

**REPORT OF BASELINE SURVEY CONDUCTED IN SEVEN VILLAGES OF
FARIDABAD, HARYANA**

INDIAN OIL CORPORATION LIMITED CSR PROJECT



Conducted by

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Tata Institute of Social Sciences

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RESEARCH TEAM AT NCSR HUB

Project Director

Dr. B. Venkatesh Kumar

Faculty Guide

Prof. T. Rajaretnam

Project Coordinators

Mr. Avadh Bihari

Ms. Priyanka Korde

TISS Programme Officer

Mr. Amit Verma

Local Programme Officer

Mr. Ajay Shukla

Field Investigators

Ms. Kanchan

Mr. Yatinder Shukla

Mr. Surinder

Mr. Rajeev Sharma

Ms. Shazia

Ms. Khusboo

Data Analysis, Data Interpretation and Report Writing

Mr. Amit Verma

Report finalisation, Special Inputs, Proof Reading

Mr. Avadh Bihari

Ms. Priyanka Korde

Secretariat Support

Ms. Vaishali Gajbiye

Ms. Rajisha Ramanakutty

Ms. Sushma

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B. Venkatesh Kumar
Professor & Chairperson
Centre for Public Policy & Governance
Tata Institute of Social Sciences

LIST OF ABBREVIATIONS

1. IOCL	: Indian Oil Corporation Limited
2. CSR	: Corporate Social Responsibility
3. TISS	: Tata Institute of Social Sciences
4. DPE	: Department of Public Enterprises
5. CPSE	: Central Public Sector Enterprises
6. NCSRH	: National Corporate Social Responsibility Hub
7. BDO	: Block Development Office
8. CS Pro	: Census and Survey Processing System
9. SPSS	: Statistical Product and Service Solutions
10. MoC	: Memorandum of Collaboration
11. RCC	: Reinforced Concrete Cement
12. PCC	: Plain Concrete Cement
13. LPG	: Liquefied Petroleum Gas
14. OBC	: Other Backward Classes
15. SC	: Scheduled Caste
16. ST	: Scheduled Tribe
17. IAY	: Indira Awaas Yojana
18. MDM	: Mid-Day Meal
19. NGO	: Non-Governmental Organisation
20. HH	: Household
21. OAD	: Open Air Defecation
22. MOWS	: Ministry of Water Resources
23. MAP	: Mass Awareness Programmes
24. ODS	: Open Defecation System
25. RMP	: Registered Medical Practitioner
26. SHC	: Sub-Health Centre
27. ASHA	: Accredited Social Health Activist
28. PHC	: Primary Health Centre
29. CHC	: Community Health Centre
30. MGNREGA	: Mahatma Gandhi National Rural Employment Guarantee Act
31. PDS	: Public Distribution System
32. APL	: Above Poverty Line
33. BPL	: Below Poverty Line
34. AAY	: Antyodaya Anna Yojana
35. DTP	: Desk Top Publishing
36. APMC	: Agricultural Produce Market Committee
37. ITI	: Industrial Training Institute
38. MBBS	: Bachelors of Medicine and Bachelors of Science
39. BAMS	: Bachelor of Ayurveda, Medicine and Surgery
40. RO	: Reverse Osmosis
41. SHG	: Self Help Group
42. CCR	: Concrete Cement Roads
43. MMV	: Mobile Medical Van
44. CGWB	: Central Ground Water Board
45. IT	: Information Technology

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EXECUTIVE SUMMARY

Introduction

The research study conducted in Faridabad is part of the Baseline Survey commissioned by Indian Oil Corporation Limited to National Corporate Social Responsibility Hub, Tata Institute of Social Sciences. This study was undertaken as per the terms of the Memorandum of Collaboration (MoC) between IOCL and TISS as signed on 27th of November, 2012. The Baseline Survey is spread across 5-7 villages in each of the 41 locations across 21 states, making it a large-scale study affecting more than 270 villages across India. Seven villages in the district of Faridabad were chosen for implementation of the study by IOCL officials.

Study Design

The Baseline Survey was conducted with the three-fold objectives: to establish baseline information of the villages in order to gauge their present situation; to understand the needs of the households, levels of accessibility and availability to services; to identify the gaps and challenges and chalk out the possible areas of CSR intervention.

This was an exploratory study using Quantitative methods of investigation. Two separate quantitative tools were developed: Household questionnaire and Village questionnaire to triangulate information and obtain best possible accuracy of data. The questionnaires were scientifically designed to obtain household and village-level information on various socio-economic indicators. The data obtained has been thematically segregated in the report in the following domains:

1. Demographic and Housing Characteristics
2. Literacy and Educational Status
3. Vocational Training
4. Water Resources, Sanitation and Hygiene
5. Health-care Facilities and Birth Details
6. Livelihood, Landholding and Livestock
7. Social Welfare Schemes
8. Safety Nets and Credit Patterns
9. Infrastructure – Availability and Accessibility

Systematic Random Sampling method was employed with the help of existing enumeration lists (Voters' list) obtained from local authorities. The data, after on-field data collection, was entered and analysed using SPSS.

Findings and Recommendations

Faridabad, on the whole, is a fairly developed district in terms of its infrastructure. The sampled villages are also developed in terms of having electricity in all households, adequate penetration of advanced fuels such as LPG and other infrastructure.

Albeit the developed state of the villages, there are areas of grievance which need to be addressed through sound interventions along with efforts that can be taken to further improve the quality of life. The major areas of intervention found across the surveyed villages of Faridabad are:

1. **Health:** The quality of healthcare facilities is questionable in all the surveyed villages as reported by participants. Most of the time the health personnel remain absent from the health sub centres (SHC) available in the nearby villages and medicines mostly remain out of stock.

Due to these reasons, majority of population, for their primary treatment, prefer to avail the services of RMPs (Registered Medical Practitioners) also known as local doctors or quacks and they have neither professional qualification nor license to practise any system of medicine. Treatment from these doctors is always a risk and dangerous for human life as local doctors do not conduct proper medical tests for diagnosing the diseases and give medicines by looking at some preliminary and superficial symptoms which is not a safe and careful practice and leads to reactions in human body many times which has dire consequences on the patient's life. Lack of public transport facilities to the nearest health institutions also restricting and channelize them to RMPs for the primary health care. The data analysis also reveals that majority of the people in all the villages are economically weak and could not afford the high cost of treatment from private hospitals or clinics.

Provision of health facilities such as MMVs could help better the health scenario of the villages in addition to financial aid through health cards to increase health seeking behaviour.

2. **Livelihood:** Faridabad, one of the biggest hubs of multinational companies, various factories where the demand of skilled work force is always remained. But the presence of a big industrial hub is found to be less approached by the villagers of the surveyed villages which are around the vicinity of the city. The main reason is coming out lack of vocational skills and poor quality of education. Lack of public transport also brings down the motivations of the youth to go out and find a job for them. As the educational standards are always questionable, therefore the only option of skilful workforce can only be created by providing vocational skills to the youth of the villages and also providing them with job placements in various companies.

Prioritisation and Categorisation of Interventions

Interventions for above-mentioned problems have been elaborated upon in the report. The interventions, as per the IOCL-TISS MoC requirement have also been prioritised on the basis of stakeholders' views, data analysis and on-field observations of the Research team. This means that in each village the recommended intervention on Priority-1 should be given first preference and importance over others and accordingly implementation should be planned for each village. Moreover, the interventions have been identified and categorised on Short, Medium and Long term basis keeping in mind the nature of the interventions to be planned for implementation for each village.

CHAPTER 1: INTRODUCTION

1.1. CORPORATE SOCIAL RESPONSIBILITY

The concept of CSR, although an age old one, has multiple definitions based on how it is understood. It was 30 years ago that Votaw wrote: “*Corporate Social Responsibility means something, but not always the same thing to everybody*” (Garriga & Mele, 2004). CSR, although, a subjectively understood idea, finds at its core, the integration of the communities social, environmental and other concerns into the company’s business operations.

The role of businesses in social welfare has seen a major shift over the years. It has changed its trajectory from philanthropy to go in the direction of coming up with long-standing sustainable projects with a predetermined goal. As Frederick (1987, 1998 as cited in Garriga & Mele, 2004) stated, CSR has transcended over the years from being an ethical-philosophical concept to an action-oriented managerial concept of social responsiveness. Which goes to say that it now entails understanding the interaction between business and society, comprehension of responsibility of business towards society and finally, relationship-building. Hence, two of the four dimensions of business along with income-generation and political performance are social demands and ethical values. Social demands and ethical values display connect between society and business and bring out the two-way relationship between the two.

One of the very many groups of theories (Integrative theories) constructed around CSR states how business should integrate social demands since business depends on society for its existence, continuity and growth (Garriga & Mele, 2004). It is in the form of social demands, the society interacts with business and hence it should be made so that the business operates in accordance with the current social values.

One more important aspect of CSR is, understanding that social needs that are not set in time and space. There is a constant shift in society and the business, in its attempt at social welfare, needs to keep track of it and modify its ways in accordance.

1.2. SIGNIFICANCE OF CSR

Since the adoption of LPG (Liberalisation, Privatisation and Globalisation) policies by the Indian government in the 1990's, the economy of India has seen a monumental rate of growth. Although liberalisation and globalisation is a radical phenomenon in world economy, it accounts for a lot of economic tension for India since it is still a developing nation with a very different socio-economic makeup and flow of money than the rest of the world. The growing industrialisation due to liberalised policies coupled with low-cost technology, has led to a host of social and environmental challenges such as water scarcity, pollution, labour conditions, displacement of communities, effect on agriculture and livelihood etc. These must be addressed to avoid weakening the nation's ability to sustain growth and development in the decades to come. In addition to these, due to its still developing status, adoption of such policies brings with it issues of rapid but uneven economic transition with certain sections of society being ignored and left behind from the process of development. Although the Indian constitution promises economic equality along with other rights, a large portion of Indian voters remain economically disadvantaged (Zile, 2012). These reinforce the need for an existence of a social welfare mechanism.

Since the corporates are becoming more economically powerful than the State, joining forces with individual companies by mandating promotion of social welfare could simulate a win-win situation. It could, on one hand, help bridge the economic divide in the society by the upliftment of backward areas and communities. On the other hand, it helps the company create a relationship with its stake-holders thereby promoting goodwill of the company. The government gives the companies the autonomy of choosing how and where they wish to utilise their CSR funds while avoiding additional taxes in the process.

For this, Department of Public Enterprises (DPE) under Ministry of Heavy Industries & Public Enterprises has introduced the CSR Guidelines in March, 2010 for the Central Public Sector Enterprises (CPSEs). According to the revised DPE guidelines (IEF April, 2013), CSR is, "the responsibility which the corporate enterprises accept for the social, economic and environmental impact their activities have on the stakeholders. The stakeholders include employees, consumers, investors, shareholders, civil society groups, Government, Non-Governmental Organisations, communities and the society at large. It is the responsibility of the companies to not only shield

the diverse stakeholders from any possible adverse impact that their business operations and activities may have, but also entails affirmative action by the companies in the social, economic and environmental spheres as expected of them by the stakeholders, to the extent of their organisational resource capabilities.” It also states, “It is now universally accepted that corporate social responsibility is not a stand-alone, one time, ad-hoc philanthropic activity. Rather, it is closely integrated and aligned with the business goals, strategies and operations of the companies. There is a close integration of social and business goals of companies” (Guidelines on Corporate Social Responsibility and Sustainability for Central Public Sector Enterprises, 2013). The guidelines give a view about the concept of CSR and how a corporate needs to conceptualise its CSR interventions prior to their implementation. Earlier the trend was more of charity or philanthropy which was considered as CSR but in recent times a shift has taken place with focus on the participation of people with the employees in implementing CSR initiatives. The interventions are required to be thoroughly researched on the basis of that the programmes/project have to be formulated which is a new and phenomenal development in the last few years. This interest and initiative is seen on part of the CPSEs as they gradually realise their responsibility towards the environment, people and the potential of such a corporate in affecting change.

1.3. NATIONAL CORPORATE SOCIAL RESPONSIBILITY HUB

As stated before, CSR in modern times is becoming an increasingly streamlined and organised process and since the trend is moving from ad-hoc philanthropic activities to long-term social modification, an understanding of social aspects becomes a necessity. National Corporate Social Responsibility Hub (NCSRH) was created by the DPE under the guidelines for CSR at Tata Institute of Social Sciences (TISS), Mumbai. TISS, a pioneer educational institution in social sciences, was chosen to establish NCSRH by the DPE for its 75 years of experience and expertise of teaching, research, advocacy, capacity building, publications, documentation, and field interventions. The Hub is created to carry out the following tasks:

1. Preparation of panels of Agencies for CSR Activity
2. Nation-wide compilation, documentation, and creation of database;
3. Training and Competency building

4. Advocacy; and Research;
5. Think Tank; Conferences and Seminars
6. Promotional Activities and Dissemination

The NCSRH comprises of a dedicated team working closely and dealing with CPSEs approaching the Hub for the shelf of activities as per the DPE Guidelines on CSR. The major activities are related to Research in which the Hub conducts Baseline survey and recommends the possible areas of interventions to the CPSEs based on the findings thereof. The Hub's recommendations are holistic and sustainable in line with the DPE Guidelines and come out from scientific techniques covering all the major areas like water, sanitation, health, education, livelihood, with a multi-stakeholder approach. After receiving recommendations from the Hub, CPSEs choose from the possible areas of interventions and implement projects in accordance with their CSR policy and CSR budget allotted for the year.

For implementation of the activities, CPSEs require credible partners in the form of Non-Governmental Organisations (NGOs), Trusts, Community-based Organisations etc. For this task, the hub is engaged in a continuous process of empanelling organisations from different states spread across the country. For the purpose, the Hub has an independent team consisting of the faculty from TISS, engaged in scrutinizing the applications of these implementing organisations and shortlist credible organisations on the basis of pre-decided parameters. The Hub also undertakes the Impact Assessment and Evaluation studies for the CPSEs' CSR activities that are undergoing or have been completed even prior to the DPE Guidelines being implemented. The Hub then scrutinizes on-field implementation, effect, benefits and gaps in the programmes and recommends improvements thereof for effectively achieving the programme objectives.

1.4. INDIAN OIL CORPORATION LIMITED

Indian Oil is India's flagship national oil company, with business interests that straddle the entire hydrocarbon value chain - from refining, pipeline transportation and marketing of petroleum products to exploration & production of crude oil & gas as well as marketing of natural gas and petro-chemicals. It is the highest ranked Indian corporate in the prestigious Fortune 'Global 500' listing, ranked at the 83rd position in the year 2012. Indian Oil and its subsidiaries have a dominant share of the petroleum products' market, national refining capacity and downstream

sector pipelines capacity. With a strong workforce, Indian Oil has been helping to meet India's energy demands for over five decades now.



Indian Oil has a concerted social responsibility programme to partner communities for health, family, welfare, education, environment and cultural heritage protection. The Corporation has always been at the forefront during national emergencies stepping in to provide assistance, relief and rehabilitation as well as maintaining an uninterrupted supply of petroleum products. Indian Oil has successfully combined its corporate social responsibility with its business offerings, meeting the energy demands of millions of people every day, across the length and breadth of the country.

Indian Oil has time and again rallied to help victims of natural calamities, maintaining uninterrupted supply of petroleum products and contributing to relief and rehabilitation measures. Indian Oil has successfully combined its CSR agenda with its business offerings.

1.4.1. CSR Approach of Indian Oil Corporation Limited

At Indian Oil, corporate social responsibility (CSR) has been the cornerstone of success right from its inception in the year 1964. The Corporation's objectives in this key performance area are enshrined in its Mission statement: "...to help enrich the quality of life of the community and preserve ecological balance and heritage through a strong environment conscience."

Indian Oil has defined set of core values– Care, Innovation, Passion and Trust – to guide them in all they do. They take pride in being able to claim almost all countrymen as customers. That's why, they coined the phrase, "Indian Oil – India Inspired", in their corporate campaigns. Public corporations like Indian Oil are essential organs of society deploying significant public resources. They, therefore, are aware of the need to work beyond financial considerations and put in that little extra to ensure that they are perceived not just as corporate behemoths that exist for profits, but as wholesome entities created for the good of the society and for improving the quality of life of the communities they serve¹.

¹www.iocl.com

CHAPTER 2: METHODOLOGICAL CONSIDERATIONS

This chapter on methodology will give information about the research design, sampling method, objectives, rationale used for the study. This becomes pertinent so as to give the reader a thorough understanding about the research process followed by the researchers so as to give a rationale and background to the findings of the study. This methodology is the basis of the study conducted by National CSR Hub, TISS for IOCL. The entire methodology, including the objectives, sampling and tools has been in consultation with faculty experts within TISS and this was shared and discussed with the company prior to the study.

2.1. OBJECTIVES OF THE BASELINE SURVEY

- To obtain baseline information of socio-economic conditions like housing, sanitation, education, health, livelihood and safety nets of the households in the villages
 - To assess the present situation of the villages and obtain information about the facilities and services available to the locals
 - To assess the needs of the households to understand the major areas of interventions from the locals' point of view
- To understand the levels of availability and accessibility to services and facilities in and around the villages for the locals
- To understand the critical areas or challenges and find out the possible areas of CSR interventions

2.2. RESEARCH DESIGN

A research design is used to give structure to a research. It provides a blueprint for the entire study, from its inception to the end, to maximize control over factors thereby reducing random error, controlling systematic error and enhancing the overall validity of the research. A research design, by answering the four major questions; which questions are to be asked, *what* data is

relevant, best way to obtain the data and how to analyse it; helps streamline the process of research and bring it in line with its given objectives.

The current study adopts an *exploratory research design*. An exploratory design, as the name suggests, is used when not much prior information is available about the research questions. It helps to look at the problem in isolation without forming preconceived notions in the mind of a researcher. An exploratory design is, in fact, made use of to determine the nature of the problem. Moreover, it is used as it gives flexibility to delve deep into the subject at hand and ‘explore’ various aspects that may come out prior or during the study to gain a better understanding of the problem at hand.

Considering the number of locations and villages, to standardise the study, Quantitative Research was adopted. “Quantitative research is ‘Explaining phenomena by collecting numerical data that are analysed using mathematically based methods (in particular statistics)’” as defined by Aliaga and Gunderson (2000).² Therefore, quantitative research method is used in this study to quantify the data by using sampling methods and analyse it statistically, and further generalise it to a larger universe. This quantitative method identifies certain significant indicators that help assess the real situation of the population and the set objectives of the study. The following thematic areas were considered to determine the quality of life by creating a complete village and household profile:

1. Demographic and Housing Characteristics
2. Literacy and Educational Status
3. Vocational Training
4. Water Resources, Sanitation and Hygiene
5. Health-care Facilities and Birth Details
6. Livelihood, Landholding and Livestock
7. Social Welfare Schemes
8. Safety Nets and Credit Patterns
9. Infrastructure – Availability and Accessibility

The data was collected at two levels viz. Village level and Household level. The Household Questionnaire was to understand the socio-economic situation at the household level on the above-mentioned areas/ parameters, whereas the Village Questionnaire looked at the structure and make-up of the village as a whole and finding information from the point of view of the officials and key persons from the village. Information at the village level was collected from

² Introduction to Quantitative Research: http://www.sagepub.in/upm-data/36869_muijs.pdf

key stakeholders like Sarpanch, Secretary, School Principal, Teachers, Doctors, etc. providing a bird's eye view of the village; while the household information was collected from independent households in the village.

2.3. SAMPLING

Being a quantitative method and spread over multiple locations across various States of India, this study had to select a sample out of the total population. It was designed based on systematically selected households as the 'sample' and the village on the whole as the total 'universe'. The aim in a Sample Survey is to generalise and universalise the data collected and findings of the sample population to the entire universe that is the total population. The following is the step-wise sampling method that was followed for this study:

Step 1

The survey was conducted in 5-7 pre-decided villages at every location covered under the scope of the study. A minimum sample size of 50 was decided for each village irrespective of the population and number of households in the village. This was a measure taken to standardise the sampling across all locations keeping in mind the representativeness of the sample as there are inevitable differences in each location due to its uniqueness in geography, demography, locale, etc. A household sample of 400 across the sampled villages was to be drawn. An additional 50 number of household sample was added to the 400 to rule out loss of data in case of unforeseen circumstances and human errors. Thus, the total sample from each location was to be 450 households across 5-7 villages.

The sample size for every location was decided by keeping duration of the field work, size of questionnaire and man days in mind. After the preliminary decision of a total of 450 across the 5-7 villages in a location and a minimum sample of 50 within each village, a formula was devised to draw the sample size of each of the village according to the number of population and households in the village. Depending on the size of the population, additional sample size was proportionately computed to make up the final number of 450 for each location. A matrix to calculate the exact number of sample to be drawn from each village was designed using computing techniques in Microsoft Excel. A sample of the calculations is provided below for reference.

then collected on field from the Panchayat, the BDO office or the Municipal Corporation office as relevant to finalise the sample from those villages.

After acquiring the data needed to compute the sample numbers, the next step was to systematically and effectively draw out specific names of households. This was to maintain authenticity and avoid bias in the data and impartially select households from each village through a systematic method. To acquire the pool of sample households, the latest enumeration list was required for each village. Given the paucity of time, manually enumerating each household in each village was not possible and therefore the next impartial method was to use and rely on authentic and official government enumeration lists. The Voters' List containing a list of all adult population eligible to respond to survey questions was considered ideal in this situation. Hence, the latest voter's list was collected for each of the villages from the Panchayat/ Block Development Offices at the village/ block level.

Step 3

Once the sample size was computed, a method of Systematic Random Sampling was utilized to select the specific households to be interviewed from the village from the Voters' Lists. Systematic random sampling is used in cases where there is a large population to be sampled from the total population and avoid any kind of bias in selection. Systematic sampling is the method of selecting individuals at regular interval from the list (in the sampling frame), only the starting point being selected at random.

Example: After obtaining the sample size for each village as illustrated in the image, the Voters' List was then sought from the local authorities. The steps that were followed to draw the sample are as mentioned below:

Number of Households: 395

Sample Size: $78 + 40\% = 40/100 \times 78 + 78 = 109$ (40% was additional sample drawn)

Population: 1975

Family size: $1975/395 = 5$ (average family size followed in GoI research study standards)

Voters: 1500

Sample Interval: $1500 / 78 = 13.76 = 14$ (The interval should be higher than 5 i.e. number of members per household)

Random sample: 3

Hence, every 14th person after Voter no. 3 will be part of the study that is 3, 17, 31...109 will be drawn as sampled respondents for the study.

The additions, deletions, modifications in the Voters' List will also be included, deleted, modified prior to beginning the process of drawing out samples from the List.

2.3.1. MULTI-STAGE SAMPLING FOR SPECIFIC LOCATIONS

For certain locations like Kerala, and Municipal areas in other locations the researchers had to employ slightly different approach for the sampling frame. In Kerala for instance, the numbers do not adhere strictly to village or cities, as the rural-urban divide with the developmental and socio-political scenario is blurred. So given the numbers and size of the villages in Kerala according to the Census data and discussion with the Block and Panchayat officials on-field, the sampling for this location was altered to achieve the target in the given time frame. Although the methodology and technique used was the same; Multi-Stage sampling approach was used to draw the sample. Each village, administratively, is divided into several wards. So as the first stage, two to three wards from each village were selected through systematic random sampling. In the next stage, selection of households was done from each ward by using the same method of sampling. The questionnaire was then administered to these sampled households.

2.4. TOOLS OF THE STUDY – SURVEY INSTRUMENTS

Primarily the tools employed in the core investigation were quantitative tools; a Household Questionnaire and a Village-level Questionnaire.

2.4.1. Household Questionnaire: The household questionnaire was used to seek information from a sample of households in the location about their socioeconomic background, housing and sanitation, demographic characteristics, recent births related information, morbidity, health seeking behaviour, occupation, vocational skills possessed, credit patterns, and access to PDS etc.

2.4.2. Village-level Questionnaire: This questionnaire was administered to all villages as per the list provided by the company. The information obtained in this questionnaire was about facilities available in and around the villages such as schools, aanganwadis and PHCs, social institutions like Mahila mandals, SHGs and farmers clubs, activities undertaken by companies (under CSR) and other NGOs, and felt needs of the villages. The information was obtained by visiting the functionaries of the village level institutions such as Panchayat representatives and officials, school principal and teachers, aanganwadi worker, non-formal leaders and informal discussion with a cross-section of village authorities and key people.

Both the questionnaires included one open-ended question inquiring about the major problems in the village. This was added so as to give space and flexibility to the respondents to give their understanding of the problems as well as possible solutions from the villagers' perspective of the issues as it is believed that the sample population and village officials can provide an insider's view to the needs of the village as well as the resolution of the same.

2.5. DATA COLLECTION

The data collection for the survey was initiated with a team of eight professionals with two Programme Officers and six Research Investigators at all the locations. The targeted numbers of households were identified from the Voters' Lists which were accessed by the team from Office of the Chief Electoral Officer, website of the respective state and the number of households were finalised from the Census data which was of 2001. The gaps from 2001 and 2011 data were identified and sorted out during the initial field visit in every village. These visits were made to all the villages to inform the locals about data collection and to take official 2011 (if available) data from the Panchayat to finalise the sample from Voters' List.

The data collection was completed in 5 to 7 villages from each location in 8 to 10 days. All the questionnaires filled by investigators were scrutinized each day by the TISS Programme Officers to check it for proper entry and clearing the doubts. If questionnaires were eliminated for improper data entered or any other issues, the sample number was taken care of beforehand by drawing additional sample. Apart from Household Questionnaires, TISS PO and Local PO collected data for Village Questionnaires with a multi-stakeholder approach. The questionnaires

were administered on key Panchayat officials, teachers, doctors and other relevant persons to obtain the necessary information. It was needed to find out the available facilities and accessibilities.

2.6. DATA ENTRY

After the completion of data entry, the questionnaires were checked and the additional/qualitative responses were translated from regional languages to English for data entry purposes. Software called “Census and Survey Processing System” (CS Pro) was used for data entry which is a widely used software for quantitative data. The data was then exported to Statistical Product and Service Solutions (SPSS) for data analysis purposes.

2.7. DATA INTERPRETATION AND ANALYSIS

Baseline survey is a quantitative study with a selected sample of households in each of the locations. The data collected from the households and village key informants was then entered in SPSS, statistical software, for further data interpretation. This data was used to conduct village as well as household specific analysis represented through indices for clear understanding. The indices are a tabular representation of the analysed data in percentages or numbers.

The primary data received through the survey itself was corroborated with the secondary data obtained from various sources to complete the analysis in a wholesome manner.

2.8. COORDINATION OF THE PROJECT

To maintain the quality and uniformity of the project, all the stages of the entire project from budgeting, study design, data collection, data entry, data analysis, and report writing was coordinated, closely monitored and conducted by two Programme Managers under the close guidance of the Project Director. Faculty Guidance from expert faculty in TISS was sought for design and methodology of the study. The data collection was coordinated by nine Programme Officers as well as preparation of the study, data analysis; report writing was also done under the guidance of the two Project Coordinators. The officials of IOCL were involved in the project to coordinate the processes of the study from the company.

CHAPTER 3: VILLAGE DEMOGRAPHICS

Village Profile			
Village 1: Dadsiya			
<i>Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001</i>			
District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Dadsiya
		Panchayat	Dadsiya
Demographics			
Population	1700	Sampled Households	58
Scheduled Caste	27.6%	Number of Households	350
Scheduled Tribe	3.4%	Hindu HHs	69%
Other Backward Class	22.4%	Sikh HHs	1.7%
General	46.6%	Muslim HHs	29.3%
		Other HHs	0%
Major Castes		Major Tribes	
Jadhav		Rajput	
Nai		Tyagi	
Raisikh		Yashi	
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	4	Total land	840
Household tap connections	350	Residential land	--
Major source of water	1. Private tap	Agricultural land	500
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land	--
		Total irrigated land	500
Community toilet	0	Waste Land	--
Type of House (Largest two)	1. Semi -pucca 2. RCC	Important Towns	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 94.8% 2. Cow dung – 75.9%	Faridabad (8 km)	

Village Profile

Village 2: Kureshipur

Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001

District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Kureshipur
		Panchayat	Kureshipur
Demographics		Sampled Households	58
Population	5000	Number of Households	700
Scheduled Caste	0%	Hindu HHs	1.7%
Scheduled Tribe	5.2%	Sikh HHs	0%
Other Backward Class	84.5%	Muslim HHs	98.3%
General	10.3%	Other HHs	0%
Major Castes		Major Tribes	
Kureshi		Fakir	
Meo		Madari	
Miya			
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	4	Total land	600
Household tap connections	150	Residential land	--
Major source of water	1. Private tap	Agricultural land	500
(Ranked in the order of usage)	2. Own Hand pump	Total Non-irrigated land	100
		Total irrigated land	400
Community toilet	0	Grazing Land	9
Type of House (Largest two)	1. Semi -pucca 2. Pucca	Important Towns	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 98.3% 2. Cow dung – 98.3%	Faridabad (5 km)	

Village Profile			
Village 3: Palwali			
<i>Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001</i>			
District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Palwali
		Panchayat	Palwali
Demographics		Sampled Households	63
Population	3500	Number of Households	400
Scheduled Caste	30.2%	Hindu HHs	100%
Scheduled Tribe	7.9%	Sikh HHs	0%
Other Backward Class	20.6%	Muslim HHs	0%
General	41.3%	Other HHs	0%
Major Castes		Major Tribes	
Balmiki		Jadhav	
Harijan			
Jogi			
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	10	Total land	700
Household tap connections	400	Residential land	--
Major source of water	1. Private tap	Agricultural land	700
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land	--
		Total irrigated land	700
		Waste Land	--
Community toilet	0		
Type of House (Largest two)	1. Semi -pucca 2. RCC	Important Towns	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 96.8% 2. Cow dung – 79.4%	Faridabad (5 km)	

Village Profile			
Village 4: Nacholi			
<i>Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001</i>			
District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Nacholi
		Panchayat	Nacholi
Demographics		Sampled Households	74
Population	5000	Number of Households	550
Scheduled Caste	25.7%	Hindu HHs	97.3%
Scheduled Tribe	0%	Sikh HHs	0%
Other Backward Class	68.9%	Muslim HHs	2.7%
General	5.4%	Other HHs	0%
Major Castes		Major Tribes	
Bhardwaj	Balmiki		
Gujjar			
Nai			
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	40	Total land	1200
Household tap connections	500	Residential land	--
Major source of water	1. Private tap	Agricultural land	1000
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land	--
		Total irrigated land	1000
Community toilet	0	Grazing Land	200
Type of House (Largest two)	1. Semi -pucca 2. Pucca	Important Towns	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 83.8% 2. Cow dung – 90.5%	Faridabad (10 km) Teegaon (7 km)	

Village Profile			
Village 5: Buhapur			
<i>Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001</i>			
District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Buhapur
		Panchayat	Buhapur
Demographics		Sampled Households	69
Population	3200	Number of Households	700
Scheduled Caste	2.9%	Hindu HHs	91.3%
Scheduled Tribe	0%	Sikh HHs	0%
Other Backward Class	97.1%	Muslim HHs	8.7%
General	0%	Other HHs	0%
Major Castes		Major Tribes	
Balmiki			
Nagar			
Baniya			
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	130	Total land	380
Household tap connections	--	Residential land	--
Major source of water	1. Private tap	Agricultural land	380
(Ranked in the order of usage)	2. Own hand pump	Total Non-irrigated land	20
		Total irrigated land	360
Community toilet	0	Waste Land	--
Type of House (Largest two)	1. Semi -pucca 2. RCC	Important Towns	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 97.1% 2. Cow dung – 97.1%	Faridabad (12 km)	
		Teegaon (2 km)	

Village Profile			
Village 6: Gothra Mohbtabad			
<i>Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001</i>			
District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Gothra Mohbtabad
		Panchayat	Gothra Mohbtabad
Demographics		Sampled Households	83
Population	5000	Number of Households	1000
Scheduled Caste	42.2%	Hindu HHs	100%
Scheduled Tribe	0%	Sikh HHs	0%
Other Backward Class	53%	Muslim HHs	0%
General	4.8%	Other HHs	0%
Major Castes		Major Tribes	
Bhardwaj			
Prjapati			
Gujjar			
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	5	Total land	1260
Household tap connections	--	Residential land	--
Major source of water	1. Private tap	Agricultural land	1260
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land	760
		Total irrigated land	500
		Waste Land	--
Community toilet	0		
Type of House (Largest two)	1. Semi -pucca	Important Towns	
	2. Pucca	Faridabad (15 km)	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 96.4%	Ballabgadh (15 km)	
	2. Cow dung – 97.6%		

Village Profile			
Village 7: Paota			
<i>Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001</i>			
District	Faridabad	Block	Faridabad
Taluka	Faridabad	Village	Paota
		Panchayat	Paota
Demographics		Sampled Households	65
Population	5000	Number of Households	3000
Scheduled Caste	13.8%	Hindu HHs	100%
Scheduled Tribe	0%	Sikh HHs	0%
Other Backward Class	72.4%	Muslim HHs	0%
General	13.8%	Other HHs	0%
Major Castes		Major Tribes	
Bhardwaj			
Prjapati			
Gujjar			
Basic Amenities		Land Details (in Acres)	
Total public/ common tap points	50	Total land	8000
Household tap connections	400	Residential land	--
Major source of water	1. Private tap	Agricultural land	7000
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land	--
		Total irrigated land	7000
Community toilet	0	Grazing Land	10
Type of House (Largest two)	1. Semi -pucca 2. RCC	Important Towns	
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 98.5% 2. Cow dung – 98.5%	Faridabad (12 km) Ballabgadh (14 km)	

CHAPTER 4: FARIDABAD, HARYANA: An In-depth Analysis

This is the Final Report of the Baseline Survey for IOCL conducted in Faridabad, Haryana by National CSR Hub, TISS for IOCL to identify possible areas of CSR intervention. This report is a product of the extensive survey undertaken in seven villages of Faridabad district.

The following tables throughout the report will have various indices or thematic areas like Household information – religious composition, caste composition, literacy, sanitation, water, livelihood, infrastructure, etc. across the seven villages. Each of the tables have been explained with the significant information pertaining to the villages and these tables also provide a benefit of comparative analysis across these seven villages in terms of their socio-economic condition in each area one panoramic view of the location. This in-depth analysis is followed by the very significant chapter on '*Possible Areas of Intervention*' that is the problems and recommendations that are common to all villages as well as specific issues and suggested resolutions are defined.

DEMOGRAPHIC & HOUSING CHARACTERISTICS

Table 1: DEMOGRAPHIC & HOUSING CHARACTERISTICS								
		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Religious Composition (%)	Hindu	69	1.7	100	97.3	91.3	100	100
	Muslim	29.3	98.3	0	2.7	8.7	0	0
	Sikh	1.7	0	0	0	0	0	0
Category (%)	Scheduled Caste	27.6	0	30.2	25.7	2.9	42.2	13.8
	Scheduled Tribe	3.4	5.2	7.9				
	Other Backward Classes	22.4	84.5	20.6	68.9	97.1	53	72.4
	General	46.6	10.3	41.3	5.4	0	4.8	13.8
Major Castes	1	Jadhav	Kureshi	Balmiki	Bhardwaj	Balmiki	Bhardwaj	Bhardwaj
	2	Nai	Meo	Harijan	Gujjar	Nagar	Prjapati	Prjapati
	3	Raisikh	Miya	Jadhav	Nayi	Baniya	Gujjar	Gujjar
	4	Regar	Lohar	Jogi	Balmiki	Dalit	Harijan	
	5			Rathod				
Major Tribes	1	Rajput	Fakir	Jadhav				
	2	Yashi	Madari					
	3	Tyagi						
Type of House (%)	RCC	24.1	3.4	30.2	13.5	34.8	14.5	15.4
	Pucca	13.9	12.1	17.5	24.3	10.1	19.3	10.8

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	Semi Pucca	53.4	75.9	47.6	58.1	49.3	62.7	72.3
	Kuchha	6.9	8.6	4.7	4.1	5.8	1.1	1.5
	Tent	0	0	0	0	0	0	0
	Hut	1.7	0	0	0	0	2.4	0
House Ownership (%)	Owned	91.4	96.6	95.2	89.2	98.6	96.4	98.5
	Rented			1.6	1.3			
	Rent Free	6.9	3.4	3.2	9.5	1.4	3.6	1.5
	Subsidised/ Allotted under scheme	1.7	0	0	0	0	0	0
Electricity (%)		96.6	89.7	96.8	97.3	94.2	95.2	95.4
Fuel (%)	Grass / Crop Residue / wood	94.8	98.3	96.8	83.8	97.1	96.4	98.5
	Cow dung	75.9	98.3	79.4	90.5	97.1	97.6	98.5
	Coal / Charcoal	0	0	0	0	0	0	0
	Kerosene	1.7	0	0	0	0	0	0
	Bio Gas	0	0	0	2.7	0	0	0
	Solar Energy	0	0	0	1.4	1.4	2.4	0
	LPG / Natural Gas	55.2	25.9	41.3	39.2	66.7	37.3	30.8
	Electricity	0	0	4.8	8.1	0	0	1.5
	Other	0	0	0	0	0	0	0

DEMOGRAPHIC AND HOUSING CHARACTERSTICS

The survey is conducted in the seven villages of district Faridabad. All the villages have Hindu majority except Kureshipur where the followers of Islam are found in majority. In Palwali, Gothra Mohbtabad and Paota, all the habitants of these villages follow Hindu religion while in Dadsiya, Buhapur and in Nacholi, majority of the habitants follow Hindu religion but along with it 29.3%, 8.7% and 2.7% habitants also follow Islam. Around 2% habitants of Dadsiya also follow Sikhism.

The data suggests that an average of 59.8% population across the villages comes under OBC with 97.1% in Buhapur followed by Kureshipur (84.5%) and lowest is 20.6% in Palwali. In Dadsiya, 46.6% of the sampled population followed by Palwali (41.3%) and lowest is 4.8% belong to General category and Buhapur does not people belonging to General category. The data shows that population belongs to SC category is highest in Gothra Mohtbtabad (42.2%) followed by Palwali (30.2%) and lowest in Buhapur (2.9%) while in Kureshipur none of the sampled habitant come under SC category. Only in three villages, viz. Palwali, Kureshipur and Dadsiya a small share of the population also comes under ST.

Moving on the type houses, majority of the population resides in semi-pucca houses ranging in between 46-76% across the seven villages with 75.9% in Kureshipur which is highest and lowest of 47.6% in Palwali. The highest numbers of RCC households are found in Buhapur (34.8%) and lowest 3.4% in Kureshipur and an average of 15.4% of population resides in pucca houses across the seven villages. The existence of kuchha houses is marked in every village with 8.6% in Kureshipur and lowest of 1.1% in kuchha houses in Gothra Mohbtabad. In Dadsiya and Gothra



Picture 1: Huts-Temporary setting of house

Mohbtabad, nearly 2% of population also resides in temporary houses such as Huts. During the data analysis it is observed that only people belonging to SC and OBC category across the seven villages resides in kuchha houses while those who resides in huts belongs to SC category only. It is also found that most of the houses are owned by the family resides in it and a very small portion of population resides in rent free houses across the seven villages.

The data analysis shows that an average of 42.3% of the households across the seven villages uses LPG as a fuel for cooking. A slight increase in the use of country's most efficient fuel is noticed in all the villages. Though the use of fuel sources like crop residue/ grass/ wood and cow dung are not decreased even in the RCC houses across all the villages. An average of 95.1% and 91% of the households across all the villages use wood/grass and cow dung respectively as a main fuel for cooking. The use of solar energy as a cooking fuel by nearly 2% of the population is also noticed in Gothra Mohbtabad, Nacholi and Buhapur.

LITERACY & EDUCATIONAL STATUS

Table 2: LITERACY & EDUCATIONAL STATUS								
		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Literacy Level (%)		74.6	55.6	72.7	76.1	78	73.7	70.7
Currently Studying (%)		61.7	54.6	65.4	63.7	71.1	65.1	68.3
Children studying in Type of Institution (%)	Government	54.9	73.2	48.8	50.6	25.2	43.3	46.5
	Private Aided	34.5	25	48.7	35	67.8	47.8	53.5
	Private un-Aided	10.6	1.8	2.5	14.4	7	8.9	0
Mode of Travel (%)	Walk	49.6	89.3	60.3	46	54.5	80.9	57.9
	Bicycle	0.9	0.9	0	0	0.7	0	0
	Scooter / Bike	1.8	0.9	0.8	0.6	1	1.3	3.5
	Auto / Taxi / Cycle Rickshaw	19.4	1.8	18.2	13.2	4.9	1.9	7
	Bus	28.3	7.1	19	40.2	38.9	15.9	31.6
	Train	0	0	1.7	0	0	0	0
Mid - Day Meal (%)	No meals	7.7	17.3	25.6	24.2	37.5	20.3	15
	Once a Week	2	0	0	0	0	0	0
	Few Days a Week	11.5	11.1	4.7	0	0	6.3	2.5
	All the Days	78.8	71.6	69.7	75.8	62.5	73.4	82.5

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Reasons for Dropout (%)	To work and support household	8.7	1.4	10.5	3.1	4.2	7.9	15
	Required to attend domestic chores	4.4	7.2	10.5	3.1	29.2	7.9	10
	Education / Higher Education not considered important	0	11.6	0	0	0	0	0
	Too poor to study / failed / Irregular to school	8.7	0	5.3	0	4.2	2.6	10
	School too far / Sending girls not safe	21.7	8.7	0	3.1	0	0	5
	Poor quality of teaching / teachers not available or rude	0	4.3	0	0	4.2	0	0
	Too high fee / expenses	0	7.2	0	0	0	5.3	0
	Frequent shifting of residence	0	2.9	0	0	0	0	0
	Physical / Mental disability / illness	0	0	5.3	3.1	4.2	2.6	
	Quit education due to early marriage	8.7	4.3		3.1	8.3	7.9	15
	No Response	47.8	52.4	68.4	84.5	45.7	65.8	45

LITERACY AND EDUCATIONAL STATUS

The literacy rate of the district Faridabad is 83.04% as per Census of India, 2011 which is higher than the literacy rate of the country. The villages under the scope of this study have an average literacy rate of 71.6% which is greatly less than the whole district's literacy rate. The highest literacy rate of 74.6% is observed in Dadsiya and lowest literacy rate of 55.6% in Kureshipur. Talking about currently studying status, Buhapur has 71.1% currently studying population followed by Paota (68.3%) and lowest of 54.6% in Kureshipur.

It is analysed that only in Kureshipur, 73.2% of the students study in government schools while in rest of the villages the percentage is less than 55. In Buhapur, 67.8% of the students go to private aided schools followed by Paota (53.5%) and lowest in Kureshipur (25%). In all the villages, government primary schools are available but in case of higher secondary schools students have to travel a distance of 3-10 Km by the available mode of transports such as bus, auto rickshaw, taxi, scooter and motor bike.

In the age group of 3-24 years, various reasons of dropout are reported by the students across the seven villages. In Dadsiya, 21.7% of the girl students dropped out from formal education because of the security issues as reported by their parents. After primary schooling, all children have to go outside their village which is not considered safe by the parents for their daughters because of serious issues of eve-teasing. Also 8.7% reported that they quit the studies due to early marriage. The same reasons have been given by the respondents of Kureshipur. In Palwali, total of 21% students dropped out because they have to attend domestic chores and have to work to support their families. In Buhapur, 29.2% dropped out as they have to attend the domestic chores; 8.3% due to early marriages. In Gothra Mohbtabad, 7.9% of the students dropped out due to early marriage and in Paota, 15% dropped out to work and to support their families. In Kureshipur and Gothra Mohbtabad it is analysed that after higher secondary education less students opted for higher education and the surveyed population does not have anybody with a post-graduation degree.

MDM scheme of government is functional in all the surveyed villages and it is found that majority of the students up to 8th standard studying in government schools receive meals on daily basis. Mainly in Palwali and Kureshipur, students studying below 8th standard in government schools reported that they do not receive any meal.

VOCATIONAL TRAINING

Table 3: VOCATIONAL TRAINING								
		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Received Vocational Training (frequency)		0	0	0	3	0	0	1
Modern (frequency)	Computer / Electronics	0	0	0	3	0	0	1
	Home Appliances	0	0	0	0	0	0	0
	DTP Centre / Xerox / Book Binding / Screen Printing and related work	0	0	0	0	0	0	0
	Catering / Bakery / Hotel-related	0	0	0	0	0	0	0
	Tuition / Training – Related	0	0	0	0	0	0	0
Household (frequency)	Tailoring / Embroidery / Weaving / Dying / Spinning / Textile – related	0	0	0	0	0	0	0
	Toy / Decoration – Related	0	0	0	0	0	0	0

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	Beedi / Agarbatti / Soap / Home use Item Making	0	0	0	0	0	0	0
	Basket / Carpet / Home Utensils making	0	0	0	0	0	0	0
	Papad / Sweet / Eatable Making	0	0	0	0	0	0	0
Agriculture (frequency)	Thresher / Harvester / Tractor operation	0	0	0	0	0	0	0
	Horticulture / Sericulture training	0	0	0	0	0	0	0
	Progressive Farming Techniques	0	0	0	0	0	0	0
	Insecticide / Spraying - related Operations	0	0	0	0	0	0	0
	Food Processing	0	0	0	0	0	0	0
Service(frequency)	Driving Vehicles	0	0	0	0	0	0	0
	Photography	0	0	0	0	0	0	0
	Health Care	0	0	0	0	0	0	0
	Beautician Services	0	0	0	0	0	0	0
Small Scale (frequency)	Motor Mechanic	0	0	0	0	0	0	0
	Welding / Electrical Repair Work	0	0	0	0	0	0	0

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	Jewellery/ Bead Making	0	0	0	0	0	0	0
	Construction Related Work	0	0	0	0	0	0	0
Traditional (frequency)	Cobbling	0	0	0	0	0	0	0
	Leather – Related work	0	0	0	0	0	0	0
	Carpentry	0	0	0	0	0	0	0
	Masonry	0	0	0	0	0	0	0
	Pottery	0	0	0	0	0	0	0
	Stone Craving	0	0	0	0	0	0	0
	Wood Craving	0	0	0	0	0	0	0
	Metal Work	0	0	0	0	0	0	0
Agency Provided Training (frequency)	NGO	0	0	0	0	0	0	1
	Government	0	0	0	0	0	0	0
	Charity Organisation/ NGO	0	0	0	0	0	0	0
	Under CSR/ by company	0	0	0	3	0	0	0
Engagement (frequency)	Wage Employed	0	0	0	0	0	0	0
	Self Employed	0	0	0	0	0	0	0
	Both	0	0	0	0	0	0	0
	Pursuing	0	0	0	0	0	0	0
	Not Engaged	0	0	0	3	0	0	1
Reasons for non-engagement	Financial Constraints	0	0	0	2	0	0	0

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

(frequency)	Time Constraints	0	0	0	0	0	0	0
	Marketing Problem	0	0	0	0	0	0	0
	Labour Problem	0	0	0	0	0	0	0
	Electricity Problem	0	0	0	0	0	0	1
	Raw Material Problem	0	0	0	0	0	0	0
	Familial Problems	0	0	0	1	0	0	0
	Complying Rules & regulations	0	0	0	0	0	0	0
	Shifted to better income source	0	0	0	0	0	0	0
	Not in Demand	0	0	0	0	0	0	0
	Married & changed work	0	0	0	0	0	0	0
	Familial responsibilities	0	0	0	0	0	0	0

VOCATIONAL TRAINING

The beneficiaries of vocational training are found in Nacholi and Paota. Three persons reported to receive vocational training in Nacholi and in Paota only one person has received vocational training in computer/electronics/mobile repairing. In Nacholi, all the three beneficiaries have received training by company while in Paota, an NGO provided the training. None of the beneficiary from both villages found to be engaged in the income generation activities. In Nacholi the reasons given for non-engagement are financial and familial problem whereas in Paota, electric power cuts came out as the reason of non-engagement.

WATER RESOURCES, SANITATION & HYGIENE**Table 4: WATER RESOURCES, SANITATION & HYGIENE**

			Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Water Facility (%)	Own Private Tap		65.5	46.6	50.8	56.8	71	55.4	46.2
	Own Govt. Tap		6.9	1.7	20.6	8.1	4.3	14.5	23.1
	Own Hand Pump		15.5	32.8	11.1	10.8	18.8	4.8	7.7
	Own Open Well		1.7		3.2	6.8	5.8		1.5
	Neighbour's Tap		17.2	27.6	19	8.1	15.9	14.5	9.2
	Community Tap		25.9	17.2	25.4	21.6	13	27.7	30.8
	Community Hand Pump		8.6	3.4	9.5	23	5.8	21.7	5.4
	Community Open Well		0	12.1	0	4.1	0	0	0
	Tank / Pond		0	0	0	0	0	0	0
	Stream / River		0	0	0	0	0	0	0
	Canal		0	0	0	0	0	0	0
	Tube well		0	0	0	0	0	0	0
	Tanker Water		0	0	0	0	0	0	0
Number of Common / Public Taps and Individual Taps	Individual Taps		350	150	400	500	0	0	400
	Public		4	4	10	40	130	5	50

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Type of Toilet (%)	Own Flush		31	15.5	15.9	25.7	26.1	18.1	7.7
	Own Pit		53.5	53.5	55.5	70.3	66.7	42.2	60
	Community Flush		0	0	3.2	0	0	1.2	0
	Community Pit		0	0	3.2	0	0	1.2	0
	ODS		15.5	31	22.2	4	7.2	37.3	32.3
Toilet Construction Expense (%)	Fully Owner		87.8	77.5	81.9	88.7	96.9	94	90.9
	Shared by HH		6.1	17.5	4.5	2.9	0	6	9.1
	Subsidy		6.1	5	4.5	7	3.1	0	0
	Govt. and NGO Expense		0	0	9.1	1.4	0	0	0
People Interested in a Private toilet Facility (%)	Yes, if Free		88.8	88.8	81.8	100	33.4	63.3	73.6
	Yes, if Subsidised		0	11.2	18.2	0	66.6	33.3	26.4
	Not Interested		11.2	0	0	0	0	3.4	0
Number of Community Toilets			0	0	0	0	0	0	0
Problem of Sullage Nuisance (%)	None	Respondent	27.6	1.7	19	20.3	13	10.8	12.3
		Observer	13.8	0	9.5	9.5	13	12	0
	Water Stagnation	Respondent	36.2	43.1	27	16.2	43.5	47	41.5
		Observer	19	19	14.3	17.6	15.9	16.9	27.7
	Drainage / Sewage	Respondent	41.4	86.2	46	35.1	63.8	73.5	64.6
		Observer	58.6	69	49.2	43.2	50.7	51.8	44.6
	Cattle Waste	Respondent	37.9	46.6	41.3	44.6	27.5	32.5	35.4

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	OAD	Observer	41.3	51.7	42.9	56.8	43.5	43.4	55.4
		Respondent	10.3	17.2	11.1	9.5	17.4	15.7	24.6
	Waste Dumping	Observer	15.5	15.5	14.3	20.3	26.1	20.5	15.4
		Respondent	15.5	15.5	33.3	47.3	23.2	15.7	16.9
		Observer	24.1	27.6	19	50	24.6	15.7	15.4

WATER RESOURCES, SANITATION AND HYGIENE

The data shows that the main resource of water for household purposes in all the villages is own private taps. In Buhapur, 71% households use own private taps followed by Dadsiya (65.5%) and in rest of the villages nearly 50% of the households use own private taps. Apart from this, existence of government household tap connections in minor percentages is also found in all the villages. Around 31% in Paota and 13% in Buhapur are using community taps to fulfill their household requirements. Along with this, community hand pumps, neighbour's tap are the other options available in all the villages which are in use by a small portion of the households. In Kureshipur and Nacholi community open well is also used as a water resource for the household purposes.

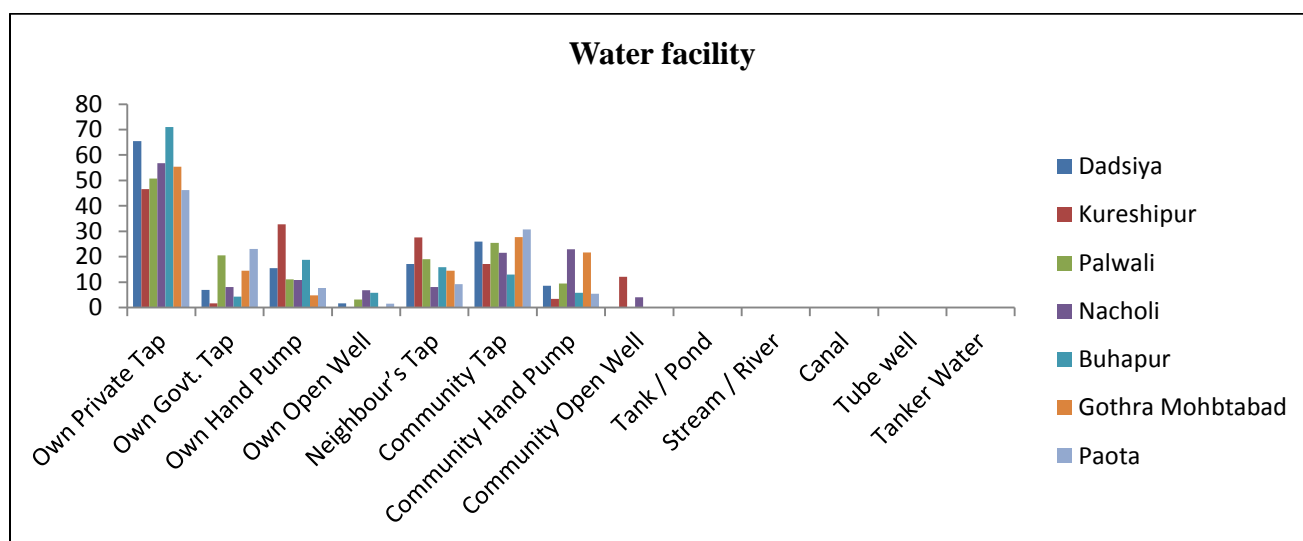


Figure 1: Water facility

Moving on to the type of toilet facilities that habitants of all villages have, it is reported that mainly pit toilets are in use by the habitants to defecate. Around 70 % in Nacholi followed by Buhapur (66.7%) and lowest 42.2 % in Gothra Mohbtabad reported of not having any kind of toilet facility and practicing open defecation. The flush toilets is reported highest in Dadsiya (31%) followed by Buhapur (26.1%) and lowest 7.7% in Paota. It is found that almost in all the villages open defecation is practiced and highest 37.3% in Gothra Mohbtabad and lowest 4% in Nacholi. The analysis of data also shows that a small number of households who have toilet facilities also practice open defecation in all the villages. This is the problem related to regular habit because of which people do not use toilet facilities even after having one. This is the

problem related to behavior which is a major area of concern. In Buhapur, Gothra Mohbtabad and Paota, more than 90% of the population and in rest of the villages nearly 80% of the population have constructed the toilets on their own expenses. Except Buhapur, in all the other villages a small portion of the households also shared the expenses of toilet construction. The data also shows that in five villages except Gothra Mohbtabad and Paota, a small percentage of toilets are also constructed by the subsidies provided by the government. Apart from this, it is analysed that those who do not have toilet facilities are more interested in private toilets if constructed free of cost. Sullage nuisance, as observed and reported by the participants and observers states that drainage/sewage, water stagnation and cattle waste are the major nuisances near to the households. Apart from this, waste dumping is also observed in all the villages because of the unavailability of the proper dumping stations in all the surveyed villages.

HEALTHCARE FACILITIES & BIRTH DETAILS

Table 5: HEALTHCARE FACILITIES & BIRTH DETAILS								
		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Primary Mode of Treatment (%)	Traditional Healer/ Dai	0	0	0	0	4.3	0	0
	Local Doctor/ RMP	44.8	70.7	47.6	75.7	56.5	69.9	66.2
	Chemist Shop	1.7	1.7			1.4	4.8	3.1
	Mobile Clinic	0	0	0	0			
	SHC/ ASHA/ Aanganwadi	0	0	0	0	4.3	0	0
	PHC/CHC	0	0	1.6		2.9	0	0
	Government Hospital	0	1.7	6.3	5.4	0	2.4	0
	Private Clinic	29.4	20.7	25.5	5.4	19	13.3	24.5
	Private Hospital	24.1	5.2	19	13.5	11.6	9.6	6.2
	CSR Hospital	0	0	0	0	0	0	0
	No Treatment	0	0	0	0	0	0	0
	Depends on Ailment	0	0	0	0	0	0	0
Accessed in the last 12 months (%)	Traditional Healer/ Dai	0	0	1.6	4.1	4.3	2.4	0
	Local Doctor/ RMP	72.4	87.9	66.7	78.4	65.2	94	89.2

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	Chemist Shop	46.6	81	30.2	13.5	47.8	60.2	76.9
	Mobile Clinic	0	0	0	5.4	1.4	0	4.6
	SHC/ ASHA/ Aanganwadi	0	0	0	0	4.3		1.5
	PHC/CHC	1.7	6.9	6.3	9.5	1.4	2.4	7.7
	Government Hospital	15.5	29.3	41.3	32.4	21.7	21.7	20
	Private Clinic	77.6	69	71.4	64.9	59.4	50.6	61.5
	Private Hospital	72.4	44.8	50.8	60.8	65.2	47	44.6
	CSR Hospital	0	0	0	0	0	0	1.5
	No Treatment	0	0	0	0	0	0	0
	Depends on Ailment	0	0	0	0	0	0	0
Births in Last 3 Years (frequency)		22	21	20	34	19	27	21
Sex of child (%)	Male	45.5	42.9	60	76.5	63.2	48.1	61.9
	Female	54.5	57.1	40	23.5	36.8	51.9	38.1
Place of Birth (%)	Government Maternity Centre / General Hospital	36.4	19	45	26.5	15.8	33.3	42.9
	Private Maternity Centre / Hospital	36.4	14.3	45	50	63.2	33.4	42.9
	PHC / CHC	0	0	10	2.9	5.3	0	0
	Health Sub Centre	4.5	0	0	2.9	0	0	9.4

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	Home by Nurse / Doctor	9.1	42.9	0	5.9	0	22.2	0
	Home by Birth Attendant	9.1	14.3	0	3	15.7	11.1	0
	Home by Other	4.5	9.5	0	8.8	0	0	4.8
Maternity Allowance (frequency)		2	1	3	1	1	6	1

HEALTH CARE FACILITIES AND BIRTH DETAILS

The primary mode of treatment in all the surveyed villages is accessed from local doctors (RMPs) followed by private clinics and private hospitals. Above 75% of the population in Nacholi and lowest 44.8% in Dadsiya access treatment from RMPs as a primary resort. Above 29% of the population of Dadsiya followed by Palwali (25.5%) and lowest 5.4% in Nacholi access private clinics to seek primary treatment.

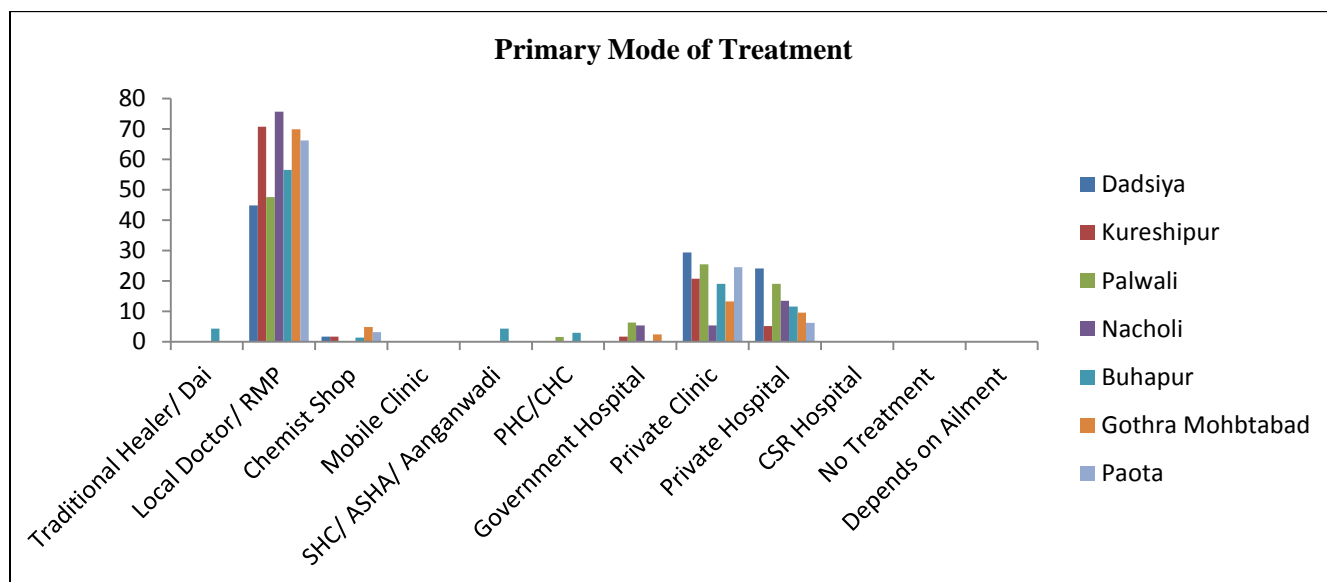


Figure 2: Primary mode of treatment

The data shows that the health care services accessed in last 12 months also have RMPs on top of the list followed by private clinics and private hospitals. Government hospital available in Faridabad at a distance of 5 to 10 Km from the villages are also accessed by the population across the surveyed villages as 41.3% of the surveyed population from Palwali and lowest 15.5% in Dadsiya reported to access it in last 12 months.

It came out from the data that institutional deliveries are more than the deliveries took place at home. The data also shows that 42.9% of deliveries in Kureshipur and 22.2% in Gothra Mohbtabad took place at home in the presence of nurse/doctor while in rest of the villages 3-16% of the deliveries took place at home.

It is also found that the deliveries that took place in government hospitals were supported by maternity allowances under Janani Shishu Suraksha Yojana; a government scheme to promote institutional deliveries.

LIVELIHOOD, LANDHOLDING & LIVESTOCK

Table 6: LIVELIHOOD, LAND HOLDING & LIVESTOCK

		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Primary Engagement (%)	Housewife	28.2	26.6	29.1	30.3	31.2	26.8	31.1
	Own Farm Activities	6.1	2	3.8	8.2	10.8	5.7	7.6
	Agricultural Labour	3.6	2.3	0.8	0.8	0.2	0.2	
	Non – Agriculture Labour	7.5	8.8	7.1	2.3	4.1	7.2	8.2
	Salaried Employment	7.5	5.9	15	9.8	9.8	8.3	7.9
	Petty Business	2.8	2.5	2	4.4	3	2.2	3.5
	Cattle Rearing	1	1.7	0		0.2	0.4	0.9
	Contractor/ broker	0	0.6	0	0.8	0.7	0.9	0.3
	Rent / Pension / Remittance	0	0	0	0	0	0	0
	Local services (including traditional services)	1.4	0	0.3	1.4	0.2	0	0
	Artisan	1.7	1.6	1.3	1	0.6	0.9	0.9
	None	40.2	48	40.6	41	39.2	47.4	39.6
Secondary Engagement (%)	Housewife	2.3	1.1	1.3	1	0.4	1.2	1.5
	Own Farm Activities	0.5		1.7	3.2	2.3	2.1	2.4
	Agricultural Labour	0.5	0.5	0	0.3	0	0	0
	Non – Agriculture Labour	0.5	0	0	0	0.4	0	1
	Factory Labour	0	0	0	0	0	0	0
	Salaried Employment	0	0	0.4	0	0.4	0	0
	Petty Business	0.5	0	0.4	0	0	0.4	0
	Cattle Rearing	0	0.6	0	0.3	0.9	0.8	0
	Contractor/ broker	0	0	0	0.4	0	0.8	0
	Rent / Pension / Remittance	0	0	0	0	0	0	0

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	Artisan	0	0	0	0	0	0	0
	None	95.7	97.8	96.2	94.8	95.6	94.7	95.1
Land (in acres)	Total Area	840	600	700	1200	380	1260	8000
	Irrigated	500	400	700	1000	360	500	7000
	Non- Irrigated	0	100	0	0	20	760	0
	Grazing	0	9	0	200	0	0	10
	Forest	0	0	0	0	0	0	30
	Wasteland	0	0	0	0	0	0	0
Agricultural Land Condition	Flood Proneness							
	Alkalinity							
	Water Logging						√	
	Soil Erosion						√	
	Drought Proneness							
	Snowfall							
Ownership of Agricultural Land (%)		34.5	10.3	28.6	52.7	76.8	31.3	55.4
Total Owned Land (%)	0-5 acres	50	100	83.7	67	92.4	84.7	97.2
	6 -10 acres	15	0	16.3	18.1	3.8	15.3	2.8
	11 – 15 acres	20	0	0	2.6	3.8	0	0
	16 -20 acres	10	0	0	10.3	0	0	0
	21 and above acres	5	0	0	2	0	0	0

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Cultivated Land (%)	0-5 acres	50	100	83.7	67	92.4	84.7	97.2
	6 -10 acres	15	0	16.3	18.1	3.8	15.3	2.8
	11 – 15 acres	20	0	0	2.6	3.8	0	0
	16 -20 acres	10	0	0	10.3	0	0	0
	21 and above acres	5	0	0	2	0	0	0
Irrigated Land (%)	0-5 acres	50	100	83.7	67	92.4	84.7	97.2
	6 -10 acres	15	0	16.3	18.1	3.8	15.3	2.8
	11 – 15 acres	20	0	0	2.6	3.8	0	0
	16 -20 acres	10	0	0	10.3	0	0	0
	21 and above acres	5	0	0	2	0	0	0
Sources of Irrigation (%)	Canal	5	0	17.6	50	3.8	0	0
	Pond	0	0	0	0	0	0	0
	Well	0	0	0	0	0	0	0
	River	0	0	0	0	1.9	0	0
	Motor Pump	0	16.7	5.9	0	0	0	2.8
	Tube well	90	33.3	82.4	68.4	81.2	88.5	86.1
	Bore Well	40	100	23.5	47.4	39.6	34.6	44.4
	Dam	0	0	0	0	1.9	0	2.8
	None	0	0	0	0	0	0	0
Major Crops (in acres of land)	Paddy	500	300	100	1000	0	0	100
	Wheat	500	300	500	1000	320	400	1000
	Millet		200	200	100	240	50	1000
	Mustard	40	100	100	0	0	0	200

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	Vegetables	50	100	100	0	0	0	0
	Sorghum	0	0	0	0	80	50	0
	Others	10	0	0	0	0	0	0
Ownership of Livestock (%)		63.8	72.4	61.9	78.4	76.8	55.4	67.7
List of Livestock (%)	He Buffalo	8.1	4.8	12.8	19	17	15.2	13.6
	She Buffalo	73	92.9	56.4	89.7	88.7	91.3	81.8
	Cow	51.4	7.1	53.8	34.5	64.2	50	68.2
	Bullock	5.4	0	2.6	5.2	9.4	4.3	13.6
	Sheep	0	0	0	0	0	0	0
	Goat	8.1	35.7	0	0	0	2.2	0
	Piggery	0	0	0	0	0	0	2.3
	Poultry	5.4	4.8	0	1.7	0	0	0

LIVELIHOOD, LANDHOLDING AND LIVESTOCK

The data in the table reflects that there are various sources of livelihood available in the sampled villages. In a closer look it is found that in Palwali, 15% of the population and in rest of the villages below 10% of the population is engaged in salaried employment as a primary source of income. In Buhapur, nearly 11% of the population followed by Nacholi with 8.2% and lowest with 2% population in Nacholi is engaged in own farming activities. Ranging from 2-9% of the population across the surveyed villages is also engaged in non-agricultural labour. It is also noticed that a small portion of population of all the villages is also engaged in other primary sources such as agricultural labour, petty business, cattle rearing, contractors, local services and artisan. An average of 42.2% of the population across the villages is dependent on the members of their families.

In Buhapur 76.8% of the population have ownership of the agricultural land followed by Paota with 55.4% and lowest is 10.3% of the population in Kureshipur. Most of the land holdings are in between 0.1-5 acres of land, with highest in Kureshipur (100%) and lowest in Dadsiya (50%). The total owned agricultural land is cultivated and irrigated by the owners as reflected in the table. The main sources of irrigation are tube wells and bore wells available in all the villages. Apart from this canal water is also used for irrigation in four villages, viz. Nacholi, Palwali, Dadsiya and Buhapur. The agricultural land in Dadsiya, Nacholi and Palwali is prone to flood as river Yamuna is near to these villages. The major crops that are grown in all the villages are wheat and millet. Paddy is also one of the main crops in five villages except Buhapur and Gothra Mohbtabad.

The ownership of the livestock is highest in Nacholi with 78.4% of the households reported the ownership. The main livestock are she buffaloes (89.7%) and cows (34.5%) owned by the owners in Nacholi which is further followed by Bhuapur (76.8%), Kureshipur (72.4%) and Gothra Mohbtabad (55.4%). Majority of the owners across all the villages owned she-buffaloes and cows. A small population across all the villages also owns he-buffaloes.

SOCIAL WELFARE SCHEMES

Table 7: SOCIAL WELFARE SCHEMES								
		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Indira Awaas Yojana	Total Beneficiaries	0	0	0	0	0	0	0
	Male	0	0	0	0	0	0	0
	Female	0	0	0	0	0	0	0
	Financial Assistance	0	0	0	0	0	0	0
	Challenges	0	0	0	0	0	0	0
MGNREGA	No. of Job Cards	21	0	0	0	0	0	0
	Males	0	0	0	0	0	0	0
	Females	0	0	0	0	0	0	0
	Total	0	0	0	0	0	0	0
	Min. Wage	191	0	0	0	0	0	0
	Challenges	0	0	0	0	0	0	0

SOCIAL WELFARE SCHEMES

It is reported by the main stakeholders of all the villages that the housing scheme of government, Indira Awaas Yojana is not functional in their villages.

MGNREGS is found to be functional only in Dadsiya where 21 job cards are issued to the households. The beneficiaries reported that the daily wage of Rs. 191/- per day is given to them. In rest of the villages, key stakeholders reported that, due to the less demand of work by villagers the scheme is not functional optimally.

SAFETY NETS & CREDIT PATTERNS

Table 8: SAFETY NETS & CREDIT PATTERNS								
		Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Type of PDS / Ration Card (%)	APL Card	65.5	65.5	68.3	56.8	79.7	59	70.8
	BPL Card	20.7	32.8	20.6	32.4	10.1	37.3	26.2
	Antyodaya / BBPL Card	0	1.7	0	0	0	0	0
	Applied But Not Received	0	0	4.8	0	2.9	0	3
	Not Applied	13.8		6.3	10.8	7.3	3.7	0
Avail PDS (%)	Yes, Regularly	24	29.3	25	34.8	30.6	27.5	14.3
	Yes, Sometimes	20	15.5	16.1	12.2	1.7	30	15.9
	no	56	55.2	58.9	53	67.7	42.5	69.8
Reasons for Not Availing PDS (%)	Not Interested	0	0	7.1	7	0	0	0
	Poor Quality of Grains	2.6	0	2.4	2.3	0	1.7	0
	No PDS shop / Irregular	0	2.4	14.3	11.6	2.3	24.1	0
	Shop Too Far	7.9	0	0	0	0	1.7	0
	Have APL Card	55.3	92.7	26.2	74.4	95.3	69	87
	no Money During PDS Supply	0	0	4.8		2.3	0	0
	Use Own Farm Produce Partly	0	0	0	4.7	0	1.7	0
People with outstanding loans (%)		11.1	13.8	25.4	29.7	20.3	24.1	20

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Source of Credit (%)	Bank	73.4	20	41.2	50	57.1	38.1	21.4
	Money Lender	15.8	30	17.6	21.4	28.6	33.3	57.1
	Trader / Employer	0	10	5.9	0	0	0	7.1
	NGO	0	0	0	0	0	0	0
	Relative / Friends	5.5	40	17.6	21.4	0	9.6	14.3
	SHG	0	0	5.9	0	0	19	0
	co-operative Society	5.3	0	11.8	7.2	14.3	0	0
Interest Rate (%)	0 -1%	11.1	22.2	17.7	7.7	0	0	0
	2- 5%	27.8	33.3	29.5	34.9	28.6	66.6	57.1
	6-10%	44.4	22.2	35.3	22.9	57.1	14.3	14.3
	11-15%	16.7	11.2	11.8	26.9	14.3	19.1	14.3
	15 -20%		11.1	5.7	3.8	0	0	14.3
	Above 20%	0	0	0	3.8	0	0	0
Assets Mortgaged (%)	None	42.1	70	47.6	28.6	42.9	71.4	71.4
	Own Land / House Deed	36.8	10	33.4	57.1	35.7	14.3	7.1
	Others Land / House Deed	0	0	0	7.1	7.1	0	14.3
	Own Jewels	0	0	0	0	0	0	0
	Others Jewels	0	0	0	0	0	4.8	0
	Own Durable Goods	0	10	19	0	0	0	0
	Others Durable Goods	0	0	0	0	0	0	0
	Personal Security	0	10	0	3.6	0	0	0
	Deposit	0	0	0	0	0	0	0
	No Response	21.1	0	0	3.6	0	9.5	7.2
Purpose of Loan	Farming	15.8	0	17.6	25	0	0	0

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(%)	Petty Trade	10.5	0	0	7.1	21.4	4.8	7.1
	Medical Expenses	5.3	20	17.7			14.3	7.2
	Education				3.6	7.1		7.1
	Marriage	31.6	40	11.8	25	21.4	38.1	28.7
	Family Function / Ceremonies / Festivals	10.5	0	0	0	0	0	0
	House Construction / Purchase / Repair	10.5	20	17.6	14.3	14.3	9.5	21.4
	Purchase of Land	0	0	0	10.7	14.3	0	0
	Purchase of Jewellery	0	0	0	0	0	0	0
	Purchase of Durable Goods	0	0	5.9	7.1	14.3	14.3	7.1
	Buy Animals	5.3	10	5.9	3.6	7.2	0	7.1
	Pay Another Loan	0	0	0	0	0	0	0
	Family Consumption	10.5	10	0	0	0	0	14.3
	Pregnancy / Child Birth Related Expenses	0	0	5.9	3.6	0	9.5	0
	No Response	0	0	17.6	0	0	9.5	0

SAFETY NETS AND CREDIT PATTERNS

Highest APL card holder families are in Buhapur (79.7%) followed by Paota (70.8%) and the lowest in Nacholi (56.8%). The highest numbers of BPL card holder families are found in Gothra Mohbtabad (48.4%) and lowest in Buhapur (10.1%). Nearly 2% of the households in Kureshipur also have AAY cards. Except Kureshipur and Paota, a small share of the households reported that they have not even applied for ration cards in rest of the villages. It is also found that maximum households across the seven villages does not avail PDS because they have APL cards while the BPL card holders reported that they do not avail ration sometimes because of multiple reasons such as poor quality of grains, irregularity in PDS, shop too far and some use own farm products. In Palwali and Buhapur, nearly 5% and 2% households respectively sometimes not avail PDS because of the shortage of money at the time of PDS supply.

There are people with outstanding loans reported almost in every sampled village. The highest with 29.7% people with outstanding loans are found in Nacholi followed by Palwali with 25.4% borrowers and lowest are found in Dadsiya (11.1%). The common sources of loans in all the villages are banks and money lenders. Majority of the borrowers have taken loan from banks in all the villages except Paota where 57.1% of the population has taken loan from money lenders. In all the surveyed villages, borrowers have mortgaged their own land/ house deeds. The main purposes of taking loans in all villages are for house construction/ repairing and to meet the marriage expenses. It is also found that in Paota, Buhapur and Nacholi, borrowers have taken loan for education purposes also. The interest rates of the loans vary from source to source. Those who have taken loans from relatives/ friends paying less interest than those who have taken loan from banks, money lenders and cooperative societies across the seven villages.

INFRASTRUCTURE- AVAILABILITY AND ACCESSIBILITY

Table 9: INFRASTRUCTURE- AVAILABILITY AND ACCESSIBILITY									
			Village 1: Dadsiya	Village 2: Kureshipur	Village 3: Palwali	Village 4: Nacholi	Village 5: Buhapur	Village 6: Gothra Mohbtabad	Village 7: Paota
Recreational	Playground				√	√		√	√
	Samaj Mandir			√	√	√	√	√	√
	Gymnasium								
	Community hall				√	√	√	√	√
	Library								
	Cremation/ Burial Place			√	√	√	√	√	√
Physical Facilities	Cement/Tar road	Within Village		√	√	√	√	√	√
		Within 5 km							
		More than 5 km							
	Bus Stop	Within Village				√			
		Within 5 km		√	√		√	√	√
		More than 5 km							
	Public Telephone Booth	Within Village							
		Within 5 km					√		√

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

		More than 5 km		√					
	Daily Market	Within Village							
		Within 5 km		√			√		
		More than 5 km						√	√
	Weekly Market	Within Village							
		Within 5 km					√		
		More than 5 km		√				√	√
	PDS Shop	Within Village		√	√	√	√	√	√
		Within 5 km							
		More than 5 km							
	Grocery Shop	Within Village		√	√	√	√	√	√
		Within 5 km							
		More than 5 km							
	DTP/Xerox Centre	Within Village							

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		Within 5 km		√	√	√	√		√
		More than 5 km						√	
Local Institutions/	Post Office	Within Village					√		
		Within 5 km		√	√	√		√	√
		More than 5 km							
	Railway Station	Within Village							
		Within 5 km							
		More than 5 km		√	√	√	√	√	√
	Police Station	Within Village							
		Within 5 km		√	√	√	√		√
		More than 5 km						√	
	Gram Panchayat Office	Within Village			√		√	√	√
		Within 5 km		√					
		More than 5 km							

		km							
	Co-operative Society	Within Village				√			
		Within 5 km		√	√		√		
		More than 5 km						√	√
	Bank for S/B Account	Within Village			√				
		Within 5 km		√		√	√		√
		More than 5 km						√	
	Block Development Office	Within Village							
		Within 5 km							
		More than 5 km		√	√	√	√	√	√
	Taluk Headquarters	Within Village							
		Within 5 km							
		More than 5 km		√	√	√	√	√	√
	District Headquarters	Within Village							
		Within 5 km							

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		More than 5 km		√	√	√	√	√	√
	Warehous e	Within Village							
		Within 5 km							
		More than 5 km		√	√	√	√	√	√
	APMC/ Mandi	Within Village							
		Within 5 km					√		
		More than 5 km		√	√	√		√	√
Transport facilities	Public/ Pvt Mini buses								
	Maxi Cabs/ Jeep				√			√	√
	Share auto			√			√		
	Taxi/ Auto			√	√	√			√
	Bicycle			√		√	√	√	√
	Motorcycl e			√	√	√	√	√	√
	Bullock/ Horse Cart								√

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

Education	Pre-Pri/Nursery School	Within Village		√	√		√	√	
		Within 5 km							√
		More than 5 km							
	Govt. Primary School	Within Village		√	√	√	√	√	√
		Within 5 km							
		More than 5 km							
	Charitable Primary	Within Village							
		Within 5 km							
		More than 5 km							
	Pvt. Primary School	Within Village				√	√	√	
		Within 5 km		√	√				√
		More than 5 km							
	Govt. Secondary School	Within Village			√	√			√
		Within		√			√	√	

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

		5 km							
		More than 5 km							
	Charitable Secondary School	Within Village							
		Within 5 km							
		More than 5 km							
	Pvt. Secondary School	Within Village							√
		Within 5 km		√	√	√	√	√	
		More than 5 km							
	Higher Secondary School	Within Village							√
		Within 5 km		√	√		√		
		More than 5 km				√		√	
	Degree College	Within Village							
		Within 5 km					√		√
		More than 5 km		√	√	√		√	

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

	ITI/ Polytechnic	Within Village							
		Within 5 km							
		More than 5 km		√	√	√	√	√	√
	Vocational training centre	Within Village							
		Within 5 km						√	
		More than 5 km		√	√	√	√		√

CHAPTER 5: AN OVERVIEW OF PROBLEMS AND POSSIBLE AREAS OF INTERVENTIONS

SALIENT FEATURES OF PROBLEMS AND RECOMMENDATIONS

The problems in the report have been explained in detail with the village-wise findings analysed and the interventions succeeding these are aimed at a sustainable approach to improve the situation of the villages in a long-term and effective manner. Being in similar stage of development and poverty, villages may have similar problems in nature like lack of healthcare, livelihood, sanitation facilities. Therefore, the recommendations or possible areas of interventions are also similar in nature and explained once in this section under each area of concern. However, the pertinent point to be noted is that this does not imply cluster or common project-implementation for a set of villages. The interventions recommended in need independent implementation in each village under the given location, as the problem is uniquely present in each village as given in the village-wise findings.

There are also few problems and recommendations that are singled-out in the last part of this chapter which are identified and appearing exclusively in that particular village, but not in any other villages in that same location. Hence these have been given a separate mention. The implementation, like in the first part, also needs to be independently done in that particular village.

Prioritising and Nature of Interventions

As required in the Memorandum of Collaboration (MoC) between TISS and IOCL, each intervention has been given a Priority on the basis of stakeholders' views, data analysis and on-field observations of the Research team. This means that in each village the recommended intervention on Priority-1 needs to be given first preference and importance over others and accordingly implementation should be planned for each village.

Moreover, each intervention also has been segregated under three terms depending upon their 'nature' as required in the MoC: Short Term, Medium Term and Long Term Intervention. Short term intervention is defined here as those interventions that require less than 1 year engagement from the company; Medium term interventions are those that need 1 to 3 years of engagement; Long term interventions are those that need a continued engagement of more than 3 years. A particular intervention may be short, medium or long term, but the implementation needs to begin in the first year; the number of years is indicative, and

not restricted, of the duration of completion to give an idea for planning. Also, if the company and implementing agency deems any intervention to be continued longer than the specified term to achieve its objectives or expanded depending on the need and beneficiary response, the discretion is upon the company to allocate the time, efforts and spending on the intervention accordingly. The implementation may be planned for those selected interventions by the company on the basis of the priorities and nature of interventions provided in this chapter.

Priority 1: Health Care Facilities – Medium Term Intervention

Situation of Health care facilities

In all the villages, the quality of healthcare facilities is questionable as reported by participants. Most of the time the health personnel remain absent from the health sub centres (SHC) available in the nearby villages and medicines mostly remain out of stock. It can be observed from the data that majority of population, for their primary treatment, prefer to avail the services of RMPs (Registered Medical Practitioners) also known as local doctors. The same scenario can be seen in the health care facilities accessed over the last one year. A large number of practitioners in the allopathic medicine have no professional qualification and no license to practise any system of medicine. They practise on the basis of the practical experience they have acquired attending in the hospitals and clinics. These local doctors provide medicines on the basis of limited knowledge based on practical experience without proper medical diagnosis. The fees of these doctors are very less as compared to BAMS and MBBS doctors and also are easily available in the village premises. Thus, making people more inclined to take their services as they find other services located at far distances and more expensive. Moreover they are not deeply concerned about the well-being of their health, which also indicates the lack of awareness of the consequences related to any disease among the villagers.

Furthermore, treatment from these doctors is always a risk and dangerous for human life as local doctors do not conduct proper medical tests for diagnosing the diseases and give medicines by looking at some preliminary and superficial symptoms which is not a safe and careful practice and leads to reactions in human body many times which has dire consequences on the patient's life. Also it is observed by the researchers in almost every village, unless it is not serious and local doctor's medicines are not able to cure the disease then only they step out for the treatment at hospitals, which in most of the cases is at crucial stages and may result in death.

Apart from this, it has also been observed that people also access private clinic and government hospitals across all the surveyed villages but the percentage of accessing local doctors is considerably higher than people accessing private clinics or government hospitals. Marginal population also accesses private hospitals and private clinics in case of major ailments or when the required facilities are not available in the government hospital which is located at Faridabad. Delving deeper into the data analysis reveals that majority of the people in all the villages are economically weak and could not afford the high cost of treatment from private hospitals or clinics. As a result they have to borrow money from different sources at high rate of interest to meet the high expenses of treatment from private hospitals or clinics. Except Nacholi, rest of the villages are settled far from the main roads and therefore limited or time specific

transport facilities are available for them to reach the nearby hospitals/ clinics which also lead to an increase in the chances of opting for local doctors which are easily available in the village.

Village wise findings:

Village1: Dadsiya

In this village, 44.8% of the sampled population access the services of RMPs or local doctors for their primary treatment which is a highly risky as people lose their lives with their treatment. The data also shows that over a last year more than 70% of people accessed the services of RMPs and 46.6% accessed the services of chemists for the treatment. And it is a known fact that either chemists or RMPs both do not hold any license to practise any medicine. The nearest community health centre and Government hospital is 12 and 14km respectively away from the village and as per the data, not even a single respondent visited there for primary treatment and the reasons are distance, lack of public transport from the village, unavailability of medicines in the government health institutions as per the respondents. The available data raises the concerns of ill health status of the village and dependency on the RMPs.

Village 2: Kureshipur

The village lacks facilities in terms of healthcare. There is no health centre and medical store in the village due to which 70.7% of the villagers access the services of RMPs/quacks which are easily available in the village. The field researchers have even seen people taking loose medicines to from these RMPs/quacks. The medicines are not even stored in proper place. The storage of medicines in proper place ensures their quality³. One cannot figure out the expiry date of these loose medicines. From this, the scenario of the health can be judged. It is also observed that mainly women and children faces more problem as minor illness of them is mostly ignored which leads to serious illness and affects their health. It can also be seen in the data that more than 50% of the deliveries are non-institutional and took place at home either in the presence of nurse or birth attendant or others. Therefore, there is a need to ensure the better health facilities in this village so that health status of the village also improves.

Village 3: Palwali

The nearest Government health institution is at the distance of 5 km from the village and only accessed by 1.6% of the sampled population because of several reasons such as lack of public transport, lack of health commodities in the public hospitals, etc. The vulnerable health conditions of the women belonging to difficult financial background have been observed during the data collection. The data shows that 47.6% of the sampled population access the services of quacks for their primary treatment. The preference is

³http://deliver.jsi.com/dlvr_content/resources/allpubs/guidelines/GuidStorEsse_Pock.pdf

given to quacks as their services are cheap and easily available and also patient can pay later if they do not have money at the time of treatment. Therefore, providing primary health facilities in the village comes out as an urgent need.

Village 4: Nacholi

The village is settled on the sides of a busy road where children often meet with accidents as per the information shared by key participants and respondents. The village has a health sub centre where medicines are always remain out of stock and health personnel often remain absent as per the respondents. For the primary treatment and first aid, villagers have to take the services of quacks and in serious circumstances, private hospital and clinics are accessed. As per the data, 75.7% of the sampled population accessed the services of quacks for the primary treatment.

Village 5: Buhapur

In this village, it is observed that preference is given to RMPs/quacks for primary treatment as the medicines are always available with them on cheap rates. The data shows that 56.5% of the sampled population accessed the services of RMPs for primary treatment even when the PHC is just 2 Km from the village and well connected with road, though transportation facilities are limited. It is also observed that minor cough, skin problems in children and other minor illnesses are mainly ignored by their parents. Therefore, it becomes important to provide the villagers with a professional health facility which is approachable and better if available in the village so that the mind-set of the villagers changes towards the health.

Village 6: Gothra Mohbtabad

There is no sub-health centre or dispensary available in the village. It is observed that illnesses like joint aches and cardio vascular diseases are prevalent in the village. Due to the absence of health institutions villagers are left with no other option than quacks/RMPs. The data also shows that 69.9% of the villagers access the health services of quacks/RMPs for their primary treatment. It is also reported by the women of the village that it becomes difficult for them to take some primary treatment from the RMPs as these RMPs are only males and they would not able to share their problems and it makes their situation vulnerable.

Village 7: Paota

The conditions are more or less same as of village Gothra Mohbtabad. The village has the population of nearly 5000 people and no public health institution is available in the village. The dependency is only on

the RMPs. As per the data, 66.2% of the sampled population seeks primary treatment from RMPs and these RMPs provide medicines without any tests or proper check-ups which are risky in nature as it can react negatively. If seen on the health services accessed over last year than again 90% of the sampled population accessed treatment from them. Therefore it becomes important to provide a village with nearly 5000 of population professional primary health services with proper check-ups.

INTERVENTION:

Mobile Medical Van

The main focus of interventions can be laid down on providing primary health care services and referral services. As all the villages are approachable therefore Mobile Medical Van (MMV) initiative can be started. As above mentioned, lack of transport facilities to the nearest health institutions also restricting and channelize them to RMPs for the primary health care which is risky. Therefore, a healthcare facility on wheels along with MBBS doctor, a pharmacist, a community mobiliser and a driver can be started to curb the problem by providing them with primary treatment at their door step. The MMV should have an MBBS doctor accompanied with pharmacist, a driver and a community mobiliser. It is also recommended that in a village MMV should visit twice a week so that villagers can access regular treatments from the experts. The schedule of MMVs should be made available in public places at every village so that people can use it at the time of emergency. The problems reported by the villagers should be diagnosed and appropriate treatment prescribed. Medicines should be stored in cool and dry place and should not be exposed to direct sunlight. The services of MMVs should be started by making a card for every family accessing the services for the first time and a nominal fee should be charged for that. The check up and diagnosis should be a free service but the medicine should be provided at nominal charges. This will help in using the services of MMVs with serious level and restrict the casual attitude towards accessing the services unnecessarily. The nominal charges will also help in understanding the importance of the services as the free services are considered to be poor. By the introduction of family card, the monitoring will be effective and error free. It will also be easy to assess the impact of the project as it will be filled by the doctors with every visit of the family members. This can be created as one condition to provide treatment to the villagers with cards which will be helpful in keeping records.

The MMVs can provide referral services to the patients suffering from serious diseases to the nearest multi-specialty hospitals like public and private hospitals in the Faridabad. The treatment, tests, medication would be sponsored by the company free of cost depending upon the economic situation of the patients. The doctor in MMVs would then write a referral note for the patients who have major illnesses, need pathology, X-ray, MRI, etc., tests, longer treatment and care.

Priority 2: Livelihood – Long Term Intervention

Situation of Livelihood

Faridabad is ranked 9th largest industrial estate in Asia, with more than 15000 small, medium and large industries providing direct and indirect employment to nearly half a million people. Many international/multinational companies are operating in this belt⁴. The presence of a big industrial hub is found to be less approached by the villagers of the surveyed villages which are around the vicinity of the city. The data is also showing that there are very few people engaged in the salaried employment. The main reason is coming out lack of vocational skills and poor quality of education. The education in the rural areas has always been a matter of concern because of several reasons like motivation, encouragement from the families, financial position of the families, awareness, secondary status to women, expectation of support from male child in agricultural work, etc. keeps education as a secondary choices. Because of low level of education and dropout cases from formal education, these youth find themselves without direction and skills to capture any job leads to unemployment. It is also analysed that most of the male students dropout from formal education to support their families financially and in case of girls, it is households chores or early marriages.

There is always a demand of skill workers in the various industries operating in the city, but due to the lack of essential qualifications, and lack of awareness about the job openings they mostly not apply and therefore it also remains the major concern areas. There is a need to build up a potential work force in the villages so that economical sustainability in a family can be established. As the educational standards are always questionable, therefore the only option of skilful workforce can only be created by providing vocational skills to the youth of the villages and also providing them with job placements in various companies.

Village wise findings:

Village 1: Dadsiya

There is a huge scope for the livelihoods in the nearby industrial hub at Faridabad. But the reason behind the 40.2% of the sampled population not engaged in any income generation activity are lack of public transport from the village, lack of essential qualifications, etc. The demand for skilled work force always remain high in the industrial sector but the data shows none of the villager have ever received or undergoing some vocational training which make them capable for getting a job. It is also cleared from the data that 7.5% of the population is engaged in non-agriculture labour which does not remain in demand throughout the year. The income generated from this employment is not sufficient for the family

4 <http://faridabad.nic.in/industri1.htm>

to sustain. Therefore, the need of the hour is to provide the vocational skills to the people and provide them livelihood, so that the income of the family increased and they live a sustainable life.

Village 2: Kureshipur

As per the data, 48% of the sampled population is not engaged in any kind of income generation activity and the poor financial condition of the village has been observed by the researchers. The data shows that 8.8% of the people are engaged in non-agriculture labour work. It is also observed that due to low income, people of the village ignore the illness as their income does not allow them to take treatment from the professional doctors. The same is observed in the case of higher education. The unemployment in this village is hindering the development of the village and its people.

Village 3: Palwali

The village have 15% of the population engaged in salaried employment whereas 40.6% of the population is not engaged in any income generation. The scenario is same like Dadsiya village. Nearly 29% of the women are housewives and remain busy with household chores. The women and young girls found to be enthusiastic on doing some work which will make them an earning hand for their family. The youth of the village needs a push and helping hand in the career as they are lacking essential qualifications for the jobs.

Village 4: Nacholi

People are less educated, semi-skilled or unskilled. Due to lack of the essential qualifications and skills, youth of the village is not able to find a job and which in turns increase the problem of drinking and gambling in the village as per the respondents and key participants. As per the data, 41% of the people are not engaged in any kind of income generation activity. The farming is another option which is only limited to those who have agricultural land holdings and as per data it is limited to 52.7% of the people. It is also observed that women of the village are mostly unemployed, though they are interested in work but due to social barriers and patriarch society they are not able to go out and find a job for themselves. To improve the scenario of the village, it becomes important to provide them with some livelihood option.

Village 5: Buhapur

Mainly people of this village are dependent on farming (10.8%) and on salaried employment (9.8%). But 39.2% of the sampled population is unemployed which also includes elderly people and totally dependent on the other family members. The village has a considerable number of youth but due to lack of public transport and lack of essential educational qualifications they are unemployed. There is no one in the village who have ever taken vocational training. There are 31.2% of the housewives in the village who

are engaged in household chores. The income of the families can be increased if the unemployed youth and housewives can be provided with some vocational skills.

Village 6: Gothra Mohhtabad

In this village, 47.4% of the people are not engaged in any income generation activity as they are not able to find the job and not aware about the jobs. If they find the job then their educational qualifications do not match with the requirements. The villagers are unable to find the job because they are not skilled. The social barriers restrict women to go out and look for a job; therefore, it becomes important to create some livelihood option for them in the village itself.

Village 7: Paota

In Paota, 39.6% of the sampled population is dependent on others' income. The employment scheme of the Government is also not availed in the village because of the low wages. Apart from this, 8.2% of the population are engaged in non-agricultural labour work which is not available for the full year. Around 31% of the women population are housewives in this village. It clearly shows that there is a need to create livelihood options especially for youth population who can be directed towards a bright future. There is also a need to organise training for the women and men so that the village's economic status can be uplifted and become prosperous.

INTERVENTION:

As defined above, Faridabad has huge industrial area with large medium and small scale industries operating in the district. Lack of technical skills is a major problem restricting youth in securing jobs in these industries. There is a need of providing vocational/skill training to the youth and skills can be decided after understanding the needs from the nearby industries. The training should be made available to all the beneficiaries with a marginal fee which will help the trainees in understanding the importance of the training for which they are paying. A monthly stipend can be provided to all the trainees that would be decided by the company as per the budget. The study material related to the training should be provided before starting the course or in the very first class. Implementing agency should also be directed to give job placements to all the trainees. Implementing agency should also be directed to give job placements to all the trainees. A minimum percentage of job placements should be decided by the company and implementing agency which will work as a milestone. All the nearby agencies can be contacted and according to their immediate requirements, training can be provided to the youth. Along with the training, English and Computer education can also be provided which will work as an add-on and in favour of these trainees in seeking jobs. These trainees can also start their own workshops after getting the training.

Few vocational training like plumber, motor mechanic, electrician, carpenter, etc. can be provided to the youth who are interested in running their small scale business.

It was also observed during the survey that housewives are not engaged in any kind of income generation activities around the seven surveyed villages. Housewives can be provided with the training of papad making, pickle making, candle making and many other kinds of household products for which the market is available. SHGs can be made of women in all the villages and they can get engaged in small scale cottage industries (making household products). As mentioned above, all the surveyed villages are near to Faridabad city so the products which are produced by these small scale cottage industries can be sold out in the market of Faridabad. This kind of market linkages need to be provided, by the implementing agency by partnering with cooperatives, NGOs and others, to the group of women as the trainings and assistance becomes redundant without a source of income generation.

VILLAGE SPECIFIC PROBLEMS AND RECOMMENDATIONS

Village	Priority	Problems	Interventions	Nature of Interventions
Nacholi	3	Infrastructure: The internal roads of the village are in deplorable conditions thus causing inconvenience to people in regular commutation as well as in emergencies.	There is a need to construct Plain Cement Concrete (PCC) roads, where ever required. The construction can be initiated by identifying the damaged roads with the help of Panchayat. This will not only improve connectivity but also help in bringing other interventions to the village for its holistic development.	Short Term Intervention
Buapur	3	Cleanliness: There is a pond within the village which is a home for several diseases. The sewage water gets collected in it. Due to this it is a home to many insects and mosquitoes and due to such unhygienic conditions, this village is prone to several diseases like malaria, cholera, typhoid, jaundice etc. Apart from this, there have been many incidents where children have drowned and lost their lives by falling into the pond due to the absence of boundary walls.	A boundary wall and gate are required to construct so that children do not go close to the pond. The pond needs to be cleaned and insecticides should be sprayed. This can be done with the help of village people. Apart from this, there is a need to place moveable dustbins in the village to avoid the open dumping of the waste materials.	Short term Intervention

Kureshipur 3, Dadsiya, Gothra Mohbtabad		<p>Education: The literacy rate is analysed lowest in the villages. In comparison to males the dropout rate of females is very high because of the reasons like safety, restrictions from family and early marriages. The reasons for male dropout rate are to support family financially. The dropout rate is high after primary education as higher secondary schools are at a distance of 5 km or more than 5km.</p> <p>Village Specific findings:</p> <p>Kureshipur: The literacy rate of the village is 55.6% which is much lower than the national average literacy rate. The dropout rate is higher because of the reason education is not considered important by 11.6% and another main reason for dropout is the long distance of higher secondary schools.</p> <p>Dadsiya: The dropout rate in this village is higher of girls as 21.7% of the girls drop from their studies due to safety reasons. As per the respondents, notorious activities such as eve teasing is very common in the</p>	<p>There is a need to promote girl child education in all of these villages. The security issues of sending girl to school can be removed by providing transportation facility to them. A school bus will be helpful to mitigate the same. Further, awareness among the parents related to the importance of education is also required. Apart from this, in Gothra Mohabtabad, it is also noticed that the basic facilities of infrastructure like benches, and black boards are also not available in sufficient numbers. Therefore company can provide these primary amenities in the school. Also with the help of NGO, remedial classes after school can be started which will improve the quality education standard. Initially the target group can be girl-children studying in the school and then extended to boys depending on the response and need.</p>	Medium Term Intervention
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		surroundings and the long distances to the higher secondary schools make the parents worried about their daughters safety.		
Palwali, GothraMo habtabad, Dadsiya	4	Housing facility: It is reported by several respondents and observed by the researchers that few of the families in the villages do not have housing infrastructure because of their extremely difficult financial status. Though the land is provided to them by State Government but no assistance has been provided for the construction. This vulnerable section of people needs assistance to construct their houses. Most of the families are of SC community and their income source is only labour work.	There is a need to uplift the SC population in the villages. A house is the one of the primary needs which is required after food and clothes. To assist this section which mainly belongs to underprivileged caste groups, company can provide them construction material or take their labour and build house structures which will help them with safe and comfortable living environment. The list of such underprivileged peoples can be obtained from the Panchayats.	Short Term Intervention
Buhapur	4	School Infrastructure: It is observed in Buhapur Government primary school that the toilets are common for both girls and boys which is not an encouraging practice.	There is an urgent need to construct separate toilets in the Government primary school for girls with proper water facility and maintenance mechanism in place.	Short term Intervention
Paota,	5	Veterinary Facilities: Most of	For the welfare of the animals/cattle,	Short Term

Kureshipur		the villagers have cattle at their homes but there is no veterinary clinic in the villages to take care of the animals when they fall sick and due to the unavailability of the veterinary doctor, villagers mostly overlook the diseases of the cattle/ animals. This is resulting in the increase of the death toll of cattle/ animals. Also in both of the villages, for a small percentage of population, cattle rearing is the primary as well as secondary source of livelihood.	company can organise health check-up camps for animals, twice or thrice in a month to assure better health of the cattle/ animals in the village. The medicines can be provided free of cost. Before conducting such camps, initial mobilisation should be taken into consideration to take villager's view and increase their awareness.	Intervention
Dadsiya	5	Flood: The village is near to river Yamuna and prone to floods in monsoons. During floods, the routine of the villagers gets affected completely and causes severe damage to life, property and livestock that is beyond the coping capacity of human beings.	The villagers can be trained for preparedness measures during flood situations. They should be trained for proper evacuation measures and shelters during floods. They should also be encouraged to do plantation along the river banks which will hold the soil and prevent its erosion. For doing this, company can outsource an NGO that works on flood mitigation issues.	Short term Intervention

CONCLUDING REMARKS

The baseline survey conducted at this location revealed certain key areas that need urgent attention. Intervention in these areas will work towards growth and development of the villages and its inhabitants in different spheres of the socio-economic arena. Different chapters on data analysis, key findings of the village and interventions give a clear picture of the kind of problems faced by people and the needs that are to be addressed along with priority of the intervention.

Following are certain important considerations which the company must take care of during implementation of the interventions.

IMPORTANT CONSIDERATIONS PRIOR TO IMPLEMENTATION

1. Maintenance of the Projects and Infrastructure

Infrastructure, which will be built by IOCL, should be maintained by the individual or the Panchayat, as per the projects. The common bathrooms, lanes, drain, etc. should be maintained by the Panchayat from their funds, or additional funds from IOCL, and individual taps, toilets, etc. should be maintained by individual households. These considerations should be discussed with the Panchayat prior to starting any of the projects and a written agreement should be signed with them in this context. The maintenance terms should be made clear to the Panchayat members as well as to individual households which will help them in maintaining it. If the Panchayat and individual households need some financial help in maintaining the infrastructure, IOCL can consider providing the same and take a decision on that. The partnership between the organisation and villagers should be framed out clearly and completely, on their terms, before implementing any of the projects. This will start all the projects on very clear and positive note.

2. Caste Discrimination as a Hindrance in Development and Growth

Caste discrimination, on general terms, is evidently present in most parts of our country, either in obvious ways or through subtlety. This fact needs to be kept in mind while implementing any of the projects so as to ensure equal access by all to the facilities made available in addition to preventing encouragement of the phenomenon in the process of development. Facilities, like water tanks in some villages, are also made available on the basis of castes, as people practise untouchability which is a legal offense but practised widely across India. The caste discrimination practised should be taken into consideration before implementing the projects, as all the benefits can get concentrated with the dominant castes. The services should be provided with special emphasis on the socially backward castes as they are doubly marginalised- one because of the lack

of development and the other because of their social backwardness in certain states. Practising untouchability is a crime, according to the Indian Constitution and this principle has to be followed strictly in implementing the projects with equal access being provided to groups from all the castes. In fact, care should also be taken to provide interventions specific to marginalised caste groups as they do not have equal opportunities for access.

3. Linkages between Different Projects

The projects recommended above should be in sync with each other. For instance, roads with drains should be constructed after laying down pipelines, if the water project is to be implemented by IOCL. And the Mobile Medical Van project will be more effective and easy to implement, if there are roads with drains laid down in the villages.

4. Community Ownership of the Projects

The ownership of the projects by the community is a much-needed phenomenon, for the success of any social development project. The labour for all the construction should be drawn from the locals by providing them masonry training, as this will help in income generation and result in semi-skills development of the locals. Semi-skilled persons can be first trained by forming a group across the villages and each semi-skilled labourer can form his own team of people of unskilled labourers. Construction of, say, individual toilets or drainage lines in that particular village becomes the responsibility of the semi-skilled team leader with his/ her group of unskilled labourers. This will be cost-effective, train the people and give them an intrinsic sense of community ownership of the projects. The community can be involved in all the projects, using the method of '*Shram Daan*', which is a very popular concept to engage communities in India. With this, ownership can be generated among people, as they will be involved in building these projects, from the start. The locations of the projects should be decided through discussions with all stakeholders to make it comfortable for majority of the people.

5. The Collaborative Model

All the projects taken up for implementation by IOCL should be in sync with the Local and Central Government Schemes, to avoid duplication. If there are projects previously sanctioned by the government, which are yet to be implemented, they can be supported by IOCL financially in a collaborative model with the Government. Collaboration with the Government is necessary for the sustainability of the projects and for increasing their usability. India is a welfare state and accordingly the state has provisions for every single aspect of human development. The Central and State Governments have a variety of schemes available to support the rural population, but the areas of contention are *availability, accessibility and affordability*. Lack of attention, funds or will

in any of these areas makes the implementation of these schemes weaker. The level of awareness is also not particularly high, because of which people are not able to avail their basic rights. The Government can be approached by the Company to provide the support needed for reaching out to people and for optimum utilisation of available resources for holistic development.

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ANNEXURES

Village Questionnaire

IDENTIFICATION PARTICULARS		
Name of District: _____		Code: _____
Name of Taluka: _____		Code: _____
Name of Block: _____		Code: _____
Gram Panchayat: _____		Code: _____
Name of Village: _____		Code: _____
<u>Informant name</u>	<u>Informant status</u>	<u>Status Code</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Date of completion of interview (DD/MM/YY): / /		

P: Population, Land and Water

Qn.	QUESTIONS AND FILTERS	CODING CATEGORIES					
P01	WRITE YEAR OF ENUMERATIONAND RECORD HOUSEHOLDS AND POPULATION OF THE VILLAGE (CODE 0000 UNDER YEAR IF NO ENUMERATION)	YEAR.....	<div></div>	<div></div>	<div></div>	<div></div>	
		HOUSEHOLDS.....	<div></div>	<div></div>	<div></div>	<div></div>	
		POPULATION.....	<div></div>	<div></div>	<div></div>	<div></div>	
P02	Total, irrigated, non-irrigated (rain fed), grazing (pasture) land, forest land, wasteland area in the village (RECORD ALL FIGURES IN ACRES)	TOTAL AREA.....1	<div></div>	<div></div>	<div></div>	<div></div>	
		IRRIGATED.....2	<div></div>	<div></div>	<div></div>	<div></div>	
		NON-IRRIGATED.....3	<div></div>	<div></div>	<div></div>	<div></div>	
		GRAZING.....4	<div></div>	<div></div>	<div></div>	<div></div>	
		FOREST.....5	<div></div>	<div></div>	<div></div>	<div></div>	
		WASTELAND.....6	<div></div>	<div></div>	<div></div>	<div></div>	
P03	What extent of agricultural land in the village suffers from flood proneness, alkalinity, water logging, and soil erosion? (RECORD IN ACRES OR WRITE CODES IN BOXES – 1 ALMOST NIL, 2 SOME, 25%, 3 HALF, 50%, 4 MORE THAN HALF, 75%, 5 ALMOST ALL) DEFINITIONS: 1. FLOOD PRONENESS – CAN BE EASILY AFFECTED BY FLOODS IN RIVER NEARBY 2. ALKALINITY – OR CLAY SOIL, THAT IS HIGH IN ALKALINE, LOW	FLOOD PRONENESS.....1	<div></div>	<div></div>			
		ALKALINITY.....2	<div></div>	<div></div>			
		WATER LOGGING.....3	<div></div>	<div></div>			
		SOIL EROSION.....4	<div></div>	<div></div>			
		DROUGHT PRONENESS.....5	<div></div>	<div></div>			

Baseline Survey Report Phase II: Haryana, Punjab & Himachal Pradesh

	<p>INFILTRATION CAPACITY CAUSING RAIN WATER TO EASILY STAGNATE/ LOG</p> <p>3. WATER LOGGING - THE WATER TABLE (LEVEL) OF THE GROUND WATER IS TOO HIGH FOR AGRICULTURE TO TAKE PLACE</p> <p>4. SOIL EROSION – SOIL THAT GETS WASHED AWAY EASILY BY WIND OR WATER</p> <p>5. DROUGHT PRONENESS – LAND THAT IS SUFFERS NORMALLY FROM DROUGHTS, I.E. LACK OF RAINS IN THE REGION</p>		
P05	<p>What are the various sources of irrigation in the village?</p> <p>(NOTE: WITH OR WITHOUT MOTOR)</p> <p>(ASK FOR ALL SOURCES)</p>	<p>TANK/POND.....A</p> <p>STREAM/RIVER.....B</p> <p>CANAL.....C</p> <p>OPEN WELL.....D</p> <p>TUBE WELL.....E</p> <p>OTHER.....F</p> <p>NONE.....X</p>	
P06	<p>What are the various sources of water for the use of households in the village? Rank them in order of importance?</p>	<p>TANK/POND.....1</p> <p>STREAM/RIVER.....2</p> <p>CANAL.....3</p> <p>OPEN WELL.....4</p> <p>TUBE WELL.....5</p> <p>PUBLIC TAP/OVERHEAD TANK.....6</p> <p>PRIVATE (HH) TAP.....7</p> <p>TANKER WATER.....8</p> <p>OTHER.....9</p>	
P07	<p>Number of public/common tap water posts and number of households with individual tap connections by the Government.</p>	<p>PUBLIC/COMMON TAP POINTS... <input type="text"/> <input type="text"/></p> <p>HH TAP CONNECTIONS..... <input type="text"/> <input type="text"/> <input type="text"/></p>	

Q: Livestock, Crops and Livelihoods

Qn.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKP																																																																											
Q01	What are the major crops grown in the village and in how much acres of land area these crops were grown during the last one year?	<table><tr><td><u>CROP NAME</u></td><td><u>CODE</u></td><td><u>LAND AREA</u></td></tr><tr><td>_____</td><td><table><tr><td><input type="text"/></td><td><input type="text"/></td></tr></table></td><td><table><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table></td></tr><tr><td>_____</td><td><table><tr><td><input type="text"/></td><td><input type="text"/></td></tr></table></td><td><table><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table></td></tr><tr><td>_____</td><td><table><tr><td><input type="text"/></td><td><input type="text"/></td></tr></table></td><td><table><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input 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Q02	What are the sources of livelihood for the people of the village? ENCIRCLE MULTIPLE OPTIONS	OWN FARM ACTIVITIES.....A AGRICULTURAL LABOUR.....B NON-AGRI LABOUR (RURAL)C FACTORY LABOUR (MODERN)D SALARIED EMPLOYMENT.....E PETTY BUSINESS/TRADE.....F CATTLE REARING.....G COLLECT & SALE FOREST/MINING																																																																												

Baseline Survey Report Phase II: Haryana, Punjab & Himachal Pradesh

		PRODUCTS.....H RENT/PENSION/REMITTANCE.....I ARTISAN (TRADITIONAL).....J OTHER_____K			
Q03	Accessibility of the forest/mining area to the people of the village for their livelihoods? What purposes? ENCIRCLE MULTIPLE OPTIONS (YES – CAN ACCESS, NO – CANNOT ACCESS, NA – NO FOREST/MINING)	CODE FIREWOOD1 FRUIT/NUTS/LEAVES/...2 HUNTING3 CULTIVATION.....4 COAL COLLECTION.....5 OTHER_____6	YES NO NA A B C A B C A B C A B C A B C A B C		
Q04	Extent of Household of the village (at least one member) temporarily or for certain periods migrates to other places in search of work.	YES, MANY MIGRATE.....1 YES, FEW MIGRATE.....2 RARE.....3			→ Q06
Q05	Where do people migrate for work?	Within the state (Agri Labour).....1 Within the state (Non-Agri Labour).....2 Outside state (Agri Labour)...3 Outside state (Non-Agri Labour).....4 Other_____5			
Q06	How many children of this village are currently (this year) staying and studying outside the village ?	NUMBER OF CHILDREN..... <input type="text"/> <input type="text"/>			

R: Religion, Caste, Recreation and Transport Facilities

Qn.	QUESTIONS AND FILTERS	CODING CATEGORIES		SKP
R01	What is the religious composition of this village? (ASCERTAIN AND RECORD APPROXIMATE NUMBER/PERCENTAGE OF HOUSEHOLDS)	Religion HHs HINDU.....1 <input type="text"/> <input type="text"/> MUSLIM.....2 <input type="text"/> <input type="text"/> CHRISTIAN.....3 <input type="text"/> <input type="text"/> BUDDHIST.....4 <input type="text"/> <input type="text"/> SIKH.....5 <input type="text"/> <input type="text"/> JAIN.....6 <input type="text"/> <input type="text"/> OTHER_____7 <input type="text"/> <input type="text"/>		

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

R02	<p>What is the caste/ tribal composition of this village?</p> <p>(ASCERTAIN AND RECORD APPROXIMATE PERCENTAGE OF HOUSEHOLDS)</p> <p>(CATEGORY – 1 GENERAL, 2 SCHEDULED CASTE, 3 SCHEDULED TRIBE, 4 OTHER BACKWARD CLASS, 5 NOMADIC TRIBE, 6 DENOTIFIED TRIBE)</p>	<table border="1"> <thead> <tr> <th><u>Caste/Tribe</u></th><th><u>CATG.</u></th><th colspan="2"><u>Code</u></th><th colspan="2"><u>HHs</u></th></tr> </thead> <tbody> <tr> <td>1 _____</td><td>_____</td><td></td><td></td><td></td><td></td></tr> <tr> <td>2 _____</td><td>_____</td><td></td><td></td><td></td><td></td></tr> <tr> <td>3 _____</td><td>_____</td><td></td><td></td><td></td><td></td></tr> <tr> <td>4 _____</td><td>_____</td><td></td><td></td><td></td><td></td></tr> <tr> <td>5 _____</td><td>_____</td><td></td><td></td><td></td><td></td></tr> <tr> <td>6 ALL OTHERS.....</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	<u>Caste/Tribe</u>	<u>CATG.</u>	<u>Code</u>		<u>HHs</u>		1 _____	_____					2 _____	_____					3 _____	_____					4 _____	_____					5 _____	_____					6 ALL OTHERS.....					
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R03	<p>Recreation/Common facilities available in the village such as playground, Samaaj Mandir, gymnasium (vyayamshala), conference hall etc.</p> <p>(ASK ALL SOURCES)</p>	<p>PLAYGROUND.....A</p> <p>SAMAAJ MANDIR.....B</p> <p>GYMNASIUM (VYAYAMSHALA).....C</p> <p>COMMUNITY HALL.....D</p> <p>LIBRARY.....E</p> <p>CREMATION/BURIAL PLACE.....F</p> <p>OTHER _____G</p>																																										
R04	<p>Which are the nearest towns to which people of your village often go for buying household goods and for services including medical services?</p> <p>How far they are from your village (km)?</p> <p>How many trips public/state transport buses MAKE in a day to these towns from or through your village?</p>	<table border="1"> <thead> <tr> <th></th><th><u>Town</u></th><th><u>Distance</u></th><th><u>Trips</u></th></tr> </thead> <tbody> <tr> <td>1 _____</td><td></td><td></td><td></td></tr> <tr> <td>2 _____</td><td></td><td></td><td></td></tr> <tr> <td>3 _____</td><td></td><td></td><td></td></tr> </tbody> </table>		<u>Town</u>	<u>Distance</u>	<u>Trips</u>	1 _____				2 _____				3 _____																													
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R05	<p>What other common transport facilities people often use to go to the (se) town(s)?</p> <p>(ASK ALL SOURCES)</p>	<p>PRIVATE BUSES/MINI-BUSES.....A</p> <p>MAXI CABS/JEEP.....B</p> <p>SHARE AUTO.....C</p> <p>TAXI/AUTO.....D</p> <p>BICYCLE.....E</p> <p>MOTOR CYCLE.....F</p> <p>BULLOCK/HORSE CART.....G</p> <p>OTHER.....H</p>																																										

S: Physical, Educational and Health facilities

Qn.	Items	Distance to the nearest item	SKIP																																															
	DISTANCE CODES: 00=Within village/<1 km, 01 to 94 kms: (KMS As It Is), 95=95+ kms, 98=Don't know, 99 Not applicable/none nearby																																																	
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Baseline Survey Report Phase II: Haryana, Punjab & Himachal Pradesh

S04	Nearest Health/Medical Facilities		
	<u>FACILITIES</u>	<u>CODE</u>	<u>DISTANCE</u> <u>VILLAGE/ TOWN NAME</u>
	HEALTH SUB-CENTRE.....1	<input type="text"/>	<input type="text"/>
	PRIMARY HEALTH CENTRE...2	<input type="text"/>	<input type="text"/>
	CHC/GOVT GEN HOSPITAL...3	<input type="text"/>	<input type="text"/>
	PVT CLINIC (RMP+).....4	<input type="text"/>	<input type="text"/>
	PVT CLINIC (MBBS/BAMS+) .5	<input type="text"/>	<input type="text"/>
	PRIVATE HOSPITAL.....6	<input type="text"/>	<input type="text"/>
	Ayush HOSPITAL.....7	<input type="text"/>	<input type="text"/>
	VETERINARY CLINIC.....8	<input type="text"/>	<input type="text"/>
	MEDICAL SHOP/CHEMIST....9	<input type="text"/>	<input type="text"/>
	ASHA WORKER.....10	<input type="text"/>	<input type="text"/>
	DAI (TRAINED/UNTRAINED) .11	<input type="text"/>	<input type="text"/>
S05	Does any mobile medical team visit this village?	YES.....1 NO.....2 → S09	
S06	How often does the team visit this village?	DAILY.....1 FEW DAYS A WEEK.....2 WEEKLY.....3 FORTNIGHTLY/LESS FRQNTLY.....4	
S07	By whom is the Mobile Medical Van service provided? (PROVIDE DETAILS OF THE AGENCY)	BY PHC/CHC.....1 BY MISSIONARIES.....2 BY COMPANY.....3 BY OTHERS.....4	
S08	What services are provided by Mobile Medical Vans? MCH – Mother Child Healthcare	MINOR AILMENT TREATMENT.....A CHRONIC DISEASES TREATMENT....B MCH SERVICES.....C BLOOD/URINE TESTS.....D SCANING RELATED TESTS.....E BP/DIABETIC RELATED TESTS.....F HIV/STI RELATED SERVICES.....G OTHER.....H	
S09	Number of Anganwadi centres in the village	ANGANWADI CENTRES..... <input type="text"/>	
S10	Number of self-help groups (SHGs) in the village for women, men, mixed, production/business activity-based	SHGS' FOR WOMEN.....1 <input type="text"/> SHGS' FOR MEN.....2 <input type="text"/> SHGS' MIXED.....3 <input type="text"/>	

T: Social Organizations, Government, NGO Functionaries; MGNREGS and other schemes

T01: Details of social/community organizations such as SHGs, Women clubs, youth clubs, farmers clubs within and outside your village that serve the village.

Name of Institution	Type	No. of Members	Active or not?	Activities and beneficiaries in the last one year (Record all activities and number of beneficiaries by activity)	
				Activities	Number of beneficiaries
(1)	(2)	(3)	(4)	(5)	(6)

Col (2) Organisation type: **01** Peoples Organisations (e.g. Water and Sanitation Committee), **02** Youth Club/Group, **03** SHG, **04** Mahila Mandal, **05** Bhajan Mandali

Col (4) **01** Yes, **02** No, **03** Don't know

Col (5) Activities: **01** Mid-Day Meal food preparation, , **02** Awareness creation, **03** Literacy/Education providing, **04** Health care activities, **05** Developmental activities, **06** Rehabilitation/Disaster control activities, **07** Giving early warning system, **08** Working on environment issues, **10** Working on Policies/advocacy **11** Others.

Col (6) Beneficiaries: Record number of beneficiaries by activity.

T02: Which Government functionaries and NGO workers visit your village?How often?

Sector	Sr. No.	Who visited (designation)	Frequency of visit
(1)	(2)	(3)	(4)
1. Agriculture department (e.g. Agriculture extension officer, patwari)	1		
	2		
	3		
2. Rural development (Gram sevak, Collector, BDOs, CDOs, DM, Panchayat officials)	1		
	2		
	3		
3. Health and social welfare (e.g. Doctors, ANM, ASHA Health Inspector, Anganwadi Worker/ Anganwadi Sahayika, Supervisor/CDPO)	1		
	2		
	3		
4. Other government functionaries	1		
	2		
	3		
5. NGOs	1		
	2		
	3		

Baseline Survey Report Phase II: Haryana, Punjab & Himachal Pradesh

Col (3):Who visited: 01 Agriculture extn officer, 02 Patwari, 03 Gram sewak, 04 BDO, 05 Panchayat official, 06 Health worker, 07 PHC doctor, 08 ANM, 09 Health inspector, 10 Anganwadi supervisor/ CDPO, 11 Veterinary doctor, 12 ASHA, 13 Anganwadi worker, 14 NGO people, 15 Other

Col (4):Frequency of visit: 1 Daily, 2 Few days a week, 3 Weekly, 4 Occasionally, 5 Rarely, 6 Other

T03:MGNREGS or NGOs implemented employment and income generation schemes in this village in the past 12 months

Program	Implemented by whom?	No. of Job Cards (If MGNREGA)	No. of beneficiaries		Minimum Wage (As per Panchayat)	Challenges in Implementation
			Males	Females		
(1)	(2)	(3)	(4)	(5)	(6)	(7)

Column 1: 1 IAY, 2 NREGA, 3 SJGSY, 4 NGY, 5 JGSY, 6 Others.

Column 2: 1 Govt., 2 CSR, 3 NGO, 4 Other

U: Health, Sanitation and Education Institutions

U01: Health Institutions (Hospitals/Clinics) in and around the village

Name and address of the institution	Type	Distance	Services available	Cost of services	Utilization by villages	Reasons for non-utilization of services
(1)	(2)	(3)	(4)	(5)	(6)	(7)

Col (2) Type: 1 PHC, 2 Govt. hospital, 3 Private hospital, 4 CSR hospital, 5 Private clinics, 6 Other

Col (3) Distance: Distance in completed km, 00 if <1 km or within the village

Col (4) Services available: 1 Minor Ailment Treatment, 2 Chronic Diseases Treatment, 3 MCH Services, 4 Blood/Urine Tests, 5 Scanning Related Tests, 6 BP/Diabetic Related Tests, 7 HIV/STI Related Services, 8 Other

Col(5)Cost of services: 1 Free, 2 Free but tips paid, 3 Subsidised, 4 Reasonable charges, 5 Very high charges

Col (6): Utilization by Villages: 1 Most people go, 2 Many people go, 3 Few go, 4 Rich/affordable people go, 5 Rarely people go

Col (7) Reasons for Non-Utilization: 1 No Facility Nearby, 2 Timing not Convenient, 3 Health Personnel often absent, 4 Waiting time too long, 5 Poor Quality of Services, 6 Unaffordable, 7 Other

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

U02: Community Toilet Facility available in the village (RECORD ONLY ONES IN USE)

Sr. No.	Location (Record nearest landmark)	Type of toilet	No. of pits/ toilets	Provided by	Maintained by	Water facility	Payments	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

Col (3) Type of toilet: 1 Pit, 2 Flush, 3 Other, 4 None

Col (5) Provided by: 1 Panchayat, 2 NGO, 3 CSR, 4 Other

Col (6) Maintained by: 1 Panchayat, 2 Local people, 3 NGO, 4 Other, 5 None

Col (7) Water facility: 1 Overhead Tank, 2 Well, 3 Bore well, 4 Storage Tank, 5 Other, 6 None

Col (8) Payments: 1 By Panchayat, 2 By User, 3 Through CSR, 4 None

Col (9) Remarks: Record sanitation & infrastructural condition of the toilet as per interviewer's observation

U03: Educational Institution in and around the villages (Up to Higher Secondary Education)

Name of Institution	Run by	Standard (from-to)	Medium of instruction	Transport facility by institution	Number of students	Mid-day meals served	Cost of education
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Col (2) Run By: 1 Government, 2 Private Aided, 3 Private Unaided, 4 Missionary/Trust, 5 CSR, 6 Other

Col (4) Medium of Instruction: 1 Hindi, 2 English, 3 Regional Languages

Col (5) Transport Facility by Institution: 1 Bus, 2 Auto Rickshaws, 3 Cycle Rickshaws, 4 Other, 5 None

Col (7) MDM Served: 1 Yes, 2 No

Col (8) Cost of education: 1 Free, 2 Subsidised, 3 Reasonable charges, 4 Very high charges

V: Schemes and Facilities for Special Groups and Overall Developmental Activities

V01: Collect List and Record Details of Differently-abled Persons

Vocational skills need to be assessed from the individual or dependents.

Sr. No.	Name	Parents name	Sex (M=1, F=2)	Age (As it is)	Marital status	Education	Occupation	Type of disability	Vocational skill	Skill interested in
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

Col (6) Marital Status: 1 Unmarried, 2 Married, 3 Widowed, 4 Divorced, 5 Separated/ Deserted, 6 Other

Col (7) Education (completed): 00 Illiterate, 01 Literate without schooling, 01-05 Standard (if literate only), 06-10 Standard, 11-12 Higher secondary, 13-15 BA/BSc/B.Com Degree course, 16-17 MA/MSc/M.Com Degree course, 18 M.Phil doing/completed, 19 PhD doing/completed, 21-29 Years of engineering/technical/management degree course, 31-39 Years of Medical/health degree course, 41-49 Years of Post-SSLC certificate/diploma/vocational course (ITI, polytechnic, VHSC's and other courses) 51-59 Years of Pre-SSLC certificate/diploma/vocational course

Col (08): Occupation: 00 None, 01 Farming, 02 Agriculture labour, 03 Non-agriculture labour, 04 Salaried (scale based), 05 Salaried (local/consolidated), 06 Artisan/craftsman/household industry, 07 Contractor/broker, 08 Petty business/trade, 09 Livestock rearing, 10 Local services (including traditional services), 19 Other (specify)

Col (9): Type of Disability: 1 Physical Disability, 2 Mentally Challenged, 3 Visual Impairment, 4 Hearing Impairment, 5 Other

Col (10 & 11): Type of skill:

Modern: 11 Computer/TV/Mobile/Electronic goods sale/service, 12 Home appliances sale/service, 13 DTP Centre/Xerox/Bookbinding/Screen-printing and related work, 14 Catering/bakery/hotel-related, 15 Tuition/Training-related, 19 Other modern skills,

Household Industry: 21 Tailoring/embroidery, 22 Weaving/dying/spinning/Textile-related, 23 Toy/Decoration-making, 24 Beedi/Agarbathi/Soap/Home use items making, 25 Basket/Carpet/Home utilities making, 26 Papad/Sweet/Eatable making, 29 Other household industry related skills,

Agricultural-related: 31 Thresher/Harvester/Tractor operation, 32 Horticulture/Sericulture training, 33 Progressive farming techniques (including vermiculture and related skills), 34 Insecticide spraying/related operation, 35 Food processing, 39 Other agricultural skills,

Service-oriented: 41 Driving vehicles, 42 Photography/Photo studio, 43 Healthcare (nursing, midwifery and related work), 44 Beautician services, 49 Other services,

Small Scale Industry: 51 Motor mechanic (repair and related work), 52 Welding/Electrical repair work, 53 Jewellery or bead making, 54 Construction related work, 59 Other small scale industry skills,

Traditional skill: 61 Cobbling, 62 Leather/related work, 63 Carpentry, 64 Masonry, 65 Pottery, 66 Stone-carving, 67 Wood-carving, 68 Metal work (ironsmith and related skill), 69 Other Traditional skills.

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V02: Collect List and Record Details of Beneficiaries under Different Social Security Schemes

Sr. No.	Name	Father's/ Husband's name	Sex (M=1, F=2)	Age	Marital status	Education	Occupation	Type of benefit	Amount/ month (As It is)	Problems
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

Col (6) Marital Status: 1 Unmarried, 2 Married, 3 Widowed, 4 Divorced, 5 Separated/ Deserted, 6 Other

Col (9) Type of Benefits: 1 Old Age Pension Scheme, 2 Widow Pension Scheme, 3 Disability Pension Scheme, 4 Other

Col (11) Problems: 00 Have no problems, 1 Do not get all benefits, 2 Irregular, 3 Do not get any benefit, 4 Other

V03: Details of development activities by non-Governmental organizations (NGOs including under CSR) in the past 3 years.

Sr. No.	Nature of activity	Agency provided the benefit	Year of activity (As it is)	Approx. cost (As it is)	No. of beneficiaries (if applicable)	Maintenance By	Functional or not?
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Col (2) Nature of Activity: 1 approach road, 2 streetlight, 3 hand pumps, 4 tanker water supply, 5 watersheds, 6 renovation of buildings, 7 supply of equipment, 8 medical facilities (clinic, hospital, MMU), 9 Other

Col (3) Agency Provided the Benefit: 1 State Govt., 2 Central Govt., 3 CSR, 4 Panchayat, 5 Missionary/ Trust, 6 Other

Col (7) Maintenance by: 1 State Govt., 2 Central Govt., 3 CSR, 4 Panchayat, 5 Missionary/ Trust, 6 Other

Col (8) Functional or not?: 1 Yes, 2 No, 3 Need urgent Maintenance

W: Major Problems of the Village

W: Major Problems (Could Be Related To Health, Nutrition, Sanitation, Education, Livelihood, Disaster, Etc.) That Require Attention According To Respondents

Household Questionnaire

(As this questionnaire requires input from male and female members of household, it should be administered to head of household in the presence of other responsible adult male and female members.)

IDENTIFICATION PARTICULARS	
Before Starting Interview	
Name of District _____	Code: _____
Name of Taluka _____	Code: _____
Name of Block _____	Code: _____
Gram Panchayat _____	Code: _____
Name of the village _____	Code: _____
Date of Interview (DD/MM/YY): ____/____/____	
Time of starting Interview (HH.MM): _____	_____ . _____ AM/PM
After Ending Interview	
Time of ending interview (HH.MM): _____	_____ . _____ AM/PM
Names of Respondents 1: _____	MID: _____
2: _____	MID: _____
3: _____	MID: _____
Name of Interviewer: _____	Code: _____
After Checking/Editing Questionnaire	
Name of Supervisor: _____	Code: _____
Name of Editor: _____	Code: _____

A: Household, Water and Sanitation background

Qn.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
A01	What is your religion?	HINDU.....1 MUSLIM.....2 CHRISTIAN.....3 SIKH.....4 BUDHHIST.....5 JAIN.....6 OTHER.....7 NO RELIGION.....8	
A02	What is your caste or tribe?	CASTE/TRIBE _____ <input type="text"/> NO CASTE/TRIBE SYSTEM.....97	
A03	Do you come under scheduled caste, scheduled tribe, nomadic tribe, or other backward class? Which one?	SCHEDULED CASTE.....1 SCHEDULED TRIBE.....2 NOMADIC TRIBE.....3 DENOTIFIED TRIBE.....4 OTHER BACKWARD CLASS (OBC).....5 GENERAL.....6 DON'T KNOW.....7	
A04	TYPE OF HOUSE (RECORD AS PER GUIDELINES BASED ON TYPE OF WALL, ROOF AND FLOOR)	RCC1 PUCCA2 SEMI-PUCCA3 KUCHCHA4 HUT5 TENT (MAKESHIFT)6	
A05	Is the house your own, rented, rent-free, sanctioned/provided under some scheme? (READ OUT ALL THE OPTIONS TO RESPONDENT & PROBE)	CONST/PURCHASED/FAMILY (OWN)1 RENTED.....2 RENT-FREE (EMPLOYER'S)3 RENT-FREE (RELATIVE'S)4 LAND FREE & CONSTRUCTION OWN.....5 CONST/ALLOTTED WITH SUBSIDY.....6 ALLOTTED UNDER SCHEME.....7 OTHER.....8	<div> <div>A07</div> <div>A08</div> </div>
A06	Allotted under which scheme?	INDIRA AWAS YOJNA.....1 GHARKUL YOJNA.....2 BY CONCERNED PSE UNDER REHAB.....3 OTHER.....4	
A07	Do you have registered papers (patta) of this land?	YES.....1 NO.....2	
A08	HOUSE ELECTRIFIED?	YES.....1 NO.....2	
A09	What type of toilet facility do you have?	FLUSH TOILET (OWN).....1 PIT TOILET (OWN).....2 FLUSH TOILET (COMMUNITY).....3 PIT TOILET (COMMUNITY).....4 OTHER.....5 NONE.....6	<div> <div>A11</div> </div>

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

A10	If own, how was the toilet constructed?	FULLY OWNER EXPENSE1 SHARED BY HOUSEHOLDS.....2 WITH SUBSIDY.....3 FULLY AT GOVT/NGO EXPENSE.....4 OTHER5	} → A12																								
A11	Would you like to have a (flush) toilet for your household? (ASK FOR THOSE HAVING "PIT TOILET (OWN)" ALSO)	NOT INTERESTED.....1 YES, IF PROVIDED FREE.....2 YES, IF PROVIDED SUBSIDY (MATERIAL/CASH)3 YES, OTHER4																									
A12	Is there sullage nuisance surrounding your house? What is the nature of sullage nuisance? (INTERVIEWER: MAKE AN INDEPENDENT ASSESSMENT AND RECORD) (ASK ALL THE OPTIONS & MULTIPLE RESPONSE POSSIBLE)	<table border="0"> <thead> <tr> <th></th> <th>RESP</th> <th>INTWR</th> </tr> </thead> <tbody> <tr> <td>NONE.....</td> <td>X</td> <td>X</td> </tr> <tr> <td>WATER STAGNATION.....</td> <td>A</td> <td>A</td> </tr> <tr> <td>DRAINAGE/SEWAGE.....</td> <td>B</td> <td>B</td> </tr> <tr> <td>CATTLE BASED WASTE.....</td> <td>C</td> <td>C</td> </tr> <tr> <td>OPEN AIR DEFECATION.....</td> <td>D</td> <td>D</td> </tr> <tr> <td>WASTE DUMPING.....</td> <td>E</td> <td>E</td> </tr> <tr> <td>OTHER.....</td> <td>F</td> <td>F</td> </tr> </tbody> </table>		RESP	INTWR	NONE.....	X	X	WATER STAGNATION.....	A	A	DRAINAGE/SEWAGE.....	B	B	CATTLE BASED WASTE.....	C	C	OPEN AIR DEFECATION.....	D	D	WASTE DUMPING.....	E	E	OTHER.....	F	F	
	RESP	INTWR																									
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CATTLE BASED WASTE.....	C	C																									
OPEN AIR DEFECATION.....	D	D																									
WASTE DUMPING.....	E	E																									
OTHER.....	F	F																									
A13	From where do you fetch water for your household? (ASK FOR ALL SOURCES/ MULTIPLE RESPONSE POSSIBLE) FOR SELECTED SOURCES, RECORD DISTANCE IN BOXES AS PER CODES: 1 WITHIN HOUSE 2 JUST OUTSIDE, 3 WITHIN 1/2 KM, 4 WITHIN 1 KM, 5 MORE THAN 1 KM	TAP (BY OWN).....A OWN TAP BY GOVT/PANCHAYAT.....B OWN HANDPUMP.....C OWN OPEN WELL.....D NEIGHBOUR'S TAP.....E COMMUNITY TAP.....F COMMUNITY HANDPUMP.....G COMMUNITY OPEN WELL.....H OTHER.....I	<table border="1"> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> <tr><td></td></tr> </table>																								
A14	What types of fuel does your household use for cooking? (ASK FOR ALL SOURCES/ MULTIPLE RESPONSE POSSIBLE)	GRASS/CROP RESIDUE/WOOD.....A COWDUNG.....B COAL/CHARCOALC KEROSENE.....D BIOGAS.....E SOLAR ENERGY.....F LPG/NATURAL GAS.....G ELECTRICITY.....H OTHER.....I																									

B: Household composition

B01	In total how many members are there in your household including those staying away for studying, working, delivery and other purposes?	NUMBER OF MEMBERS..... <table border="1"><tr><td></td><td></td></tr></table>		

Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

B02: Please give following details for all members of your household, starting from the head.

Sl.No. (MID)	Name of Member	Relation to Head	Residential Status	Sex (M=1) F=2)	Age Completed	Marital Status (10+)	Education (7+)	Studying? (Y=1,N=2) (3-24)	Reasons for dropout/no schooling (7-18)	Occupation	
										Primary	Secondary
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
01		01									
02											
03											
04											
05											
06											
07											
08											
09											
10											
11											
12											

Col (3) Relation to Head:01 Head, 02 Spouse, 03 Son/Daughter, 04 Son-in-law/Daughter-in-law, 05 Grandchild, 06 Father/mother, 07 Father-in-law/Mother-in-law, 08 Brother/Sister, 09 Brother-in-law/Sister-in-law, 10 Uncle/Aunt, 11 Niece/Nephew, 12 Grandfather/Grandmother, 13 Other relative, 14 Servant/Employee/Other (specify)

Col (4) Residential status:1 Currently residing, 2 Studying elsewhere, 3 Working elsewhere, 4 Staying elsewhere but not studying or working, 5 Other (specify).

Col (5) Sex:1 Male, 2 Female. **Col (6) Age:** Record age in completed years, 00 if not completed one year, 96 if age 96 or above.

Col (7) Marital Status:1 Unmarried, 2 Married, 3 Widowed, 4 Divorced, 5 Separated/ Deserted, 6 Other (specify)

Col (8) Education (completed):00 Illiterate, 01 Literate without schooling, 01-12 Write standard as it is, 13 Bachelors 1st Year, 14 Bachelors 2nd Year, 15 Bachelors 3rd Year/ Completed Graduation, 16 Masters 1st year, 17 Masters 2nd year/ Completed Post-graduation, 18 M.Phil doing/completed, 19 PhD doing/completed, 21-29 Years of engineering/technical/management degree course, 31-39 Years of Medical/health degree course, 41-49 Years of Post-SSLC certificate/diploma/vocational course (ITI, polytechnic, VHSC's and other courses) 51-59 Years of Pre-SSLC certificate/diploma/vocational course, 60 Other (specify)

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Col (10): (MULTIPLE RESPONSE POSSIBLE) Reasons for dropout/Not gone to school (if code 2 in Col. 9):1 To work and support household, 2 Required to attend domestic chores, 3 Education/higher education not considered important, 4 Too poor in studies/failed/irregular to school, 5 School too far/sending girls not safe, 6 Poor quality of teaching/teachers not available or rude, 7 Too high fees/expenses, 8 Frequent shifting of residence, 9 Physical/mental disability/illness, 10 Quit education due to early marriage 11 Other (specify)

Col (11, 12): Activity:00 Housewife, 01 Farming, 02 Agriculture labour, 03 Non-agriculture labour, 04 Salaried (scale based), 05 Salaried (local/consolidated), 06 Artisan/craftsman/household industry, 07 Contractor/broker, 08 Petty business/trade, 09 Livestock rearing, 10 Local services (including traditional services), 19 Other (specify) 97 None.

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B03: CHECK B02 AND LIST ALL PERSONS STUDYING (CODE 1 IN COLUMN 9) AND THEN ASK DETAILS

MID	Name of Student	Standard studying	Type of Institution	Distance to institution from home	Mode of travel	Frequency of mid-day meal (ASK UPTO STANDARD 8TH)	Benefits received in one year (RECORD UP TO 5 BENEFITS)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Col (1) & (2) MID & Name of Student: RECORD AS PER TABLE B02

Col (3) Standard studying: Codes as in Col (8) of Table B02, **00** Pre-school education.

Col (4) Type of Institution: **1** Govt, **2** Private-aided, **3** Private-unaided, **4** Other (specify)

Col (5) Distance to institution from home: Distance in completed km as it is, **00** if less than 1 km or within the village.

Col (6) Mode of travel: **0** Walk, **1** Bicycle, **2** Scooter/Bike/etc, **3** Auto/Taxi/Cycle Rickshaw, **4** Bus, **5** Train, **6** Other (specify)

Col (7) Frequency of mid-day meal: **0** No, **1** Once a week, **2** Few days a week **3** All the days

Col (8) Benefits received: **0** None **1** Food supplements/ration, **2** Scholarship **3** Fee concession, **4** Uniforms, **5** Books & stationery, **6** Bus/train pass, **7** Health facilities, **8**. Bicycle **9** Other (specify).

B04	Did you or any of your household members receive any vocational skill training in the last 3 years? (READ THE LIST OF VOCATIONAL SKILLS)	YES.....1 NO.....2	C01
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Baseline Survey Report Phase II: **Haryana, Punjab & Himachal Pradesh**

B05: LIST ALL THE PERSONS WHO RECEIVED SKILL TRAINING AND ASK DETAILS (IF RECEIVED MORE THAN ONE TRAININGS, CONSIDER THE LATEST ONE COMPLETED)

MID	Name of person	Type of Skill	Agency provided training	Duration of training (As it is)	Month and year of training (As it is)	Engaged in this activity for income generation	If not engaged, why?
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Col (1) & (2) MID & Name: RECORD AS PER TABLE B02

Col (3) Type of skill: Modern: **11** Computer/TV/Mobile/Electronic goods sale/service, **12** Home appliances sale/service, **13** DTP Centre/Xerox/Bookbinding/Screen-printing and related work, **14** Catering/bakery/hotel-related, **15** Tuition/Training-related, **19** Other modern skills (specify),

Household Industry: **21** Tailoring/embroidery, **22** Weaving/dying/spinning/Textile-related, **23** Toy/Decoration-making, **24** Beedi/Agarbathi/Soap/Home use items making, **25** Basket/Carpet/Home utilities making, **26** Papad/Sweet/Eatable making, **29** Other household industry related skills (specify),

Agricultural-related: **31** Thresher/Harvester/Tractor operation, **32** Horticulture/Sericulture training, **33** Progressive farming techniques (including vermiculture and related skills), **34** Insecticide spraying/related operation, **35** Food processing, **39** Other agricultural skills (specify),

Service-oriented: **41** Driving vehicles, **42** Photography/Photo studio, **43** Healthcare (nursing, midwifery and related work), **44** Beautician services, **49** Other services (specify),

Small Scale Industry: **51** Motor mechanic (repair and related work), **52** Welding/Electrical repair work, **53** Jewelry or bead making, **54** Construction related work, **59** Other small scale industry skills (specify),

Traditional skill: **61** Cobbling, **62** Leather/related work, **63** Carpentry, **64** Masonry, **65** Pottery, **66** Stone-carving, **67** Wood-carving, **68** Metal work (ironsmith and related skill), **69** Other Traditional skills (specify).

Col (4) Agency provided training: **1** NGO, **2** Government, **3** Charity organization, **4** CSR/ By Company(specify name) **5** Other (specify)

Col (7) Engaged in this activity: **1** Wage employed, **2** Self-employed, **3** Both, **4** Pursuing course training **5** Not engaged

Col (8) If not engaged, why?: **00** Not Applicable **01** Financial (Credit) constraints, **02** Time constraints, **03** Marketing problems, **04** Labour problems, **05** Electricity problems, **06** Raw materials problems, **07** Family problems, **08** Complying rules and regulations, **09** Shifted to better income source, **10** This skilled work not in demand, **11** Married and changed work, **12** Family/Child care commitments, **19** Other (specify).

C: Health seeking behaviour

C01	If household members fall sick, where do you go or whom do you consult first?	TRADITIONAL HEALER/DAI....1 LOCAL DOCTOR/RMP.....2 CHEMIST SHOP.....3 MOBILE CLINIC.....4 SHC/ASHA/ANGANWADI.....5 PHC/CHC.....6 GOVT HOSPITAL.....7 PRIVATE CLINIC.....8 PRIVATE HOSPITAL.....9 COMPANY/AIDED HOSPITAL...10 NO TREATMENT.....11 DEPENDS ON AILMENT.....12 OTHER.....13	
C02	During the last 12 months, which are the agencies did you/your household members visit for consultation and/or treatment? (ASK FOR ALL SOURCES/ MULTIPLE RESPONSE POSSIBLE)	TRADITIONAL HEALER/DAI....A LOCAL DOCTOR/RMP.....B CHEMIST SHOP.....C MOBILE CLINIC.....D SHC/ASHA/ANGANWADI.....E PHC/CHC.....F GOVT HOSPITAL.....G PRIVATE CLINIC.....H PRIVATE HOSPITAL.....I COMPANY/AIDED HOSPITAL....J OTHER.....K NO TREATMENT.....X NOBODY FELL SICK.....Y	

Birth Details

C03	Did any woman in your household give birth to a child in the last 3 years (that is, since January 2010)?	YES.....1 NO.....2 → D01
-----	---	-----------------------------

C04: Please give the following details in respect of all the **births, including live and still births** (OCCURRED IN THE LAST 3 YEARS).

MID of Mother	Name of Mother	Name of Child	Sex of child	Date of birth	Place of birth	Mother's age at birth	Order of birth	Maternity allowance	Birth registration	If child died, age at death (0-3)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

Col (1) & (2) MID & Name: RECORD AS PER TABLE B02

Col (4) Sex of child: 1 Male, 2 Female.

Col (5): Date of birth: Exact date of birth (DD/MM/YY) or at least month and year of birth need to be recorded.

Col (6) Place of birth: 1 Government Maternity Centre/General Hospital, 2 Private Maternity Centre/Hospital, 3 PHC/CHC, 4 Health sub-centre, 5 Home by Nurse/doctor, 6 Home by birth attendant, 7 Home by other, 8 Other (specify).

Col (7): Age of mother at child birth: Age of the mother when the child was born;

Col (8): Order of birth: Order of birth to the mother, irrespective of survival status of the children. 1 first birth, 2 second birth, and so on.

Col (9): Maternity Allowance (In Rs.): Allowance given for the delivery by Government or NGOs usually to meet transport and hospital expenses, under Safe Delivery Scheme.

Col (10) Birth Registration: 1 Yes Registered, 2 No Not Registered, 3 Certificate Awaited, 4 Status Not Known, 5 Other (specify).

Col (11): If died, age at death: 0 Still Birth; Record the age at death in completed days, if the child died within 2 months of birth (xx days), in completed months if died within 2 years (xx months) and in completed years if died after 2 years (xx years).

D: Landholding and Livestock

D01	Does your household own any agricultural land including any plantation land?	YES.....1 NO.....2 → D06
D02	How much agriculture land do you own? (RECORD IN LOCAL UNITS, IF REQUIRED)	ACRES _____. _____
D03	How much land do you cultivate? (RECORD IN LOCAL UNITS, IF REQUIRED)	ACRES _____. _____
D04	How much of the land cultivated by you is irrigated (total owned, rented, encroached, etc.)? (RECORD IN LOCAL UNITS, IF REQUIRED)	Nil.....0 → D06 ACRES _____. _____

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D05	What are the sources of irrigation? NOTE: DO NOT RECORD RAIN AS A METHOD OF IRRIGATION (ASK FOR ALL SOURCES/ MULTIPLE RESPONSE POSSIBLE)	CANAL.....A POND.....B WELL.....C RIVER.....D MOTOR PUMP.....E TUBE WELL.....F BORE WELL.....G DAM.....H OTHER.....I NONE.....X																					
D06	Does your household own any livestock? (READ LIVESTOCK LIST)	YES.....1 NO.....2	→ E01																				
D07	Please give the list of livestock and numbers you possess. (RECORD 99 IF NUMBER OF LIVESTOCK 99 & ABOVE) (ASK FOR ALL SOURCES/ MULTIPLE RESPONSE POSSIBLE)	HE BUFFALO.....A SHE BUFFALO.....B COW.....C BULLOCK.....D SHEEP.....E GOAT.....F PIGGERY.....G POULTRY.....H OTHER.....I	<table border="1"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>																				

E: Public Distribution System and Outstanding Loans

E01	What type of PDS/Ration card does your household possess?	APL CARD.....1 BPL CARD.....2 ANTYODAYA/BBPL CARD.....3 APPLIED BUT NOT RECEIVED.....4 NOT APPLIED.....5 NONE.....6	→ E04
E02	Do you avail ration from PDS?	YES, REGULARLY.....1 YES, SOMETIMES.....2 NO.....3	→ E04
E03	What are the reasons for not (regularly) availing PDS ration? (ASK FOR ALL REASONS/ MULTIPLE RESPONSE POSSIBLE)	NOT INTERESTED.....A POOR QUALITY OF GRAIN.....B NO PDS SHOP/IRREGULAR.....C SHOP TOO FAR.....D HAVE APL CARD.....E NO MONEY DURING PDS SUPPLY.....F USE OWN FARM PRODUCE PARTLY.....G OTHER.....I	

Loans

E04	Does any member of your family have outstanding loan from bank, cooperatives, SHGs, money lenders, friends, relatives, and so on?	YES1 NO2	F01
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E05: Details of loans outstanding

MID	Name of borrower	Source of credit	Month & year of loan	Amount borrowed	Interest rate % per year	Assets mortgaged	Purpose of loan
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Col (1) & (2) MID & Name: RECORD AS PER TABLE B02

Col (3) Credit source: 1 Bank, 2 Money lender, 3 Trader/Employer, 4 NGO 5 Relative/Friends, 6 SHG, 7 Co-operative Society, 8 Other (specify)

Col (7) Asset mortgaged: 0 None, 1 Own land/house deed, 2 Others land/house deed, 3 Own jewels, 4 Others jewels 5 Own durable goods, 6 Others durable goods 7 Personal security, 8 Deposit 9 Other (specify)

Col (8) Purpose of Loan: 01 Farming activity; 02 Petty trade/business; 03 Medical expenses, 04 Education, 05 Marriage expenses, 06 Family function/ceremonies/festival, 07 House construction/purchase/repair, 08 Purchase of land, 09 Purchase of Jewelry, 10 Purchase of durable goods, 11 To buy animals, 12 Settle/pay another loan, 13 Family consumption, 14 Pregnancy/child birth related expenses, 15 Death related expenses, 16 Other (specify). (RECORD UP TO 3 IN ORDER OF IMPORTANCE)

F: Major problems in the village

F01: What, according to you, are the major problems faced or needs to be addressed in the village at the village level? (PROBE & ELABORATE POSSIBLE SOLUTIONS ACCORDING TO THE RESPONDENT)

1. _____
2. _____
3. _____
4. _____
5. _____