of any health related issues. Almost 69.5 percent of the births which have taken place in the village are Institutional in nature and followed to which it was reported by the women that 11.9 percent of the total births were non-Institutional in nature. In the village there is also prevalence of skilled birth attendant which is around 18.6 percent of the total.

4.15.8. PDS/ration Card Availability

In the village around 54 Percent of the people have the BPL Card and 15 percent of the people do not have any card available with them. 31 percent of the people have applied but have not received the Card. On asking to the people it was found that 94 percent of the people avail PDS.



4.15.9. Recommendations

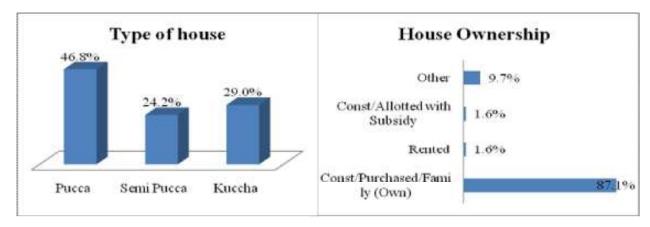
- ➤ Teachers have requested for the teaching aids. CCL can help them by providing library which in turn will improve the quality of education. It was also found that there is a high dropout rates in the village mainly because of poverty and few percentage due to early marriage. CCL can introduce scholarships for poor and needy students so that they can continue their education, which can provide both support and motivate the students towards Higher Education.
- ➤ .Villagers have demanded a mobile medical van for health related issues because 93.2% of studied sample prefer to go to local RMP for medical consultation. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Water is major requirement in the village despite having various sources of it. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Adivasi High School, Anganwari Kalyanpur, Anganwari (44), Standard English Academy, Tana Bhagat Avasi Vidyalia have requested for drinking water and toilet facility.

4.16. Kamta Village

YEAR	2011	Facilities /	Available in the	Facilities Existing within 5 kms.
HOUSEHOLI	os 500		illage	Bus Stop
		Cement Tar R		Public Telephone Booth
POPULATIO	V 2850	Ceasen Shan		Daily Evening Market
Forest Pro	oduce	Grocery Shop		Weekly Market
		PDS Shop		Post Office
Cultivation	Yes	Pre-pri Nursei	ry School	DTP/Xerox Centre
	200	Govt Primary	School	Police Station
Forest Produce	e Yes			Gram panchayat Office
		Private Primary School		Cooperative Society
		Private Secon	dary School	Bank
Chief Crop	Area	ASHA Worke	T.	Block development Office
Name				Govt Secondary School
Dod V	90	Private Clinic	(RIVIP)	Higher Secondary School
Paddy		Dai(Trained/Untrained)		Degree College
	acres	Public/Comm	on Tap 00	Pvt Clinic (MBBS BAMS) Health Sub Centre
RELIGION		Points		CHC /Govt. general Hospital
	holds			Medical Shop Chemist
		HH Tap Connections 00		PHC
				AND DESCRIPTION OF THE PROPERTY OF THE PROPERT
				Facilities Existing more than 5
				Kms
	Land Distr	ibution (In Ac	res):	Railway Station
		**	71	Taluk Headquarters
Total Area	Irrigated	Grazing	Wasteland	District Headquarters
				APMC/Mandi
782	61	26	260	Charitable Primary
				Charitable Secondary
Migration Patt	ern			ITI/Polytechnic
				Voc training Centre
Outside the state (Non-Agricultural Labour) Yes				
Outside the Sta	Outside the State (Agricultural Labour) Yes			Pvt Hospital
	0.000000		Ayush Hospital	

Figure poster 16: Kamta Village

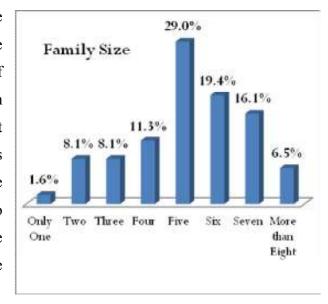
4.16.1. Household Status



In the village majority of the houses are Pucca which is approximately 46.8 percent of the total. It was reported by the people that they have Pucca houses and followed to which 29 percent of the people in the kamta village have Kuccha houses with them. In the village 24.3 percent of the people also have Semi Pucca houses. In the village nobody reported of having a RCC House with them. With regard to the ownership of houses 87.1 percent of the respondent said that they have their own houses. Around 9.7 percent of the people said that they have house ownership in the other category. The remaining have been reported as of those having rented houses and those Constructed/Allotted with subsidy.

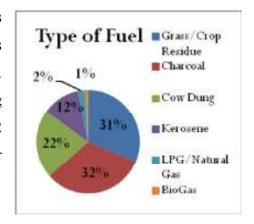
4.16.2. *Family Size*

In the Village it was found that majority of the family in the village reported of having five members in the family. Around 29 percent of the people said that they have five members in their families, followed to which 19.4 percent of the people said that they have six members in the family. In the village there is a diverse range of family size ranging from only one to More than eight. The important thing to be noticed in the village is that there is also large percentage of large families in the village.

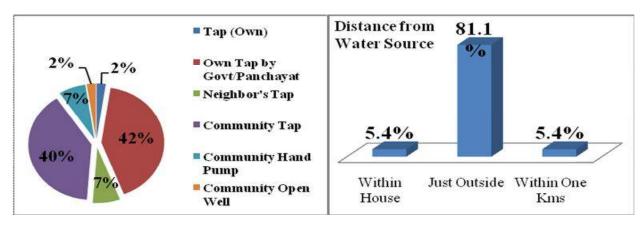


4.16.3. *Type of Fuel*

In the village there are various types of fuels used such as Charcoal, Grass/Crop Residue and Cow dung. It was reported that 32 percent of the people used charcoal as fuel. Followed to which are Grass/Crop Residue and Cow Dung which are 31 percent and 22 Percent respectively. 12 percent of the people use Kerosene as fuel and other remaining sources are LPG/Natural Gas and Biogas.

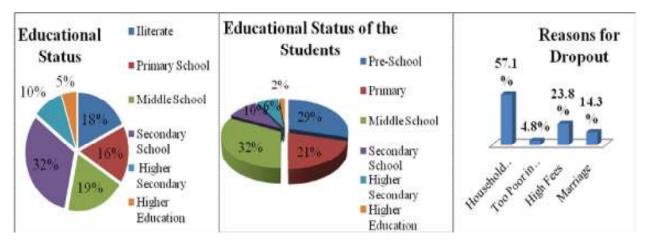


4.16.4. Source of Water



Approximately 42 percent of the people said that they use Own Tap provided by the Govt/Panchayat in order to get drinking and water for domestic purposes. In the village 40 percent of the people use Community Tap to get water. Around 7 percent of the people are also dependent upon the Community Hand Pump and Neighbor's Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Approximately 81 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 6 percent of the people have the water sources in their houses and similar to that another 5 percent of the people said that they are having water sources within a Kms. The important aspect is that 6 percent of the entire population has to go within a Kms to get water.

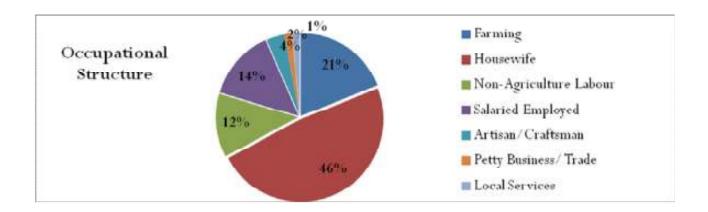
4.16.5. Education



In the village majority of the people which is around 32 percent of the total who have completed their Secondary Level Education. Followed to that it was also found, 19 percent of the people completed their Middle level education. The important concern is that around 18 percent of the people reported as Illiterate. Similarly another sixteen percent of the people said that they have completed their Primary level education. In the village those completed their Higher education is very less around 5 percent of the total. In the village those students who are currently involved in the education or having their education, it was reported that around 32 percent of them are in the Middle Level Schooling. Followed to which it was found that 29 percent are involved in their Pre-School education and 19 percent in the primary education. Those who are currently engaged in the Higher Education, their percentage are very less which is around less than 2 percent of the total. The primary reason which forces the students to leave the education in between and is most dominant in the village was found to be getting involved in the household activities. Followed to which it was also found that 'High Fees' is also a major cause of dropout in the village which was reported by around 23.8 percent of the people. There are also other two reasons identified as reasons for dropout being reported in the village which are 'Marriage' and 'Too Poor in Studies'.

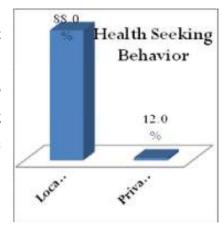
4.16.6. Occupation

In the village approximately 46 percent of the women in the village were Housewives and followed to which 21 percent of the people are engaged as farmers. Similarly 14 percent of the people said that they are engaged as salaried employed and 12 percent as Non-Agriculture Labour. In the village there is also prevalence of other occupations available such as those engaged as Artisan/Craftsman, Petty Business Trade Local Services etc.



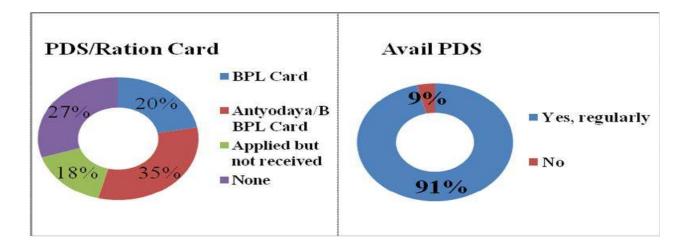
4.16.7. Health Seeking Behavior

In the village it was reported that majority of the people visit Local Doctor/RMP in case of any health related problem. Approximately 88 percent of the people agreed that they visit to the Local Doctor available if anybody fells sick. The remaining 12 percent of the people said that they visit to the private clinic to take health services.



4.16.8. People Having PDS/Ration Card

Around 35 percent of the people in the village are having the Antyodaya BPL Card followed to which 27 percent do not having any card available with them. In the village 20 percent of the people said that they have the BPL Card and remaining 18 percent of the people have applied but they have not received any card. With regard to avail PDS in the village 91 percent of the people avail it regularly and remaining 9 percent of the people said that they don't avail it.



4.16.9. Recommendations

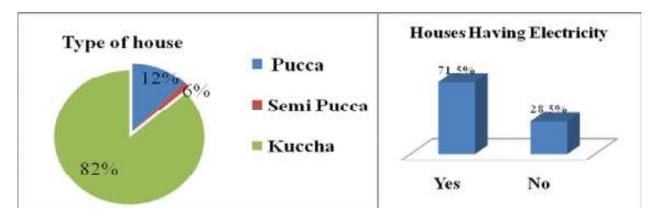
- Mobile Medical Van shall be provided in the village, as 88% of studied sample goes to local RMP. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people especially women and children also to take the benefit of it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- It was also found that there is a high dropout rates in the village because of poverty and early marriages. CCL can introduce few scholarships for the poor students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Despite having various water sources in the village, the village still faces shortage of water during summers. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ During the interview, UMS, Anganwari center (Harijan Tola), Madrassa Kamta, Iqra Public School and Anganwari Center (Masjid Tola) have requested for water and toilet facility.
- ➤ In command areas of CCL, Sports Competitions in schools should be conducted, and prizes shall also be distributed which will encourage students more towards developing their extra-curricular skills. Also CCL should identify the sportsman on the basis of their performance in particular sports with the help of teachers. Those found interested in sports and performing well should be linked to district or state sports authority wherein they can make their carrier in sports.

4.17. Kirighara Village

YEAR	2011	Facilities Ev	isting within 5	
			ms.	Facilities Available in the village
HOUSEHOLDS	307	Bus Stop		\$50
POPULATION 1540		Grocery Sho	D	PDS Shop
		Weekly Mark		Cement/Tar Road
Forest Dred	luca.	DTP/Xerox C	Centre	Cement lai Road
Forest Prod		Post Office		Pre-pri Nursery School
Cultivation	Ye	Ayush Hospi		Private Clinic(RMP)
Coal	S	Veterinary C		Private Clinic(RiviP)
Collection	Ye	Gram Panch Health Sub C		Facilities Existing more than 5
	rea	Bank for S/B		Kms
Name		Pvt Primary		Block Development Office
Paddy 2	0	Govt. Primar		Taluk headquarters
	cres	Pvt Seconda		
	louse	Gavt. Second Degree Colle		District Headquarters
h	olds	Health Sub C		Warehouse
HINDU 3	07	Pyt Clinic (M		Police Station
		Medical Shop	p/Chemist	
Land Distribution (In Acres):		APMC/Mandi		
				Railway Station
Total Area Nor		Grazing	Wasteland	Charitable Primary
Irrig	jated			Higher Secondary School
				Higher Secondary School
				Charitable Secondary
1876 469)	389	790	Degree College
Migration Pattern			ITI/Polytechnic	
				Vocational Training Centre
Within the state (Agricultural Yes			CHC/Govt Gen Hospital	
Labour) Yes				
Outside the State (Non-Agricultural			Private Hospital	
Labour			РНС	

Figure Poster 17: Kirighara Village

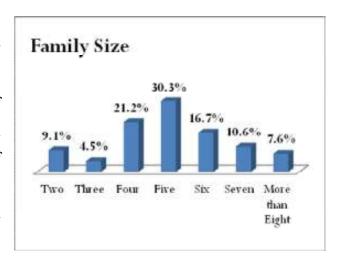
4.17.1. Household Status



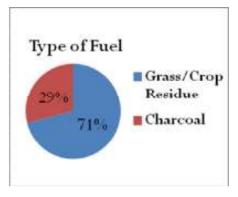
In the Karighara Village people reported that 82 percent of the houses are Kuccha and remaining 14 percent are divided into Pucca and Semi Pucca houses. 12 percent of the houses are Pucca and 6 percent of the houses are Semi Pucca. In the village no RCC made Houses were found as per reported by the people. Along with these the important aspect of the houses in the village is that all the houses are owned by the people themselves, nobody in the village reported of staying in the rented houses or allotted under any schemes as such. On asking the people with regard to the registered papers of houses all respondent have agreed on having it. With regard to having electricity in the houses approximately 51.5 percent of the houses have said that they have it in their houses.

4.17.2. Family Size

In the village on an average five members are there in the family which was reported by around 30 percent of the people. Followed to which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 16.7 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.



4.17.3. Type of Fuel

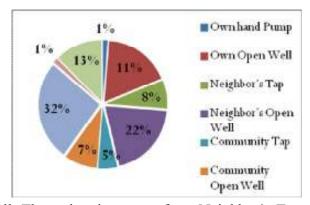


In the village mostly Grass/Crop Residue and Wood is used as a major fuel as 71 percent of the people have reported of using it. Followed to which we have the Charcoal which is used by approximately 29 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they were very less in Prevalence.

4.17.4. Water Source

Approximately 32percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 22 percent of the people also have their

own Neighbor's Open Well. Around 11 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in

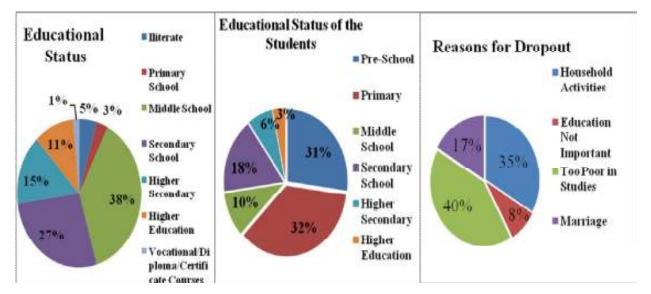


the village Community tap, Community Open Well, Those drawing water from Neighbor's Tap etc but their availability is very low such as 7 percent, 8 Percent and 5 percent respectively.

4.17.5. Education

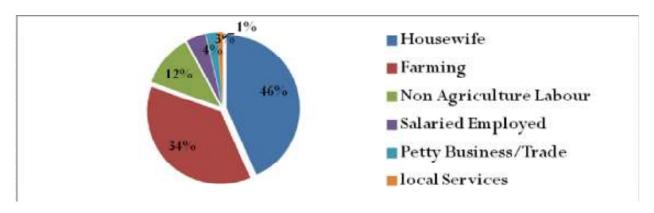
With regard to the education majority of the people which is approximately 56 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 22 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 32 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 31 percent of the total. In the village percentage of students who are involved in the Secondary

Level Education is 18 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 6 percent respectively in both the standards. Approximately 40 percent of the students said that they left education due to being too poor in studies. In the village another major reason for which the students left education was due to getting involved in the Household Activities. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, and Marriage which are 8 percent and 17 percent of the total.

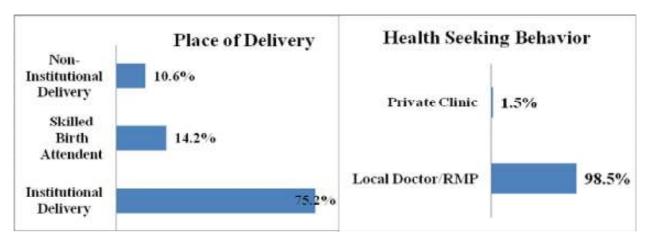


4.17.6. Occupational Status

Apart from the 46 percent women's reporting being Housewife, in the village Farming is the dominant occupation which is almost comprised of 34 percent of the people. Approximately 12 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Salaried Employed in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.



4.17.7. Health Seeking Behavior



In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 98.5 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 1.5 percent of the people which is very low said that they visit to private clinic in case of any health related issue. The women who have given any birth in last three years reported that out of the total 75.2 percent of the births have taken place in any health Institution. In other words majority of the births are institutional in nature. Followed to that there is also prevalence of skilled birth attendant which is around 14.2 percent of the total births, in the village there was also identified the Non-Institutional Deliveries which was around 10 percent.

4.17.8. Availability of PDS/Ration Card

Thirty percent of the people in the village have reported that they have their BPL card available with them. Similar to that 35 percent of the people also said that they do not have any card with them. Along with that, 20 percent of the people also reported that they have applied but haven't received their card. Those having the Antyodaya/BPL Card are very low in percentage such as 14 percent of the total. Of the total 97 percent of the people reported that they avail PDS regularly.



4.17.9. Recommendations

- ➤ Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- As the data suggests there is a high dropout rate in this village due to poverty and early marriages. CCL can introduce scholarships for poor meritorious students so that they can continue their education.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- Drinking water problem is the major problem in this village. People use hand pumps and open wells for drinking purposes. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- In command areas of CCL, Sports Competitions in schools should be conducted, and prizes shall also be distributed which will encourage students more towards developing their extra-curricular skills. Also CCL should identify the sportsman on the basis of their

performance in particular sports with the help of teachers. Those found interested in sports and performing well should be linked to district or state sports authority wherein they can make their carrier in sports.

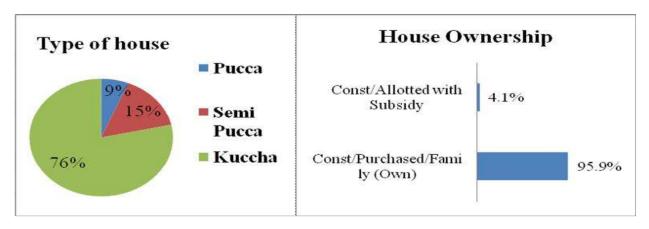
- > UMS and Anganwari have requested for toilet and drinking water facility.
- > During the interview with villagers, they have requested for construction of bridge on Damodar River.

4.18. Karo Village

YEAR	2011	Facilities Available in	Facilities Existing within 5
		the village	kms.
HOUSEHOLD:	ST 440	Cement/ Tar Road	TANK TANKS
HOUSEHOLD	S 118	Appellation.	Charitable primary School Bus Stop
		PDS Shop	
POPULATION	435	Gracery Shop	Private Clinic(RMP) Weekly Market
ACRESTATION NO.		Continuity Shipp	DTP/Xerox Centre
D. Lucion Communication	non 00	Degree College	Private Secondary School
Public/Comm Tap Points	ion Du	AND THE RESIDENCE OF THE PROPERTY OF THE PARTY OF THE PAR	Post Office
	2000	Govt Primary School	Police Station (Neturia)
HH Tap	00	Higher Secondary School	Bank for S/B Account
Connections		riigher secondary school	Gram Panchayat Office
Chief Crop	Area	ASHA Worker	Pre-Primary Nursery School
Name			Private Primary School
	40	Ayush Hospital	Health Sub Centre
Paddy			Medical Shop/Chemist
	acres	Dat (Trained/Untrained)	Veterinary Clinic
RELIGION	House	Forest Produce	Facilities Existing more than 5
RELIGION	holds	rolest Floduce	Kms
		- 100 N	Police Station
HINDU	116	Cultivation Yes	The second secon
	02	Coal Collection Yes	Block Development Office
CHRISTIAN		CONSCIONATION CONTRACTOR AND	Taluk Headquarters
			District Headquarters
Lan	d Distrib	oution (In Acres):	APMC/Mandi
Lall	G DISTILL	(11 /10/03).	ITI/Polytechnic
Total Area	Irrigated	forest Wasteland	Govt. Secondary School
4/077	1010		Charitable Secondary
1877	1319	778 53	Vocational Training Centre
Migration P	attern		Private Clinic(MBBS/BAMS)
	10102111		PHC
\A/ithin the	state (A-	ricultural Yes	CHC/Govt Gen Hospital
Labour)			1,00
Labour)		Yes	Private Hospital
Outside the	State (1	Non-	
Agricultural	Labour)		

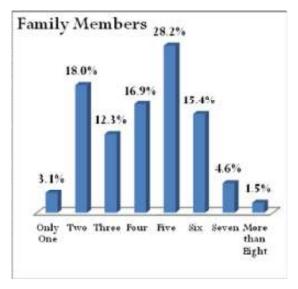
Figure poster 18: Karo Village

4.18.1. Household Status



Household Status with regard to Type of House having registered Papers. In the village majority of the houses are Kuccha which is approximately 76 percent and 15 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 9 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 95.9 percent of the respondent said that they have their own houses. Remaining 4.1 percent is comprised of those allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana.

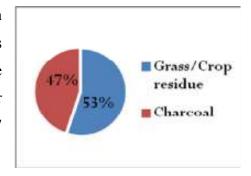
4.18.2. *Family Size*



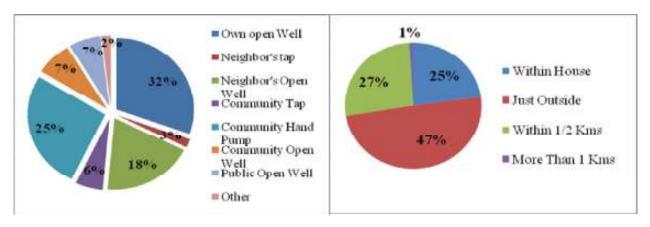
In the village a majority the people have said that they are having on an average five members in their families. Since as per reported by the people 28 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having only two members in the family. Those families having more than 8 members were found very less in the village which is around 1.5 percent.

4.18.3. *Type of Fuel*

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 53 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses.

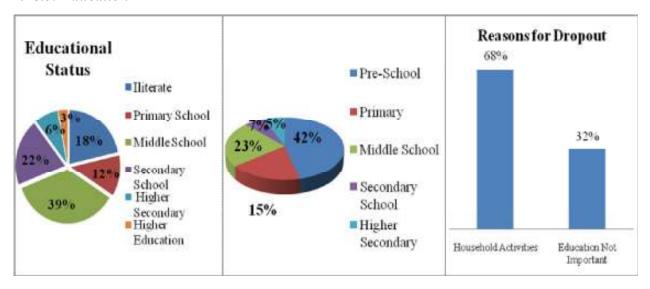


4.18.4. Water Source



Approximately 32 percent of the people said that they use Own open well in order to get water for drinking and water for domestic purposes. In the village 25 percent of the people use Community hand Pump to get water. Around 18 percent of the people are also dependent upon the Neighbor's Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well which are both 7 Percent reported by the people. Neighbor's Tap and Community tap are also available. Approximately 47 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 25 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

4.18.5. Education

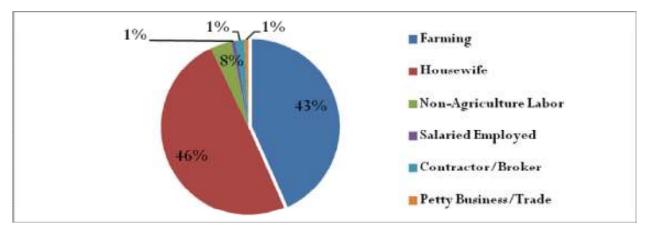


With regard to the education majority of the people which is approximately 39 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 18 percent of the people reported of being Illiterate. In the village 22 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 6 percent of the people have completed their Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 42 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 23 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 15 percent. In the village Higher Secondary and Secondary level schooling comprises of 6 percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 68 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

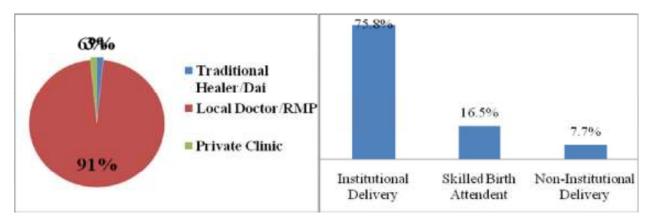
4.18.6. Occupation

Apart from the 46 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 43 percent of the people. Approximately 8

percent of the people are involved in the village are engaged in Non-Agriculture Labour. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.



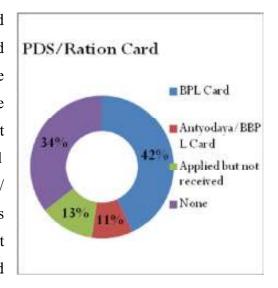
4.18.7. Health Seeking Behavior



In the village more than 91 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 6 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 75.8 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5 percent of the total. In the village around 7.7 percent of the deliveries are non-Institutional deliveries.

4.18.8. PDS/Ration Card Availability

In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 34 percent of the people do not have any card available with them. At the same time around 13 percent of the people have applied but they haven't received any card. The remaining 11 percent of the people reported that they have Antyodaya/BPL Card with them. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it.



4.18.9. Recommendations

- It was also found that there is a high dropout rates in the village. 68% of studied sample of students less than 18 years of age reported that they left education due to household activities. CCL can introduce few scholarships for the poor students in the village, which can provide both support and motivate the students towards Higher Education.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village, as 91% of the studied sample goes to RMP for medical consultation. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding various government schemes on health should be provided to the villagers especially on family planning, institutional deliveries etcc. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ People of this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

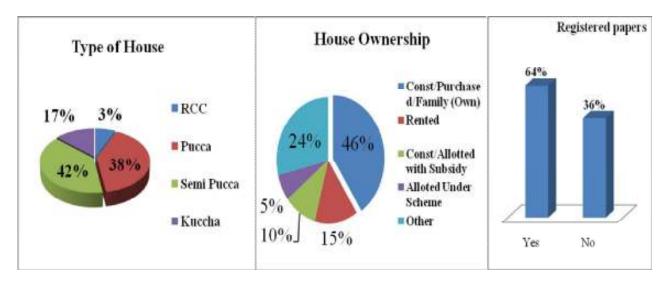
- ➤ UMS Karo has requested for Sports items while as Anganwari has requested for water facility.
- > In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.

4.19. Kasiyadi Village

VEAD SOL	- ***	
YEAR 2011	Facilities Available in	Facilities Existing within 5
	the village	kms.
HOUSEHOLDS 663	Weekly Market	Bus Stop
	Cement Tar Road	Public Telephone Booth
POPULATION 3986	PDS Shop	Grocery Shop
Forest Produce		DTP/ Xerox Centre
- VIII - VIII VII	Grocery Shop	Veterinary Clinic
Cultivation Yes	Post Office	Medical Shop
Firewood Yes	Gram Panchayat Office	Health Sub-Centre
M. (M. States See Mests)		Private Secondary School
Public/Common 00	Asha Worker.	Govt. Primary School
Tap Points	Pre/Pri Nursery School.	Private Primary School
HH Tap 00	Dai Trained/Untrained.	Govt. Secondary School
Connections	ļ.	Private Clinic (RMP+)
	RELIGION House	Escilition Existing mare than E
	holds	Facilities Existing more than 5 Kms
Chief Crop Area	Hindu 413	Railway Station
Name	52 43 55	Daily Evening Market
Paddy 150	Muslim 250	Taluk Headquarters
acres		District Headquarters
7 181.19		Police Station
Land Distribu	tion (In Acres):	Cooperative Society
Total Non- G	azing Forest Wasteland	Block Development Office
Area Irrigated		Bank
1506 592 98	46 409	APMC/Mandi
		Higher Secondary School
Migration Pattern		Degree College
		Vocational Training Centre
\A/ithin the state (Non	-Agricultural Yes	ITI
Within the state (Non		Charitable Primary Charitable Secondary
Labour)	Yes	CHC/Govt General Hospital
Outside the State (No	on-	PHC
Agricultural Labour)		Private Clinic (MBBS/BAMS)
		Private Hospital
		Titale Hospital

Figure poster 19: Kasiyadi Village

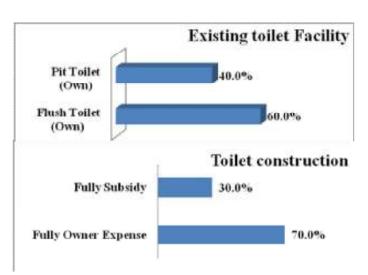
4.19.1. Household Status



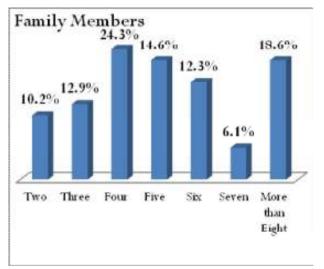
In the village a majority of the people reported that they have Pucca Houses in the village. Approximately 42 percent of the people said that they live in Pucca houses. Followed to which it was found that 38 percent of the people live in Semi Pucca houses. The remaining 17 percent of the people said that they live in the Kuccha Houses. The important aspect is that in the village only 3 percent of the people reported of having an RCC Houses. Along with this, 46 percent of the houses are Constructed/Purchased or owned by themselves. 24 percent of the houses come in the category of other followed to which 15 percent are the rented Houses and other 10 percent are the rented houses. 5 percent of the houses are allotted under the schemes. In the village approximately 64 percent of the houses are having registered Papers.

4.19.2. Sanitation

In the village 60 percent of the people having toilet facility in their houses reported of having Flush toilet and remaining 40 said that they have Pit toilet in their houses. It was also said that those having toilet it was reported that 70 percent of the total toilets have been constructed by their own expenses and remaining 30 were provided full subsidy.



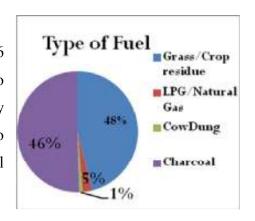
4.19.3. Family Size



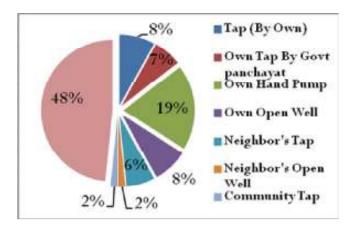
In the village on an average four to five members are there in the family which was reported by around 24 and 15 percent of the people respectively. Followed to which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 12.3 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.

4.19.4. Type of Fuel

In the village mostly charcoal is used as a major fuel as 46 percent of the people have reported of using it. Followed to which we have the Grass/Crop Residue which is used by approximately 48 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they very less in Prevalence.



4.19.5. Water Source

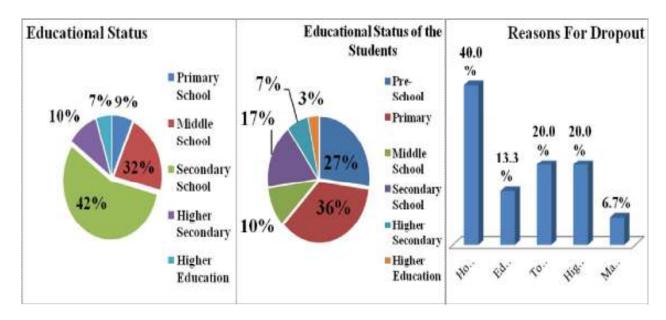


Approximately 48 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 19 percent of the people also have their own Hand Pump. Around 8 percent of the people are also dependent upon the own Open Well and Own Tap for getting water.

In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village are Neighbor's Tap and Own Tap Provided by the Government or

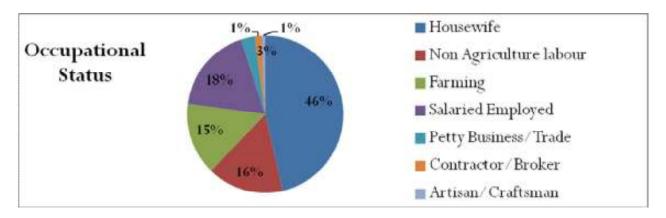
Panchayat which are 6 percent and 7 percent respectively. Other remaining sources are Neighbor's Open Well, Community Tap etc.

4.19.6. Education



With regard to the education majority of the people which is approximately 42 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 32 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 9 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 17 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 7 percent respectively in both the standards. In the village the major reason for which the students left education was due to getting involved in the Household Activities. Approximately 40 percent of the students said that they left education due to getting involved in the Household Activities. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, High Fees and Marriage.

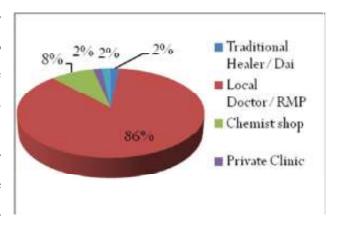
4.19.7. Occupation



Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

4.19.8. Health Seeking Behavior

In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options

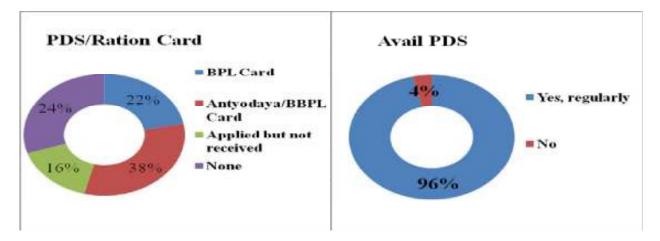


available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village.

4.19.9. People Having PDS/Ration Card

Around 38 percent of the people in the village is having the Antyodaya BPL Card followed to which 24 percent do not having any card available with them. In the village 22 percent of the people said that they have the BPL Card and remaining 16 percent of the people have applied but

they have not received any card. With regard to avail PDS in the village 96 percent of the people avail it regularly and remaining 4 percent of the people said that they don't avail it.



4.19.10. Recommendations

- In the village it was reported that 86% of studied sample prefer going to the Local Doctor/RMP in case of any health related issue. The suggested strategy with regard to this is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ There is high rate of dropouts in the village, reasons being poverty and early marriage. CCL can introduce scholarships for poor students. CCL should introduce scholarships for poor meritorious students.
- ➤ People of this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should

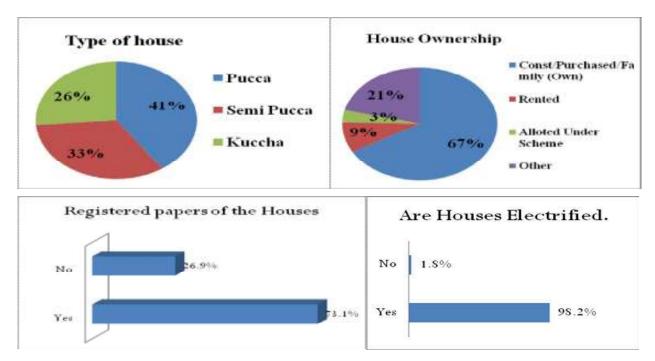
- also be asked to motivate the villagers about roof water harvesting.
- ➤ Village reflects extremely discouraging figure in terms of sanitation. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- > Teachers of schools have requested for education related materials, library can be the option for this.
- > UMS has requested books for library, toilet, drinking water facility and sports items.
- > Anganwari center has requested for toilet facility.

4.20. Kichto Village

YEAR	2011	Facilities Available	in the village	Facilities Existing within 5
HOUSEHOLD	S 350	Cement Tar Road		kms. Private Secondary School
		Bus Stop		
		Weekly Market		Post Office
POPULATION	1 1786	PDS Shop Grocery Shop		Health Subcentre
		heddelplotell./heddeld.irli		DTP/Xerox Centre
		Pre/Pri Nursery Sci	hool	Bank for S/B Account
		Govt Primary Scho	ol	CONTRACTOR OF THE PROPERTY OF
Forest Pro		Private Primary School		Facilities Existing more than 5 Kms
Coal Collect	ion Yes	Medical Shop/Cher	nist	than 5 Kms
		ASMA Worker		Railway Station
Cultivation	Yes	Private Clinic		Police Station
Firewood	Yes	Public/Common	Tap 08	Block Development Office
	110000	Points		Taluk Headquarters
				District Headquarters
	98 (*1.00 to to to	HH Tap Connec	tions 00	
Chief Crop	Area	Market Contract of		Warehouse
Name				APMC/Mandi
Paddy	60	RELIGION	House	Govt. Secondary School
	Acres	Kullicion	holds	Charitable Secondary
		Hindu		Charitable Primary School
		Muslim	01	
	Land Dis	stribution (In Acres):		Links Consider Coloni
Total Area I	rrigated	Grazina Forcet	Wasteland	Higher Secondary School Degree College
Total Alea I	rrigated	Grazing Forest	vvasteland	
1700	1520	740	57	ITI/Polytechnic
1700	1530	743	57	Veterinary Clinic
				Vocational Traning Centre
Migration Pattern PHC CHC/Govt. Gen. Hospital				
30/02/				Private Clinic
Within the state (Non-Agricultural Labour) Yes				(MBBS/BAMS)
				Private Hospital
Within the state(Agricultural Labour) Yes Ayu				Ayush Hospital
Outside state	Outside state (Non-Agri Labour) Yes			
Figure poeter 20: Kiehte Village				

Figure poster 20: Kichto Village

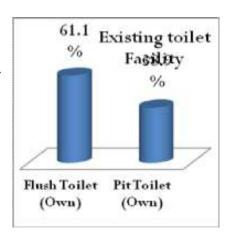
4.20.1. Household Status



In the Kichto village it was reported that the majority of the people are living in the Pucca houses which is around 41 percent of the total houses. Semi Pucca houses in the village are followed by that which is around 33 percent and remaining 26 percent of the houses were reported as Kuccha houses. In the village there were no houses reported as of RCC. With regard to the house ownership 67 percent of the people reported of having houses of their own. Around 9 percent of the people have reported of having rented houses and remaining three percent of the total houses were allotted under the Scheme.

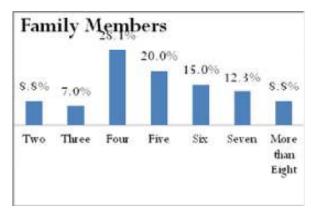
4.20.2. Sanitation

In the village out of those people who are having toilets in their homes around 61 percent of the total are having Flush toilet of their own. Remaining people are having pit toilet of their own. Secondly, with regard to the toilet construction 67 percent of the available toilets have been constructed at the owner's own expense. Similarly 28 percent of the toilets have been reported as been made under fully subsidy and remaining 5 percent have been provided under Government/NGO Expense.

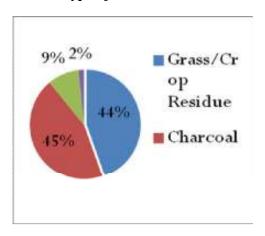


4.20.3. Family Size

In the village majority of the people reported that they are having four members in the family. Followed to that around 20 percent of the people said that they are having five members in the family. In the village there is also availability of the large families, such as 12.3 percent of the people said that they are having seven members in the family.

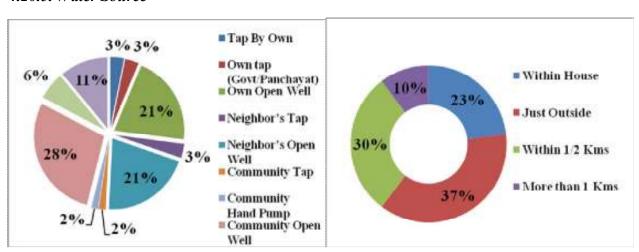


4.20.4. Type of Fuel



In the village there are four types of fuels used in the village which are Grass/Crop Residue, Charcoal, LPG/Natural Gas and Cow Dung. Around 45 percent of the people use Charcoal as fuel in their houses. In the village around 44 percent of the people use Charcoal as fuel in their houses too. There are also other types of fuel available in the village but their availability is very less in the village such as Cow dung and LPG/Natural Gas.

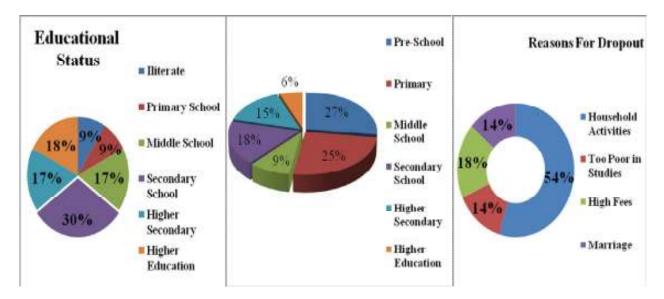
4.20.5. Water Source



In the village there is wide variety of sources of water available in the village. It was reported that 28 percent of the people are dependent upon the Community open well. Followed to which we have Own Open well and Neighbor's Open well which are 21 percent each in the village. In

the village there are also other sources available such as Own Tap provided by the Govt/Panchayat, Neighbor's Tap, Own Open well etc. Majority of the people in the village 37 percent of the people said that they have their source of water just outside the House. After that 30 percent of the people also said that they have water source within ½ Kms. In the village around 23 percent of the people have their water source within the house only. The important concern is that around 10 percent of the people have to go around more than 1 Kms to fetch water.

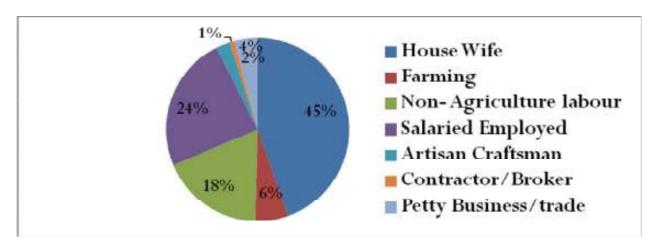
4.20.6. Education



With regard to the education majority of the people which is approximately 30 Percent found to be in the categories that have completed their Secondary Level education. Followed to which comes Middle level Schooling and Higher Secondary which comprises of 17 percent each. In the village 18 percent of the people also reported that they have completed their Higher education. In the village people also reported that 9 percent of the people have completed their Primary Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 9 percent. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 25 percent. Followed to which is those who are involved in the Pre Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 18 percent. In the village Higher Secondary and Middle level schooling comprises of 15 and 9 percent respectively in both the standards. In the village getting involved in the household activities is the major cause for the

Dropout. Following that 18 percent of the students left their education due to High fees. The other causes of dropout are High Fees and Being too poor in studies because of which students left their education. Getting involved in the household activities seemed to be the major reason for dropout in the village as 54 percent of the people reported of it. Being too poor in studies and Marriage are the other two reasons in the village which was reported by approximately 14 percent each in the village.

4.20.7. Occupation



Apart from the 45 percent women's reporting being Housewife, in the village those engaged in Salaried Employed are dominant which almost comprised of 24 percent of the people. Approximately 18 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Petty Business/Trade in the village comprises of 4 percent in the village. Around 6 percent of the people are engaged in the Farming and other occupations available in the village are Artisan/Craftsman, Contractor/Broker etc.

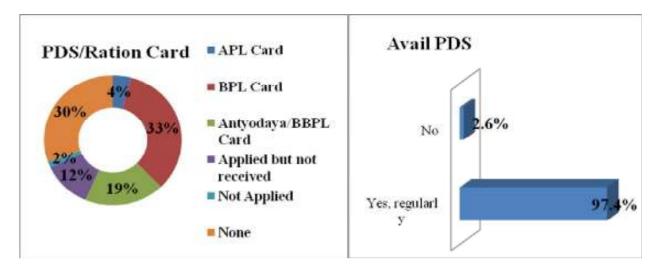
4.20.8. Health Seeking Behavior

In the village approximately 71 percent of the people prefer to visit Local Doctor/RMP in case of any health related Problem. Followed to which it was also reported that 13 percent of the people visit 'Other' Sources to fetch water. Similarly 11 percent of the people said that they visit Private clinic and remaining 5 percent of the people visit Government Hospital to get health services.



4.20.9. PDS/Ration Card Availability

In the village around 33 Percent of the people have the BPL Card and 30 percent of the people do not have any card available with them. 12 percent of the people have applied but have not received the Card. In the village only 4 percent of the people have the APL Card with them. On asking to the people it was found that 97.4 percent of the people avail PDS.



4.20.10. Recommendations

- It was also found that there is a high dropout rates in the village. Majority of the students of studied sample less than 18 years of age reported that they left education due to household activities and early marriages. CCL can introduce few scholarships for poor students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ The problem of pollution existed in this village (from observation) but since people living in these areas were used to inhaling the smoke, there wasn't any major complaint about it. The recommendation would be plantation of trees and installing water sprinklers with scientific method (size of nozzle, amount of water sprinkled per second and mixing of chemicals).
- ➤ Villagers have requested a mobile medical van for health related issues because 71% of studied sample prefer to go to local RMP for medical consultation. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services

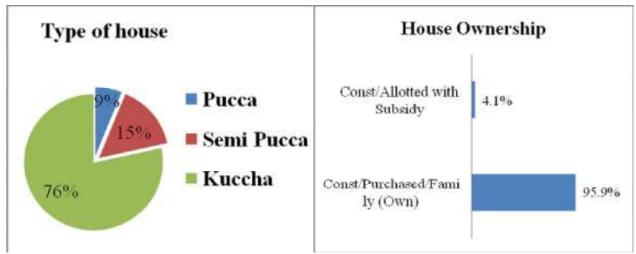
- for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- Community tap & Open Well are the major source of water is the village. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ People of this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Piparwar vikas Vidyalia, UMS and Sarasvati Shishu Vidyalia Mandir have requested for construction of extra 5, 2 and 3 class rooms and sports items. As teachers have to conduct combine classes.

4.21. Koed Village

YEAR 2011	Facilities Existir	ng within 5	Facilities Existing more than 5
HOUSEHOLDS 653	kms. Gooperative Soc	untu	Kms Railway Station
	Post Office	MALE.	Public Telephone Booth
POPULATION 3800	Private Primary :	SARANI.	Daily/Evening Market
	Health Sub Cent		Taluk Headquarters
Forest Produce	Health Sub Centre		DTP/Xerox Centre Taluk Headquarters
	Facilities Avail		AND CONTRACT OF THE CONTRACT O
Cultivation Yes	villag	е	District Headquarters Block Development Office
Coal Yes	Bus Stop		Police Station
Collection	Cement Tar Roa	nd .	Private Primary School
	PDS Shop		Bank
Public/Commo 00	Weekly Market		Warehouse
n Tap Points	Grocery Shop		Charitable Secondary School
	Govt. Primary So	chool	APMC/Mandi
HH Tap 00	Asha Worker Dai(Trained/Untr	Chanin	ITI Polytechnic
Connections			Higher Secondary School Degree College
	Gram Panchaya Pre-Pri Nursery		Govt. Secondary School
Chief Area	RELIGION	House	Charitable Primary School
Crop	RELIGION	holds	Pvt Secondary School
Name			Vocational Training Centre.
Paddy 600acres	HINDU	653	Private Clinic(RMP)
	HINDS	000	Private Clinic(MBBS/BAMS)
	MADESCANOL		Private hospital Medical Shop
Land Distri			
Total Irrigated G	razing Forest	Wasteland	Ayush Hospital PHC
Area			CHC/Govt. Gen. Hospital
			Veterinary hospital
1220 57 4	1 528	154	

Figure Poster 21: Koed Village

4.21.1. Household Status

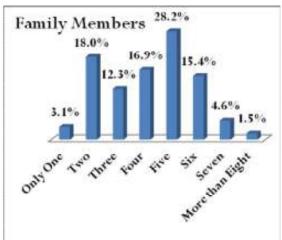


In the village majority of the houses are Kuccha which is approximately 76 percent and 15 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 9 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 95.9 percent of the respondent said that they have their own houses. Remaining 4.1 percent is comprised of those allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana.

4.21.2. Family Size

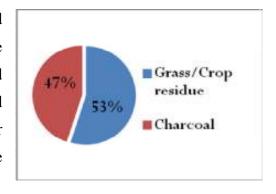
In the village a majority of the people have said that they are having on an average five members

in their families. Since as per reported by the people 28 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having only two members in the family. Those families having more than 8 members were found very less in the village which is around 1.5 percent.

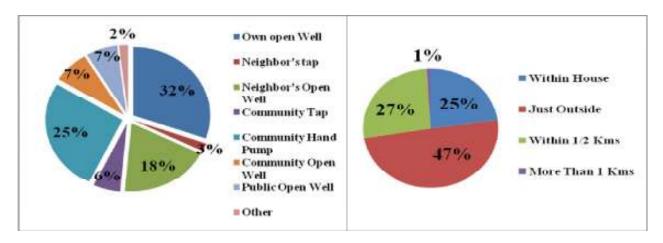


4.21.3. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 53 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses.

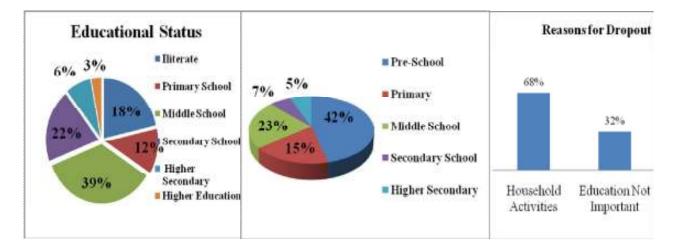


4.21.4. Water Source



Approximately 32 percent of the people said that they use Own open well in order to get water for drinking and water for domestic purposes. In the village 25 percent of the people use Community hand Pump to get water. Around 18 percent of the people are also dependent upon the Neighbor's Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well which are both 7 Percent reported by the people. Neighbor's Tap and Community tap are also available. Approximately 47 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 25 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

4.21.5. Education

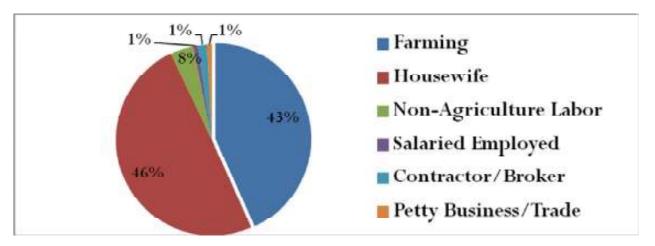


With regard to the education majority of the people which is approximately 39 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 18 percent of the people reported of being Illiterate. In the village 22 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 6 percent of the people have completed their Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 42 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 15 percent. In the village Higher Secondary and Secondary level schooling comprises of 6 percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 68 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

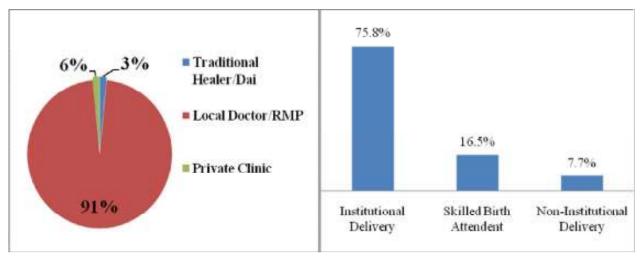
4.21.6. Occupation

Apart from the 46 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 43 percent of the people. Approximately 8

percent of the people are involved in the village are engaged in Non-Agriculture Labour. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.



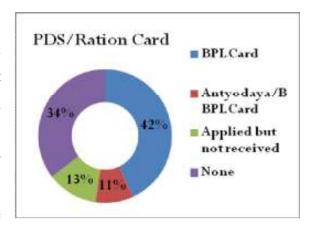
4.21.7. Health Seeking Behavior



In the village more than 91 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 6 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 75.8 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5 percent of the total. In the village around 7.7 percent of the deliveries are non-Institutional deliveries.

4.21.8. PDS/Ration Card Availability

In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 34 percent of the people do not have any card available with them. At the same time around 13 percent of the people have applied but they haven't received any card. The remaining 11 percent of the people reported that they have



Antyodaya/ BPL Card with them. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it

4.21.9. Recommendations

- ➤ People of this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- It was also found that there is a high dropout rates in the village. Majority of the students less than 18 years of age reported that they left education due to various household activities. CCL can introduce few scholarships for the poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- Doctor/RMP in case of any health related issue. The suggested strategy with regard to this is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people

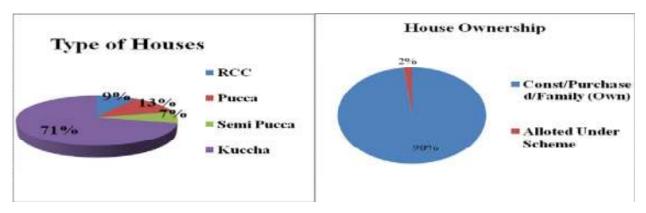
- from all the command villages of CCL can come and take consultation.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ UMS, UPS Bartola and UPS Basaria tola have requested for construction of toilets in their schools.
- > During the interview with villagers, they have requested for construction of dam on river for irrigational purposes.

4.22. Kumrankala Village

Facilities Available in	Facilities Existing within 5 kms.	Facilities Existing more than 5 Kms	
the village Cement/Tar Road	Daily Evening Market Weekly Market	Post Office	
Health Sub Centre	Bus Stop	Railway Station	
Govt Primary School	Public Telephone Booth PDS Shop	Private Secondary School Gram Panchayat Office	
	DTP/Xerox Centre	Cooperative Society	
Grocery Shop ASHA Worker	Police Station	Charitable Secondary School	
YEAR 2011	Bank for S/B Account Block Development Office	Taluk Headquarters	
HOUSEHOLDS 159	Pre-Primary Nursery	District Headquarters	
POPULATION 880	School Degree College	Warehouse	
	Private Primary School Govt. Secondary School	APMC/Mandi	
Forest Produce	Pvt Clinic (RMP+) PHC	Charitable Primary	
Cultivation Yes	Pvt Clinic (MBBS BAMS)	Vocational Training Centre ITI/Polytechnic	
Fire Wood Yes	CHC/Govt. Gen. Hospital	Private Hospital	
	Medical Shop Veterinary Clinic	Ayush Hospital	
Chief Area Crop	Land Distribution (In Acres):		
Name	Total Area Irrigated C	Grazing Forest Wasteland	
Paddy 400acres	1035 64 5	731 28	
RELIGION Hous			
holds HINDU 159	Within the state (Non-Agricultural Yes Labour)		
	Outside state (Non-Agri Labour) Yes		

Figure Poster 22: Kumrankala Village

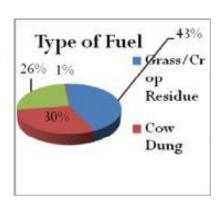
4.22.1. Household Status



In the village a majority of the people reported that they have Kuccha Houses in the village. Approximately 71 percent of the people said that they live in Kuccha houses. Followed to which it was found that 13 percent of the people live in Pucca houses. The remaining 9 percent of the people said that they live in the Semi RCC Houses. Along with this, all the houses are registered and the entire respondent said that they have their registered papers. In other words in the village only 2 percent of the people have been allotted houses under scheme of the government.

4.22.2. Type of Fuel

In the village three types of fuels are primarily used which are Grass/Crop Residue, Cow Dung and Charcoal which almost 43 percent, 30 Percent and 26 percent respectively. But in terms of majority Grass Crop residue and wood is used in the households as fuel. There are also other sources of fuel in the village which are Kerosene and LPG/Natural Gas. But these are very low in availability in the village approximately less than 1 percent in the village.



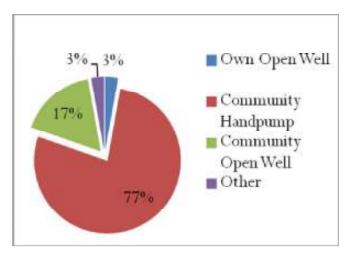


4.22.3. Family Size

With regard to the size of the family, it was reported that around 26.8 percent of the family in the village are having four members. After that there are 17.9 percent of the people who have agreed that in their family there are on an average five members. Also in the village there is also prevalence of the families having

members around seven or even more than eight also.

4.22.4. Source of Water



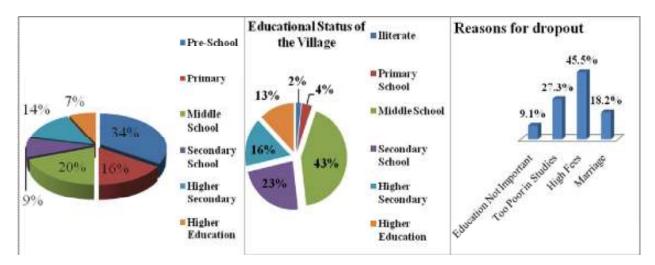
Approximately 77 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 17 percent of the people use Community Open Well. Around 6 percent of the people are also dependent upon the Open well and Other Sources for getting water. In the village people have a wide range of diversity of the

water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Approximately 72 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 25 percent of the people have the water sources within the range of a Kms and similar to that another 2 percent of the people said that they are having water sources within house. The important aspect is that 25 percent of the entire population has to go within a Kms to get water. In summer season there arises a great problem due to water scarcity.

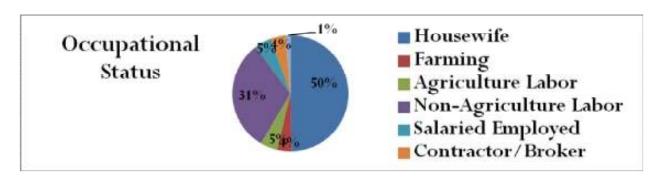
4.22.5. Education

With regard to the education majority of the people which is approximately 43Percent found to be in the categories that have completed their Middle Level education. Followed to that it was reported by the people of the village that they have completed their Higher Secondary Schooling, this is around 23 Percent of the total. In the village 16 percent of the people also reported that they have completed their Higher Secondary education. It was also said that percentage of Illiterate people in the village is approximately 2 percent. With regard to those who have done their Higher Education is 12 percent in the village. In the village majority of the students reported of being involved in their pre-schooling which is approximately 34 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 20 percent of the total. In the village percentage of students who are involved in the Primary

Education is 16 percent. In the village Higher Secondary and Secondary level schooling comprises of 14 and 9 percent respectively in both the standards. Currently those students who are involved in the Higher Education is approximately around 7 Percent. In the village majority of the people reported that due to high fee they left their education in between and it is also considered as a major cause for the Dropout. Around 45 percent of the total dropout in the village has taken place due to High Fees. Following which 27 percent of the students reported that they left education due to being too poor in the Studies. The other causes of dropout are Marriage which constitutes around 19 percent and remaining 9 percent of the students left education as they did not considered the education as important.

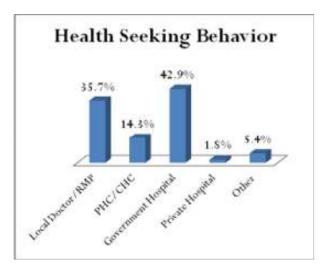


4.22.6. Occupation



Apart from the 50 percent women's reporting being Housewife, in the village those working as Non-Agriculture labor is dominant which is almost comprised of 31 percent of the people. Approximately 5 percent of the people are involved in the village are engaged in Agriculture Labour. Farming in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which are approximately 3 percent in the village.

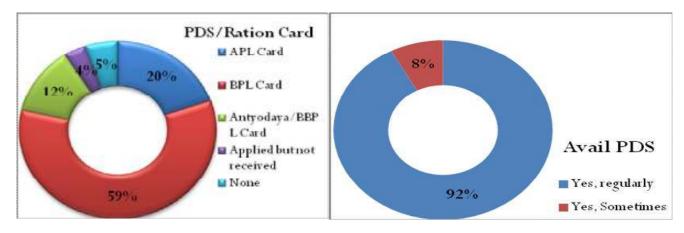
4.22.7. Health Seeking Behavior



In the village more than 43 Percent of the people prefer to go to the Government Hospital in case of any illness and disease. At the same time 36 percent of the people agreed that they go to the Local Doctor/RMP for the treatment of their minor and major ailments. Followed to which approximately 14 percent of the people also said that they visit PHC/CHC for health services. Followed to this it was also reported that 2 percent of the people agreed on visiting Private

clinics in case of any health related issue. In the village around 5 percent of the people also visit to the other services for any health related Problem.

4.22.8. PDS/Ration Card Availability



Of the total 59 percent of the people do not have any PDS/Ration Card followed to which is the 20 percent of the people who have APL card available with them. 12 percent of the people have BBPL Card. Only 1 percent of the people have APL Card. Approximately 92 percent of the people have agreed that they avail PDS regularly.

4.22.9. Recommendations

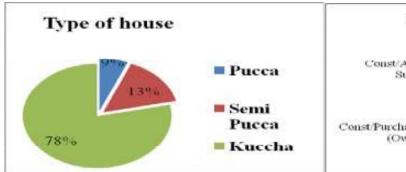
- ➤ Education facility for the children- providing the village schools with Educational Materials will be a very nice initiative to develop interest of the students towards education.
- ➤ It was also found that there is a high dropout rates in the village. CCL can introduce few scholarships for poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women and children also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- Nearly 25% of the studied sample said they have to walk more than 1km to fetch water. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Village reflects extremely discouraging figure in terms of sanitation. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ In command areas of CCL, Sports Competitions in schools should be conducted, and prizes shall also be distributed which will encourage students more towards developing their extra-curricular skills. Also CCL should identify the sportsman on the basis of their performance in particular sports with the help of teachers. Those found interested in sports and performing well should be linked to district or state sports authority wherein they can make their carrier in sports.

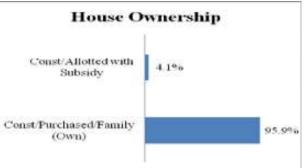
4.23. Kumuramkhurd Village

YEAR 2011 HOUSEHOLDS 327	Facilities Existing within 5 kms Charitable Primary School Dai(Trained/Untrained		Facilities Existing more than 5 Kms Police Station DTP/ Xerox Centre
POPULATION 1962	Facilities Available in the village Cement/tar Road		Bus Stop Daily Evening Market
Forest Produce	ASHA Worker Pre-pri Nursery School Govt Primary School PDS Shop Grocery Shop		Post office Gram Panchayat Office
			Railway Station
Firewood Yes			Bank for S/B Account Block Development Office
5-40-U-2	Public/Comm	юн 20	Taluk Headquarters
Chief Crop Area Name	Tap Points HH Tap		District Headquarters
	Connections	VIVVO ESPOI	Warehouse
HELI CALL MANAGE	RELIGION	House	APMC/Mandi
Paddy 200		holds	Public Telephone Booth
Acres	HINDU	327	Govt Secondary School Charitable Secondary School
Land Distrib	l ution (In Acr	es):	Pvt Primary School Degree College
Total Irrigated Gra Area	zing Forest	Wasteland	Higher Sec School Private Secondary School
1145 41 08	800	39	ITI/Polytechnic VOC/ Training Centre
Migration Pattern		CHC/Govt Gen Hospital PHC	
			Private Clinic(RMP)
Within the state (No Labour)	n-Agricultura	Private Hospital Private Clinic(MBBS/BAMS)	
			Ayush Hospital
Outside state (Non-	Agri Labour)	Veterinary Hospital Medical Shop	

Figure poster 23: kumuramkhurd village

4.23.1. Household Status

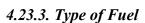




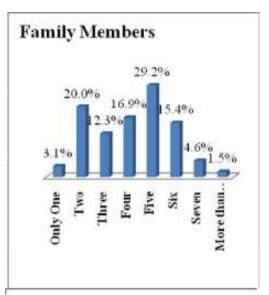
In the village majority of the houses are Kuccha which is approximately 78 percent and 13 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 9 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 95.9 percent of the respondent said that they have their own houses. Remaining 4.1 percent is comprised of those allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana.

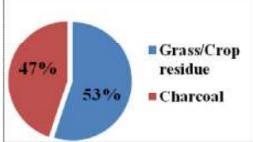
4.23.2. Family Size

In the village a majority of the people have said that they are having on an average five members in their families. Since as per reported by the people 29 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having only two members in the family. Those families having more than 8 members were found very less in the village which is around 1.5 percent.



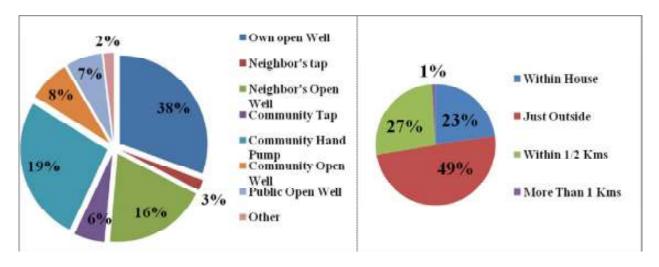
In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 53 percent of the people use Grass/crop





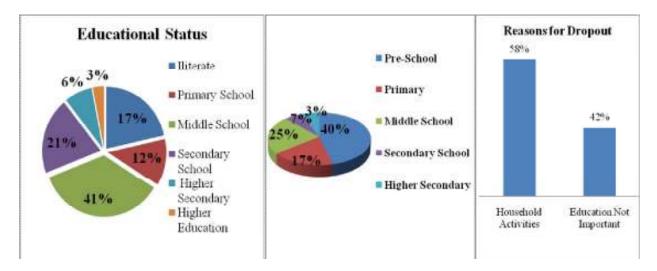
residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses.

4.23.4. Water Source



Approximately 38 percent of the people said that they use Own open well in order to get water for drinking and water for domestic purposes. In the village 19 percent of the people use Community hand Pump to get water. Around 16 percent of the people are also dependent upon the Neighbor's Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well which are both 7 Percent reported by the people. Neighbor's Tap and Community tap are also available. Approximately 49 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 23 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

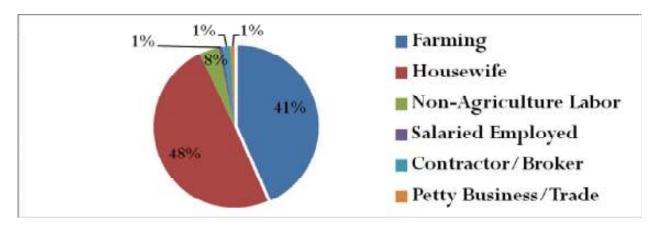
4.23.5. Education



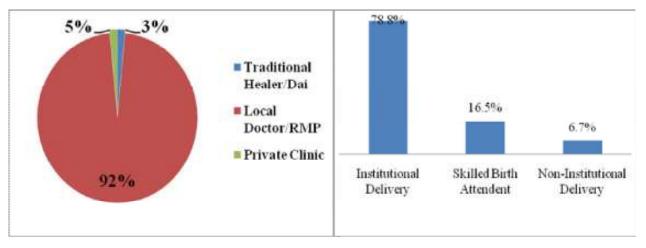
With regard to the education majority of the people which is approximately 41 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 17 percent of the people reported of being Illiterate. In the village 21 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 6 percent of the people have completed their Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 40 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 25 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 17 percent. In the village Higher Secondary and Secondary level schooling comprises of 7 and 3 Percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 58 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

4.23.6. *Occupation*

Apart from the 48 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 41 percent of the people. Approximately 8 percent of the people are involved in the village are engaged in Non-Agriculture Labour. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.



4.23.7. Health Seeking Behavior

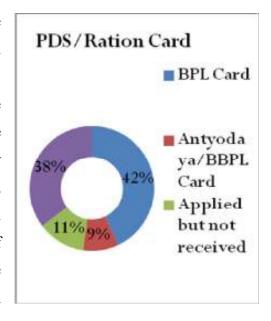


In the village more than 92 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 5 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 79 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5

percent of the total. In the village around 6.7 percent of the deliveries are non-Institutional deliveries.

4.23.8. PDS/Ration Card Availability

In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 38 percent of the people do not have any card available with them. At the same time around 11 percent of the people have applied but they haven't received any card. The remaining 9 percent of the people reported that they have Antyodaya/ BPL Card with them. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it



4.23.9. Recommendations

- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ It was also found that 48% of studied sample are dropouts because of poverty. CCL can introduce few scholarships for the poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Villagers have requested a mobile medical van for health related issues because 92% of studied sample prefer to go to local RMP for medical consultation. With this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. There shall also be referral services for patients and that CCL should provide free medical consultation in

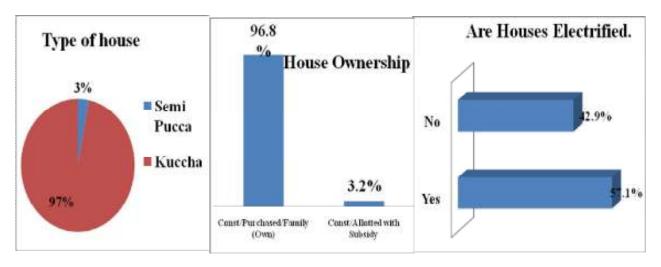
- their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- As the data suggests, most of the villagers go for ODS. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- > During the interview villagers have requested for Check dam on Deshwari River for irrigational and drinking water purposes.

4.24. Kutki Village

YEAR 2011 HOUSEHOLDS 83 POPULATION 450 Forest Produce Cultivation Yes	Facilities Available in the village Cement/Tar Road PDS Shop Pre-pri Nursery School Govt Primary School ASHA Worker	Facilities Existing more than 5 Kms Railway Station Police Station Bus Stop DTP/Xerox Centre
Firewood Yes	Facilities Existing within 5 kms. Gram Panchayat Office	Weekly Market Grocery Shop
Public/Comm 00 on Tap Points	Health Sub Centre Private Primary School	Block Development Office Taluk Headquarters
HH Tap 00 Connections	Private Clinic (RMP)	District Headquarters Bank
RELIGION House holds	Chief Crop Area Name	Charitable Secondary School Charitable Primary School Private Secondary School
HINDU 83	Paddy 20Acres	Govt. Secondary School Higher Secondary School Degree College
Land Distri	bution (In Acres):	ITI/Polytechnic
Total Irrigate	d Forest Wasteland	VOC/Training Centre
Area		Primary Health Centre
1293	585 33	CHC/Govt Gen Hospital
Migration Pattern		Private Clinic(MBBS/BAMS)
		Private Hospital
Within the state (N	on-Agricultural Yes	Medical Shop
Labour)		Veterinary Clinic

Figure Poster 24: Kutki Village

4.24.1. Household Status

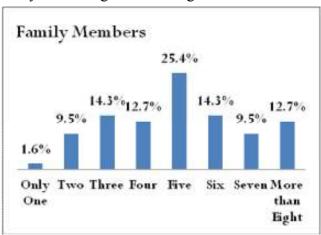


In the village majority of the houses are Kuccha which is approximately 97 percent of the people agreed that they are having Kuccha houses and only remaining three percent of the people are having Semi-Pucca houses. With regard to the ownership of houses 96.8 percent of the respondent said that they have their own houses. Remaining 3.2 percent is comprised of those allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana. With regard to the houses having electricity in the houses it was found that around 43 percent of the houses do not have electricity available with them. Remaining 57 percent of the people agreed that they have electricity but those who do not have electricity; their Percentage is very high in the village.

4.24.2. Family Size

In the village a majority of the people have said that they are having on an average five members

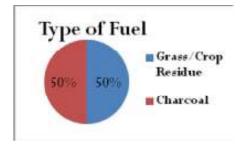
in their families. Since as per reported by the people 25 percent of the people have said that they are having five members in the family. In the village there has been also availability of the families having members around six also. It was found that there are also families which have reported of having only two members in the family. Those families having more than 8 members were found in the village which is



around 12.7 percent.

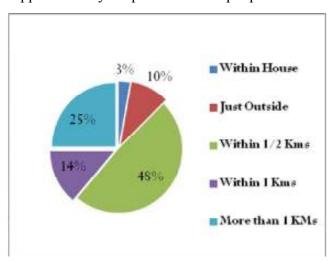
4.24.3. Type of Fuel

In the entire village only two types of fuels are being used which are Grass/Crop Residue and Charcoal and their percentage of availability and usage is exactly same.



4.24.4. Water Source

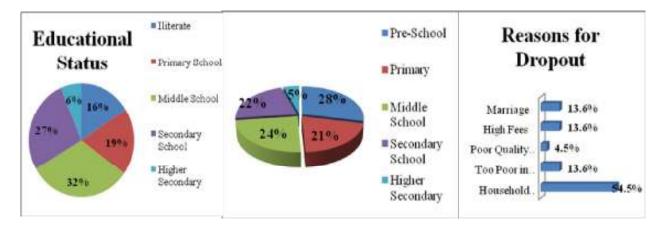
Approximately 43 percent of the people said that they use 'Other Sources' in order to get water



for drinking and water for other domestic purposes. In the village 24 percent of the people use Neighbor's Open Well to get water. Around 15 percent of the people are also dependent upon the Public Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the

year. The other available sources of water for the people are Community Open well and Own Open Well which are 11 percent and 7 percent respectively in the village. Approximately 48 percent of the people have their source of water within ½ Kms. In other words the people have to go around ½ Kms in the village to get or avail water for the drinking and other domestic purposes. In the village 25 percent of the people have to look for the water sources located at more than a Kms. Approximately 14 percent of the people said that they are having water sources Within a Km. The Only 10 percent of the people have water source just outside their houses and only 3 percent of the people have water sources within their houses.

4.24.5. Education

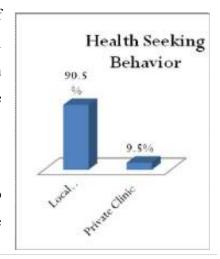


With regard to the education majority of the people which is approximately 32 Percent found to be in the categories that have completed their Middle Level education. In the village 27 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 19 percent of the people have completed their Primary Level Schooling. Crucial aspect of the village is that 16 percent of the people are illiterate. Around 6 percent of the people are having completed their Higher Secondary Education. In the village majority of the students reported of being involved in their pre-schooling which is approximately 28 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 24 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 22 percent. Those in the village who are currently involved in the Primary level education are 21 percent of the total. The remaining five percent are in the Higher Secondary Education. With regard to the students who left education in between and asking them the reasons for which they left education, it was found that approximately 55

percent of the students left school due to the responsibility of the Household Activities. Followed to which there are several other reasons which came out as the reasons for dropout which are Marriage, High Fees, Being too poor in studies and also the Poor quality of teaching in the school.

4.24.6. Health Seeking Behavior

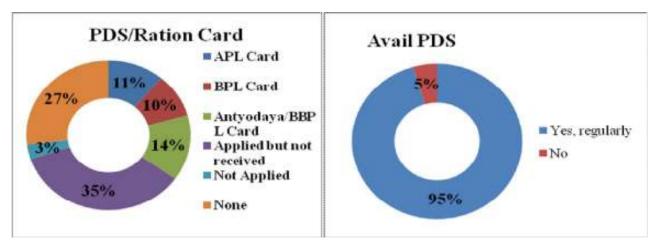
In the village more than 91 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the



same time 9 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments.

4.24.7. PDS/Ration Card Availability

In the village around 35 percent of the people reported that they have applied for the card but they have not received it yet. Followed to which it was also found that 27 percent of the people do not have any card available with them. In the village there are only 10 percent of the people who hold a BPL card with them and 11 percent of the people have APL Card with them. Fourteen percent of the people said that they are having Antyodaya/BPL Card with them and remaining 3 percent of the people have not applied for any card in the village. With regard to the avail of PDS Ration it was found that almost 95 percent of the people avail PDS Ration regularly.



4.24.8. Recommendations

- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Villagers have requested a mobile medical van for health related issues because majority of studied sample prefer to go to local RMP for medical consultation. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people specially women also to take the benefit from it. There shall also be

- referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- There is high rate of dropouts in the village, reasons being poverty and early marriage. CCL can introduce scholarships for poor students. As 54.5% studied sample of students said they left education because of various household activities.
- Drinking water problem is the major problem in this village. People use hand pumps and open wells for drinking purposes. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ NPS Barwa Tola, UMS and Anganwari center have requested for toilet and drinking water facility.

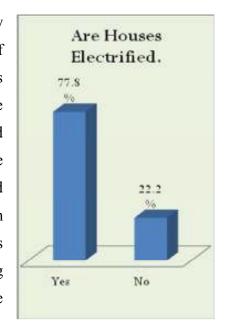
4.25. Lokaya Village

	2011 56	Facilities Availa		Facilities Existing more than 5 Kms
Population 2	290	Govt. Primary Sc		Railway Station
		Dai (Trained/Unti	ained)	Police Station DTP/Xerox Centre
Public/Commo n Tap Points HH Tap	00	ASHA Worker Facilities Existin	a within 5	Bus Stop Daily/ Evening Market
Connections Chief Area Crop	а	kms. PDS Shop Weekly Market	9	Block development Office
Name		Gram Panchayat		Taluk Headquarters
Maize 35a	cres	Govt Secondary Private Seconda	School	District Headquarters Higher Secondary School
The second secon	ouse olds	Health Sub Cent Forest Pro		Degree College
HINDU 56		Cultivation	Yes	Pre-Pri/Nursery School (Sarbari)
		Coal Collection	Yes	Charitable Primary
Lan	nd Distr	bution (In Acres)		Charitable Secondary
Total Non- Irri Area Irrigated	igated	Grazing Fores	t Wastelan d	CHC/Govt. Gen. Hospital Primary Health Centre
450 24 35		111 185	89	Private Hospital
Migration Pattern			Private Clinic(RMP)	
Within the state (Non-Agricultural Yes Labour)		Private Clinic(MBBS/BAMS)		
Within the Stat	e (No	on-Agricultural	Yes	Veterinary Clinic Medical Shop/ Chemist

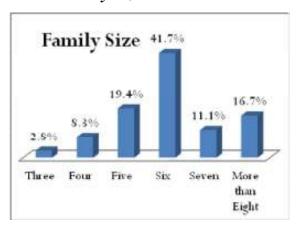
Figure Poster:25 Lokaya Village

4.25.1. Household Status

In the village it was reported that all the houses are only Kuccha. In other words it was found that hundred percent of the houses were reported as Kuccha. All other types of houses were completely absent from the village. On asking the people with regard to the ownership of the house it was found that almost all the houses are owned by the people themselves. Along with this all the people have registered papers of their houses too. On asking the Households with regard to the availability of electricity in their houses it was found that around 78 percent of the houses are having electricity. Remaining 22 percent of the people do not have electricity in their houses.



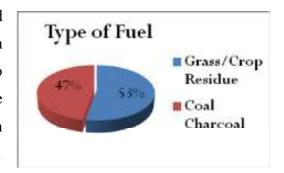
4.25.2. Family Size



With regard to the size of the family, it was reported that around 42 percent of the family in the village are having six members. After that there are 20 percent of the people who have agreed that in their family there are on an average five members. Also in the village there is also prevalence of the families having members around seven or even more than eight also which is around 17 percent.

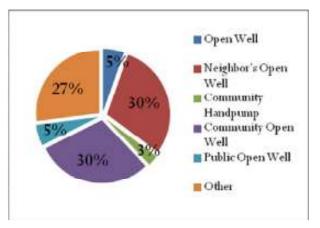
4.25.3. Type of fuel

In the village two types of fuels are primarily used which are Grass/Crop Residue and Charcoal which almost 53 and 47 percent respectively. There are also other sources of fuel in the village which are Kerosene and LPG/Natural Gas. But these are very low in availability in the village approximately less than 1 percent in the village.



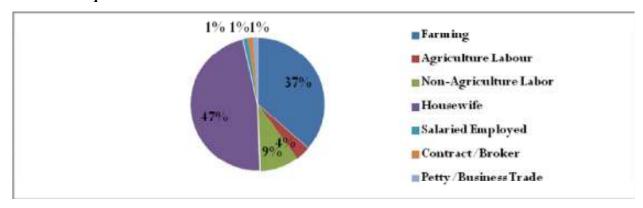
4.25.4. Water Source

Approximately 30 percent of the people said that they use Community Open well and Neighbor's open well each in order to get drinking and water for domestic purposes. In the village 27 percent of the people are completely dependent upon the other sources for drinking water and water for the other domestic purposes. Around 6 percent of the people are also dependent upon the Open



well and Public Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year.

4.25.5. Occupational Status



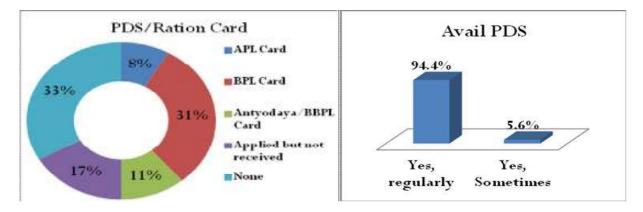
Apart from the 47 percent women's reporting being Housewife, in the village those engaged in the Agriculture is dominant which is almost comprised of 37 percent of the people. Approximately 9 percent of the people are involved in the village are engaged in Non-Agriculture Labour. In the village around 4 percent of the people are involved in farming and remaining occupations available in the village are Contractor/Broker, Petty business/Trade and Salaried Employed which are around or less than 1 percent each in the village.

4.25.6. Health Seeking Behavior

With regard to the health seeking behavior it was reported that almost all the people in the village visit the Local Doctor/RMP in order to get treatment or take health services.

4.25.7. PDS/Ration Card Availability

Of the total 33 percent of the people do not have any PDS/Ration Card followed to which is the 31 percent of the people who have BPL card available with them. 17 percent of the people have applied but dint received the card. Only 8 percent of the people have APL Card. Approximately 95 percent of the people have agreed that they avail PDS regularly.



4.25.8. Recommendations

- It was also found that there is a high dropout rates in the village. Majority of the students less than 18 years of age reported that they left education due to various household activities and early marriage. CCL can introduce few scholarships for the poor meritorious students in the village, which can provide both support and motivate the students towards Higher Education.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

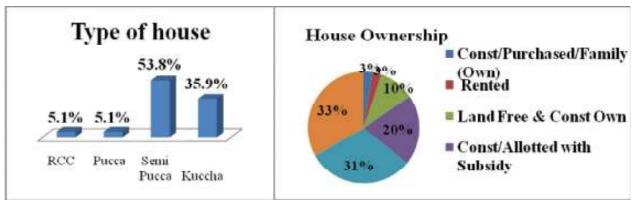
- The problem of hygiene and sanitation is also major concern in this village. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ UPS has requested for construction of 3 extra class rooms.

4.26. Magardaha Village

YEAR 2011	Facilities Available in the	Facilities Existing more than 5
	village	Kms
HOUSEHOLDS 53	Private Primary School	Railway Station
	Cement/Tar Road	Bus Stop
POPULATION 800	Private Secondary School	Public Telephone Booth
	Tivate occordary conco	Pre-Primary Nursery School
Forest Produce	Facilities Existing within 5	Grocery Shop
	kms.	DTP/Xerox Centre
	Daily/ Evening Market	Block Development Office
Coal Collection Yes	Weekly Market	Post Office
Firewood Yes	PDS Shop	Police Station
	Govt. primary School	Taluk Headquarters
	Govt. Secondary School	Bank
Public/Commo 00		District Headquarters
n Tap Points	Health Sub Centre	
A comment	RELIGION House	Higher Secondary School
HH Tap 00	holds	Degree College
Connections	Muslims 53	Charitable Primary
		Charitable Secondary
Land Distrib	ution (In Acres):	VOC/Training Center
Total Irrigated Gra	zin Forest Wastelan	ITI/Polytechnic
Area g	d	Private Clinic(RMP)
595 121	121 25	Primary Health Center
Migration Pattern		CHC/Govt Gen Hospital
Within the state (Non-Ag	gricultural Yes	Private Hospital
Labour)	Yes	Private Clinic(MBBS/BAMS)
Within the State (Agricu	tural Labour) Yes	Ayush Hospital
Outside the State (Non-		Medical Shop
Labour)		Veterinary Clinic
		Votes many Simile

Figure Poster: 26 Magardaha Village

4.26.1. Household Status



In the village majority of the houses are Semi Pucca which is approximately 54 percent of the people agreed that they are having Semi Pucca houses. Along with this it was also reported by the people that there is around 36 percent of the houses which were reported as Kuccha. Remaining 10 percent of the houses have been divided into Both RCC Houses and Pucca Houses. With regard to the ownership of houses 3 percent of the respondent said that they have their own houses. Majority of the houses have been allotted under the various schemes which are around 31 percent. Approximately 33 percent of the houses have been categorized as 'other' and 20 percent were reported as those Constructed/Allotted under subsidy. The people also reported that around 10 percent of the houses are land free & construction own based houses. It was also reported by the people that almost all the houses in the village is having electricity and with regard to the houses having registered Papers it was found that 86 percent of the houses are having registered papers of it.

4.26.2. Family Size

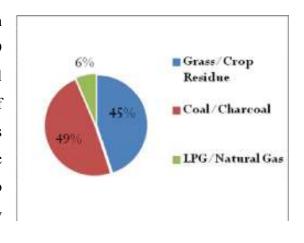
In the village a majority of the people have said that they are having on an average four members in their families. Since as per reported by the people 28 percent of the people have said that they are having five members in the family. In the village there has been also availability of the families having members around six also. Approximately 21 percent of the people reported



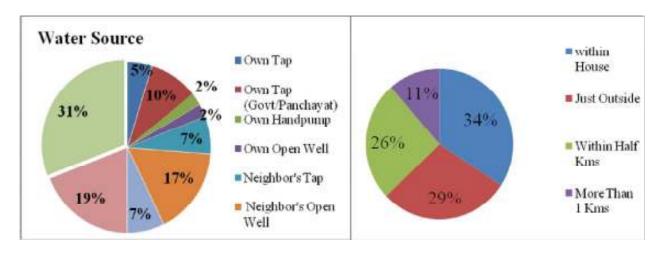
it. Those families having more than 8 members were found in the village which is around 12.7 percent.

4.26.3. *Type of fuel*

In the village there are three types of fuels which were identified. It was found that around 49 percent of the household use Coal & Charcoal followed to which it was found that 45 percent of the houses use Grass/Crop Residue and wood as fuel in their houses for cooking and other domestic purposes. In the concerned village there was also prevalence of LPG/Natural Gas but it is very low which approximately around 6 percent is.



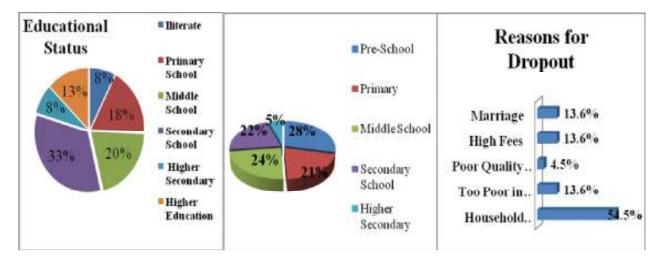
4.26.4. Source of Water



Approximately 31 percent of the people said that they use 'Other Sources' in order to get water for drinking and water for other domestic purposes. In the village 17 percent of the people use Neighbor's Open Well to get water. Around 19 percent of the people are also dependent upon the Public Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Community Open well and Own Open well etc. Approximately 34 percent of the people have their source of water

within House. In the village 29 percent of the people have to look for the water sources located just outside the House. Approximately 26percent of the people said that they are having water sources Within Half Kms. The Only 11 percent of the people have water source available more than a Kms away.

4.26.5. Education

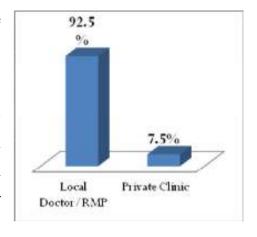


With regard to the education majority of the people which is approximately 33 Percent found to be in the categories that have completed their Secondary Level education. In the village 20 percent of the people also reported that they have completed their Middle Level education. In the village people also reported that 18 percent of the people have completed their Primary Level Schooling. Crucial aspect of the village is that 8 percent of the people are illiterate. Around 13 percent of the people are having completed their Higher Education. In the village majority of the students reported of being involved in their pre-schooling which is approximately 28 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 24 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 22 percent. Those in the village who are currently involved in the Primary level education are 21 percent of the total. The remaining five percent are in the Higher Secondary Education. With regard to the students who left education in between and asking them the reasons for which they left education, it was found that approximately 55 percent of the students left school due to the responsibility of the Household Activities. Followed to which there are several other reasons which came out as the reasons for dropout which are

Marriage, High Fees, Being too poor in studies and also the Poor quality of teaching in the school.

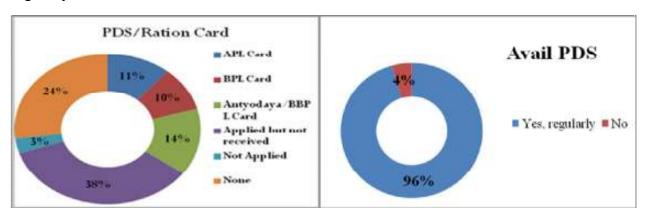
4.26.6. Health Seeking Behavior

In the village more than 93 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 7.5 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments.



4.26.7. PDS/Ration Card Availability

In the village around 38 percent of the people reported that they have applied for the card but they have not received it yet. Followed to which it was also found that 24 percent of the people do not have any card available with them. In the village there are only 10 percent of the people who hold a BPL card with them and 11 percent of the people have APL Card with them. Fourteen percent of the people said that they are having Antyodaya/BBPL Card with them and remaining 3 percent of the people have not applied for any card in the village. With regard to the avail of PDS Ration it was found that almost 96 percent of the people avail PDS Ration regularly.



4.26.8. Recommendations

The problem of pollution existed in this village (from observation) but since people living in these areas were used to inhaling the smoke, there wasn't any major complaint about it. The recommendation would be plantation of trees and installing water sprinklers with scientific method(size of nozzle, amount of water sprinkled per second and mixing of chemicals)

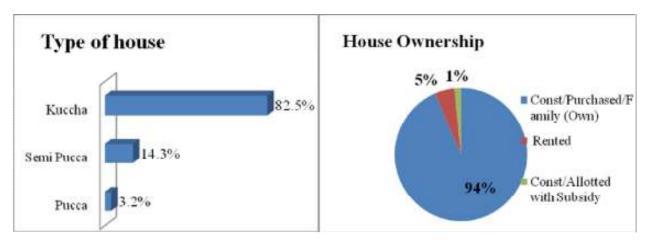
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- Doctor/RMP in case of any health related issue. The suggested strategy with regard to this is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women also to take the benefit of it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- It was also found that there is a high dropout rates in the village, the reasons being involvement in household activities and early marriages. CCL can introduce few scholarships for poor students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Water is the most crucial requirement in the village. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ New Magardaha High School has requested for 4 extra class rooms and construction of toilet and drinking water facility.
- ➤ Construction of Household toilets may be considered.

4.27. Mander Village

YEAR 2011	Facilities Available in the		
	village	Facilities Existing more than 5 Kms	
HOUSEHOLDS 140	Cement /Tar Road Bus Stop		
	Charitable Primary School	Railway Station Public Telephone Booth	
POPULATION 775		Police Station	
	Charitable Secondary School		
Forest Produce	ASHA Worker		
	Govt Primary School	Block Development Office	
Coal Collection Ye	Private Primary School	Block Development Office	
s	Tavato Primary School	Taluk Headquarters	
Firewood Ye	Facilities Existing within 5	1	
s Cultivation Ye	kms. PDS Shop	District Headquarters	
Chief Crop Area	Daily Evening Market	- 0 · 0 · 3 - × - 0 · 0	
Name	Weekly Evening Market	Post Office	
Ivallic	Grocery Shop		
Maize 200	DTP/Xerox Centre	Higher Secondary School	
Acres	Gram Panchayat Office	VOC/ Training College	
	Bank for S/B Account		
RELIGION House holds	Pre/Pri Nursery School	Govt. Secondary School	
	Private Secondary School		
		ITI/Polytechnic	
	Medical Shop Private Clinic(RMP)	Degree College	
	Health Sub Centre		
Land Distrib	oution (In Acres):	Primary Health Centre	
Total Irrigated Gra	zing Forest Wasteland		
Area		CHC/Govt Gen Hospital	
2171 238 526	0 1432 37		
2000	Private Hospital		
Migration Pattern Ayush Hospital			
Within the state (Non-Agricultural Labour) Yes			
Within the State (Agricu	Pvt Clinic (MBBS BAMS)		
Outside the State (Non-Agricultural Yes			
Labour)		Veterinary Clinic	

Figure Poster 27: Mander Village

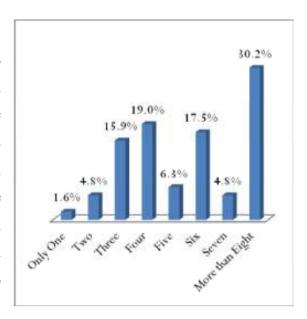
4.27.1. Household Status



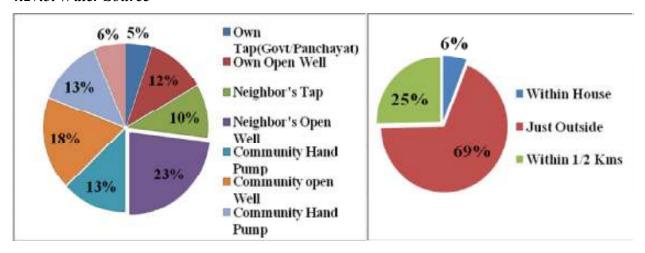
In the Mander village majority of the people have Kuccha houses to stay which is around 83 percent of the total. The other two categories of the houses are Semi Pucca and Pucca which are approximately 14.3 percent and 3.2 percent of the total in the village. On asking to the people with regard to the ownership of the houses it was found that around 94 percent of the people own their houses and remaining 6 percent have been divided into rented houses and constructed or allotted with subsidy. Along with all these all the houses are having registered papers of their houses. But the issue of concern is that no houses in the village reported of having electricity connection.

4.27.2. Family Size

In the village there is availability of large families i.e. More than 8 which is also the majority when compared to other family size available in the village. Approximately 30 percent of the families reported that they have more than eight members in their families. Followed to this 19 percent of the people said that they are having four members in their family. In the village there is diversity with regard to the family size ranging from only one to more than eight also.

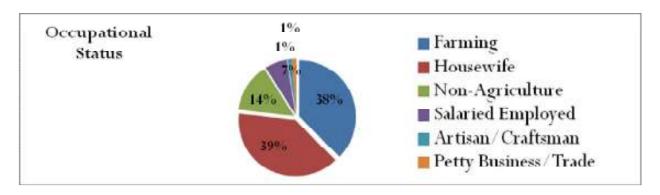


4.27.3. Water Source



In the Mander village majority of the people have said that they are completely dependent upon the Neighbor's Open well for taking water for drinking and other domestic purposes. Approximately 18 percent of the people fetch water from the community open well. Community hand Pump and community Open Well are the other major source of water available in the village which is used by around 13 percent each people in the village. 12 percent of the people reported that they are having Own Open well in the village. Other sources available in the village are own tap provided by Government or Panchayat, Public Open Well and Neighbor's tap etc. As mentioned above with regard to the water sources, people also said that majority of them are having their water sources located just outside their houses. Followed to this 25 percent of them are having water sources within ½ Kms. Only 6 percent of the people are having water sources in their houses.

4.27.4. Occupation

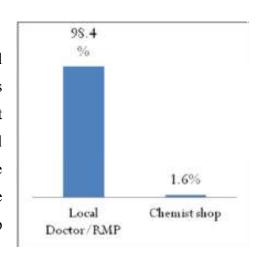


In the village around 39 percent of the women said that their occupation is housewife and followed to this it was also identified that 38 percent of the people are engaged in farming to get

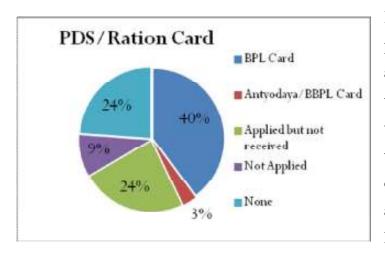
their livelihood. Similarly 14 percent of the people have said that they are engaged in the Non-Agriculture activities and 7 percent of the people have said that they are salaried employed. There are other sources also available in the village which is Petty business/Trade and Artisan/Craftsman but they very less around 1 percent or even less than that also.

4.27.5. Health Seeking Behavior

Broadly in the village people visit to the Local Doctor/RMP in case of any health related problem which is approximately around 98 percent. This also implies that majority of the people directly approach to the Local Doctor if they have any health related issue or to take health services. Remaining less than 2 percent of the people has said that they prefer going to the chemist shop if they fell sick.



4.27.6. PDS/Ration Card availability



In the village there are 40 percent of the people who are having BPL Card available with them and followed to this 24 percent of the people have said that they do not have any card available with them. Similarly another 24 percent of the people have said that they applied for the PDS card but they haven't received it yet. Around three

percent of the people have Antyodaya/BPL card available with them and 9 percent have not applied for any card. With regard to availing PDS it was reported that almost all the people who are having the PDS/Ration Card avail it.

4.27.7. Recommendations

- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ In the village in order to improve the status of education educational materials shall be provided in the school in order to develop interest of the students towards education.
- ➤ The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village, as 98.4% of the studied sample goes to RMP for medical consultation. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ In the village in order to improve the situation of sanitation households shall be provided with the toilets and prior to that they shall be also motivated with regard to the benefits of using toilets.
- As per the discussion with villagers availability of drinking water has emerged as one of the major concern especially during summer season. Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- Nazrat Health Center and UMS Chirwa Tola have requested for drinking water facility.
- > St. Joseph school has requested for construction of 6 extra class rooms.
- Anganwari center has requested for providing toilet facility.

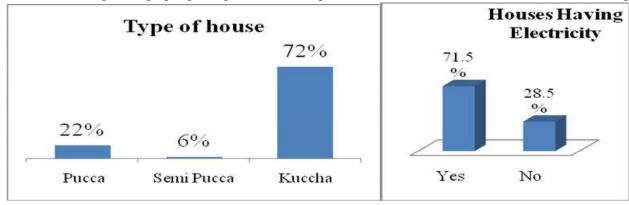
4.28. Masiloung Village

YEAR 2011	Facilities Available	in the	
TLARC 2011	village	Facilities Existing more than 5	
	PDS Shop	Kms	
HOUSEHOLDS 80	Cement/Tar Road	Railway Station	
	Pre-Pri/Nursery Scho		
	Govt Primary School	Weekly Market	
POPULATION 436	ASHA Worker		
		Bus Stop	
Forest Produce	Facilities Existing w	vithin 5 Public Telephone Booth	
1 orest 1 locace	kms.	DTP/Xerox Centre	
NAMES AND ADDRESS OF THE PARTY			
Fire wood Yes	Grocery Shop	Block Development Office	
		Police Station	
Cultivation Yes	Charitable Primary So	chool Bank	
	Private Primary Scho	ol	
Coal Yes		Taluk Headquarters	
Collection	Private Clinic(RMP)	APMC/Mandi	
DELLOIS H	Dai(Trained/Untrained	d) District Headquarters	
RELIGIO House		District Floudquarters	
N holds	Post Office	Govt. Secondary School	
	Chief Crop Are	Degree College	
HINDU 80	Name	Pvt Secondary School	
ATTEMOTIVE STORES	rvarrie	Higher Secondary School	
	Paddy 50	Acres	
75 - 17 54000 100	-	ITI/Polytechnic	
Land Distr	ibution (In Acres):	Vocational Training Centre	
Total Irrigated G	razing Forest Wa	Stelan Health Sub Centre	
	razing rolest vva	Primary Health Centre	
Area	u		
667 34 1	8 169 182	CHC/Govt Gen Hospital	
		Private Clinic(MBBS/BAMS)	
Migration Pattern Ayush Hospital			
Outside the state (Agricultural Yes		Pvt Hospital	
	Agricultural	res Medical Shop	
Labour)		Veterinary Clinic (Purulia)	
		votermary Simo (i draila)	

Figure Poster 28: Masiloung Village

4.28.1. Household Status

In the Masilong Village people reported that 72 percent of the houses are Kuccha and remaining



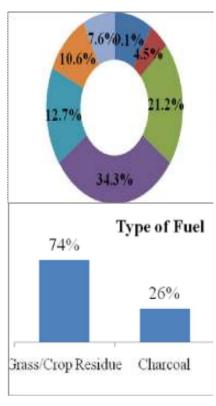
14 percent are divided into Pucca and Semi Pucca houses. 22 percent of the houses are Pucca and 6 percent of the houses are Semi Pucca. In the village no RCC made Houses were found as per reported by the people. Along with these the important aspect of the houses in the village is that all the houses are owned by the people themselves, nobody in the village reported of staying in the rented houses or allotted under any schemes as such. On asking the people with regard to the registered papers of houses all respondent have agreed on having it. With regard to having electricity in the houses approximately 51.5 percent of the houses have said that they have it in their houses.

4.28.2. *Family Size*

In the village on an average five members are there in the family which was reported by around 34 percent of the people. Followed to which it was also found that 22 percent of the total families have four members in their families. Approximately 12.7 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.

4.28.3. Type of Fuel

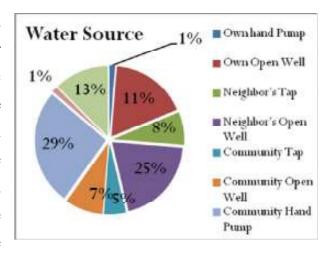
In the village mostly Grass/Crop Residue and Wood is used as a major fuel as 74 percent of the people have reported of using it. Followed to which we have the Charcoal which is used by



approximately 26 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they very less in Prevalence.

4.28.4. *Water Source*

Approximately 29 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 25 percent of the people also have their own Neighbor's Open Well. Around 11 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the

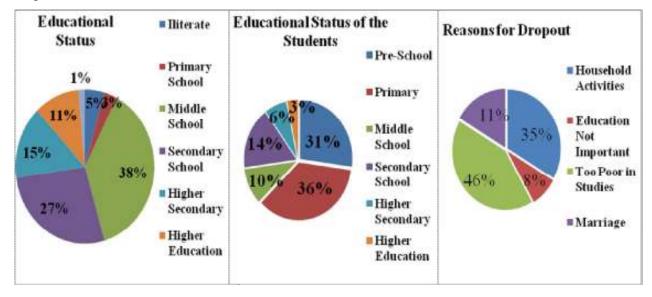


water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village Community tap, Community Open Well, Those drawing water from Neighbor's Tap etc but their availability is very low such as 7 percent, 8 Percent and 5 percent respectively.

4.28.5. Education

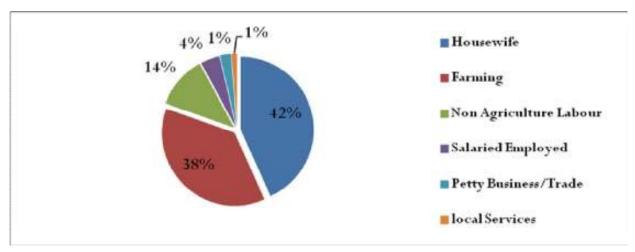
With regard to the education majority of the people which is approximately 56 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 22 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 31 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 14 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 6 percent respectively in both the standards. Approximately 46 percent of the students said that they left education due to being too poor in studies. In the village another major reason for which the students left education was due to

getting involved in the Household Activities. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, and Marriage which are 8 percent and 11 percent of the total.

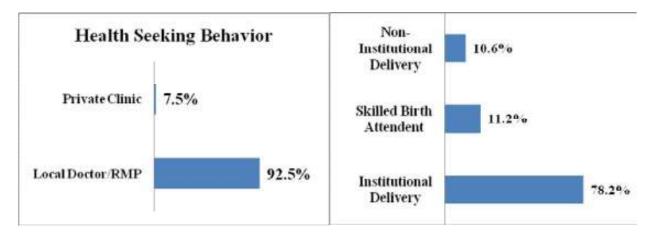


4.28.6. *Occupation*

Apart from the 42 percent women's reporting being Housewife, in the village Farming is the dominant occupation which is almost comprised of 38 percent of the people. Approximately 14 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Salaried Employed in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

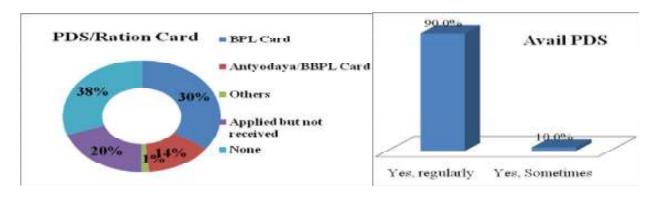


4.28.7. Health Seeking Behavior



In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 98.5 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 1.5 percent of the people which is very low said that they visit to private clinic in case of any health related issue. The women who have given any birth in last three years reported that out of the total 75.2 percent of the births have taken place in any health Institution. In other words majority of the births are institutional in nature. Followed to that there is also prevalence of skilled birth attendant which is around 14.2 percent of the total births, in the village there was also identified the Non-Institutional Deliveries which was around 10 percent.

4.28.8. Availability of PDS/Ration Card



Thirty percent of the people in the village have reported that they have their BPL card available with them. Similar to that 38 percent of the people also said that they do not have any card with them. Along with that, 20 percent of the people also reported that they have applied but haven't received their card. Those having the Antyodaya/BPL Card are very low in percentage such as

14 percent of the total. Of the total 90 percent of the people reported that they avail PDS regularly.

4.28.9. Recommendations

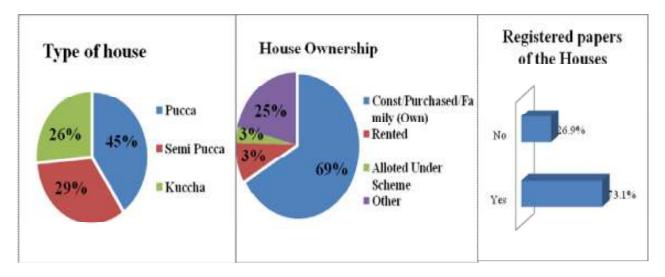
- The suggested strategy with regard to health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people to specially women also to take the benefit of it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation. With regard to Maternal Health women shall also be encouraged and aware towards Institutional deliveries, Age at Birth and number of children and good for her reproductive health.
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- > 35% of the studied sample left education because of various household activities. CCL can introduce yearly scholarships for poor and needy students so that they can continue their education.
- > Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of household toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ UMS has requested for toilet and water facility.
- ➤ In command areas of CCL, Sports Competitions in schools should be conducted, and prizes shall also be distributed which will encourage students more towards developing their extra-curricular skills. Also CCL should identify the sportsman on the basis of their performance in particular sports with the help of teachers. Those found interested in sports and performing well should be linked to district or state sports authority wherein they can make their carrier in sports.

4.29. Laranga Village

YEAR 2011	Facilities Available in the village	Facilities Existing more than 5 Kms
HOUSEHOLDS 274	Cement/Tar Road	Grocery Shop
DODUMATION 1995	PDS Shop	Weekly Market
POPULATION 1325	Bus Stop	DTP/Xerox Centre
Chief Crop Area		Police Station
Name	ASHA Worker	Railway Station
Paddy 100	Govt Primary School	Block Development Office
acres		Taluk Headquarters
Religion House	Facilities Existing within 5 kms.	District Headquarters
holds	Gram Panchayat Office	Pre-Primary School
Hindu 274		Bank
Forest Produce	Charitable Primary School	Govt Secondary School
Cultivation Yes	Charitable Secondary	Primary Health Centre
Coal Yes	School Health Sub Centre	Pvt Primary School
Collection		ITI/ Polytechnic College
		Higher Secondary School
Land Distribu	ition (In Acres):	Degree College
Total Non- Irri	ig Gra Fore Wastel	Vocational Training Centre
Area Irrigated ate		CHC/Govt Gen Hospital
915 444 65 252 53		Pvt Clinic (RMP+)
Migration Pattern		Pvt Clinic (MBBS BAMS)
Within the state (Non-Agricultural Yes		Pvt Hospital
Labour)		Veterinary Clinic
Outside state (Non-A	Agri Labour) Yes	Medical Shop Chemist

Figure Poster 29: Laranga Village

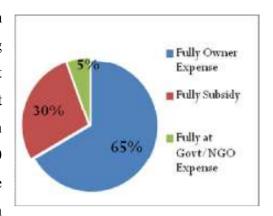
4.29.1. Household Status



In the Laranga village it was reported that the majority of the people are living in the Pucca houses which is around 45 percent of the total houses. Semi Pucca houses in the village are followed by that which is around 29 percent and remaining 26 percent of the houses were reported as Kuccha houses. In the village there were no houses reported as of RCC. With regard to the house ownership 67 percent of the people reported of having houses of their own. Around 3 percent of the people have reported of having rented houses and remaining three percent of the total houses were allotted under the Scheme.

4.29.2. Sanitation

In the village out of those people who are having toilets in their homes around 71 percent of the total are having Flush toilet of their own. Remaining people are having pit toilet of their own. Secondly, with regard to the toilet construction 65 percent of the available toilets have been constructed at the owner's own expense. Similarly 30 percent of the toilets have been reported as been made under fully subsidy and remaining 5 percent have been provided under Government/NGO Expense.

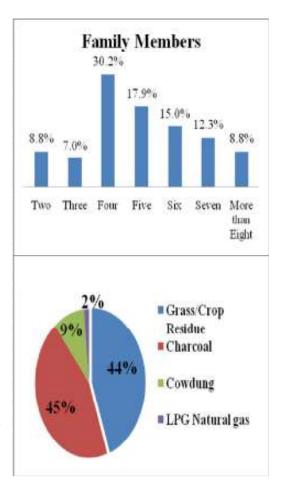


4.29.3. Family Size

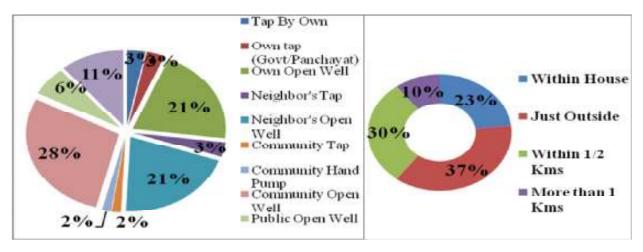
In the village majority of the people reported that they are having four members in the family. Followed to that around 18 percent of the people said that they are having five members in the family. In the village there is also availability of the large families, such as 12.3 percent of the people said that they are having seven members in the family.

4.29.4. Type of Fuel

In the village there are four types of fuels used in the village which are Grass/Crop Residue, Charcoal, LPG/Natural Gas and Cow Dung. Around 45 percent of the people use Charcoal as fuel in their houses. In the village around 44 percent of the people use Charcoal as fuel in their houses too. There are also other types of fuel available in the village but their availability is very less in the village such as Cow dung and LPG/Natural Gas.



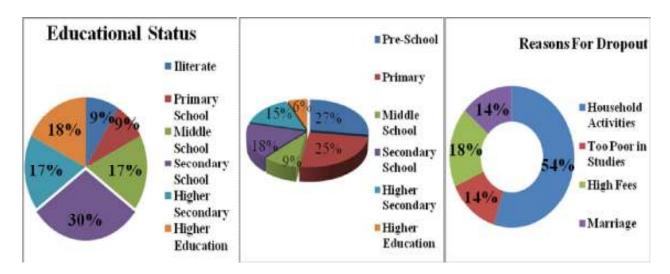
4.29.5. Water Source



In the village there is wide variety of sources of water available in the village. It was reported that 28 percent of the people are dependent upon the Community open well. Followed to which we have Own Open well and Neighbor's Open well which are 21 percent each in the village. In

the village there are also other sources available such as Own Tap Provided by the Govt/Panchayat, Neighbor's Tap, Own Open well etc. Majority of the people in the village 37 percent of the people said that they have their source of water just outside the House. After that 30 percent of the people also said that they have water source within ½ Kms. In the village around 23 percent of the people have their water source within the house only. The important concern is that around 10 percent of the people have to go around more than 1 Kms to fetch water.

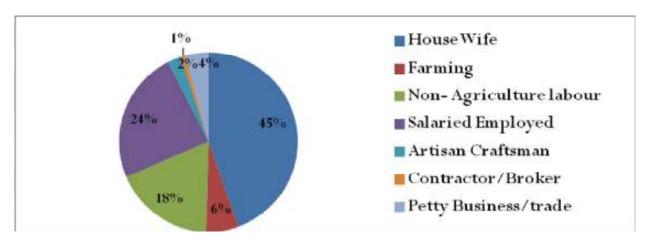
4.29.6. Education



With regard to the education majority of the people which is approximately 30 Percent found to be in the categories that have completed their Secondary Level education. Followed to which comes Middle level Schooling and Higher Secondary which comprises of 17 percent each. In the village 18 percent of the people also reported that they have completed their Higher education. In the village people also reported that 9 percent of the people have completed their Primary Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 9 percent. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 25 percent. Followed to which is those who are involved in the Pre Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 18 percent. In the village Higher Secondary and Middle level schooling comprises of 15 and 9 percent respectively in both the standards. In the village getting involved in the household activities is the major cause for the Dropout. Following that 18 percent of the students left their education due to High fees. The

other causes of dropout are High Fees and Being too poor in studies because of which students left their education. Getting involved in the household activities seemed to be the major reason for dropout in the village as 54 percent of the people reported of it. Being too poor in studies and Marriage are the other two reasons in the village which was reported by approximately 14 percent each in the village.

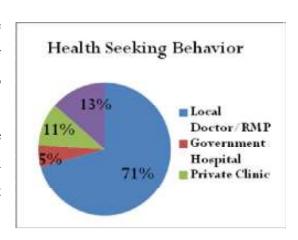
4.29.7. Occupation



Apart from the 45 percent women's reporting being Housewife, in the village those engaged in Salaried Employed are dominant which almost comprised of 24 percent of the people. Approximately 18 percent of the people are involved in the village are engaged in Non-Agriculture Labor. Petty Business/Trade in the village comprises of 4 percent in the village. Around 6 percent of the people are engaged in the Farming and other occupations available in the village are Artisan/Craftsman, Contractor/Broker etc.

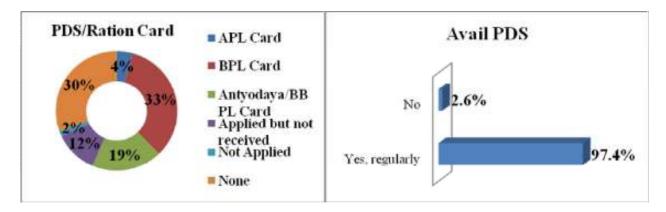
4.29.8. Health Seeking Behavior

In the village approximately 71 percent of the people prefer to visit Local Doctor/RMP in case of any health related Problem. Followed to which it was also reported that 13 percent of the people visit 'Other' Sources to fetch water. Similarly 11 percent of the people said that they visit Private clinic and remaining 5 percent of the people visit Government Hospital to get health services.



4.29.9. PDS/ration Card Availability

In the village around 33 Percent of the people have the BPL Card and 30 percent of the people do not have any card available with them. 12 percent of the people have applied but have not received the Card. In the village only 4 percent of the people have the APL Card with them. On asking to the people it was found that 97.4 percent of the people avail PDS.



4.29.10. Recommendations

- ➤ It was also found that there is a high dropout rates in the village, reasons being involvement in various household activities and early marriages. CCL can introduce few scholarships for the poor students in the village, which can provide both support and motivate the students towards Higher Education.
- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- > Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

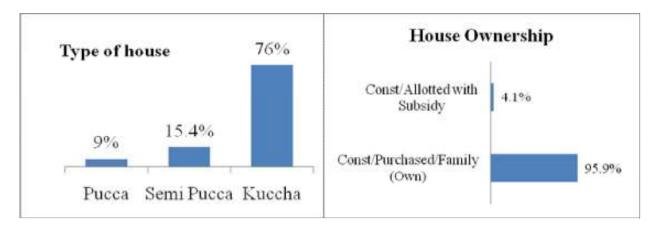
>	In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should		
	also be asked to motivate the villagers about roof water harvesting.		

4.30. Kandhaar Village

YEAR 2011		Facilities Existing within 5 kms.	Facilities Existing more than 5 Kms
HOUSEHOLDS 100 POPULATION 566		Cement Tar Road Private Primary School	Railway station Weekly Market PDS Shop
FOFULATIO	14 300	Facilities Available in the	Grocery Shop
Forest P Cultivation Coal Collection		village Cremation/Burial Place Govt. Primary School	Bus Stop DTP Xerox Centre Post Office Railway Station
Public/Com n Tap Points HH Tap Connections	s 00	Pri Nursery School Dai(Trained/Untrained)	Police Station Gram Panchayat Office Bank Daily/Evening Market
RELIGION HINDU	NAME AND ADDRESS OF THE OWNER, WHEN	Govt Primary School Chief Crop Area Name	Block Development Office Taluk Headquarters District Headquarters
Christian	16	Paddy 13 acres	Warehouse Govt. Secondary School Degree College
L	and Distrib	ution (In Acres):	APMC/Mandi
Total Area	Irrigated	Forest Wasteland	Charitable Primary Charitable Secondary
1245	52	288 120	ITI/Polytechnic Vocational Training Centre
Migration Pat	tern		Private Clinic(MBBS/BAMS)
Outside state Within the Sta			Primary Health centre CHC/Govt Gen Hospital Private Hospital Ayush Hospital Veterinary Clinic

Figure Poster 30: Kandhaar

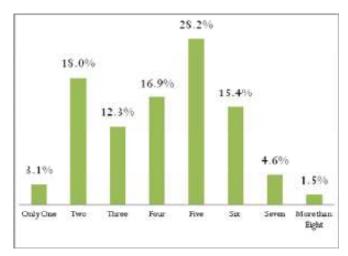
4.30.1. Household Status



In the village majority of the houses are Kuccha which is approximately 76 percent and 15 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 9 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 95.9 percent of the respondent said that they have their own houses. Remaining 4.1 percent is comprised of those allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana.

4.30.2. Family Size

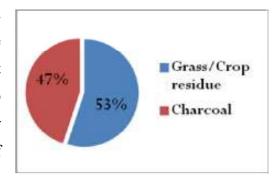
In the village a majority of the people have said that they are having on an average five members in their families. Since as per reported by the people 28 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having only two members in the family. Those families having more



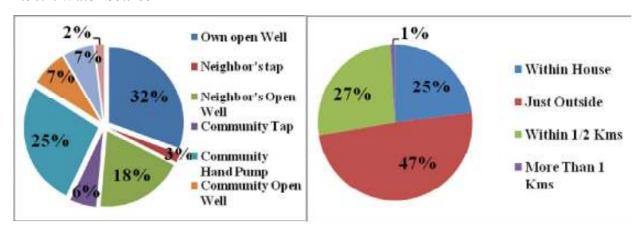
than 8 members were found very less in the village which is around 1.5 percent.

4.30.3. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 53 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses.

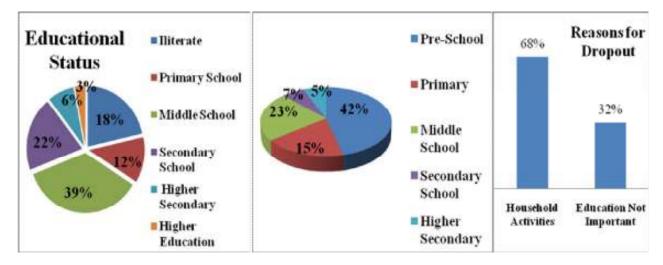


4.30.4. Water Source



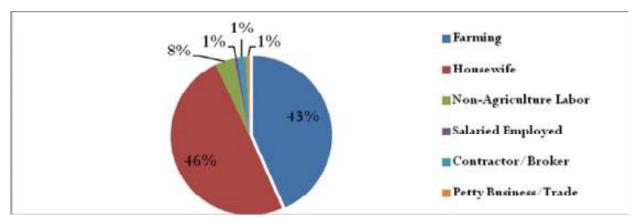
Approximately 32 percent of the people said that they use Own open well in order to get water for drinking and water for domestic purposes. In the village 25 percent of the people use Community hand Pump to get water. Around 18 percent of the people are also dependent upon the Neighbor's Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well which are both 7 Percent reported by the people. Neighbor's Tap and Community tap are also available. Approximately 47 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 25 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

4.30.5. Education



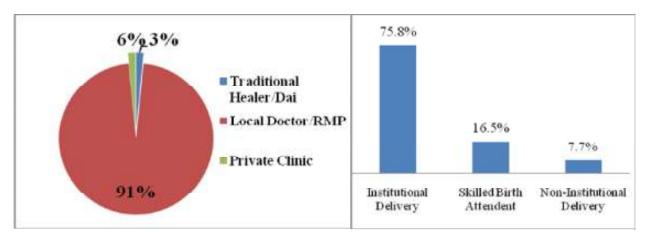
With regard to the education majority of the people which is approximately 39 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 18 percent of the people reported of being Illiterate. In the village 22 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 6 percent of the people have completed their Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 42 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 15 percent. In the village Higher Secondary and Secondary level schooling comprises of 6 percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 68 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

4.30.6. Occupation



Apart from the 46 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 43 percent of the people. Approximately 8 percent of the people are involved in the village are engaged in Non-Agriculture Labor. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.

4.30.7. Health Seeking Behavior

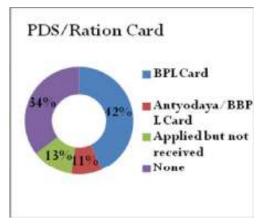


In the village more than 91 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 6 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 75.8 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5

percent of the total. In the village around 7.7 percent of the deliveries are non-Institutional deliveries.

4.30.8. PDS/Ration Card Availability

In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 34 percent of the people do not have any card available with them. At the same time around 13 percent of the people have applied but they haven't received any card. The remaining 11 percent of the people reported that they have Antyodaya/BPL Card with them. On asking the people questions



regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it.

4.30.9. Recommendations

- It was found that there is a high dropout rates in the village as the data suggests that 68% of the studied sample left education due to various household activities. CCL can introduce few scholarships for the poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

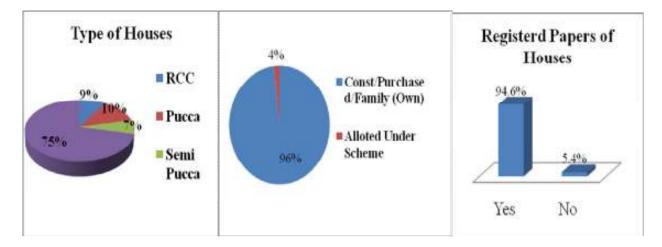
- As per the discussion with villagers availability of drinking water has emerged as one of the major concern especially during summer season. Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ UPS has requested for portable drinking water facility.
- ➤ Village reflects extremely discouraging figure in terms of sanitation. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

4.31. Naudiha

YEAR 2011	Facilities Available in the village	Facilities Existing more than 5 Kmss		
HOUSEHOLDS 121	Cement/Tar Road	Daily Evening Market		
POPULATION 786	Private Clinic(RMP)	Public Telephone Booth Grocery Shop		
Forest Produce	Pre-Pri/Nursery School	Block Development Office DTP/Xerox Centre		
	Dai(Trained/Untrained)	Post Office		
Coal Collection Ye	00110101	Taluk Headquarters		
S	ASHA Worker	Railway Station		
Cultivation Ye	Facilities Existing within 5	Cooperative Society		
S	kms.			
	Weekly Market	District Headquarters Bank		
Name	Bus Stop	Govt. Primary School		
Paddy 50				
	PDS/Shop	APMC/Mandi		
BASIN AND STREET	Gram Panchayat Office	Private Primary School		
RELIGION House	Public/Common Tap 00	Charitable Primary		
holds	Points	Govt Secondary School		
HINDU 121	HH Tap 07	Charitable Secondary		
Aller and Aller	Connections	VOC/Tarining College		
Land Distrit	oution (In Acres):	Pvt Secondary School		
Total Irrigated Gr	azing Forest Wasteland	Higher Secondary School		
Area	azing roles, wasteland	Degree College		
(A)		ITI/Polytechnic		
1631 24 44	1123 36	Health Sub Centre		
Migration Pattern	Primary Health Centre			
mg dilon i diloni	CHC/Govt Gen Hospital			
Mithin the state (Nen	Private Clinic(MBBS/BAMS)			
Within the state (Non- Labour)				
	Private Hospital			
Within the State (Agri	Within the State (Agricultural Labour)			
		Medical Shop		

Figure poster 31: Naudiha Village

4.31.1. Household Status



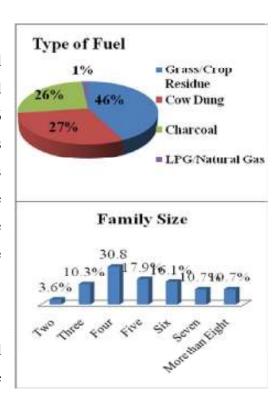
In the village a majority of the people reported that they have Kuccha Houses in the village. Approximately 75 percent of the people said that they live in Kuccha houses. Followed to which it was found that 14 percent of the people live in Pucca houses. The remaining 9 percent of the people said that they live in the Semi RCC Houses. Along with this, all the houses are registered and the entire respondent said that they have their registered papers. In other words in the village only 4 percent of the people have been allotted houses under scheme of the government.

4.31.2. Type of Fuel

In the village three types of fuels are primarily used which are Grass/Crop Residue, Cow Dung and Charcoal which almost 46 percent, 27 Percent and 26 percent respectively. But in terms of majority Grass Crop residue and wood is used in the households as fuel. There are also other sources of fuel in the village which are Kerosene and LPG/Natural Gas. But these are very low in availability in the village approximately less than 1 percent in the village.

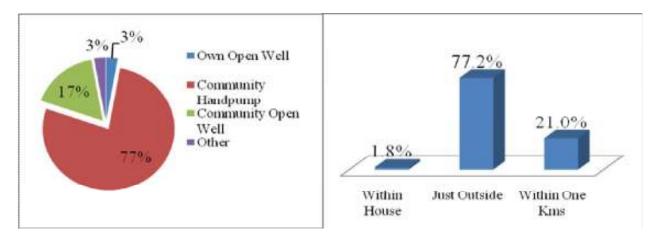


With regard to the size of the family, it was reported that around 30.8 percent of the family in the village are



having four members. After that there are 17.9 percent of the people who have agreed that in their family there are on an average five members. Also in the village there is also prevalence of the families having members around seven or even more than eight also.

4.31.4. Source of Water

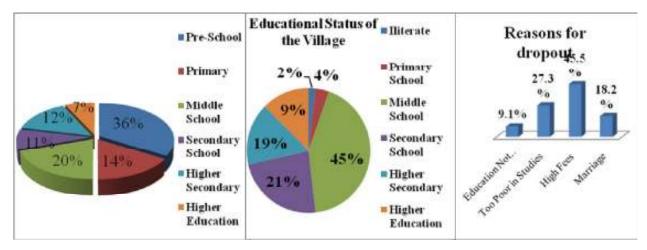


Approximately 77 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 17 percent of the people use Community Open Well. Around 6 percent of the people are also dependent upon the Open well and Other Sources for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Approximately 77 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 21 percent of the people have the water sources within the range of a Kms and similar to that another 2 percent of the people said that they are having water sources within house. The important aspect is that 25 percent of the entire population has to go within a Kms to get water. In summer season there arises a great problem due to water scarcity.

4.31.5. Education

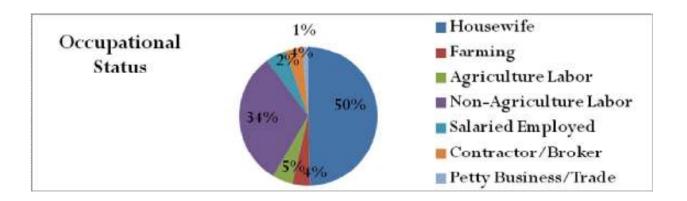
With regard to the education majority of the people which is approximately 45Percent found to be in the categories that have completed their Middle Level education. Followed to that it was reported by the people of the village that they have completed their Higher Secondary Schooling, this is around 21 Percent of the total. In the village 19 percent of the people also reported that they have completed their Higher Secondary education. It was also said that percentage of

Illiterate people in the village is approximately 2 percent. With regard to those who have done their Higher Education is 9 percent in the village. In the village majority of the students reported of being involved in their pre-schooling which is approximately 36 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 20 percent of the total. In the village percentage of students who are involved in the Primary Education is 12 percent. In the village Higher Secondary and Secondary level schooling comprises of 14 and 11 percent respectively in both the standards. Currently those students who are involved in the Higher Education is approximately around 7 Percent. In the village majority of the people reported that due to high fee they left their education in between and it is also considered as a major cause for the Dropout. Around 45 percent of the total dropout in the village has taken place due to High Fees. Following to which, 27 percent of the students reported that they left their education due to being too poor in the Studies. The other causes of dropout are Marriage which constitutes around 19 percent and remaining 9 percent of th students left education as they did not considered the education as important.



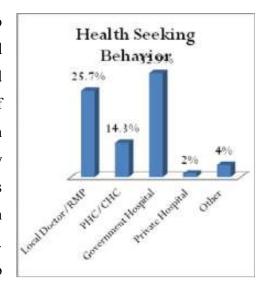
4.31.6. Occupation

Apart from the 50 percent women's reporting being Housewife, in the village those working as Non-Agriculture labour is dominant which is almost comprised of 34 percent of the people. Approximately 5 percent of the people are involved in the village are engaged in Agriculture Labour. Farming in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which are approximately 3 percent in the village.



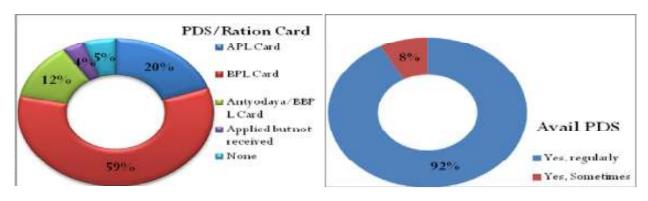
4.31.7. Health Seeking Behavior

In the village more than 53 Percent of the people prefer to go to the Government Hospital in case of any illness and disease. At the same time 26 percent of the people agreed that they go to the Local Doctor/RMP for the treatment of their minor and major ailments. Followed to which approximately 14 percent of the people also said that they visit PHC/CHC for health services. Followed to this it was also reported that 2 percent of the people agreed on visiting Private clinics in case of any health related issue. In the village around 5 percent of the people also visit to the other services for any health related Problem.



4.31.8. PDS/Ration Card Availability

Of the total 59 percent of the people do not have any PDS/Ration Card followed to which is the 20 percent of the people who have APL card available with them. 12 percent of the people have BBPL Card. Only 1 percent of the people have APL Card. Approximately 92 percent of the people have agreed that they avail PDS regularly.



4.31.9. Recommendations

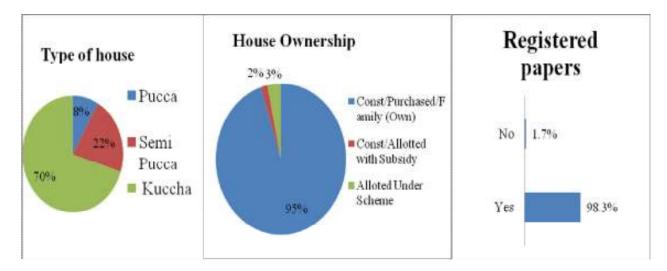
- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. People in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- Some yearly prizes shall be also introduced by the CCL for the students who perform well in the yearly examinations. It shall be noted that teachers shall be made effective partners into this with regard to identify the children.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Villagers have requested a mobile medical van for health related issues as this is very far flung area without connectivity. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ There is high rate of dropouts in the village, reasons being poverty and early marriage. CCL can introduce scholarships for poor students.
- > UMS and Anganwari center have requested for water and toilet facility.

4.32. Raham Village

YEAR + 2011	Facilities Available in the			
WANTE AREA TO THE TOTAL AREA TO THE	village	kms.		
HOUSEHOLDS 1270	DTP/Xerox Centre			
	Post Office	Bus Stop		
POPULATION 5846	Gram Panchayat Office	Facilities Existing more than		
	Cement Tar Road	5 Kms		
Forest Produce	PDS Shop			
Cultivation Yes	Grecery Shop	Railway Station		
	Health Sub Center	Daily/Evening Market		
	Private Clinic(RMP)	Weekly Market		
Collection		7-10 W 4-1-1		
Chief Area	Pre Primary Nursery School	Taluk Headquarters Police Station		
Crop	Government Primary	Bank		
Nante	School Deid Interior of (Taxing at)	Dalik		
Paddy 1000Acres	Dai(Untrained/Tarined)	District Headquarters		
RELIGION	Asha Worker House holds	Block Development Office		
TELISION	riouse riolas	200-00-00-00-00-00-00-00-00-00-00-00-00-		
Hindu	970	Private Primary School		
		Govt. Secondary School		
Muslim	300	Higher Secondary School		
Christian	03	Charitable Secondary School		
Land Distrit	oution (In Acres):	Charitable Primary School		
		Degree College		
Total Irrigated Gr	azing Forest Wasteland			
Area	azing rolest viastelalia	ITI Polytechnic		
M va		VOC/ training centre		
6765 162 80	2163 2482	Primary Health centre		
		Veterinary Clinic (Asansol)		
Migration Pattern		CHC/Govt. General hospital		
		Private Clinic(MBBS/BAMS)		
Within the state (Nor Labour)	n-Agricultural Yes	Veterinary Clinic		
Laboury		Private Hospital		
Outside state (Non-A	\gri Labour) Yes	Medical Shop		
Medical Shop				

Figure poster 32: Raham Village

4.32.1. Household Status



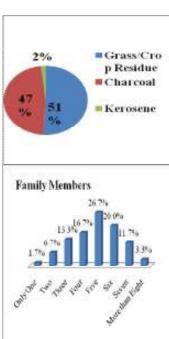
In the village majority of the houses are Kuccha which is approximately 70 percent and 22 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 8 percent of the people have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 95 percent of the respondent said that they have their own houses. Remaining 5 percent is comprised of those Constructed/allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana. In the village around 66 percent of the households reported of having electricity in their houses and with regard to the registered papers almost all the houses have it.

4.32.2. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 51 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses. In the Raham village there is also prevalence of Kerosene as fuel but at very low level.

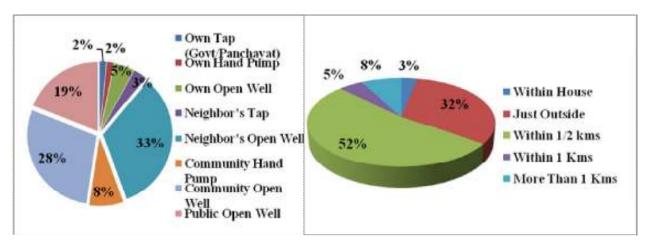


In the village a majority of the people have said that they are having on an average five members in their families. Since as per reported



by the people 27 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having six members in the family. Those families having more than 8 members were found very less in the village which is around 3.3 percent.

4.32.4. Water Source

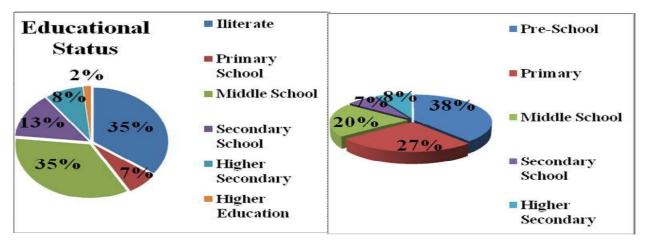


Approximately 33 percent of the people said that they use Neighbor's open well in order to get water for drinking and water for domestic purposes. In the village 28 percent of the people use Community Open well to get water. Around 19 percent of the people are also dependent upon the Public Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Community Hand Pump (8 Percent), Own Open well, Own Tap, Own Hand Pump etc but their availability is very low in the village. Approximately 52 percent of the people have their source of water within Half Kms in the village. This comprises of Tap and Hand Pump and also the community taps and wells etc. In the village 32 percent of the people have to look for the water sources Just outside their houses. Approximately 8 percent of the people said that they are having water sources located more than 1 Kms away. In the village only 3 percent of the people reported that they are having their water sources within their houses.

4.32.5. Education

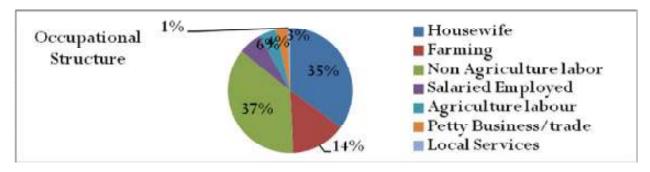
With regard to the education majority of the people which is approximately 35 Percent found to be in the categories that have completed their Middle Level education. Similar to that it was also found that a majority of the people in the village which is around 35 percent of the total are

illiterate. Followed to which the most vital concern of the village is that 13 percent of the people reported of being completed their Secondary Schooling. In the village 8 percent of the people also reported that they have completed their Higher Secondary Level education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 2 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 38 percent. Followed to which is those who are involved in the Primary Level Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in



the Middle Level Education is 20 percent. In the village Higher Secondary and Secondary level schooling comprises of 8 and 7 Percent each in both the standards.

4.32.6. Occupation

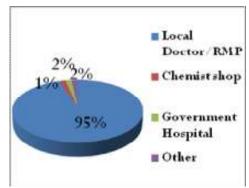


Apart from the 35 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 37 percent of the people. With regard to this it is also implied that along with the men, women is also involved as Non-agriculture labor in the village. Approximately 14 percent of the people are involved in the village are engaged in

farming as its primary and main occupation. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.

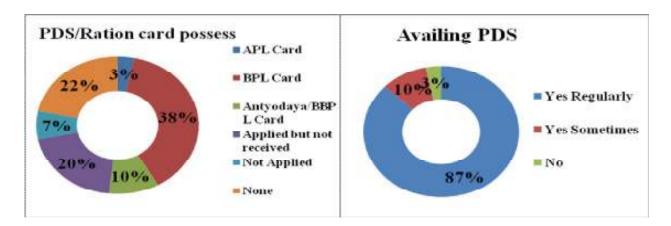
4.32.7. Health Seeking Behavior

In the village it was clearly mentioned by the people that 95 percent of them visit Local Doctor/RMP available in the village. Remaining 5 percent comprised of those visiting Government hospitals, Chemist Shops and other Sources.



4.32.8. PDS/Ration Card Availability

In the village around 38 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 22 percent of the people do not have any card available with them. At the same time around 20 percent of the people have applied but they haven't received any card. The remaining 10 percent of the people reported that they have Antyodaya/ BPL Card with them. Around 7 percent of the people have not applied for any card and three percent of the people hold APL Card. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them 87 percent of them avail it.



4.32.9. Recommendations

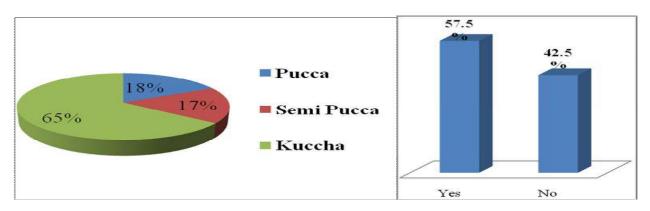
- ➤ People in this village need to be trained in some vocational skill in collaboration with the agency best fitted for the concerned target group; this decision should be taken with the help of people living in the community. Company should rope in organizations which provide vocational skills and placement guarantee to the people they engage with their companies. Also CCL can bear the fees of those people interested in taking vocational skills.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- Anganwari (38) and Anganwari (2) have requested for toilet facility while as UPS Kamtaha Tola has requested for drinking water facility.

4.33. Rajdhaar Village

Firewood Yes	Facilities Existing within 5 kms. Bus Stop Grocery Shop Weekly Market PDS Shop DTP/Xerox Centre Post Office Private Primary School Gram Panchayat office	Facilities Available in the village Cement Tar road Government Primary school Facilities Existing more than 5 Kms Railway Station Taluk Headquarters District Headquarters
Public/Common 00 Tap Points HH Tap 00 Connections Chief Crop Area Name Paddy 05acres	Medical Shop/Chemist	Police Station Block Development Office Private Secondary School Degree College Higher Secondary School Primary Health Center CHC/Govt Gen Hospital Private Hospital
Land Distribe	Bus Stop (Neturia) ution (In Acres): ting Forest Wasteland	RELIGION House holds
Area d	ing rolest vvasteland	HINDU 69
256 105	53 17	Muslim 100
Migration Pattern Within the state (Agricon Outside the State(Non-Labour)	Christian 01	

Figure poster 33: Rajdhaar Village

4.33.1. Household Status



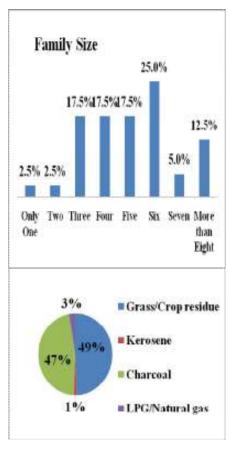
In the village majority of the houses are Kuccha which is approximately 65 percent and 18 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 17 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses almost all the houses said that they have their own houses. Along with this they are having the registered papers of their houses too. Also in the village around 58 percent of the people are having electricity in their houses.

4.33.2. Family Size

In the village a majority of the people have said that they are having on an average six members in their families. Since as per reported by the people 25 percent of the people have said that they are having six members in the family. Followed to which it was found that there are also families which have reported of having three to five members in the family. Those families having more than 8 members were also found in the village which is around 12.5 percent.

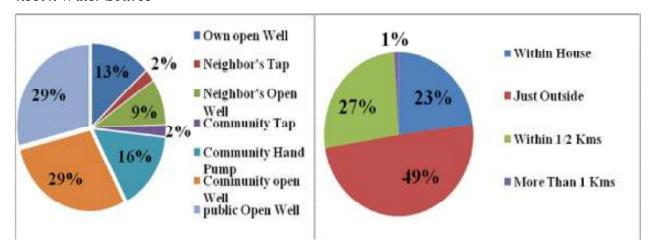
4.33.3. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 49 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people



use charcoal as fuel in their houses. In the village LPG/Natural Gas and Kerosene is also used but their availability is very low in the village.

4.33.4. Water Source

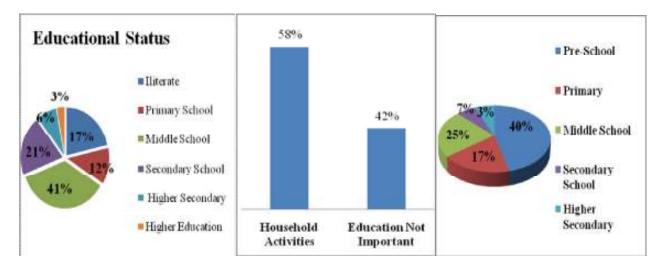


Approximately 30 percent of the people said that they use Community open well & Public Open Well each in order to get water for drinking and water for domestic purposes. In the village 16 percent of the people use Community hand Pump to get water. Around 13 percent of the people are also dependent upon their own open well. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well; Neighbor's Tap and Community tap are also available. Approximately 49 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 23 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

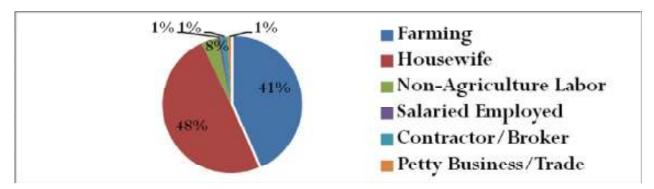
4.33.5. Education

With regard to the education majority of the people which is approximately 41 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 17 percent of the people reported of being Illiterate. In the village 21 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 6 percent of the people have completed their

Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 40 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 25 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 17 percent. In the village Higher Secondary and Secondary level schooling comprises of 7 and 3 Percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 58 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

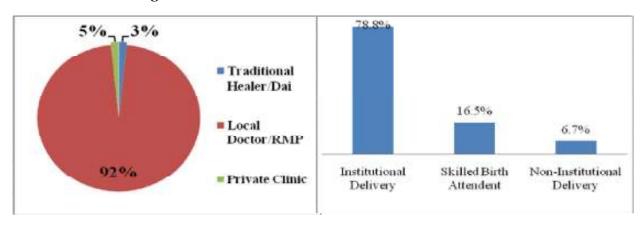


4.33.6. Occupation



Apart from the 48 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 41 percent of the people. Approximately 8 percent of the people are involved in the village are engaged in Non-Agriculture Labor. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.

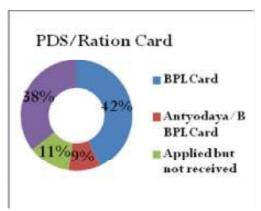
4.33.7. Health Seeking Behavior



In the village more than 92 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 5 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 79 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5 percent of the total. In the village around 6.7 percent of the deliveries are non-Institutional deliveries.

4.33.8. PDS/Ration Card Availability

In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 38 percent of the people do not have any card available with them. At the same time around 11 percent of the people have applied but they haven't received any card. The remaining 9 percent



of the people reported that they have Antyodaya/ BPL Card with them. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it.

4.33.9. Recommendations

- It was found in the village that only few percent of the total students are engaged in some vocational/Certificate courses. With the involvement of students in such courses can bring new and generate economic activities for the students in the village. The youth living in this village need to be trained in some vocational skill in collaboration with the agency best fitted for the concerned target group. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ It was also found that there is a high dropout rates in the village. Majority of the studied sample (58%) of students less than 18 years of age reported that they left education due to household activities as they are poor. CCL can introduce few scholarships for the backward and poor students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ The problems related to blasting and the noise /house cracks were reported in this village.

 The magnitude of it should be lessened by adapting certain measures after consulting any specialized institute in it.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Villagers have requested a mobile medical van for health related issues. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

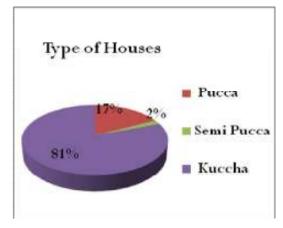
4.34. Sidalu Village

YEAR 2011	Facilities Existing within	Facilities Existing more than		
Daniel State Control C	5 kms.	5 Kms		
HOUSEHOLDS 70	Dai(Trained/Untrained)	Railway Station		
HOUSEHOLDS /U		PDS Shop		
	Facilities Available in	Grocery Shop		
POPULATION 350	the village	Bus Stop		
	Govt. Primary School	Weekly market		
Forest Produce		DTP/Xerox Center		
	ASHA Worker			
Firewood Ye	Olivies A	Block Dev Office		
	Chief Area	Post Office		
	Crop Name	Bank		
Cultivation Ye	Paddy 50 Acres	Taluk Headquarters		
RELIGION House	,	Private Primary School		
holds	Public/Common 00	District Headquarters		
HINDU 67	Tap Points	Warehouse		
1111100 07	The second second	Higher Secondary School		
CHRISTIAN 03	HH Tap 00	Degree College		
CHRISTIAN US	Connections	APMC/Mandi		
TO A STATE OF THE		Charitable Primary		
Land Distrib	ution (In Acres):	Charitable Secondary		
T-t-I Instructoral Con	i Ft \\/t- d	VOC Training Center		
CONTRACTOR	azing Forest Wasteland	Pvt Secondary School		
Area		Govt. Secondary School		
565 195	291 870	ITI/Polytechnic		
		Health Sub Center		
Migration Pattern	Migration Pattern			
	Primary Health Centre CHC/Govt Gen Hospital			
	Private Hospital			
	Private Clinic(MBBS/BAMS)			
Within the state (Agri	Private Clinic(RMP)			
Labour)		Veterinary Clinic		
		Medical Shop		
H.				

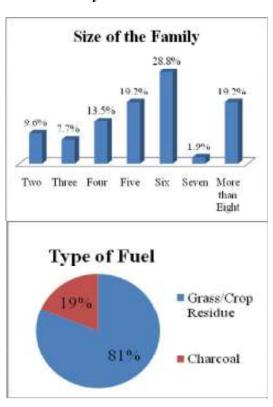
Figure Poster 34: Sidalu Village

4.34.1. Household Status

In the village majority of studied population said that they are having Kuccha houses which are approximately around 81 percent of the total houses. Followed to this it was also agreed by the people that they are having Pucca houses which are around 17 percent of the total. The remaining 2 percent of the houses have been categorized or comprised of Semi Pucca houses in the village.



4.34.2. Family Size



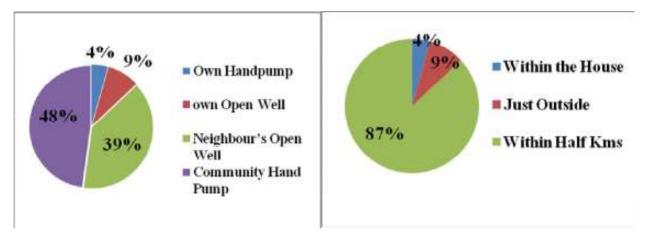
In the village a majority of the people have said that they are having on an average six members in their families. Since as per reported by the people 29 percent of the people have said that they are having six members in the family. Followed to which it was found that there are also families which have reported of having more than eight members in the family. With regard to the families having five members around 19 percent of the people agreed to it. In the village the issue of concern is that there is high availability of the families which are having large numbers which is around more than eight.

4.34.3. Type of fuel

With regard to the use of different fuels in the village

it was reported that primarily two types of fuels are used in the village. The fuel which is used in almost all the houses of the village is Grass/Crop Residue and wood which is around 81 percent of the total. The remaining 19 percent of the people reported that they use charcoal in their houses for cooking and other domestic purposes.

4.34.4. Water Sources

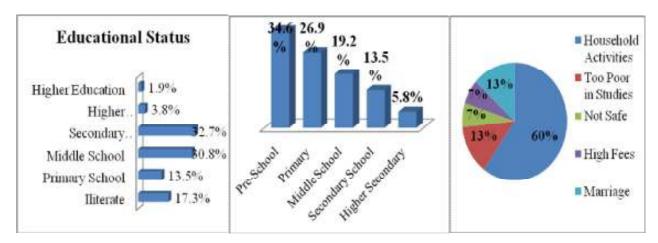


Approximately 48 percent of the people said that they use Community Hand Pump in order to get water for drinking and water for domestic purposes. In the village 39 percent of the people use Neighbor's Open Well to get water. Around 9 percent of the people are also dependent upon their own open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and own hand pump which are available but their availability is very less. Approximately 87 percent of the people have their source of water within ½ Kms away from their houses. This implies or comprises of Community Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 9 percent of the people have to look for the water sources just outside their houses which imply those neighbor's tap and community taps available just outside their houses. Approximately 4 percent of the people said that they are having water sources within their houses.

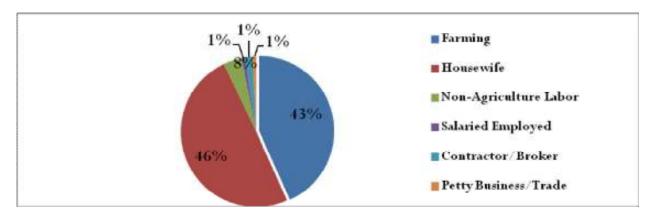
4.34.5. Education

With regard to the education majority of the people which is approximately 33 Percent found to be in the categories that have completed their Secondary Level education. Followed to which the most vital concern of the village is that 18 percent of the people reported of being Illiterate. In the village 30 percent of the people also reported that they have completed their Middle Level education. In the village people also reported that 13 percent of the people have completed their Primary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 2 Percent of the total. In

the village majority of the students reported of being involved in their pre-schooling which is approximately 34 percent. Followed to which is those who are involved in the Primary Level Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Middle Level Education is 19 percent. In the village Higher Secondary and Secondary level schooling comprises of 6 percent and 14 percent approximately in both the standards. In the entire village various reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important', not safe for girls and High fees. From the responses of the village people it was found that 60 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who were too poor in studies and marriage.



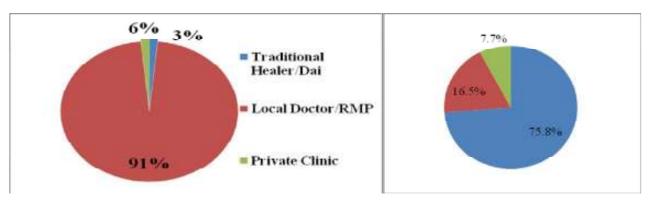
4.34.6. Occupation



Apart from the 46 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 43 percent of the people. Approximately 8 percent of the people are involved in the village are engaged in Non-Agriculture Labour. In the

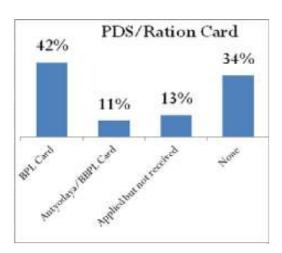
village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.

4.34.7. Health Seeking Behavior



In the village more than 91 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 6 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 75.8 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5 percent of the total. In the village around 7.7 percent of the deliveries are non-Institutional deliveries.

4.34.8. PDS/Ration Card Availability



In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 34 percent of the people do not have any card available with them. At the same time around 13 percent of the people have applied but they haven't received any card. The remaining 11 percent of the people reported that they have Antyodaya/ BPL Card with them. On asking the people questions regarding the availing of PDS, it was found

that almost all the people who are having the PDS/Ration Card available with them avail it.

4.34.9. Recommendations

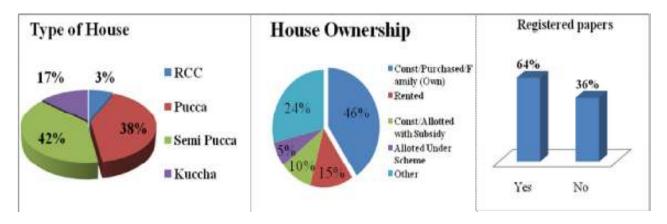
- ➤ The suggested recommendation in order to improve economic security of the village will be providing skill based training to villagers by engaging any organization, with that the organization guarantees the market for products made by villagers. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ It was also found that there is a high dropout rates in the village. Majority of the students (60%) less than 18 years of age of the studied sample reported that they left education due to various household activities. CCL can introduce few scholarships for poor and backward students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Water problem has emerged as one of the major problems in the village. 87% of the studied sample population has to fetch water from ½ kms distance. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- ➤ NPS has requested for drinking water facility.

4.35. Thena Village

1001		
YEAR 2011	Facilities Existing	Facilities Existing more than
HOUSEHOLDS 60	within 5 Kms	5 kms.
POPULATION 340	Bus Stop(Kalyanpur)	Public Telephone Booth (Bachra)
Facilities Available in	Grocery Shop(Bahera)	Railway Station (Rai)
	DTP/Xerox (Bahera)	Police Station (Piparwar)
	Post Office(Bahera)	Block Development Office (Tandwa)
	Gram Panchayat	Taluk Headquarters
PDS Shop	office(Bahera) Bank for S/B	(Piparwar)
	Account(Bahera)	District Headquarters (Chatra)
Govt. Pri School	Charitable Primary (Mander)	Warehouse (Chatra)
	Charitable	APMC/Mandi (Chatra)
	Secondary(Mander)	Govt. Secondary School (Tandwa)
(Trained/Untrained) RELIGION House	Health Sub	Higher Secondary School
holds	Centre(Bahera) Pvt. Clinic/ RMP	(Dakra)
HINDU 60	(Bahera)	Degree College (Tandwa) ITI/Polytechnic (Hazaribagh)
Forest Produce	Pvt. Clinic/ MBBS (Kalyanpur)	THIT DIVICENTILE (Hazaribagii)
Coal Yes Collection	Veterinary	VOC Training Centre (Hazaribagh)
Firewood Yes	Clinic(Kalyanpur) ASHA Worker (Bigen)	Primary Health Centre
Land Distrib	ution (In Acres):	(Tandwa)
Total Irrigated	Forest Wasteland	CHC/ Govt. General Hospital (Tandwa)
Area		Private Hospital (Bachra)
515 108	108 39	

Figure Poster 35: Thena Village

4.35.1. Household Status



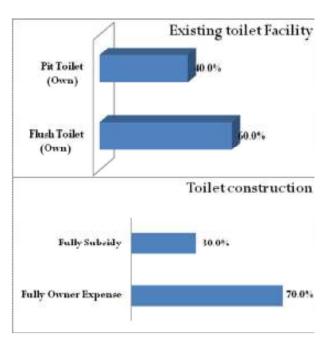
In the village a majority of the people reported that they have Pucca Houses in the village. Approximately 42 percent of the people said that they live in Pucca houses. Followed to which it was found that 38 percent of the people live in Semi Pucca houses. The remaining 17 percent of the people said that they live in the Kuccha Houses. The important aspect is that in the village only 3 percent of the people reported of having an RCC Houses. Along with this, 46 percent of the houses are Constructed/Purchased or owned by themselves. 24 percent of the houses come in the category of other followed to which 15 percent are the rented Houses and other 10 percent are the rented houses. 5 percent of the houses are allotted under the schemes. In the village approximately 64 percent of the houses are having registered Papers.

4.35.2. Sanitation

In the village 60 percent of the people having toilet facility in their houses reported of having Flush toilet and remaining 40 said that they have Pit toilet in their houses. It was also said that those having toilet it was reported that 70 percent of the total toilets have been constructed by their own expenses and remaining 30 were provided full subsidy.

4.35.3. Family Size

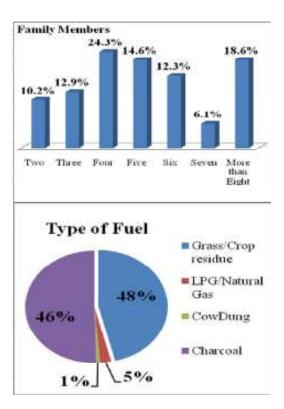
In the village on an average four to five members are there in the family which was reported by around 24 and 15 percent of the people



respectively. Followed to which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 12.3 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.

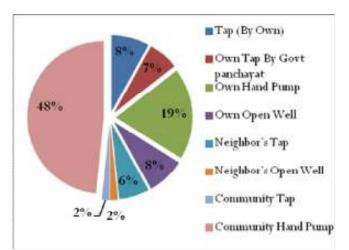
4.35.4. Type of Fuel

In the village mostly charcoal is used as a major fuel as 46 percent of the people have reported of using it. Followed to which we have the Grass/Crop Residue which is used by approximately 48 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they are very less in Prevalence.



4.35.5. Water Source

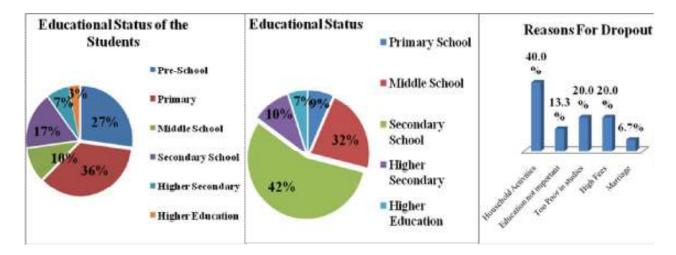
Approximately 48 percent of the people said that they use Community Hand Pump in order to



get drinking and water for domestic purposes. In the village 19 percent of the people also have their own Hand Pump. Around 8 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not

available throughout the year. Other sources available in the village are Neighbor's Tap and Own Tap Provided by the Government or Panchayat which are 6 percent and 7 percent respectively. Other remaining sources are Neighbor's Open Well, Community Tap etc.

4.35.6. Education

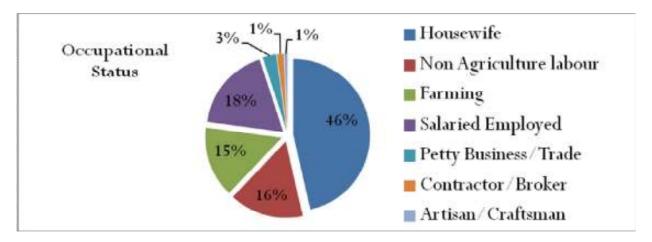


With regard to the education majority of the people which is approximately 42 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 32 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 9 percent of the people have completed their Primary Level Schooling. Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 17 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 7 percent respectively in both the standards. In the village the major reason for which the students left education was due to getting involved in the Household Activities. Approximately 40 percent of the students said that they left education due to getting involved in the Household Activities. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, High Fees and Marriage.

4.35.7. Occupation

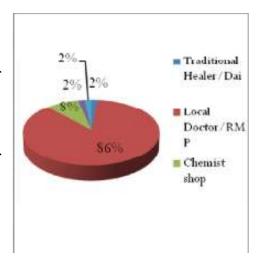
Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the

village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.



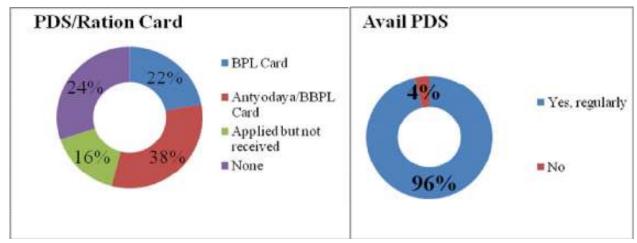
4.35.8. Health Seeking Behavior

In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village.



4.35.9. PDS/Ration Card Availability

Around 38 percent of the people in the village is having the Antyodaya BPL Card followed to which 24 percent do not having any card available with them. In the village 22 percent of the people said that they have the BPL Card and remaining 16 percent of the people have applied but they have not received any card. With regard to avail PDS in the village 96 percent of the people avail it regularly and remaining 4 percent of the people said that they don't avail it.



4.35.10. Recommendations

- Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Village has a huge number of dropouts. 40% of the studied sample population left education to get involved in various household activities because of poverty. CCL can introduce scholarships for poor and needy students which will encourage students towards education
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Also awareness regarding family planning should be conducted in the village. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

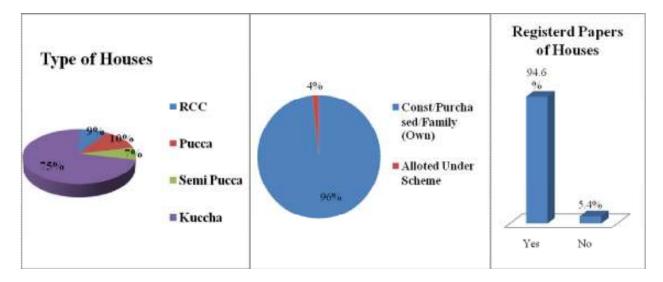
Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.

4.36. Saradu Village

YEAR 2011	Facilities	Facilities Existing within
	Available in the	5 kms. Cement/Tar road
	village	Facilities Existing
POPULATION 5180	Govt. Primary	more than 5 Kms
Forest Produce	School	Railway Station
Firewood Yes	ASHA Worker	Public Telephone Booth
Cultivation Yes	Health Sub Centre	DTP/Xerox Centre
Sanivation	Bus Stop	Higher Secondary
	Gram panchayat	School
RELIGION House	office Cooperative Society	Bank for S/B Account
holds		Taluk Headquarters
HINDU 810	PDS Shop Govt. Secondary	Block Development
MUSLIM 70	School	Office Police Station
Chief Crop Area	Grocery Shop	Daily Evening Market
Name	Private Primary	District Headquarters
Paddy 400Acres	School	Warehouse
Paddy 400Acres	Post Office	APMC/Mandi
	Panchayat Office	Charitable Primary
Land Distribution	n (In Acres):	Charitable Secondary
Total Irrigated Grazing	g Forest Wasteland	Pvt Secondary School
Area		Degree College
		Veterinary Clinic
5485 139 301	1762 533	Primary Health centre
	CHC/Govt General Hospital	
Migration Pattern	Pvt Clinic (RMP+)	
Outside state (Agricultura	Pvt Clinic (BAMS MBBS)	
	Private Hospital	
Outside State(Non-Agricultural Yes labour)		Ayush Hospital
		Medical Shop/Chemist

Figure Poster 36: Saradu Village

4.36.1. Household Status



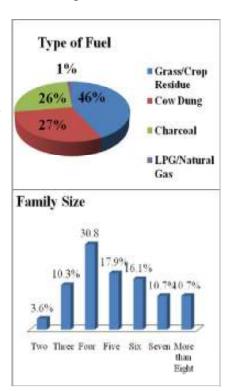
In the village a majority of the people reported that they have Kuccha Houses in the village. Approximately 75 percent of the people said that they live in Kuccha houses. Followed to which it was found that 14 percent of the people live in Pucca houses. The remaining 9 percent of the people said that they live in the Semi RCC Houses. Along with this, all the houses are registered and the entire respondent said that they have their registered papers. In other words in the village only 4 percent of the people have been allotted houses under scheme of the government.

4.36.2. *Type of Fuel*

In the village three types of fuels are primarily used which are Grass/Crop Residue, Cow Dung and Charcoal which almost 46 percent, 27 Percent and 26 percent respectively. But in terms of majority Grass Crop residue and wood is used in the households as fuel. There are also other sources of fuel in the village which are Kerosene and LPG/Natural Gas. But these are very low in availability in the village approximately less than 1 percent in the village.

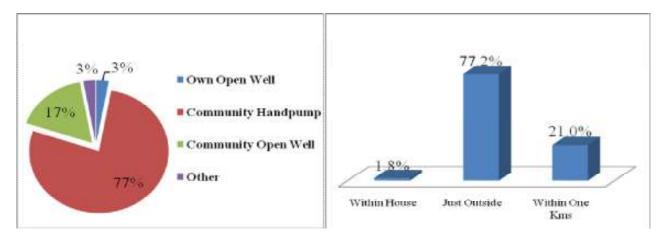
4.36.3. Family Size

With regard to the size of the family, it was reported that around 30.8 percent of the family in the village are having four members. After that there are 17.9 percent of the people who



have agreed that in their family there are on an average five members. Also in the village there is also prevalence of the families having members around seven or even more than eight also.

4.36.4. Source of Water

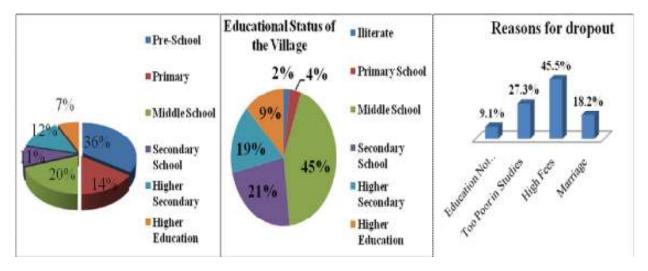


Approximately 77 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 17 percent of the people use Community Open Well. Around 6 percent of the people are also dependent upon the Open well and Other Sources for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Approximately 77 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 21 percent of the people have the water sources within the range of a Kms and similar to that another 2 percent of the people said that they are having water sources within house. The important aspect is that 25 percent of the entire population has to go within a Kms to get water. In summer season there arises a great problem due to water scarcity.

4.36.5. Education

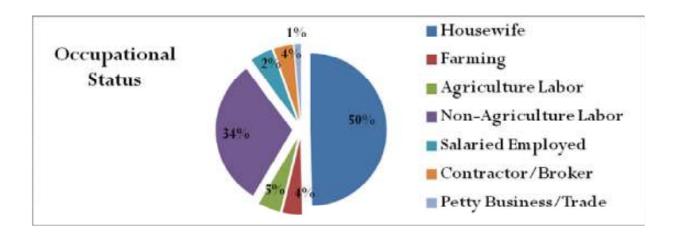
With regard to the education majority of the people which is approximately 45Percent found to be in the categories that have completed their Middle Level education. Followed to that it was reported by the people of the village that they have completed their Higher Secondary Schooling, this is around 21 Percent of the total. In the village 19 percent of the people also reported that they have completed their Higher Secondary education. It was also said that percentage of Illiterate people in the village is approximately 2 percent. With regard to those who have done

their Higher Education is 9 percent in the village. In the village majority of the students reported of being involved in their pre-schooling which is approximately 36 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 20 percent of the total. In the village percentage of students who are involved in the Primary Education is 12 percent. In the village Higher Secondary and Secondary level schooling comprises of 14 and 11 percent respectively in both the standards. Currently those students who are involved in the Higher Education is approximately around 7 Percent. In the village majority of the people reported that due to high fee they left their education in between and it is also considered as a major cause for the Dropout. Around 45 percent of the total dropout in the village has taken place due to High Fees. Following to which, 27 percent of the students reported that they left their education due to being too poor in the Studies. The other causes of dropout are Marriage which constitutes around 19 percent and remaining 9 percent of the students left education as they did not considered the education as important.



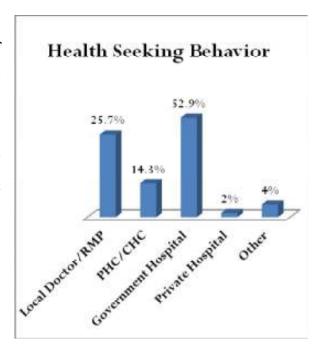
4.36.6. *Occupation*

Apart from the 50 percent women's reporting being Housewife, in the village those working as Non-Agriculture labour is dominant which is almost comprised of 34 percent of the people. Approximately 5 percent of the people are involved in the village are engaged in Agriculture Labour. Farming in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which are approximately 3 percent in the village.



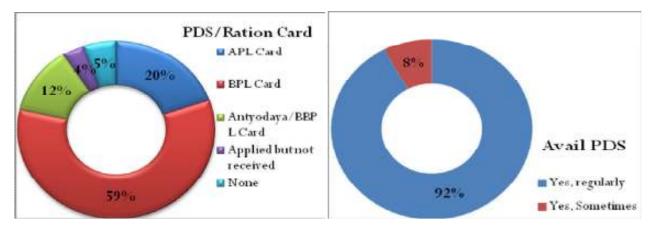
4.36.7. Health Seeking Behavior

In the village more than 53 Percent of the people prefer to go to the Government Hospital in case of any illness and disease. At the same time 26 percent of the people agreed that they go to the Local Doctor/RMP for the treatment of their minor and major ailments. Followed to which approximately 14 percent of the people also said that they visit PHC/CHC for health services. Followed to this it was also reported that 2 percent of the people agreed on visiting Private clinics in case of any health related issue. In the village around 5 percent of the people also visit to the other services for any health related Problem.



4.36.8. PDS/Ration Card Availability

Of the total 59 percent of the people do not have any PDS/Ration Card followed to which is the 20 percent of the people who have APL card available with them. 12 percent of the people have BPL Card. Only 1 percent of the people have APL Card. Approximately 92 percent of the people have agreed that they avail PDS regularly.



4.36.9. Recommendations

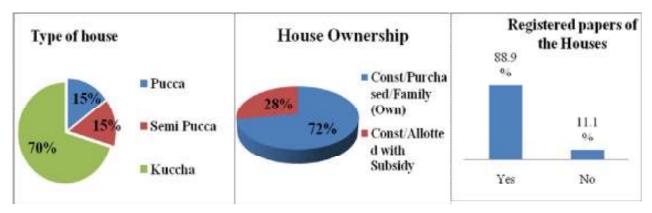
- As per the discussion with villagers availability of drinking water has emerged as one of the major concern especially during summer season. The majorities of the villagers has their own agricultural land and are involved in various agricultural activities. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- > CCL can introduce few scholarships for students who cannot continue their higher level education due to one or the other reason.
- As per the data only 1% of the studied sample is involved in Vocational courses. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- Angnwari Upka Pani and UPS Hariya Tola have requested for water facility. UPS Saradu, Anganwari Sidalu and UPS Kosaha have requested for toilet facility. While as UMS Upka Pani has requested for providing water and toilet facility.

4.37. Samidi village

YEAR 2011	Espelition Available to the	E 1011 E 1 12
TEAR 2011		3
HOUSEHOLDS 65		5 Kms
		Railway Station
POPULATION 370		Weekly Market
POPULATION 370		Police Station
Forest Produce	ASHA Worker	Gram Panchayat Office
		DTP/Xerox Centre
Cultivation Yes	Govt Primary School	Grocery Shop
Coal Yes	Facilities Existing within	Bank
Collection	5 kms.	Post Office
Collection	Charitable Primary	Block Development Office
	School	Taluk Headquarters
Chief Crop Area	Charitable Secondary	District Headquarters
Name	School	Pre-Primary nursery School
INAITIC	Health Sub Centre	Higher Secondary School
Paddy 50acre	RELIGION House	VOC/Training College
S		Private Primary School
	holds	Degree College
Public/Commo 00	HINDU 50	Govt. Secondary School
		ITI/Polytechnic
	Muslim 15	Private Clinic(RMP)
		Private Clinic(MBBS/BAMS)
Land Distri	bution (In Acres):	Primary Health Centre
		CHC/Govt Gen Hospital
		Pvt Hospital
	azing Forest Wasteland	Medical Shop
Area		Veterinary Clinic
the state of the s		
90.21 38	37 13	
Migration Pattern		
Wilgration Fattern		
Within the state (Non-Agricultural Labour) Yes		
Outside state (New Agri Lebeur)		
Outside state (Non-Agri Labour) Yes		

Figure poster 37: Samidi Village

4.37.1. Household Status



In the village majority of the people have said that 70 percent of the people have Kuccha Houses and remaining 30 percent of the people have been divided into Semi Pucca and Pucca houses in the village. With regard to the ownership status it was found that 72 percent of the people have their own houses and remaining 28 percent of the houses have been constructed with subsidy. All the houses which have been constructed under subsidy have been allotted under the Indira Aawas

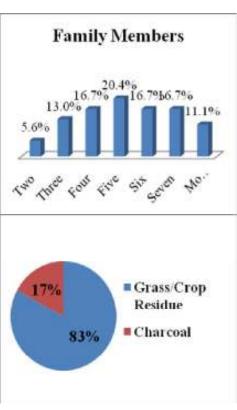
Yojana.

4.37.2. Family Size

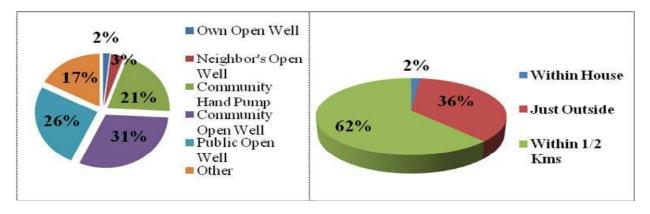
In this village it was found that majority of the families are having five members in the families. With regard to this it was reported by the 20.4 percent of the people that they have five members in the family. In the village there is a diverse range of family size ranging from only two to more than eight.

4.37.3. Type of Fuel

In this village, there are two types of fuel which are Grass/Crop residue which is around 83 percent. Followed to which there is also 17 percent of the people who uses charcoal as fuel.

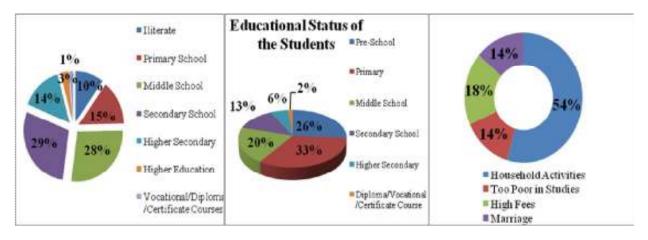


4.37.4. Water Source



In the village majority of the people are dependent upon the Community Open Well upon which 31 percent of the people are dependent on it for water. Similarly 26 percent and 21 percent of the people use Public open well and Community Hand Pump respectively to fetch water for drinking and Domestic purposes. Other sources are Neighbor's Open well and Own Open Well in the village. Water is a scarce resource in the entire area and in this village it was reported that 62 percent of the people have to go within Half Kms in order to get water. Similarly 36 percent of the people have water sources just outside their houses. Only 2 percent of the people said that they have the water sources within their houses.

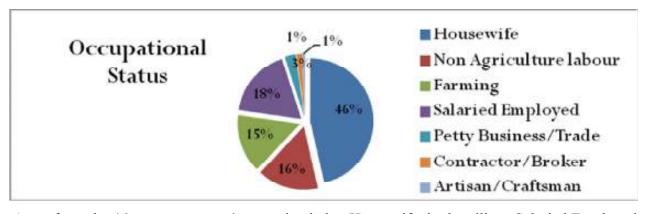
4.37.5. Education



With regard to the education majority of the people which is approximately 29 Percent found to be in the categories that have completed their Secondary Level education. Followed to which comes Middle level Schooling, which comprises of 28 percent. In the village 15 percent of the people also reported that they have completed their Primary education. In the village people also

reported that 14 percent of the people have completed their Higher Secondary Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 10 percent. With regard to those who have done their Higher Education is 3 percent in the village. In the village majority of the students reported of being involved in their Primary level schooling which is approximately 33 percent. Followed to which is those who are involved in the Pre Schooling which is approximately 26 percent of the total. In the village percentage of students who are involved in the Middle Education is 20 percent. In the village Secondary and Higher Secondary level schooling comprises of 13 and 6 percent respectively in both the standards. In the village getting involved in the household activities is the major cause for the Dropout. Following that 18 percent of the students left their education due to High fees. The other causes of dropout are High Fees and Being too poor in studies because of which students left their education. Getting involved in the household activities seemed to be the major reason for dropout in the village as 54 percent of the people reported of it. Being too poor in studies and Marriage are the other two reasons in the village which was reported by approximately 14 percent each in the village.

4.37.6. *Occupation*



Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

4.37.7. Health Seeking Behavior

In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 86 percent of the people agreed that they visit

to the Local Doctor/RMP. Remaining 8 percent of the people which is very low said that they visit to Chemist Shop in case of any health related issue. Other options available for the people in the village are Private Hospital, Traditional Healer and Private Clinic which are approximately 2 Percent each in the village. On asking the women about the place of delivery it was reported that out of total births in the village in the past three years 73.7 percent of the births have taken place in any health institutions. In other words 73 percent of the births are institutional in nature. In the village 16 percent of the total births are Non-Institutional in Nature. It was also reported that 10.5 percent of the births were attended by the skilled Birth attendant.



4.37.8. PDS/Ration Card Availability

In the village 49 percent of the people do not have any card with them. Followed to which 16 percent of the people have applied but haven't received it. With regard to avail it, 88 percent of the people avail it regularly.

4.37.9. Recommendations

- Education facility for the children- providing school with Educational Materials will be a very nice initiative to develop interest of the students towards education.
- > 50% of the studied sample left schools because of household activities as they are poor. CCL can introduce scholarships for poor and needy students so that they can continue their education.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL

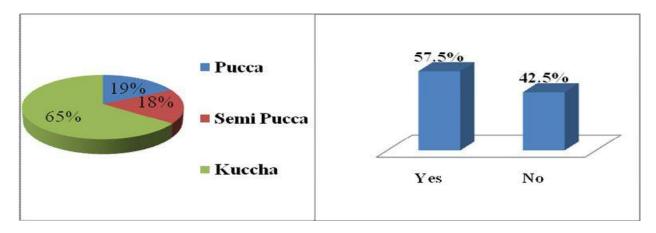
- should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- Drinking water problem is the major problem in this village. People use hand pumps and open wells for drinking purposes. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- As data suggests the employment level among the community is extremely low, especially among the women. People living in this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

4.38. Soparam village

YEAR 2011	Facilities Available	Facilities Existing more
HOUSEHOLD 189 S POPULATION 1086	in the village Bus Stop Cement/Tar Road Pre-Primary Nursery	than 5 Kms Railway Station DTP/Xerox Centre Police Station
Forest Produce Coal Yes Collection Cultivation Yes	School Health Sub Centre ASHA Worker Dai (Trained/Untrained)	Block Devt Office Public telephone Booth Daily Evening Market
Firewood Yes	Facilities Existing	Taluk Headquarters Bank
Chief Crop Area Name	within 5 kms. Weekly Market	District Headquarters Warehouse
Paddy 500 acres	PDS Shop Gram Panchayat office	APMC/Mandi
RELIGI House ON holds	Grocery Shop Post Office	Charitable Primary
ON Holds		Higher Secondary School
HINDU 189		Charitable Secondary Pvt Secondary School Degree College
Total Irrigated Gra	oution (In Acres): azing Forest Wasteland	ITI/Polytechnic Private Clinic(MBBS/BAMS)
Area 2156 54 22	1555 114	Vocational Training centre Private Clinic(RMP) Primary Health Centre
Migration Pattern Within the state (No Labour)	n-Agricultural Yes Yes	CHC Govt General Hospital Private Hospital Veterinary Clinic
Outside the State(N labour)	on-Agricultural	Ayush Hospital

Figure Poster 38: Soparam Village

4.38.1. Household Status



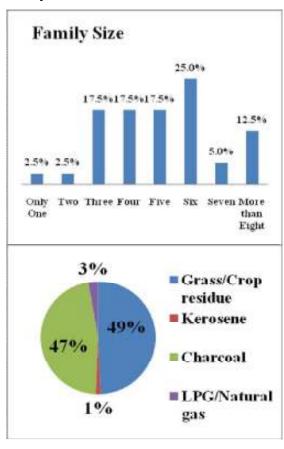
In the village majority of the houses are Kuccha which is approximately 65 percent and 18 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 17 percent of the people also have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses almost all the houses said that they have their own houses. Along with this they are having the registered papers of their houses too. Also in the village around 58 percent of the people are having electricity in their houses.

4.38.2. Family Size

In the village a majority of the people have said that they are having on an average six members in their families. Since as per reported by the people 25 percent of the people have said that they are having six members in the family. Followed to which it was found that there are also families which have reported of having three to five members in the family. Those families having more than 8 members were also found in the village which is around 12.5 percent.

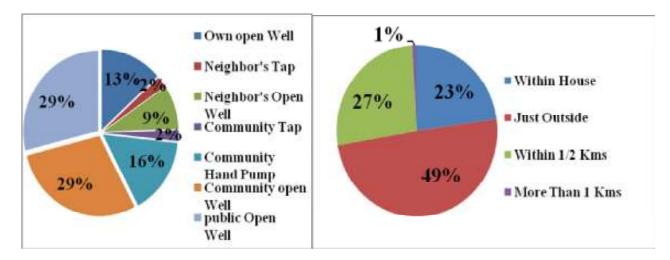
4.38.3. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the



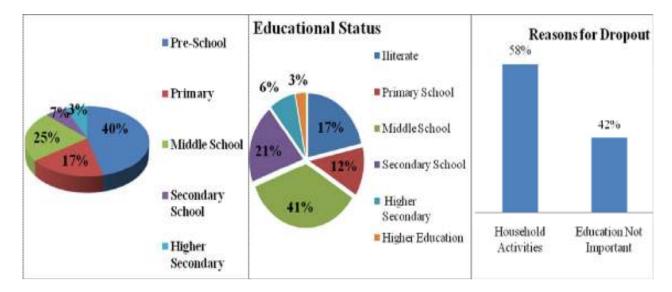
Charcoal. It was reported by the respondents that around 49 percent of the people use Grass/crop residue and wood as fuel in their houses for domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses. In the village LPG/Natural Gas and Kerosene is also used but their availability is very low in the village.

4.38.4. Water Source



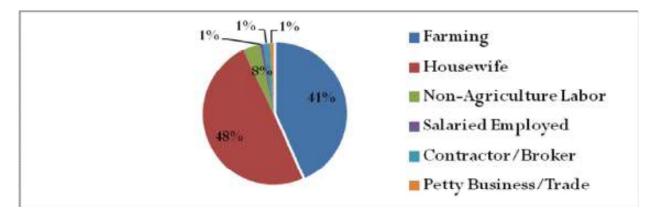
Approximately 30 percent of the people said that they use Community open well & Public Open Well each in order to get water for drinking and water for domestic purposes. In the village 16 percent of the people use Community hand Pump to get water. Around 13 percent of the people are also dependent upon their own open well. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Public Open Well and Community Open well; Neighbor's Tap and Community tap are also available. Approximately 49 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the village 27 percent of the people have to look for the water sources within half Kms. Approximately 23 percent of the people said that they are having water sources within their houses. The important aspect is that 1 percent of the entire population has to go more than a Kms to get water.

4.38.5. Education



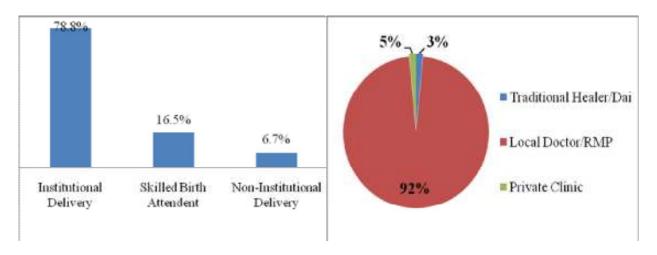
With regard to the education majority of the people which is approximately 41 Percent found to be in the categories that have completed their Middle Level education. Followed to which the most vital concern of the village is that 17 percent of the people reported of being Illiterate. In the village 21 percent of the people also reported that they have completed their Secondary Level education. In the village people also reported that 6 percent of the people have completed their Higher Secondary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 3 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 40 percent. Followed to which is those who are involved in the Middle Level Schooling which is approximately 25 percent of the total. In the village percentage of students who are involved in the Primary Level Education is 17 percent. In the village Higher Secondary and Secondary level schooling comprises of 7 and 3 Percent each in both the standards. In the entire village two major reasons for the dropout in the villages were identified which are 'Getting Involved in the Household Activities' and those considering 'Education Not Important'. From the responses of the village people it was found that 58 percent of the people left education due to getting engaged in the household Activities and secondly with regard to those who considered education not Important.

4.38.6. Occupation



Apart from the 48 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 41 percent of the people. Approximately 8 percent of the people are involved in the village are engaged in Non-Agriculture Labour. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.

4.38.7. Health Seeking Behavior

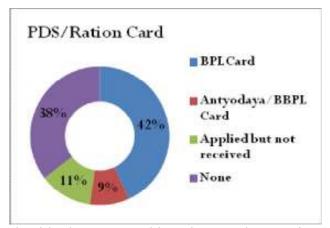


In the village more than 92 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 5 percent of the people agreed that they go to the Private Clinic for the treatment of their minor and major ailments. Followed to this it was also reported that 3 percent of the people agreed on visiting Traditional Healer/Dai in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 79 percent. Followed to which is

home deliveries which are assisted by the Skilled Birth Attendant which is approximately 16.5 percent of the total. In the village around 6.7 percent of the deliveries are non-Institutional deliveries.

4.38.8. PDS/Ration Card Availability

In the village around 42 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 38 percent of the people do not have any card available with them. At the same time around 11 percent of the people have applied but they haven't received any card. The remaining 9 percent of the people



reported that they have Antyodaya/ BPL Card with them. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them avail it.

4.38.9. Recommendations

- ➤ It was also found that there is a high dropout rates in the village. Majority of the students of studied sample less than 18 years of age reported that they left education due to household activities and early marriages. CCL can introduce few scholarships for poor students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Villagers have requested a mobile medical van for health related issues because 71% of studied sample prefer to go to local RMP for medical consultation. Along with this there shall be also provision of connecting ASHA/Anganwadi Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.

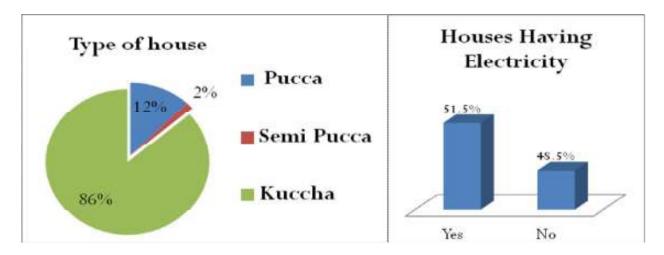
- ➤ People of this village need to be trained in some vocational skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- > UMS has requested for providing toilet and water facility.

4.39. Tarwan village

YEAR 2011	Facilities Available in	Facilities Existing within 5
	the village Cement/Tar Road	Kms.
	Bus Stop	Veterinary Clinic
	PDS Shop	Facilities Existing
	Grocery Shop	more than 5 Kms
Forest Produce	Govt Primary School	Post Office
	Charitable Primary School	Police Station
Cultivation Yes		Weekly Market
Coal Yes	Private Primary School	Block Development Office
Collection	Private Clinic(RMP) Private	Railway Station
Public/Commo 00	Clinic(MBBS/BAMS)	DTP/Xerox Center
n Tap Points	ASHA Worker	
	Dai (Trained/Untrained)	Taluk Headquarters
HH Tap 00		Gram Panchayat Office Bank
Connections		Darik
RELIGION House	Chief Crop Area	District Headquarters
holds	Name	Govt. Secondary School
	Paddy 100	Private Secondary School
HINDU 265	acres	Higher Secondary School
		Medical Shop
		Production of the second
Land Clain	bution (In Acres):	Primary Health Center
		Pvt Secondary (Burnpur)
		Degree College
		ITI/Polytechnic
Migration Pattern		Voc Training Centre
inglation rattern		Health Sub Centre
Within the state (Non-Agricultural Yes		CHC/Govt Gen Hospital
Labour)		Private Hospital
Outside state (Non-A	Agri Labour) Yes	Ayush Hospital
	A CONTRACTOR OF THE PARTY OF TH	Ayush Hospital

Figure Poster 39:Tarwan Village

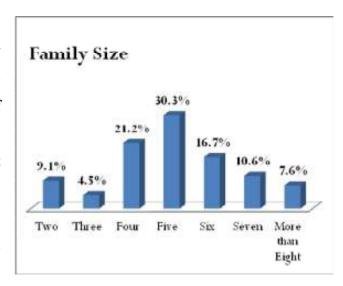
4.39.1. Household Status



In the Tarwan Village people reported that 86 percent of the houses are Kuccha and remaining 14 percent are divided into Pucca and Semi Pucca houses. 12 percent of the houses are Pucca and 2 percent of the houses are Semi Pucca. In the village no RCC made Houses were found as per reported by the people. Along with these the important aspect of the houses in the village is that all the houses are owned by the people themselves, nobody in the village reported of staying in the rented houses or allotted under any schemes as such. On asking the people with regard to the registered papers of houses all respondent have agreed on having it. With regard to having electricity in the houses approximately 51.5 percent of the houses have said that they have it in their houses.

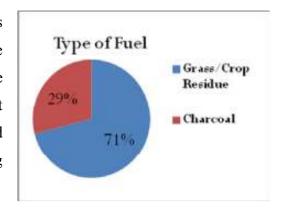
4.39.2. Family Size

In the village on an average five members are there in the family which was reported by around 30 percent of the people. Followed to which it was also found that 18.6 percent of the total families have more than 8 members in their families. Approximately 16.7 percent of the people have reported of having six members in the family. In the village there is a diverse range of family size ranging from two to more than eight.

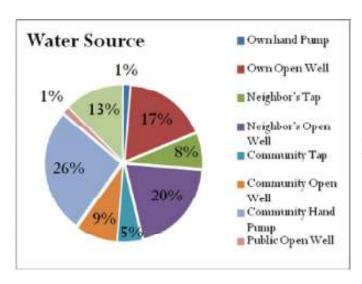


4.39.3. Type of Fuel

In the village mostly Grass/Crop Residue and Wood is used as a major fuel as 71 percent of the people have reported of using it. Followed to which we have the Charcoal which is used by approximately 29 percent of the people. There are also other types of fuel used in the village such as LPG/Natural Gas and Cow dung but they very less in Prevalence.



4.39.4. Water Source



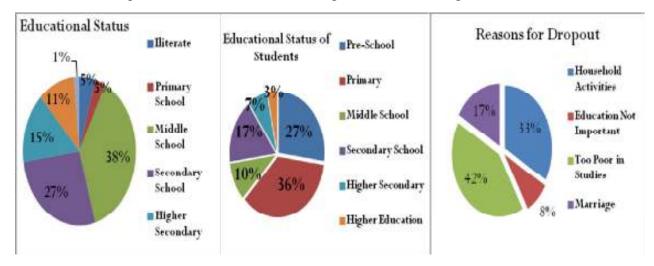
Approximately 26 percent of the people said that they use Community Hand Pump in order to get drinking and water for domestic purposes. In the village 20 percent of the people also have their own Neighbor's Open Well. Around 17 percent of the people are also dependent upon the own Open Well and Own Tap for getting water. In the village people have a wide range of diversity of the water sources but

then also the water is a scarce resource in the region as it is not available throughout the year. Other sources available in the village Community tap, Community Open Well, Those drawing water from Neighbor's Tap etc but their availability is very low such as 9 percent, 8 Percent and 5 percent respectively.

4.39.5. Education

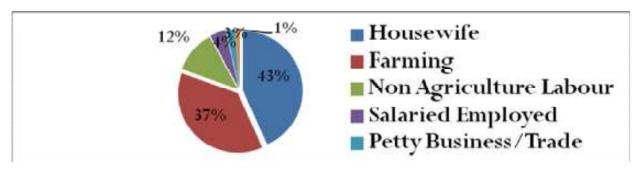
With regard to the education majority of the people which is approximately 56 Percent found to be in the categories that have completed their Secondary Level education. Followed to which is Middle level Schooling, which comprises of 22 percent. In the village 10 percent of the people also reported that they have completed their Higher Secondary education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling.

Nobody in the village was reported as Illiterate in the village. In the village majority of the students reported of being involved in their Primary School which is approximately 36 percent. Followed to which is those who are involved in the Pre- Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Secondary Level Education is 17 percent. In the village Middle Level Schooling and Higher Secondary level schooling comprises of 10 Percent and 7 percent respectively in both the standards. In the village the major reason for which the students left education was due to getting involved in the Household Activities. Approximately 40 percent of the students said that they left education due to being too poor in studies. Followed to these are the other reasons such as considering education not Important, Too Poor in studies, High Fees and Marriage.

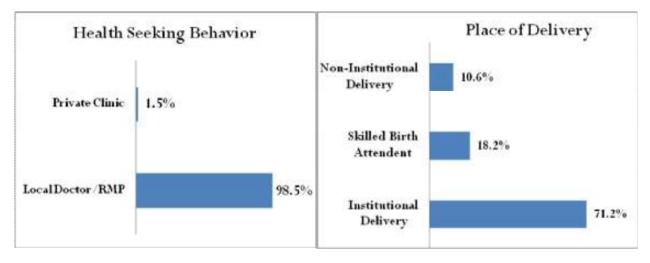


4.39.6. Occupation

Apart from the 43 percent women's reporting being Housewife, in the village Farming is the dominant occupation which is almost comprised of 37 percent of the people. Approximately 12 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Salaried Employed in the village comprises of 4 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.



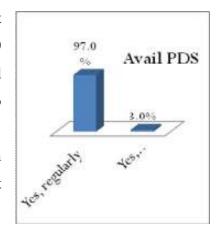
4.39.7. Health Seeking Behavior



In the village it was reported that if anybody falls sick majority of the people prefer to go to the Local Doctor/RMP. In the village approximately 98.5 percent of the people agreed that they visit to the Local Doctor/RMP. Remaining 1.5 percent of the people which is very low said that they visit to private clinic in case of any health related issue. The women who have given any birth in last three years reported that out of the total 71.2 percent of the births have taken place in any health Institution. In other words majority of the births are institutional in nature. Followed to that there is also prevalence of skilled birth attendant which is around 18.2 percent of the total births, in the village there was also identified the Non-Institutional Deliveries which was around 10 percent.

4.39.8. PDS/Ration Card Availability

Thirty five percent of the people in the village have reported that they have their BPL card available with them. Similar to that 30 percent of the people also said that they do not have any card with them. Along with that, 20 percent of the people also reported that they have applied but haven't received their card. Those having the Antyodaya/BPL Card are very low in percentage such as 14 percent of the total. Of the total 97 percent of the people reported that they avail PDS regularly.



4.39.9. Recommendations

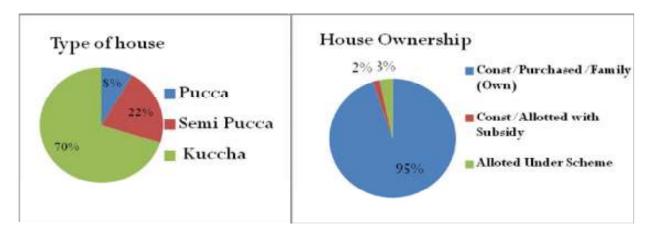
- As per the discussion with villagers availability of drinking water has emerged as one of the major concern especially during summer season. The majorities of the villagers has their own agricultural land and are involved in various agricultural activities. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- > CCL can introduce few scholarships for students who cannot continue their higher level education due to one or the other reason.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village, approximately three days in a week. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- As per the data only 1% of the studied sample is involved in Vocational courses. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- > There is high rate of dropouts in the village, reasons being poverty and early marriage. CCL can introduce scholarships for poor students.
- Anganwari center has requested for toilet and water facility. While as UMS has requested for Sports items.
- ➤ Villagers have requested for construction of dam on the river.

4.40. Torhad village

YEAR 2011 HOUSEHOLDS 45	Facilities Available in the village Private Primary School Pre-pri Nursery School	Facilities Existing more than 5 Kms Daily Evening Market Weekly Market
POPULATION 250 Forest Produce	Govt Primary School ASHA Worker Facilities Existing within 5 kms. Health Sub Center	Railway Station Police Station PDS Shop Bus Stop Gram Panchayat Office
Cultivation Ye	Dai (Trained/Untrained)	Grocery Shop DTP Xerox Centre Bank
Ye s	Public/Common 00 Tap Points HH Tap 00 Connections	Post Office Block Development Office Taluk Headquarters
RELIGION House holds HINDU 45	Chief Crop Area Name	District Headquarters Warehouse APMC/Mandi
Land Distribu	Paddy 20 Acres Ition (In Acres):	Charitable Primary Govt. Secondary School Charitable Secondary ITI/Polytechnic
	Forest Wasteland	Pvt Secondary School Higher secondary School Vocational Training Centre
458 17 1	54 19	Degree College Primary Health Centre Private Clinic (MBBS/BAMS)
Migration Pattern Within the state (Non-Labour)	Agricultural Yes	CHC/Govt Gen Hospital Private Clinic (RMP) Private Hospital Medical Shop Veterinary Clinic

Figure poster 40: Torhad Village

4.40.1. Household Status

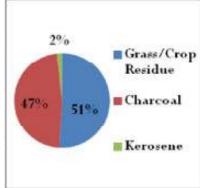


In the village majority of the houses are Kuccha which is approximately 70 percent and 22 percent of the houses are Semi Pucca as per reported by the people of the village. In the village 8 percent of the people have Pucca houses and no houses were reported under the category of RCC. With regard to the ownership of houses 95 percent of the respondent said that they have their own houses. Remaining 5 percent is comprised of those Constructed/allotted under Scheme. In the village all the houses allotted under the scheme are given under the Indira Aawas Yojana. In the village around 66 percent of the households reported of having electricity in their houses and with regard to the registered papers almost all the houses have it.



4.40.2. Type of Fuel

In the entire village only two types of fuels are used which are Grass Crop Residue and secondly the Charcoal. It was reported by the respondents that around 51 percent of the people use Grass/crop residue and wood as fuel in their houses for



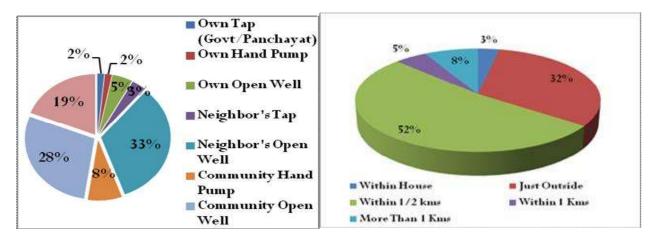
domestic and other purposes. Similarly 47 percent of the people use charcoal as fuel in their houses. In this village there is also prevalence of Kerosene as fuel but at very low level.

4.40.3. Family Size



In the village a majority of the people have said that they are having on an average five members in their families. Since as per reported by the people 27 percent of the people have said that they are having five members in the family. Followed to which it was found that there are also families which have reported of having six members in the family. Those families having more than 8 members were found very less in the village which is around 3.3 percent.

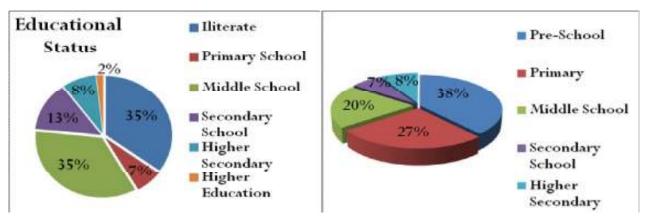
4.40.4. Water Source



Approximately 33 percent of the people said that they use Neighbor's open well in order to get water for drinking and water for domestic purposes. In the village 28 percent of the people use Community Open well to get water. Around 19 percent of the people are also dependent upon the Public Open well for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. The other available sources of water for the people are Community Hand Pump (8 Percent), Own Open well, Own Tap, Own Hand Pump etc but their availability is very low in the village. Approximately 52 percent of the people have their source of water within Half Kms in the village. This comprises of Tap and Hand Pump and also the community taps and wells etc. in the village 32 percent of the people have to look for the water sources Just outside their houses. Approximately 8 percent of the people said that they are having water sources

located more than 1 Kms away. In the village only 3 percent of the people reported that they are having their water sources within their houses.

4.40.5. Education

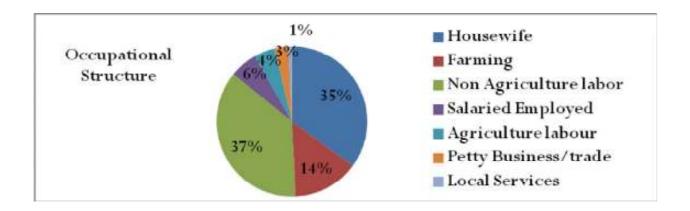


With regard to the education majority of the people which is approximately 35 Percent found to be in the categories that have completed their Middle Level education. Similar to that it was also found that a majority of the people in the village which is around 35 percent of the total are illiterate. Followed to which the most vital concern of the village is that 13 percent of the people reported of being completed their Secondary Schooling. In the village 8 percent of the people also reported that they have completed their Higher Secondary Level education. In the village people also reported that 7 percent of the people have completed their Primary Level Schooling. It was also said by the respondents that percentage of those people who have completed their Higher Education is very less which is around 2 Percent of the total. In the village majority of the students reported of being involved in their pre-schooling which is approximately 38 percent. Followed to which is those who are involved in the Primary Level Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Middle Level Education is 20 percent. In the village Higher Secondary and Secondary level schooling comprises of 8 and 7 Percent each in both the standards.

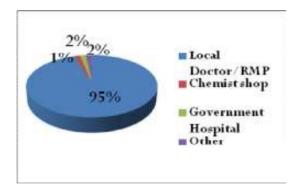
4.40.6. Occupation

Apart from the 35 percent women's reporting being Housewife, in the village Farming is dominant occupation which is almost comprised of 37 percent of the people. With regard to this it is also implied that along with the men, women is also involved as Non-agriculture labour in the village. Approximately 14 percent of the people are involved in the village are engaged in

farming as its primary and main occupation. In the village there are also other forms of occupations available which are Petty Business/Trade, Contractor/Broker and Salaried which are very less in the village.

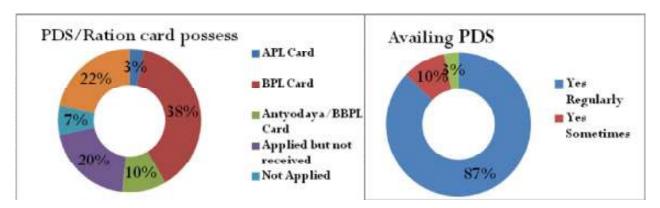


4.40.7. Health Seeking Behavior



In the village it was clearly mentioned by the people that 95 percent of them visit Local Doctor/RMP available in the village. Remaining 5 percent comprised of those visiting Government hospitals, Chemist Shops and other Sources.

4.40.8. PDS/Ration Card Availability



In the village around 38 percent of the people reported that they have BPL Card available with them. Followed to which it was also found that 22 percent of the people do not have any card available with them. At the same time around 20 percent of the people have applied but they

haven't received any card. The remaining 10 percent of the people reported that they have Antyodaya/ BPL Card with them. Around 7 percent of the people have not applied for any card and three percent of the people hold APL Card. On asking the people questions regarding the availing of PDS, it was found that almost all the people who are having the PDS/Ration Card available with them 87 percent of them avail it.

4.40.9. Recommendations

- Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people to specially women and children also to take the benefit of it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- ➤ Teachers have requested for the teaching aids. CCL can help them by providing library which in turn will improve the quality of education.
- ➤ It was also found that there is a high dropout rates in the village because of poverty and early marriages. CCL can introduce few scholarships for the poor students in the village, which can provide both support and motivate the students towards Higher Education.
- ➤ Despite having various water sources in the village, the village still faces shortage of water during summers. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- ➤ Lack of market oriented skill is one of the reasons behind the rising unemployment in the village. No persons were found during the study who has taken any skill building training. This can be taken up as major initiative. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.

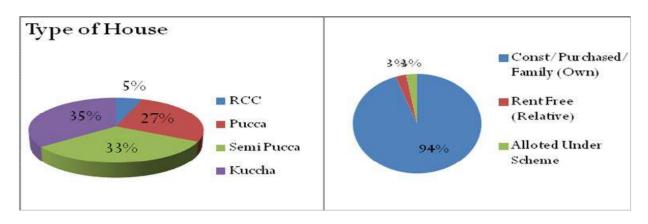
- ➤ Sanitation has emerged as another major issue for the community. As majority of the respondents do not have access to any toilet facility, construction of toilet should be taken up under CSR. CCL in collaboration with Gram Panchayat and district administration can construct the community toilet and Gram Panchayat should be asked to run and maintain the toilets.
- > UPS Divar Tola has requested for water and toilet facility.

4.41. Ursoo village

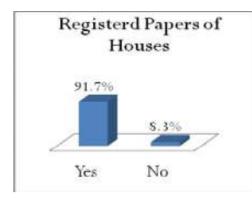
YEAR 2011	Facilities Ex	kisting more	Facilities Existing within 5
HOUSEHOLDS 113	Railway Statio Taluk Headqu	arters	kms. Public Telephone Booth Daily/Evening Market Weekly Market
POPULATION 609	District Head Charitable Pri ITI Polytechni	imary School	Police station Post Office DTP/Xerox Center
Forest Produce	Warehouse APMC/Mandi		Pre- Pri Nursery School
Coal Yes	ITI/Polytechnic	0	Gram Panchayat Office Bank
Collection Yes Firewood	Vocational Training Centre Charitable Secondary School		Private Primary School Block Development Office Govt. Secondary School
Cultivation Yes	Private Clinic(MBBS/E	BAMS)	Higher Secondary School Private Secondary School
RELIGION House holds	Private Hospital Ayush Hospital		Degree College Health Sub Center Primary Health Center
HINDU 113	Chief Crop Name	Area	CHC/Govt. Gen. Hospital Private Clinic(RMP) Dai(Trained/Untrained)
	Paddy	200 acres	Veterinary Clinic Medical Shop
Land Distribution (In Acres):			Facilities Available in the
Total Irrigated Gra Area	zing Forest	Wastelan d	village Bus Stop
664 37 20	45	45	
Migration Pattern			PDS Shop
Within the state (Non-Agricultural Yes			
			Asha Worker

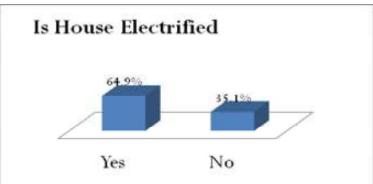
Figure poster 41: Ursoo Village

4.41.1. Household Status



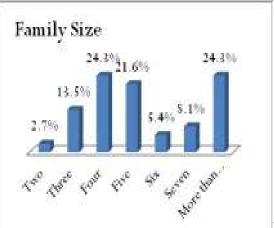
In the village majority of the houses are Kuccha which is approximately 35 percent and 33 percent of the houses are Kuccha as per reported by the people of the village. In the village 27 percent of the people also have Pucca houses and remaining 5 percent of the houses are of RCC. With regard to the ownership of houses 94 percent of the respondent said that they have their own houses. Remaining three percent each are comprised of Rent free houses and those allotted under Scheme. In the village 91.7 percent of the people have the registered papers of their houses and with regard to having electricity, approximately 65 percent of the people have in their houses.





4.41.2. Family Size

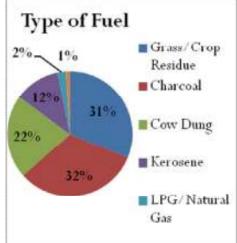
In the Village it was found that majority of the family in the village reported of having four members in the family. Around 24.3 percent of the people said that they have four members in their families, followed to which 21.6 percent of the people said that they have five members in



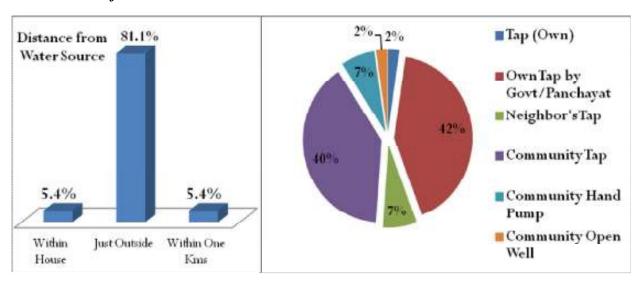
the family. In the village there is a diverse range of family size ranging from only one to More than eight. The important thing to be noticed in the village is that there is also large percentage of large families in the village.

4.41.3. Type of Fuel

In the village there are various types of fuels used such as Charcoal, Grass/Crop Residue and Cow dung. It was reported that 32 percent of the people used charcoal as fuel. Followed to which are Grass/Crop Residue and Cow Dung which are 31 percent and 22 Percent respectively. 12 percent of the people use Kerosene as fuel and other remaining sources are LPG/Natural Gas and Biogas.



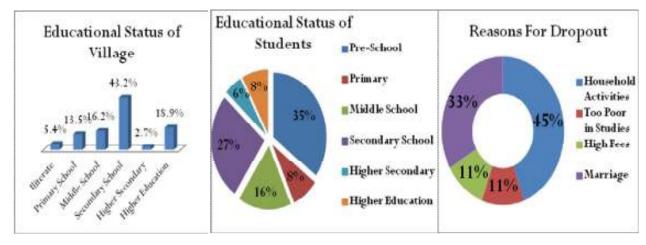
4.41.4. Source of Water



Approximately 42 percent of the people said that they use Own Tap provided by the Govt/Panchayat in order to get drinking and water for domestic purposes. In the village 40 percent of the people use Community Tap to get water. Around 7 percent of the people are also dependent upon the Community Hand Pump and Neighbor's Tap for getting water. In the village people have a wide range of diversity of the water sources but then also the water is a scarce resource in the region as it is not available throughout the year. Approximately 81 percent of the people have their source of water just outside the houses. Which implies or comprises of Neighbor's Open Well, Tap and Hand Pump and also the community taps and wells etc. In the

village 6 percent of the people have the water sources in their houses and similar to that another 5 percent of the people said that they are having water sources within a Kms. The important aspect is that 6 percent of the entire population has to go within a Kms to get water.

4.41.5. Education

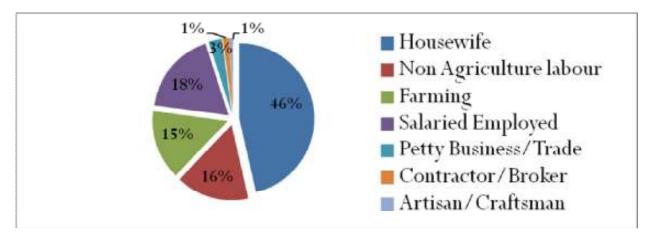


With regard to the education majority of the people which is approximately 43 Percent found to be in the categories that have completed their Secondary Level education. Followed to which the Higher Education, which comprises of 18.9 percent. In the village 16 percent of the people also reported that they have completed their Middle Level education. In the village people also reported that 16 percent of the people have completed their Middle Level Schooling. It was also reported that percentage of Illiterate people in the village is approximately 6 percent. In the village majority of the students reported of being involved in their pre-schooling which is approximately 35 percent. Followed to which is those who are involved in the Secondary Level Schooling which is approximately 27 percent of the total. In the village percentage of students who are involved in the Middle Education is 16 percent. In the village Higher Secondary and Primary level schooling comprises of 8 percent each in both the standards. In the village getting involved in the household activities is the major cause for the Dropout. Following that 33 percent of the students left their education due to early marriage. The other causes of dropout are High Fees and Being too poor in studies because of which students left their education.

4.41.6. *Occupation*

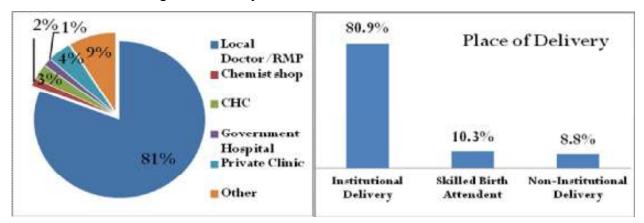
Apart from the 46 percent women's reporting being Housewife, in the village Salaried Employed is dominant which is almost comprised of 18 percent of the people. Approximately 16 percent of the people are involved in the village are engaged in Non-Agriculture Labour. Farming in the

village comprises of 15 percent in the village which is followed by the Petty Business/Trade, contractor/Broker which is approximately 3 percent in the village.

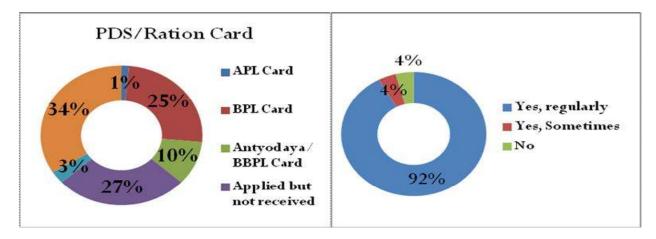


4.41.7. Health Seeking Behavior

In the village more than 80 Percent of the people prefer to go to the Local Doctor/RMP in case of any illness and disease. At the same time 9 percent of the people agreed that they go to the Other Sources for the treatment of their minor and major ailments. Followed to this it was also reported that 4 percent of the people agreed on visiting Private clinics in case of any health related issue. Out of the total births majority of births have taken place in the Government Maternity Centre/General Hospital which is approximately 80.9 percent. Followed to which is home deliveries which are assisted by the Skilled Birth Attendant which is approximately 10.3 percent of the total. In the village around 8.8 percent of the deliveries are non-Institutional deliveries.



4.41.8. PDS/Ration Card Availability



Of the total 34 percent of the people do not have any PDS/Ration Card followed to which is the 27 percent of the people who have applied but haven't received the card. 25 percent of the people have BPL Card and 10 percent have Antyodaya/BPL Card. Only 1 percent of the people have APL Card. Approximately 92 percent of the people have agreed that they avail PDS regularly.

4.41.9. Recommendations

- As per the discussion with villagers availability of drinking water has emerged as one of the major concern especially during summer season. The majorities of the villagers has their own agricultural land and are involved in various agricultural activities. In the village Rainwater Harvesting methods shall be introduced to recharge the water table in order to address the problem of water scarcity. The implementing partner should also be asked to motivate the villagers about roof water harvesting.
- The suggested strategy with regard to Health is that Mobile Medical Van shall be provided in the village. Along with this there shall be also provision of connecting ASHA/Anganwari Worker to the MMV which can encourage people specially women also to take the benefit from it. Awareness regarding government health schemes, of family planning and importance of institutional deliveries as well as day to day health care activity be provided. There shall also be referral services for patients and that CCL should provide free medical consultation in their own hospitals at least once in a month where in people from all the command villages of CCL can come and take consultation.
- As data suggests the employment level among the community is extremely low, especially among the women. People of this village need to be trained in some vocational

- skill. CCL can tie up with some organization having expertise in skill development and which also ensures Placement. CCL can bear the fees but funding should be limited to providing fees for all the trainees enrolled from this village.
- ➤ Community has mentioned sullage nuisance as the major problem during the interview. The demand for drainage system is quite evident from the community and same can be taken on priority under CSR work.
- > NPS has requested for providing toilet facility.

5. KEY CONCLUSION AND GENERAL RECOMMENDATION:

These recommendations are common to all the studied villages and should be taken in collaboration with district administration, local panchayats and implementing agencies. It is advisable to have a MoU between all the parties before implementation.

5.1. SUPPLY OF DRINKING WATER

As most of the community depends on open sources of drinking water, the lack of it is considered as one of the major issues in most of the villages. It is advisable if CCL can install water purifier in schools with continuous water supply. Majority of the villages demanded Hand Pump with deep boring for drinking water. Various watershed management techniques or rainwater harvesting can be considered to solve the problem of water.

Some villagers also expressed the demand for drinking water supply through pipelines to the household. CCL can collaborate with district and local administration to ensure the piped water supply. It can be done only through the convergence model where administration can take the responsibility of maintaining the piped supply system.

5.2. COMMUNITY TOILET

Community toilets need to be constructed in all 41 villages as people in all these villages go for ODS which gives rise to various health issues. It is a pre requisite to consult all the Panchayats and to request them to be an active partner of the project and to bear the responsibility of maintaining the toilets if provided by the company. The key stakeholders especially the Panchayat officials are in view that increasing the community toilets with proper water supply will help to improve the sanitation situation .Panchayats should be given the responsibility of community toilets.

5.3. MATERNAL HEALTH

Absence of institutional delivery and maternal health emerged as one of the issues of the community. Thus, they should be given importance under CSR work. Company can involve its existing Mobile Medical Van (MMV) in this particular CSR intervention. MMV can work in collaboration with Anganwadi Centers to address the lack of general health care and maternal health in particular. Regular health camps can be organized to address primary healthcare issues.

5.4. LIVELIHOOD

Unemployment emerged as one of the major concerns for the community. Lack of market oriented skills is one of the reasons stated by key informants. The role of higher education is also emphasized as the demand for highly skilled workers is growing in the local market. Skills building in areas like computer education, hotel management, ticketing and interior decoration could be considered. Also, skill building in areas of sewing and stitching for women can be considered as a possible CSR intervention.

5.5. DRAINAGE SYSTEM

Construction of drainage system was requested in majority of the villages where there is a problem of water logging especially during the rainy seasons. Various health related issues can be curbed by having better drainage system in the villages.

5.6. POLLUTION

Air pollution emerged as a major problem in the villages where transportation of coal passes through these villages because of which all respondents complained about the problem of dust pollution. It was found that villagers are suffering from breathing related problems, reportedly caused by dust and pollution. Reduction in air pollution can be taken as one of the major projects of CCL where it can try to reduce pollution through plantation and installing Water Sprinklers. Starting a major drive for tree plantation and involving schools and other stakeholders including the administration can be one of the approaches to address this.