REPORT OF BASELINE SURVEY CONDUCTED IN SEVEN VILLAGES OF PANIPAT, HARYANA

INDIAN OIL CORPORATION LIMITED CSR PROJECT



Conducted by

National Corporate Social Responsibility Hub Tata Institute of Social Sciences Mumbai- 400088 2012-14

> <u>Commissioned by</u> Indian Oil Corporation Limited

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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

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- 31. PDS : Public Distribution System
- 32. APL : Above Poverty Line
- 33. BPL : Below Poverty Line
- 34. AAY : Antyodaya Anna Yojana
- 35. PWD : Person with Disabilities
- 36. DTP : Desk Top Publishing
- 37. STD : Subscriber Trunk Dialer
- 38. PCO : Public Call Office
- 39. APMC : Agricultural Produce Market Committee
- 40. ITI : Industrial Training Institute
- 41. MBBS : Bachelors of Medicine and Bachelors of Science
- 42. BAMS : Bachelor of Ayurveda, Medicine and Surgery
- 43. RO : Reverse Osmosis
- 44. SHG : Self Help Group
- 45. CCR : Concrete Cement Roads
- 46. MMV : Mobile Medical Van
- 47. IT : Information Technology
- 48. TSP : Total Suspended Particulates
- 49. PAH : Polycyclic Aromatic Hydrocarbons
- 50. CO : Carbon Monoxide

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EXECUTIVE SUMMARY

Introduction

The research study conducted in Panipat 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. Six villages in the district of Panipat and one village in district of Karnal 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 was done 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

The seven villages which come under the scope of the study in the district of Panipat (6 villages) and Karnal (1 village) are predominantly Hindu villages with majority of the population of 5 sampled villages belonging to Scheduled Caste. Findings from the study paint a deplorable picture of the villages, commanding immediate need to bring in interventions in a lot of areas that define basic living. Major portion of the population in all villages resides in temporary housing structures such as semi-pucca houses with labour work being the most common occupation. Also, almost all houses still use traditional Chullas despite availability of modern fuels. These conditions state the quality and standard of life of the villagers. Education level of the villages, too, is way below the national literacy level with girl education demanding special attention. The infrastructural needs of the villages become evident given the unavailability of schools and hospital facilities in and around the villages.

The major areas of intervention found across the surveyed villages are:

1. **Livelihood:** Given the unavailability of formal educational facilities affecting the literacy rate of the villages along with the kind of shift the economy of India is experiencing where there is a huge demand for skill based jobs, specialised skill training programs are needed at all levels to ensure employment to all individuals alike, whether educationally qualified or not.

Willingness of the villagers, men and women alike, to learn vocational skills is encouraging and would ensure success of interventions in this area as its importance is already well-known to its recipients.

2. **Education:** The three basic requirements of an educational facility to create excellent students are affordability, accessibility and quality. With the literacy level in these villages being considerably lower than the national levels, intervention in this area is of utmost importance. Girl education needs special attention as drop-out rates of girls are seen to be really high across villages.

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Infrastructural aid along with measures to promote education like provision of scholarships, career guidance cells in addition to improving quality of education through teachers training programs can be a road to elevated numbers of literacy level.

3. **Health:** Data from the survey illustrates that the villages of Panipat and Karnal do not have provision of basic health care facilities such as Primary Health Centre and Sub-Health Centres. Due to this, more than 80% of the population from almost all the villages prefer and resort to unqualified local doctors for treatment, generally called as quacks. Given the level of hygiene maintained across villages, provision of treatment facilities takes even further precedence.

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

4. **Fuel:** Almost all houses in all the surveyed villages still make use of traditional Chullas with use of age-old fuel sources such as wood/crop residue/grass and cow dung despite the penetration of LPG seen to be optimum across villages. Given this, alternate needs to be introduced in the villages which would mitigate the health concerns caused due to Chullas but are also not seen to be a financial liability for the villagers. Smokeless Chullas could prove to be an effective solution which meets all demands.

5. Electricity: Frequent and long power cuts are reported to be a common occurrence within all the villages and hence an alternative in the form of solar lamps could be introduced to alleviate the concern to a certain degree.

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 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.

¹<u>www.iocl.com</u>

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: <u>http://www.sagepub.in/upm-data/36869_muijs.pdf</u>

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.

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

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13											-
14		Output:	List of 7 villages with number of allo	of household ocation to ea			on process	s and sar	nple size		
15		<u>SINo</u>	Village	HHs	Minimum sample size	HHs in excee of 50	Addi sample size	Total sample size	Weight		
16		1	Pudakalkatti	433	50	383	31	81	1.367438		
17		2	Kyarkop	421	50	371	30	80	1.345785		
18		3	Govankoppa	192	50	142	12	62	0.800357		
19		4	Belur Goutan Nagalavi	395 48	50 48	345	28	78 48	1.297006 0.256849		
20		6	Goutan Nagalavi Benkankatti	48	48 50	177	14	48	0.256849		
22		7	T.R.Nagar	36	36	1//	14	36	0.256849		
23		,	Total	1752	334	1418	116	450	0.200040		
24		Instructio		21.02		2,110	110				
25			opy and paste the list of 7 villages a	nd number of	household	s in the inp	ut table				1
26			unshaded portion of Output table an								
27			he process until the sample size is								
28			If the columns except SINo, Village,				Weight.				
29		Note: Wei	ght is required for later use. Input 'H	<u>Hs'</u> is assum	ed to be rel	iable and c	orrect.				
RAPE	Sheet 1	1 /Sheet2	/Sheet3 / 🔶 /								
Sheet '	1/3			PageSt	yle_Sheet	t1					

Step 2

The number of households and the total number of population was acquired from the online census data, 2001 for each of the villages (Census of India, 2011 results were not available for all locations at the time of designing and conducting the said study). In case where the census data was absent for a few villages on the official website of the Census of India, the information was

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*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: Dadlana						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001						
District	Panipat	Block	Gharaunda			
Taluka	Panipat	Village	Dadlana			
		Panchayat	Dadlana			
Demographics		Sampled Households	66			
Population	8000	Number of Households	900			
Scheduled Caste	30.3%	Hindu HHs	95.5%			
Scheduled Tribe	0%	Sikh HHs	3%			
Other Backward Class	7.6%	Muslim HHs	1.5%			
General	62.1%	Other HHs	0%			
Major Castes		Major Tribes				
Rajput	Brahmin					
Balmiki						
Pasi Basic Amenities		Land Datails (in Assa)				
	70	Land Details (in Acres)	4000			
Total public/ common tap points	70	Total land	1000			
Household tap connections	700	Residential land				
Major source of water	1. Private tap	Agricultural land	975			
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land				
		Total irrigated land	975			
A N N N N		Waste Land				
Community toilet	0					
T	4. Court of the	Important Towns				
Type of House (Largest two)	1. Semi -pucca	Gharaunda (12 km)				
	2. Pucca					
Sources of Fuel in Lies (Lorgest	1 Crocol area residuel					
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 93.9%					
	2. Cow dung – 77.3%					
	2. com dung //.5/0					

Village Profile						
Village 2: Rajapur						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001						
District	Panipat	Block	Panipat			
Taluka	Panipat	Village	Rajapur			
		Panchayat	Rajapur			
Demographics		Sampled Households	65			
Population	8000	Number of Households	1150			
Scheduled Caste	87.7%	Hindu HHs	92.3%			
Scheduled Tribe	0%	Sikh HHs	7.7%			
Other Backward Class	4.6%	Muslim HHs	0%			
General	7.7%	Other HHs	0%			
Major Castes Balmiki	last	Major Tribes				
	Jaat					
Gaud Rajput						
Basic Amenities		Land Details (in Acres)				
Total public/ common tap points	70	Total land	950			
Household tap connections	70	Residential land				
Major source of water	1 Own Govt. tap	Agricultural land	900			
(Ranked in the order of usage)	2. Private tap	Total Non-irrigated land	500			
(numee in the order of usage)	2. 1110ate tap	Total irrigated land	900			
		Waste Land				
Community toilet	0	Waste Lanu				
	Ŭ	Important Towns				
Type of House (Largest two)	1. Semi -pucca	Babarpur (7 km)				
. , pe et tiouse (Luigest tito)	2. Pucca	Panipat (16 km)				
	0000					
Sources of Fuel in Use (Largest	1. Grass/ crop residue/					
two)	wood – 100%					
	2. Cow dung – 90.8%					

Village 3: Sithana						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001						
Matloda						
Sithana						
Sithana						
olds 55						
holds 600						
93.9%						
6.1%						
%						
0%						
Acres)						
1800						
1600						
ed land						
d 1600						
15						

	Village Prof	ile				
Village 4: Kachroli						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001						
District	Panipat	Block	Panipat Grameen			
Taluka	Panipat	Village	Kachroli			
		Panchayat	Kachroli			
Demographics		Sampled Households	69			
Population	4000	Number of Households	465			
Scheduled Caste	79.7%	Hindu HHs	100%			
Scheduled Tribe	0%	Sikh HHs	0%			
Other Backward Class	10.1%	Muslim HHs	0%			
General	10.2%	Other HHs	0%			
Major Castes Brahmin Balmiki	Sasi	Major Tribes				
Rajput						
Basic Amenities		Land Details (in Acres)				
Total public/ common tap points	24	Total land	1435			
Household tap connections	460	Residential land				
Major source of water	1. Own Govt. tap	Agricultural land	1400			
(Ranked in the order of usage)	2. Community tap	Total Non-irrigated land				
		Total irrigated land Waste Land	1400			
Community toilet	0	Waste Lana				
	U	Important Towns				
Type of House (Largest two)	1. Semi -pucca 2. Pucca	Panipat (7 km)				
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 97.9% 2. Cow dung – 92.8%					

	Village Profi	le				
Village 5: Bal Jattan						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001						
District	Panipat	Block	Matloda			
Taluka	Matloda	Village	Bal Jattar			
		Panchayat	Bal Jattar			
Demographics		Sampled Households	60			
Population	3000	Number of Households	500			
Scheduled Caste	18.4%	Hindu HHs	100%			
Scheduled Tribe	0%	Sikh HHs	0%			
Other Backward Class	20%	Muslim HHs	0%			
General	61.6%	Other HHs	0%			
Major Castes Dalit Jaat Brahmin	Kashyap	Major Tribes				
Basic Amenities		Land Details (in Acres)				
Total public/ common tap points	40	Total land	1500			
Household tap connections		Residential land				
Major source of water	1. Private tap	Agricultural land	1450			
(Ranked in the order of usage)	2. Community hand pump	Total Non-irrigated land				
		Total irrigated land	1450			
		Waste Land				
Community toilet	0					
		Important Towns				
Type of House (Largest two)	1. Semi -pucca	Panipat (20 km)				
	2. Pucca	Matloda (10 km)				
Sources of Fuel in Use (Largest	1. Grass/ crop residue/					
two)	wood – 95%					
	2. Cow dung – 70%					

	Village Profi	le				
Village 6: New Baholi						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001						
District	Panipat	Block	Matloda			
Taluka	Matloda	Village	New Baholi			
		Panchayat	New Baholi			
Demographics		Sampled Households	60			
Population	1800	Number of Households	335			
Scheduled Caste	65%	Hindu HHs	78.3%			
Scheduled Tribe	0%	Sikh HHs	20%			
Other Backward Class	26.7%	Muslim HHs	1.7%			
General	8.3%	Other HHs	0%			
		nasta e Tribae				
Major Castes		Major Tribes				
Balmiki	Jaat					
Lubana						
Dalit Basic Amenities		Land Datails (in Acros)				
	50	Land Details (in Acres)	450			
Total public/ common tap points	50	Total land	150			
Household tap connections		Residential land				
Major source of water	1. Private tap	Agricultural land	80			
(Ranked in the order of usage)	2. Own Govt. tap	Total Non-irrigated land				
		Total irrigated land	80			
		Waste Land				
Community toilet	0					
		Important Towns				
Type of House (Largest two)	1. Semi -pucca	Panipat (10 km)				
	2. RCC					
Courses of Fuel in Lies /Lowerst	1 Cross/ gran register /					
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 98.3%					
	2. Cow dung – 91.7%					
	2. Cow dulig = 51.7%					

	Village Profi	le						
	Village 7: Kuta	na						
Sources: Primary Baseline Data - Village Questionnaire, Census of India 2001								
District	Karnal	Block	Gharaund					
Taluka	Asandh	Village	Kutana					
		Panchayat	Kutana					
Demographics		Sampled Households	58					
Population	2500	Number of Households	500					
Scheduled Caste	8.6%	Hindu HHs	98.3%					
Scheduled Tribe	0%	Sikh HHs	1.7%					
Other Backward Class	89.7%	Muslim HHs	0%					
General	1.7%	Other HHs	0%					
Major Castes		Major Tribes						
Kashyap	Kumhar							
Balmiki	Ramdasi Sikh							
Dalit		Lond Dataila (in Assoc)						
Basic Amenities	20	Land Details (in Acres)	c - -					
Total public/ common tap points	20	Total land	675					
Household tap connections	400	Residential land	-					
Major source of water	1. Own Private tap	Agricultural land	600					
(Ranked in the order of usage)	2. Own Govt. tap	Total Non-irrigated land						
		Total irrigated land	600					
		Waste Land						
Community toilet	0							
		Important Towns						
Type of House (Largest two)	1. Semi -pucca	Gharaunda (14 km)						
	2. RCC							
Courses of Fuel in Lice /Largest	1 Cross/ grop residue/							
Sources of Fuel in Use (Largest two)	1. Grass/ crop residue/ wood – 100%							
	2. Cow dung – 100%							
	2. Cow dung 100/0							

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

This is the Final Report of the Baseline Survey for IOCL conducted in Panipat, 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 six villages of Panipat district and in one village of Karnal 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.

Table 1: DEMOGRAPHIC & HOUSING CHARACTERISTICS								
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
Religious Composition (%)	Hindu	95.5	92.3	93.9	100	100	78.3	98.3
	Muslim	1.5	0	0	0	0	1.7	0
	Sikh	3	7.7	6.1	0	0	20	1.7
Category (%)	Scheduled Caste	30.3	87.7	68.2	79.7	18.4	65	8.6
	Nomadic Tribe	0	0	1.5	0	0	0	0
	Other Backward Classes	7.6	4.6	19.7	10.1	20	26.7	89.7
	Schedule Tribe	0	0	0	0	0	0	0
	General	62.1	7.7	10.6	10.2	61.6	8.3	1.7
Major Castes	1	Rajput	Balmiki	Bazigar	Brahmin	Dalit	Balmiki	Kashyap
	2	Balmiki	Gaud	Pandit	Balmiki	Jaat	Lubana	Balmiki
	3	Pasi	Rajput	Beragi	Rajput	Brahmin	Dalit	Dalit
	4	Brahmin	Jaat	Kashyap	Sasi	Balmiki	Jaat	Kumhar
	5	Lohar	Gujar	Balmiki	Dhiman	Kashyap	Julaha	Ramdasi sikh
	6	Khati		Dhanuk	Dalit	Nayi	Prjapati	
Major Tribes	1							

4.1 DEMOGRAPHIC & HOUSING CHARACTERISTICS

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

Type of House (%)	RCC	25.8	18.4	12.1	14.5	26.6	30	15.5
	Pucca	33.3	26.2	24.2	23.2	35	25	12.1
	Semi Pucca	40.9	49.2	56.1	58	36.7	43.3	67.2
	Kuccha	0	6.2	6.1	4.3	1.7	1.7	5.2
	Tent	0	0	1.5	0	0	0	0
	Hut	0	0	0	0	0	0	0
	Owned	92.5	98.5	95.5	98.6	98.3	98.3	100
	Rented	1.5	1.5	1.5	0	0	1.7	0
House	Rent Free	0	0	1.5	0	0	0	0
Ownership (%)	Subsidized/ Allotted under scheme	6	0	1.5	1.4	1.7	0	0
Electricity (%)	0	100	84.6	90.9	98.6	98.3	98.3	93.1
	Grass / Crop Residue / wood	93.9	100	97	97.9	95	98.3	100
	Cow dung	77.3	90.8	90.9	92.8	70	91.7	100
	Coal / Charcoal	0	0	0	0	0	0	0
	Kerosene	0	3.1	0	0	0	1.7	1.7
Fuel (%)	Bio Gas	1.5	0	0	0	0	0	0
	Solar Energy	0	0	1.5	0	0	1.7	0
	LPG / Natural Gas	69.7	38.5	54.5	21.7	73.3	50	17.2
	Electricity	0	1.5	0	1.4	0	1.7	0
	Other	0	0	0	0	0	0	0

DEMOGRAPHIC AND HOUSING CHARACTERSTICS

The seven surveyed villages of the District Panipat and Karnal is in the vicinity of the Indian Oil Corporation Limited, Refinery. The population of the villages has a large difference in the numbers. The highest population is approximately 8000 in two villages Dadlana and Rajapur while 1800 (New Baholi) is the lowest population size in the surveyed villages. The average family size in all the surveyed villages is around 5 persons per family. The villages comprises of Hindu religion. A small percentage of Islam and Sikh religion are also found in the villages. The Kachroli and BalJattan villages are with 100% Hindu population followed by Kutana (98.3%) and Dadlana (95.5%). The only two villages with Muslim population are Dadlana (1.5%) and New Baholi (1.7%) among the surveyed villages. Sikh population is 20% in New Baholi following Rajapur (7.7%) and Sithana (6.1%).

In surveyed villages, it is analysed that there is no family belongs to Schedule Tribe. The major caste groups found in all the surveyed villages are Balmiki, Brahmin, Bazigar, Rajput, Dalits, Gujjar, Jaat, Kashyap, Dhiman, Kumhar, Sasi, etc. The major share of the General category is in Dadlana (62.1%) followed by BalJattan with (61.6%) and the lowest percentage is in Kutana (1.7%). In Rajapur village Balmiki is the major caste belongs to Scheduled caste (87.7%) is the highest among the surveyed villages following Kachrolli with (79.7%) and the lowest in Kutana with only (8.6%). It is also observed that Balmiki which belongs to Scheduled Caste is common in all the seven villages. The Other Backward Class is highest in Kutana (89.7%) village followed by New Baholi with 26.7%. In rest of the five villages the range of the percentage for OBC is lying between 4 to 20 per cent. A Nomadic Tribe, Dhanuk (1.5%) is also found only in Sithana.

The majority of the population in the surveyed villages has semi-pucca houses. Kutana is the village with highest number of semi-pucca houses (67.2%) followed by Kachrolli (58%) and Sithana (56.1%). The percentage of RCC households is varying in between 12 to 30 percent. New Baholi is has 30% while Sithana has 12.1% of RCC houses which is the lowest in the surveyed villages. In BalJattan, 35% of the households are pucca followed by Dadlana with (33.3%), the lowest percentage of pucca houses are reported to be in Kutana with only 12.1 per cent. There are 26.2% pucca houses in Rajapur followed by 25% in New Baholi, 24.2% in Sithana and 23.2 in Kachroli. It is clear from the table that only Dadlana does not have any

kuccha house while rest of the six villages have small portion of the population living in kuccha houses. Only 6.2% of the houses are kuccha in Rajapur which is the highest percentage and the lowest is 1.7 percent shared by two villages i.e. BalJattan and New Baholi.

The data reflects that above 90% of the houses are owned by the families living in it in all the seven villages while Dadlana, Rajapur, Sithana share equal number of percentage of households (1.5%) living on rented houses. To 6% of the population of Dadlana, houses are allotted under scheme followed by BalJattan (1.7%), Sithana (1.5%) and Kachroli (1.4%). The State Government and Central Government Schemes like Indira Awaas Yojana and MGNREGA are found to be functioning in the village.

Talking about the electrified houses, data is clearly showing that in six villages except Rajapur, above 90% of the houses have accessibility to electricity and Dadlana with the maximum number of houses i.e. 100 percent followed by Kachroli (98.6%) and BalJattan (98.3%). Rajapur is the only village which has 84.6% of the houses electrified.

Three types of fuels are used in all the villages by majority of the households which are cow dung, grass/ crop residue/ wood and LPG cylinders.

The usage of the grass/ crop residue/ wood as fuel is above 92% in all the surveyed villages with maximum 100% in Kutana and Rajapur while lowest in Dadlana (93.9%). The use of the cow dung is again maximum in Kutana (100%) followed by Kachroli (92.8%) and lowest used in BalJattan (70%). LPG which is the most efficient cooking fuel is also used in all the sampled villages with highest usage in BalJattan (73.3%) followed by Dadlana (69.7%), Sithana (54.5%), New Baholi (50%), Rajapur (38.5%), Kachroli (21.7%) and the lowest in Kutana (17.2%) only. It is observed that despite having LPG cylinders in the households, the main dependency is only on cow-dung. As there is 73.3% and 69.7% of the households in the BalJattan and Dadlana respectively have LPG cylinder but more number of households i.e. 95% and 93.9% in the respective villages use cow dung and grass/ wood as a cooking fuel. Apart from these fuels, small number of households (below 2%) are also found using electricity as a fuel for cooking in Rajapur, Kachroli and New Baholi. Kerosene is also used only in three villages namely Rajapur (3.1%) followed by Kutana (1.7%) and New Baholi (1.7%) only.

4.2 LITERACY & EDUCATIONAL STATUS

	Table 2	2: LITERAC	Y & EDUC	ATIONAL	STATUS			
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
Literacy Level (%)		68.1	58.5	66.2	62.9	76.9	64.6	59.8
Currently Studying (%)		64.9	49.4	66.9	56.6	65.4	62.9	59.8
Children	Government	51	70.6	63.4	79.6	28	62.2	72.4
studying in Type Of Institution (%)	Private Aided	48	29.4	36.6	20.4	72	37.8	27.6
	Private Un-Aided	1	0	0	0	0	0	0
Mode Of	Walk	51	70.6	51.5	85.7	41	64.4	71.1
Travel (%)	Bicycle	0	5.9	7.9	2	0	2.2	0
	Scooter / Bike	2.1	0	4	0	1	1.2	0
	Auto / Taxi / Cycle Rickshaw	2.1	5.9	18.8	0	0	2.2	0
	Train	0	0	1	0	1	2.2	0
	Bus	44.8	17.6	16.8	12.3	57	27.8	28.9
Mid - Day	No Meals	32.2	15.5	19.6	15.1	36	25.5	14.9
Meal (%)	Once a Week	0	0	0	0	0	0	0
	Few Days a Week	22.6	8.6	26.8	13.7	4	13.7	0

	All the Days	45.2	75.9	53.6	71.2	60	60.8	85.1
	To work and support household	18.2	12	9.2	21.6	26.7	0	7.1
	Required to attend domestic chores	4.5	10	4.5	2.7	13.3	5.9	7.2
	Education / Higher Education not considered important	0	0	0	2.7	0	0	0
	Too poor in studies / failed / Irregular to school	0	6	9.1	8.1	0	5.9	17.9
Reasons of	School to far / Sending girls not safe	0	10	0	8.1	6.7	5.9	10.7
Dropout (%)	Poor quality of teaching / teachers not available or rude	0	2	0	0	0	0	0
	Too high fee / expenses	4.5	0	4.5	0	0	0	0
	Frequent shifting of residence	0	0	0	0	0	0	0
	Physical / Mental disability / illness	4.5	2	0	2.7	0	5.9	0
	Quit education due to early marriage	9.2	4	0	2.7	0	0	7.1
	No response	59.1	54	72.7	51.4	53.3	76.4	50

LITERACY AND EDUCATIONAL STATUS

The literacy rate among the surveyed villages is highest in BalJattan with 76.9% followed by Dadlana (68.1%), and the lowest in Rajapur (58.5%) and in Kutana (59.8%). The findings also show that Sithana whose literacy rate is 66.2% is having the highest number of population (66.9%) currently going to educational institutes. BalJattan with highest literacy rate among seven surveyed villages is followed by Sithana in currently studying population with 65.4%. The findings clearly shows that Rajapur with the lowest literacy rate is also have the lowest currently studying population.

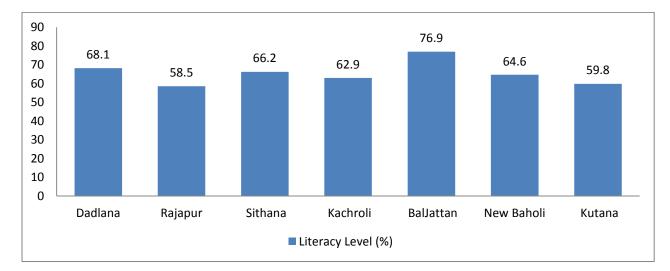


Figure 1: Literacy Rate

The data reflects that above 50% of the students go to Government schools in six villages except BalJattan (28%). In BalJattan 72% of the students go to private schools while lowest is 20.4% of Kachroli.

The students studying in government schools also receive Mid-day meal, a government run scheme. Around 85% of students responded that they receive meals all the days of a week in Kutana followed by Rajapur (75.9%), Kachroli (71.2%) and the lowest in Dadlana with 45.2% only. It is also cleared from the data that Bal Jattan and Dadlana are the only villages where 36% and 32.2% of students respectively going to government schools and receiving no meals.

The findings show that Aanganwadis and Government primary schools are present in all the seven sampled villages. Government secondary schools are also available within the villages except Kachroli and BalJattan where secondary schools are present within 5 Km of distance from

the village. For senior secondary education students of two villages namely Rajapur and Sithana have to travel more than 5 Km while the population currently studying in senior secondary schools from the villages Kachroli, Kutana, New Baholi and BalJattan have to travel less than 5 Km to reach the institutes. For Dadlana village, the Government senior secondary school is in the village. For higher education and for professional degrees in all surveyed villages, students have to travel to the district Panipat which is more than 10 km from all the sampled villages. Bus is the transportation mode used by the students to reach the nearby institutes. For Rajapur and Sithana, bicycles are used by 5.9% and 7.9% respectively. This is also used by the students to reach secondary schools which are less than 5 Km from both of the villages.

4.3 VOCATIONAL TRAINING

	Table	e 3: VOCAT	TIONAL T	RAINING				
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
Received Vocational Training (frequency)		6	5	9	3	4	1	3
	Computer / TV / Electronics	1	1	1	1	0	0	0
	Home Appliances	0	0	0	0	0	0	0
Modern (frequency)	DTP Center / 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
	Tailoring / Embroidery / Weaving / Dying / Spinning / Textile – related	4	3	6	1	4	1	3
	Toy / Decoration – Related	0	0	0	0	0	0	0
Household (frequency)	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

	Thresher / Harvester / Tractor operation	0	0	0	0	0	0	0
	Horticulture / Sericulture training	0	0	0	0	0	0	0
Agriculture (frequency)	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
	Driving Vehicles	0	0	0	0	0	0	0
Service	Photography	0	0	0	0	0	0	0
(frequency)	Health Care	0	0	0	0	0	0	0
	Beautician Services	1	1	2	1	0	0	0
	Motor Mechanic	0	0	0	0	0	0	0
Small Scale	Welding / Electrical Repair Work	0	0	0	0	0	0	0
(frequency)	Jewellery or Bead Making	0	0	0	0	0	0	0
	Construction Related Work	0	0	0	0	0	0	0
	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
Traditional	Masonry	0	0	0	0	0	0	0
(frequency)	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	NGO	4	4	6	2	3	1	2
Provided	Government	0	0	1	0	0	0	0
Training	Charity Organization/ NGO	0	0	1	1	0	0	0
(frequency)	Under CSR / By company	2	1	1	0	1	0	1
						-		
	Wage Employed	1	0	1	0	0	0	0
Engagement	Self Employed	0	1	1	0	0	0	1
(frequency)	Both	0	0	0	0	0	0	0
	Pursuing	2	0	3	2	1	0	0
	Not Engaged	3	4	4	1	3	1	2
	Financial	1	0	3	1	0	0	1
	Time Constraints	2	4	1	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	0
Reasons of	Raw Material Problem	0	0	0	0	0	0	0
Non-	Familial Problems	0	0	0	0	0	0	0
Engagement (frequency)	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	1	0	0
	Married & changed work	0	0	0	0	0	0	0
	Familial responsibilities	0	0	0	0	0	0	0
	No Response	0	0	0	0	2	1	1

VOCATIONAL TRAINING

The findings reflect that in all the sampled villages there are the people who have received vocational training from Government institutes or from NGOs. The frequency of receiving vocational training is highest in Sithana village with 9 persons followed by Dadlana (6), Rajapur (5) and BalJattan with 4 persons. New Baholi is the only village where frequency is quiet low with only one member received vocational training in tailoring/ weaving among the sampled population from NGO and the receiver has not any reason to not engaged in any work related to livelihood. Most of the people in all seven villages have received the training of tailoring/ weaving through NGO. It is noticed that the training is being imparted by a NGO which is outsourced by IOCL to look after the CSR Activities. It is also noticed that sewing machines are also provided to the trainees after successful completion of the course. However, the findings show that in only three villages; Dadlana (1), Sithana (2) and Rajapur (1) people are engaged in livelihood activities. Only in Rajapur one person is self-employed while in other two villages there are wage employees. Most of the population is not engaged in any livelihood activity and the reasons being given as; financial constraints, time constraints, work not in demand. In BalJattan two persons have not given any response for non-engagement and same is the case in New Baholi and Kutana. Financial constraint is the problem coming out from four villages namely; Sithana (3), Dadlana (1), Kachroli (1), Kutana (1) out of seven villages.

Apart from this, persons from Dadlana, Sithana, Rajapur and Kachroli also received vocational training in beautician services and mobile/ computer repairing from NGO and government institutes and not more than 2 persons have received training in these courses. It is also found that none of the member of any household across the seven surveyed villages have received vocational training that help them in looking for more employment options in small scale / big industries.

	Tabl	e 4: WATER I	RESOURC	ES, SANIT	ATION &	HYGIENE			
			Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
	Own Private Tap		59.1	27.7	30.3	20.3	55	41.7	46.6
	Own Govt. Tap		9.1	38.5	6.1	72.5	5	33.3	43.1
	Own Hand Pump		12.1	0	25.8	1.4	21.7	25	6.9
	Own Open Well		0	0	0	0	1.7	0	0
	Neighbour's Tap		0	3.1	7.6	0	3.3	3.3	0
	Community Tap		21.2	15.4	24.2	23.2	10	10	19
Water	Community Hand Pump		9.1	12.3	15.2	0	23.3	6.7	3.4
Facility (%)	Community Open Well		0	0	0	0	0	0	0
	Bore well		0	12.3	0	0	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	4.6	0	0	0	0	0
	Tanker Water		0	1.5	0	0	0	0	0
Number of	Individual		700	700	450	460	0	0	400
Taps	Public		70	70	24	24	40	50	20
				-					
Type of	Own Flush		22.7	3	13.6	1.4	15	3.3	0
Toilet (%)	Own Pit		60.6	70.8	68.2	47.8	81.7	81.7	69

4.4 WATER RESOURCES, SANITATION & HYGIENE

	Community Flush		1.5	0	0	0	0	0	0
	Community Pit		0	0	0	0	0	0	1.7
	ODS		15.2	26.2	18.2	50.8	3.3	15	29.3
Toilet	Fully Owner		98.2	83.3	77.8	82.4	55.2	82.4	55
Constructio	Shared By HH		0	6.3	0	0	0	3.9	2.5
n Expense	Subsidy		1.8	10.4	16.7	8.8	32.8	0	27.5
(%)	Govt. and NGO Expense	-	0	0	5.5	8.8	12	13.7	15
Interested in	Yes, If Free		9.8	17.5	7	27.9	3.9	6.9	13.8
a Private	Yes, If Subsidized		9.8	9.5	12.3	22.1	0	8.6	15.5
toilet Facility (%)	No Response		80.4	73	80.7	50	96.1	84.5	70.7
Community 7	Foilets		0	0	0	0	0	0	0
	None	Respondent	7.6	9.2	4.5	10.1	20	5	0
	TUNC	Observer	3	3.1	3	2.9	13.3	1.7	0
	Water Stagnation	Respondent	25.8	29.2	50	24.6	23.3	16.7	36.2
		Observer	27.3	30.8	53	13	18.3	15	24.1
Problem of	Drainage / Sewage	Respondent	54.5	29.2	56.1	44.9	26.7	31.7	34.5
Sullage	Dramage / Sewage	Observer	63.6	32.3	51.5	43.5	30	38.3	36.2
Nuisance	Cattle Waste	Respondent	19.7	41.5	18.2	30.4	35	38.3	55.2
(%)		Observer	40.9	50.8	39.4	40.6	50	63.3	72.4
	OAD (Open Air	Respondent	3	7.7	3	17.4	3.3	0	5.2
	Defecation)	Observer	3	9.2	6.1	8.7	1.7	0	3.4
	Waste Dums's -	Respondent	48.5	63.1	56.1	69.6	46.7	76.7	87.9
	Waste Dumping	Observer	72.7	81.5	74.2	75.4	63.3	90	87.9

WATER RESOURCES, SANITATION AND HYGIENE

In all the seven surveyed villages, four primary sources of water for the household chores are available. These are private own taps, government taps, community taps, and own hand pumps. The government household tap connections are highest in Kachroli with 72.5% and lowest in BalJattan where only 5% household tap connections are provided. Habitants of BalJattan have their own private taps (55%) and own private hand pumps (21.7%). In Rajapur, population is mainly dependent on government provided tap connections (38.5%) and they also have 27.7% of private tap connections. Apart from these resources Rajapur is the only village where water is also fetched from bore-well (12.3%), tube well (4.6%) and tanker water (1.5%). Data from village questionnaire also shows that in Dadlana and Rajapur approximately 700 household tap connections are provided. In two villages, New Baholi and BalJattan household connections are there but the numbers are not available with the panchayat. In rest of the three villages approximately 400 to 450 household tap connections are provided by the Panchayat.

Above 60% of the population in sampled villages have their own pit toilets. The leading villages are BalJattan and New Baholi where 81.7% of the people have pit toilets followed by Rajapur (70.8%), Kutana (69%), Sithana (68.2%) and Dadlana (60.7%) where the percentage of flush toilet (22.7%) is also the highest among the seven villages. The lowest percentage of pit toilets and flush toilets is recorded in Kachroli (47.8%) and (1.4%) respectively. Despite of being given subsidies to the marginal sections of the seven sampled villages and some of the expenses managed by NGO, still the open defecation is practiced in all the villages.

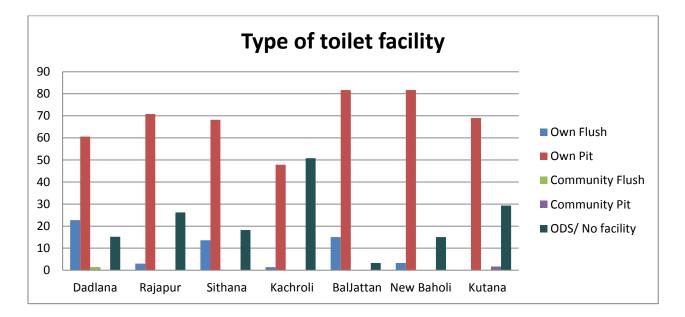


Figure 2: Type of toilet facility

The data reflects that 50.8% of the population of Kachroli still practice open defecation. The second in place is Kutana with 29.3% which is further followed by Rajapur (26.2%), Sithana (18.2%), Dadlana (15.2%), New Baholi (15%) and lowest in BalJattan with only 3.3 per cent. The two villages Rajapur and Kachroli also awarded with Nirmal Gram Puruskar.

In all the surveyed villages the problem of waste dumping is higher in Kutana 87.9% and lower in BalJattan 46.7%, the second in place is drainage or sewage problem which is highest in Sithana (56.1%) followed by Dadlana (54.5%) while lowest is analyzed in BalJattan (26.7%). Apart from this, the problems of water stagnation and cattle waste are also there in the villages.

	Table 5: HEA	LTHCARE	FACILITII	ES & BIRT	H DETAIL	S		
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
	Traditional Healer/ Dai	0	0	0	0	0	0	0
	Local Doctor/ RMP	84.8	96.9	86.5	92.8	76.7	93.3	89.7
	Chemist Shop	1.5	0	0	0	13.3	0	0
	Mobile Clinic	0	0	0	0	0	0	0
	SHC/ ASHA/ Aanganwadi	0	0	0	0	0	0	0
Primary Mode	PHC/CHC	1.5	0	1.5	0	0	0	0
of Treatment (%)	Government Hospital	0	0	1.5	0	1.7	1.7	1.7
(70)	Private Clinic	12.2	3.1	4.5	7.2	5	1.7	0
	Private Hospital	0	0	1.5	0	3.3	3.3	0
	CSR Hospital	0	0	4.5	0	0	0	0
	No Treatment	0	0	0	0	0	0	0
	Depends on Ailment	0	0	0	0	0	0	8.6
	Traditional Healer/ Dai	1.5	0	0	0	0	0	0
	Local Doctor/ RMP	93.9	96.9	90.9	95.7	86.7	93.3	91.4
Accessed in the last 12 Months	Chemist Shop	4.5	0	27.3	0	20	0	0
$\begin{array}{c} \text{Iast 12 Months} \\ (\%) \end{array}$	Mobile Clinic	0	0	0	0	0	0	0
	SHC/ ASHA/ Aanganwadi	4.5	0	0	0	0	0	0
	PHC/CHC	4.5	0	1.5	0	0	0	0

4.5 HEALTH CARE FACILITIES & BIRTH DETAILS

	Government Hospital	33.3	60	28.8	66.7	26.7	36.5	60.3
	Private Clinic	75.8	60	80.3	53.6	61.7	51.7	48.3
	Private Hospital	66.7	67.7	66.7	56.5	73.3	70	53.4
	CSR Hospital	0	0	13.6	0	5	0	10.3
	No Treatment	0	0	0	0	0	0	0
	Depends on Ailment	0	0	0	0	0	0	0
Birth in Last 3 Years (Frequency)		12	16	14	19	20	14	15
Sex of child	Male	73.3	55.6	60	45.5	63	60	62.5
(%)	Female	26.7	44.4	40	54.5	37	40	37.5
	Government Maternity Center / General Hospital	26.7	27.8	53.3	54.5	40.7	46.7	62.5
	Private Maternity Center / Hospital	26.7	11.1	20	13.6	37	33.3	25
Place of Birth	PHC / CHC	0	0	0	13.6	0	0	0
(%)	Health Sub Center	0	0	0	0	3.7	0	0
	Home By Nurse / Doctor	0	11.1	13.3	4.5	3.7	0	0
	Home By Birth Attendant	26.6	50	0	13.8	14.9	6.7	12.5
	Home By Other	20	0	13.4	0	0	13.3	0
Maternity Allowance (frequency)		0	2	0	0	1	0	7

HEALTH CARE FACILITIES AND BIRTH DETAILS

In all the seven surveyed villages the primary of mode of treatment is local doctor which is also called as Rural Medical Practitioners (RMPs) which mostly provide outpatient care and have no formal qualifications for it. As per the data, Rajapur village is leading in taking the health care services provided by RMPs with 96.9% of the population taking it as primary mode of treatment. In all the villages percentage of the population is above 75% whose primary mode of treatment is a local doctor. The lowest percentage is of BalJattan (76.7%) which take treatment from RMPs. In last 12 months the accessibility of RMPs is also above 85% in comparison to Government and private hospitals.

The findings show that the population of Kachroli (66.7%) accessed Government hospital in last 12 months which is the highest among the surveyed villages but it is also analysed that 95.7% of the population have also accessed RMPs services in last 12 months. In Sithana, Government hospital is approached by only 28.8% of population which is lowest in all the surveyed villages. The health care services of private hospitals (above 50%) and private clinics (above 48%) are also accessed by the villagers. In BalJattan, 73.3% of the people accessed private hospital services and the least accessed by the population of Kutana (53.4%). The presence of CSR hospital is also marked in 4 villages Sithana, Rajapur, BalJattan and Kutana.

The findings also show that BalJattan reported 33.3% new children are born in last three years which is followed by Kachroli (27.5%), Kutana (25.9%) and lowest in Dadlana (18.2%). It is also clear from the data that Kachroli is the only village where percentage of female children (54.5%) is higher than other six villages.

The era is when Government is promoting the institutional deliveries by appointing ASHA workers in all villages and by providing maternity allowances, still there is no village among the sampled villages where 100% of institutional deliveries have been recorded. Kutana reported to have 62.5% of the deliveries which took place in Government hospitals and 25% in private maternity hospitals and rest 12.5% in home in the presence of birth attendants. It is also reflected that Rajapur and Dadlana are the villages where institutional deliveries are low as 38.9% and 53.4% respectively took place in both Government and private maternity home and rest of the deliveries took place in home either in the presence of birth attendants or in the presence of nurses or others. Further it is also observed that the knowledge of Janani Sishu Suraksha Yojana

(JSSY) is not well known among the villagers. Only in Kutana, BalJattan and Rajapur maternity allowances under JSSY has been received by the beneficiaries.

	Table 6: LIVE	LIHOOD, LA	AND HOLI	DING & LI	VESTOCK			
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
	House wife	30.3	24.1	27.9	23.8	30	27.3	29.7
	Own Farm Activities	6.6	4.8	3.9	0.9	12	0.7	2.3
	Agricultural Labour	2.8	2.1	4.6	4.9	1.2	0.4	0
	Non – Agriculture Labour	10.6	20.8	11.8	15.4	11.5	16.2	22.2
	Salaried Employment	7.5	2.1	6.6	8.4	5.4	6.7	4.1
Primary	Petty Business	1.2	3	1.6	2.3	1.8	4.1	2.6
engagement	Contractor / Broker	1.6	0	0	0	0.3	0	0
(%)	Cattle Rearing	0.6	0	0	0.3	0.6	0	0
	Local Services (Including traditional services)	0	0	0	0.3	0	0	0
	Rent / Pension / Remittance	0	0	0	0	0	0	0
	Artisan	0	0.3	0	0.5	0.3	1.5	0.8
	None	38.8	42.8	43.6	43.2	36.9	43.1	38.3
	House wife	0	2.6	1.2	3.2	0.5	0	1.2
Secondary engagement	Own Farm Activities	1.5	0.5	0.6	1	1	0	3
	Agricultural Labour	0	0.5	0	1.5	0	0	0
(%)	Non – Agriculture Labour	0	0	0.6	1	0	0	0.6
	Factory Labour	0	0	0	0	0	0	0

4.6 LIVELIHOOD, LANDHOLDING & LIVESTOCK

	Salaried Employment	0.5	0	0	0	0	0	0
	Petty Business	0	0.5	0.6	0.5	1	0	0
	Cattle Rearing	3.1	2.1	0	1	1.5	1.9	3.7
	Collect / Sale of Forest / Mining Products	0	0	0	0	0	0	0
	Local Services (Including traditional services)	0.5	0	0	0	0	0	0.6
	Rent / Pension / Remittance	0	0	0	0	0	0	0
	Artisan	0	0.6	0	0	0	1.3	0
	None	94.4	93.2	97	91.8	96	96.8	90.9
	Total Area	1000	950	1800	1435	1500	150	675
	Irrigated	975	900	1600	1400	1450	80	600
T 1.	Non- Irrigated	0	0	0	0	0	0	0
Land in acres	Grazing	0	0	0	0	0	0	0
	Forest	0	0	0	0	0	0	0
	Wasteland	0	0	0	0	0	0	0
	Flood Proneness	0	0	0	0	0	0	0
	Alkalinity	0	0	0	0	0	0	0
Agricultural	Water Logging	0	0	0	0	0	0	0
Land Condition	Soil Erosion	0	0	0	0	0	0	0
(~0)	Drought Proneness	0	0	0	0	0	0	0
	Snowfall	0	0	0	0	0	0	0

Baseline Survey Report Phase II: Haryana, Punjab & Himachal Pradesh	
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Ownership of Agricultural Land (%)		54.5	30.8	37.9	15.9	68.3	10	31
	0-5 acres	80.5	95	76	90.9	95.2	100	94.4
Total Owned	6 -10 acres	14	5	24	9.1	2.4	0	5.6
Land in Acres	11 – 15 acres	0	0	0	0	0	0	0
(%)	16 -20 acres	0	0	0	0	0	0	0
	21 acres and above	5.5	0	0	0	2.4	0	0
	0-5 acres	80.5	95	76	90.9	95.2	100	94.4
Cultivated	6 -10 acres	14	5	24	9.1	2.4	0	5.6
Land in Acres	11 – 15 acres	0	0	0	0	0	0	0
(%)	16 -20 acres	0	0	0	0	0	0	0
	21 and above acres	5.5	0	0	0	2.4	0	0
	0-5 acres	80.5	95	76	90.9	95.2	100	94.4
	6 -10 acres	14	5	24	9.1	2.4	0	5.6
Irrigated Land	11 – 15 acres	0	0	0	0	0	0	0
in Acres (%)	16 -20 acres	0	0	0	0	0	0	0
	21 and above acres	5.5	0	0	0	2.4	0	0
	Canal	8.3	5	16	10	34.1	0	0
	Pond	0	0	0	0	0	0	0
Sources of	Well	0	0	0	0	0	0	0
Irrigation (%)	River	0	0	0	0	0	0	0
	Motor Pump	0	0	0	0	0	0	0

	Tube well	72.2	85	72	90	95.1	100	100
	Bore Well	33.3	20	28	0	12.2	0	0
	Dam	0	0	0	0	0	0	0
	None	0	0	0	0	0	0	0
Major Crops	Wheat	900	850	1400	1300	1350	80	550
and land (in	Paddy	900	850	1400	1300	1300	80	550
acres)	Cucumber	0	10	0	100	0	0	30
Ownership of Livestock (%)		59.1	56.9	54.5	39.1	80	45	72.4
	He Buffalo	15.4	10.8	13.9	7.4	22.9	3.7	11.9
	She Buffalo	89.7	73	80.6	81.5	95.8	74.1	73.8
	Cow	43.6	48.6	44.4	18.5	27.1	33.3	35.7
	Bullock	5.1	5.4	5.6	0	6.3	0	7.1
List of	Sheep	0	0	0	0	0	0	0
Livestock (%)	Goat	0	0	0	3.7	2.1	3.7	0
	Piggery	0	0	0	0	0	0	0
	Poultry	2.6	8.1	0	0	0	0	0
	Horse	2.6	0	2.8	0	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 an average 15.5% of population across all the villages engaged in non-agricultural labour work, with highest 22.2% at Kutana and lowest 10.6% in Dadlana. In BalJattan, 12% of the population followed by Dadlana with 6.6% and lowest with 0.7% population in New Baholi is engaged in own farming activities. Ranging from 2-9% of the population across the surveyed villages is also engaged in salaried employment as their primary source of livelihood. It is also noticed that a small portion of population of all the villages is also engaged in petty business. An average of 40.9% of the population across the villages is dependent on the members of their families.

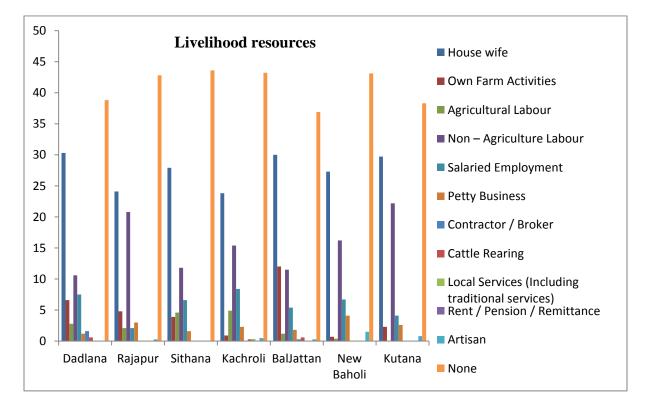


Figure 3: Primary livelihood resources

Sithana has approximately 1800 acres of land out of which 1600 acres of land is irrigated followed by BalJattan with 1500 acres out of which 1450 acres of land is irrigated and the lowest is in New Baholi where only 150 acres of land is available out of which 80 acres is irrigated. In BalJattan 68.3% of the population have ownerships of agricultural land, followed by Dadlana

(54.5%), Sithana (37.9%), Kutana (31%), Rajapur (30.8%), Kachroli (15.9%) and the lowest in New Baholi where only 10% of the population have the ownership of agricultural land.

More than 75% of the land which is owned by the villagers in all the seven villages is in between 0.1 to 5 acres while less than 25% of the land holding is in between 6 to 10 acres of the land except New Baholi where the land holding is only in between 0.1 to 5 acres. The same percentage of the land as shown in the table and discussed above is cultivated and irrigated by its owners in all the seven villages.

The main sources of the irrigation in all the surveyed villages are tube well (more than 70%) and bore well. In New Baholi and Kutana, 100% of the population use tube wells for the irrigation. It is also analysed that canal is also used for irrigation in five villages except New Baholi and Kutana.

The major crops grown in the surveyed villages are wheat and paddy, while crop of cucumber is also grown in a small portion of the land in Kachroli, Kutana and Rajapur.

Talking about livestock, in BalJattan, 80% of the population owned livestock which is followed by Kutana (72.4%) and Dadlana (59.1%). The lowest ownership of livestock (39.1%) is in Sithana. Above 70% of the population owned she buffaloes in all the seven surveyed villages. The list of livestock also includes cow, he buffalo and bullock while in some of the villages, poultry and horses are also owned by the villagers.

4.7 SOCIAL WELFARE SCHEMES

	Table 7: SOCIAL WELFARE SCHEMES											
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana				
	Total Beneficiaries	0	12	0	5	0	0	0				
	Male	0	0	0	0	0	0	0				
Indira Awaas	Female	0	0	0	0	0	0	0				
Yojana	Financial Assistance	0	0	0	0	0	0	0				
	Challenges	0	0	0	0	0	0	0				
	No. Of Job Cards	50	0	40	0	0	11	0				
	Males	25	0	25	0	0	0	0				
	Females	25	0	15	0	0	0	0				
MGNREGA	Min. Wage	191	0	191	0	0	191	0				
	Challenges	Lesser demand of work by villagers.	0	Lesser demand of work by villagers.	0	0	Lesser demand of work by villagers.	0				

SOCIAL WELFARE SCHEMES

The housing scheme of Central Government is functioning in two villages, viz. Rajapur and Kachroli where 12 and 5 beneficiaries respectively have taken the benefits of financial assistance under the name of Indira Awaas Yojana.

Also MGNREGA, a rural employment guarantee scheme of Government which ensures 100 days employment to a household along with the daily wages is also functioning only in three villages. In Dadlana 50 job cards have been issued out of which 25 are male and 25 are females. The second village is Sithana where 40 job cards have been issued out of which 25 are males and 15 are females and the third village is New Baholi where only 11 job cards have been issued so far to the households. The cardholders are engaged in doing unskilled labour work. The minimum wage is Rs. 191 per day in all the three villages. Along with it the problem of less demand of work by villagers is also reported by the Panchayat heads of these three villages which is affecting the functioning of this scheme.

4.8 SAFETY NETS & CREDIT PATTERNS

Table 8: SAFETY NETS & CREDIT PATTERNS												
		Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana				
	APL Card	83.4	30.8	71.3	17.4	83.3	51.7	79.3				
Type of PDS /	BPL Card	13.6	53.8	22.7	79.7	13.3	38.3	15.5				
Ration Card	Antyodaya / BBPL Card	0	1.5	3	0	0	0	0				
(%)	Applied But Not Received	3	7.7	1.5	0	0	3.3	0				
	Not Applied	0	6.2	1.5	2.9	3.4	6.7	5.2				
	Yes, Regularly	6.3	33.9	9.4	37.3	3.4	33.3	9.1				
Avail PDS (%)	Yes, Sometimes	6.2	30.4	10.9	44.8	6.9	7.4	7.3				
	No	87.5	35.7	79.7	17.9	89.7	59.3	83.6				
	Not Interested	1.7	2.7	1.7	0	0	0	0				
	Poor Quality of Grains	3.3	13.5	6.9	16.7	8.9	8.3	4				
	No PDS shop / Irregular	3.3	24.3	1.7	38.1	1.8	0	0				
Reasons for Not	Shop Too Far	0	0	0	0	0	0	0				
Availing PDS	Have APL Card	91.7	54.1	79.3	28.6	89.3	86.1	94				
(%)	No Money During PDS Supply	0	5.4	3.4	7.1	1.8	5.6	4				
	inadequate ration / ration not available / stock not available	0	5.4	12.1	16.7	0	0	0				
	Use Own Farm Produce Partly	0	0	0	0	0	0	0				

People with outstanding loans (%)		13.6	20	16.7	33.3	20	28.3	24.1
	Bank	33.3	15.4	63.9	4	25	5.9	6.7
	Money Lender	0	15.4	0	32	25	23.5	20
	Trader / Employer	11.1	15.4	9.1	8	16.7	0	20
Source of	NGO	0	0	0	0	0	0	0
Credit (%)	Relative / Friends	0	53.8	18	52	16.6	52.9	40
	SHG	0	0	0	0	0	0	0
	Co-operative Society	55.6	0	9	0	16.7	5.9	0
	Don't Know	0	0	0	4	0	11.8	13.3
	0 -1%	0	38.5	0	8	8.3	23.5	26.7
	2-5%	33.3	38.5	45.5	52	50	47.1	40
	6-10%	55.5	7.7	54.5	20	33.4	11.8	13.3
Interest Rate	11-15%	11.2	7.7	0	4	8.3	0	13.3
(%)	16-20%	0	7.6	0	0	0	0	0
	Above 20%	0	0	0	4	0	5.9	0
	Don't Know	0	0	0	12	0	11.7	6.7
	Own Land / House Deed	36.4	15.4	45.5	11.1	25	0	6.7
Assets Mortgaged (%)	Others Land / House Deed	0	0	0	0	0	0	0
	Own Jewels	0	0	9	7.4	0	0	6.7
	Others Jewels	0	0	0	3.7	0	0	0
	Own Durable Goods	0	0	0	3.7	0	0	0

	Others Durable Goods	0	0	0	0	0	5.9	0
	Personal Security	9.1	7.7	0	25.9	8.3	41.2	60
	None	36.4	76.9	45.5	48.2	66.7	52.9	26.6
	No response	9	0	0	0	0	0	0
	Deposit	9.1	0	0	0	0	0	0
	Farming	33.3	7.7	9.1	4	33.3	0	6.4
	Petty Trade	11.1	15.4	18.2	8	16.7	11.8	6.2
	Medical Expenses	0	7.7	9.1	44	0	23.5	25
	Education	0	0	0	0	8.4	0	0
	Marriage	11.1	23.1	36.4	20	8.3	35.3	31.4
	Family Function / Ceremonies / Festivals	0	0	0	0	0	0	0
	House Construction / Purchase / Repair	0	38.5	18.2	12	33.3	17.6	6.2
Purpose of	Purchase of Land	0	0	0	0	0	0	6.2
Loan (%)	Purchase of Jewellery	0	0	0	0	0	0	0
	Purchase of Durable Goods	0	0	0	0	0	0	6.2
	Buy Animals	22.3	0	0	0	0	0	0
	Pay Another Loan	0	7.6	0	4	0	0	0
	Family Consumption	0	0	0	4	0	11.8	6.2
	Pregnancy / Child Birth Related Expenses	0	0	0	0	0	0	6.2
	Death Related Expenses	0	0	0	0	0	0	0
	Don't Know	22.2	0	9	4	0	0	0

SAFETY NETS AND CREDIT PATTERNS

In Public Distribution System (PDS), the ration is provided on the subsidies to the people on the basis of the APL (Above Poverty Line), BPL (Below Poverty Line) and AAY (Antyodaya Anna Yojana) cards. The AAY cards are given to those who are poorest of the poor.

It is clear from the data that except Rajapur and Kachroli, all the villages have more than 50% of the households who have APL cards. The highest APL cards are issued in Dadlana (83.4%) and BalJattan (83.3%) while highest BPL cards are issued in Kachroli (79.7%) followed by Rajapur (53.8%). The two villages Rajapur (1.5%) and Sithana (3%) also have the population who has AAY cards.

In three villages Kachroli, Rajapur and New Baholi, 30-40% of the population avail PDS regularly while in the rest of the four villages the percentage of availing PDS is less than 10. The main reason for not availing PDS is having APL cards according to more than 50% of population across six villages except Kachroli. The other reasons are poor quality of grains and also in six villages except Dadlana in between 1-6% of population have no money when PDS is supplied from the respective PDS shops.

Across the surveyed seven villages, there is a small percentage of people who have taken loans and the highest is in Kachroli village where nearly 34% of the people have taken the loans followed by New Baholi (28.3%) and the lowest in Dadlana (13.6%). The main source of the loan across the seven villages is bank. Across six villages except Dadlana, loan is also taken from relatives or friends. The other sources are trade/ employer, cooperative societies and money lenders.

In Dadlana village those who have taken the loans from banks and employers are paying the interest in between 6 to 10% while those who have taken from cooperative societies are also paying maximum of 12% interest on the total amount they have borrowed and the assets mortgaged for it are either own land/ house deed or personal securities and the purpose of taking loan is for farming activities (33.3%) and to buy animals (22.3%).

In Rajapur village 38.5% of the borrowers have taken loan for house construction/ repair and 23.1% have taken loan to meet the marriage expenses and the sources are relatives/ friends (53.8%) and bank (15.4%). The maximum interest is paid between 0.1-5% and findings are also

showing that 76.9% of the borrowers have not mortgaged anything for taking loan while 15.4% have mortgaged their own land. There are 7.6% of the borrowers who have taken loan to pay back the other loans.

In Sithana village 63.9% of the borrowers have taken loan from banks by mortgaging own land/ house deeds (45.5%) and paying the interest in between 6 to 10% on the total amount which is taken from the bank. The reason for taking the loan is marriage (36.4%), house construction (18.2%) and petty business (18.2%).

In Kachroli, 33.3% of the population has taken the loans out of which 52% of the borrowers have taken from relatives/ friends and 32% from money lenders while only 4% have taken from bank. The mortgaged assets are personal securities (25.9%) and 48.2% have mortgaged nothing to take the loan. Those who have taken loan from money lenders are also paying more than 20% interest. The main purpose of taking loan is to meet the medical expenses.

In BalJattan, 25% of the borrowers have taken loan from banks and same percentage has taken the loan from Money lenders. Those who have taken loan from bank are paying the interest in between 6 to 10% and those who have taken loan from money lender are paying 11 to 15% interest. The loan is taken for house construction (33.3%) and for farming (33.3%). BalJattan is the only village where loan is also taken for educational purposes though the percentage is low than ten percent.

In New Baholi, loan is mainly taken to meet the marriage expenses (35.3%) and to meet medical expenses (23.5%) while 11.8% have also taken loan for family consumption. In this village also the main source of credit are relatives/ friends (52.9%) and money lenders (23.5%) while from bank only 5.9% have taken loans. The findings show that 47.1% of the borrowers pay the interest rate of 2-5% and 5.9% are also paying interest rate more than 20%. The data also shows that 52.9% of the borrowers have not mortgaged anything to take the loan while 41.2% of the borrowers have mortgaged their personal securities for the loan. Those who have mortgaged assets have taken loan either from banks or from money lenders.

In Kutana, the main source of loan is again relatives/ friends (40%). Mainly loan is taken to meet the marriage expenses (31.4%) and 25% to meet the medical expenses. The loan is also taken to repay the other loans and also for farming activities. The findings are showing that 60% of the borrower have mortgaged their personal securities while 26.7% of the borrowers have not

mortgaged anything as for them source is relatives/ friends. The data also shows that 40% of the borrowers pay interest rate in between 2 to 5% to the source.

		Table 9: INI	RASTRUCT	URE AVAIL	ABILITY & A	ACCESSIBIL	ITY		
			Village 1 Dadlana	Village 2 Rajapur	Village 3 Sithana	Village 4 Kachroli	Village 5 BalJattan	Village 6 New Baholi	Village 7 Kutana
	Playground SamajMandir Gymnasium	-	$\sqrt{1}$	\checkmark		$\overline{\mathbf{v}}$			
Recreatio nal	Community hall Library		\checkmark						
	Cremation/ Burial Place			\checkmark		√			
			1		/				
	Cement/Tar	Within Village Within 5 Km					√		
	road	More than 5 Km							
Dharrian	D. G.	Within Village Within 5 Km						\checkmark	
Physical Facilities	Bus Stop	More than 5 Km			√(Panipat)				
	Public Telephone	Within Village Within 5 Km				√(Babarpur Mandi)			
	Booth	More than 5 Km		√(Babarpur)	√(Panipat)				

4.9 INFRASTRUCTURE- AVAILABILITY & ACCESSIBILITY

	Daily Market	Within Village Within 5 Km More than 5	√(Gharaund	√(Babarpur		√(Babarpur Mandi)			√(Gharau
		Km	a))	$\sqrt{(\text{Panipat})}$		√(Matloda)	$\sqrt{(\text{Panipat})}$	nda)
	Weekly	Within Village Within 5 Km				√(Babarpur Mandi)			
	Market	More than 5 Km	a)	$\sqrt{(Babarpur)}$	$\sqrt{(\text{Panipat})}$		$\sqrt{(Matloda)}$	$\sqrt{(Panipat)}$	√(Gharau nda)
	PDS Shop	Within Village Within 5 Km					√	V	
		More than 5 Km							
	Grocery Shop	Within Village Within 5 Km				\checkmark			
	Grocery Shop	More than 5 Km							
	DTP/Xerox	Within Village Within 5 Km		√(IOCL Chowk)	\checkmark	√	√	√(IOCL)	
	Center	More than 5 Km							
Local Institutio ns/	Post Office	Within Village Within 5 Km		√(Dadlana)	√(Kabdi)	√(Babarpur)	√(Shera)	√(Kabdi)	√(Munak)

	More than 5 Km							
	Within Village							
Railway	Within 5 Km	$\sqrt{(Kohand)}$			$\sqrt{(Babarpur)}$			
Station	More than 5 Km		√(Babarpur)	$\sqrt{(\text{Panipat})}$		√(Matloda)	$\sqrt{(\text{Panipat})}$	√(Konc
	Within Village							
	Within 5 Km							
Police Station	More than 5 Km	√(Matloda)	$\sqrt{(\text{Panipat})}$	√(Matloda)	$\sqrt{(\text{Panipat})}$	√(Matloda)	$\sqrt{(Matloda)}$	√(Ghar nda)
	Within Village							
Gram	Within 5 Km							
Panchayat Office	More than 5 Km							
	Within Village	\checkmark					√(Kabdi)	
Co-operative	Within 5 Km			√(Kabdi)	√(Kabdi)	√(Shera)		\checkmark
Society	More than 5 Km		$\sqrt{(Sithana)}$					
	Within Village							
Bank for S/B Account	Within 5 Km			√(IOCL)	√(Babarpur Mandi)		$\sqrt{(\text{Refinar})}$ yChowk)	√(IOC]
	More than 5 Km) $\sqrt{(Babarpur)}$			√(Ashan)		
Block	Within Village							
Development Office	Within 5 Km							

		More than 5 Km	√(Gharaund a)	$\sqrt{(\text{Panipat})}$	√(Matloda)	√(Panipat)	√(Matloda)	√(Matloda)	√(Gharau nda)
		Within Village							
	Taluk	Within 5 Km							
	Headquarters	More than 5 Km	√(Panipat)	$\sqrt{(\text{Panipat})}$	√(Ishrana)	$\sqrt{(Panipat)}$	√(Matloda)	√(Matloda)	$\sqrt{(Ashand h)}$
		Within Village							
	District	Within 5 Km							
	Headquarters	More than 5 Km	√(Panipat)	$\sqrt{(\text{Panipat})}$	√(Panipat)	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	√(Karnal)
		Within Village							
	*** 1	Within 5 Km							
	Warehouse	More than 5 Km	√(Panipat)	$\sqrt{(\text{Panipat})}$	√(Panipat)	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	√(Panipat)	√(Gharau nda)
		Within Village						· • • /	
		Within 5 Km							
	APMC/ Mandi	More than 5 Km	$\sqrt{(Gharaund a)}$	√(Babarpur)	√(Babarpur)	√(Babarpur Mandi)	√(Matloda)	√(Babarpu rMandi)	√(Gharau nda)
	Public/ Pvt./ Mini buses		\checkmark				\checkmark		
	Maxi Cabs/		1		1				1
Transport	Jeep Share auto		N						
facilities									
	Taxi/ Auto				\checkmark	\checkmark			
	Bicycle					\checkmark			
	Motorcycle		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark

	Bullock/ Horse Cart								
		Within Village	\checkmark	\checkmark	\checkmark	\checkmark			
	Pre-	Within 5 Km							
	Pri/Nursery School	More than 5 Km							
		Within Village	\checkmark	\checkmark		\checkmark			
	Govt. Primary	Within 5 Km							
	School	More than 5 Km							
	Charitable Primary	Within Village							
		Within 5 Km							
Education		More than 5 Km							
Education		Within Village	\checkmark	\checkmark	\checkmark				
	Pvt. Primary	Within 5 Km				√(Babarpur)		$\sqrt{(\text{Singhpu} r)}$	
	School	More than 5 Km							
		Within Village	\checkmark						
	Govt. Secondary	Within 5 Km			√(Kabdi)	√(Badoli)	√(Shera)		
	School	More than 5 Km		√(Badoli)					
	Charitable	Within Village							
	Secondary	Within 5 Km							
	School	More than 5							

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		Km							
		Within Village			\checkmark				
	Pvt. Secondary School	Within 5 Km				√(Babarpur)	√(Shera)	√(Kabdi)	$\sqrt{(Dadlan)}$
	School	More than 5 Km	$\sqrt{(Gharaund a)}$	√(Badoli)					
		Within Village	\checkmark						
	Higher Secondary	Within 5 Km			√(Kabdi)	√(Badoli)	√(Shera)	√(Kabdi)	√(Dadlan a)
	School	More than 5 Km		√(Badoli)					Labdi) a) Image: constraint of the system of th
		Within Village							
	Degree	Within 5 Km							
	College	More than 5 Km	√(Panipat)	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	
		Within Village							
	ITI/	Within 5 Km							
	Polytechnic	More than 5 Km	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	$\sqrt{(\text{Panipat})}$	√(Bala)
		Within Village							
	Vocational	Within 5 Km							
	training center	More than 5 Km	$\sqrt{(Gharaund a)}$	$\sqrt{(\text{Panipat})}$	√(Panipat)	√(Panipat)	$\sqrt{(\text{Panipat})}$	√(Panipat)	√(Bala)
Health	Local Doctor/	Within Village	\checkmark			\checkmark		\checkmark	
care institution s	RMP	Within 5 Km							√ (Dadlana)

	More than 5 Km							
Chemist Shop	Within Village	\checkmark		\checkmark		\checkmark		
	Within 5 Km							
	More than 5 Km							
Mobile Clinic	Within Village							
	Within 5 Km							
	More than 5 Km							
SHC/ ASHA/	Within Village	\checkmark						
Aanganwadi	Within 5 Km							
	More than 5 Km							
PHC/CHC	Within Village	\checkmark						
	Within 5 Km							
	More than 5 Km			$\sqrt{(Matloda)}$				
Government	Within Village							
Hospital	Within 5 Km							
	More than 5 Km	√(Panipat	√(Panipat	√(Panipat	√(Panipat	√(Panipat	√(Panipat	$\sqrt{(Gharunda)}$
Private Clinic	Within Village	\checkmark		\checkmark				
	Within 5 Km				√(Babarpur Mandi)			
	More than 5 Km		√(Panipat			$\sqrt{(Matloda)}$	√(Panipat	$\sqrt{(Gharur})$ da)
Private	Within Village		` *				` *	
Hospital	Within 5 Km							

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		More than 5 Km		√(Panipat	√(Panipat	√(Panipat	√(Matloda)	√(Panipat	$\sqrt{(Gharun da)}$
	CSR Hospital	Within Village		\checkmark	\checkmark		\checkmark		
		Within 5 Km							
		More than 5 Km							
	Veterinary	Within Village	\checkmark	\checkmark	\checkmark				
	clinic	Within 5 Km				√ Mehmanpur	√(Kabri)	√ (DharmGa rh)	
		More than 5 Km							

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

5.1 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.

5.2 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 1 to 3 years. A particular intervention may be short, medium or

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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.

5.3 Priority 1: Livelihood – Long term intervention

According to Basix Academy for Building Lifelong Employability Limited report, as per industry analysis, nearly 75-80 million jobs will be created in India over the next five years. And it is estimated that almost 75-90% of additional employment will require some kind of skill/vocational training.³ With the kind of shift the economy of India is experiencing, there is a huge demand for skill based jobs which the education system of our country fails to provide. Specialised skill training programs, hence, are needed at all levels to ensure employment to all individuals alike, whether educationally qualified or not, in the sense of formal education. Lack of formal education should not be made to have a bearing on the standard of living and quality of life of an individual. And hence, skill based trainings should be provided to the youth in order to bridge the gap between demand and supply of labour in industry along with assuring an optimal life quality for each individual.

It is encouraging to discover that people from these villages are asking for vocational and skill based training. This shows willingness which would translate into higher receptivity in an intervention in this area on the part of the villagers and therefore, higher likelihood of yielding better results. Women, of the village, too, are observed to be keen on learning traditional skills such as stitching and embroidery to earn a living and are supported by the men. Hence the gender complications have eliminated themselves in the case of these villages which would make provision of training smoother.

5.3.1 Village specific findings:

Village 1: Dadlana

There are 38.8% of the people who are not engaged in any income generation activity and dependent on others income. It is observed that due to lack of skills and motivation, the inhabitants of the village are not able to find jobs in the nearby city. The training of stitching clothes is given by IOCL but it is observed that due to lack of market options, trained women are not able to earn an income. Therefore, there is a need to provide market linkages for these trained women so that they can become an earning hand for their family.

Village 2: Rajapur

The primary source of livelihood is non-agriculture labour work as 20.8% of the sampled population engaged in it. It is observed that due to lack of skills, villagers find it difficult to get a job in the nearby industries and factories present in the Panipat. Lack of public transportation facility is also observed as an important reason of disconnect from the city; private mode of transportation is available but they are not so frequent. Lack of transportation facility makes the situation worst for women of the village. Only

³<u>http://www.b-able.in/challenge.php</u>

30.8% of the people in the village have the ownership of agriculture land which is also the one of the reason which makes majority of villager to do unskilled non-agricultural labour work. Apart from providing vocational trainings to the inhabitants, there is also a need to provide them job placements and make them aware the government employment exchange office where they can register themselves and avail the benefits.

Village 3: Sithana

In Sithana, there are more people involved in non-agricultural labour (11.8%) as compared to other listed livelihood options. As per the data, only 3.9% of the people are engaged in the farming for their livelihood as a primary source. The main reason of less involvement of farmers in agriculture for income generation is because of small land holdings. There are 76% people in this village with ownership of agricultural land lying in the range of 0.1-5 acres that does not fetch appropriate profit margins to meet their needs. Apart from this, less availability of agriculture labour also de-motivates them to adapting farming as a main livelihood option. It is observed that unemployment amongst youth in the village is a serious issue as they do not have the modern/technical skills required in the industries and factories which are available in the Panipat. So, there is need to spread awareness in the people regarding different job possibilities available in nearby areas and how different training courses can help the youth in getting a right job for them.

Village 4: Kachroli

In Kachroli, the problems are more or less same like other villages cited above. The majority of the population is engaged in non-agriculture labour work (15.4%). Non-agriculture labour is mostly unskilled labour in which people are engaged in this village and works on daily wages. The income generated from this employment is very low and they face problems in meeting the requirements of the whole family. It also results in the high dropout rate as people are not able to bear the expenses of education of their children. Data also shows that 21.6% drop their studies to work and support their families. Therefore, there is a need to make youth skilled, which dropped their studies because of the financial constraints. Various ITI courses/ training courses can help them in getting a handsome earning job in the nearby industries. IOCL is already providing clothes stitching training to the women but it is observed that more women are getting trained in the same skill from the same area and it is becoming very difficult to find the market in the village for them. Due to lack of market, their skills are getting wasted as due to the social barriers these women are not allowed to go outside to find a job. If SHGs can be formed and market linkage can be provided to them, the livelihood option can be generated.

Village 5: BalJattan

It is observed that the youth of this village is mainly unemployed. As per the data, literacy rate of this village is 76.9%, still unemployment amongst youth in the village is a serious issue as they do not have the modern and technical skills required in nearby industries. In the village, there are countable people who are pursuing post-graduation. It is also observed that youth from difficult financial background have not registered their names with the government employment exchange. The government's MGNREGA is also not functioning in this village. It signifies that there is need to provide the vocational training to the unskilled youth and spread awareness in the people regarding different job possibilities available in nearby areas.

Village 6: New Baholi

As per the data, the primary engagement for livelihood is non-agricultural labour work (16.2%). The reason behind this is that the inhabitants of this village have small land holdings. Only 10% people have the ownership of agricultural land. Apart from this, only one person has received vocational training. In the village, there are two or three countable persons who are pursuing higher education. MGNREGS is functional but only 11 job card holders are registered with the Panchayat to avail the benefits of the scheme. The problem of alcohol addiction is also observed in this village which makes the situation of women in the village vulnerable. As per the female respondents, the problem of drinking is high among the youngsters of the village who are mainly unemployed. In this village, there is a need to provide guidance to the youngsters and to make the women of the village empowered by providing means of employment to them.

Village 7: Kutana

Due to lack of income opportunities, people who are unskilled and engaged in non-agriculture labour face inability to meet the daily requirements of the households. As per the data, 22.2% of the people are engaged in non-agriculture labour. This labour class keeps shifting from one village to another in search of work. The people of the village are not skilled with modern, technical, skills to secure skilled jobs which are good in paying. They are less educated and unskilled and due to their difficult financial condition, they get involved in non-agricultural labour work. The youngsters are not aware about the vocational trainings and if they are aware than due to financial constraints, they are not able to enrol themselves in such trainings. The women of the village also are not engaged in any income generation activity.

INTERVENTION

Awareness about Government Placement Cells

Village authorities stated that there is a paucity of employment opportunities within the villages where a large sum of the population is not engaged in any kind of income generation and major part of the working population is engaged in non-agricultural labour. There are Government employment exchange facilities where registered individuals are intimated about various job openings according to qualification. However, the youth are not aware about this facility to apply for jobs. The company can arrange a workshop for the villagers where they can invite a member of the Employment exchange and hold an awareness camp explaining the process involved and the workings of the employment exchange. The District authorities also hold vocational camps for the youth. These facilities can be made accessible to villagers by making them aware of the availability.

Skill Development Training

Training can be provided to villagers to develop their skill sets and grow employment opportunities available around the villages. Based on the industries at the district level dictating the scope of employment around the villages, villagers can be trained in non-technical skills such as garment making, wood and wood products, leather products etc. and technical skills such as Industrial training, computer training and the like can be imparted. For instance, women can be trained in stitching and garment making and other such skills so as to increase scope of employment generation within the village. Women can be trained in all the other non-technical as well as technical skills, too, to avoid restricting their growth and promote development of gender stereotypes. Market for the products needs to be researched and planned beforehand. A few people in the village can be trained so that they have enough market and less competition initially. Also, they can train others in the village that will provide them with future employment opportunities. In addition to this, after the training, SHGs of women can be formed and initial technical support can be provided to help create linkages and market their products.

It should be ensured that the beneficiaries of the training programmes have an opportunity for field experiences through internships after the completion of the course. Having hands-on experience is an equally, if not more, important part of acquiring and mastering a skill.

Few of the skills apart from industry specific skills that can be imparted amongst the youth are as follows. It should, however, be noted that this is not an exhaustive but only a suggestive list of skills.

- 1. **Industrial Training:** In the light of increasing technological advancement, there is an ever increasing need for jobs requiring specific skills. Providing skills such as that of carpenter, electrician, plumber, welder, instrument mechanic, fitter etc. would increase likelihood of absorption in the existing industries.
- Repair Work: A few individuals from each village can be given basic training in skills such as mobile repairing, DTP/Xerox, electronic repair etc. As these jobs are required in everyday living, by all households, the market for such skills could be easily available.
- 3. **Computers:** In the kind of employment opportunities in the modern economy, knowledge of computers forms the basic component for any job. Having knowledge of computers increases likelihood of various opportunities and widens the scope of getting employment. Computer literacy, unlike other skills, does not require a minimum level of high educational foundation or qualification and hence can be disseminated to a larger bunch of people.
- 4. Traditional Skills: IOCL has been conducting vocational training programmes for women in the skill of stitching and tailoring in most of the sampled villages. However, it was noticed that a lot of women from the same village are getting trained bi-annually creating shortage of market for all. Hence, each skill should be disseminated in small numbers so as to ensure optimum market for each for income generation. Also, the instructor for the skill is, reportedly, not satisfactory and needs to be changed and replaced by a one with higher understanding of the subject. Initial support can be provided to these women in the form of financial assistance, establishing a market and market skills initially. Alternatively, tie-ups can be made with NGOs to buy their products in the long run. Looking for and establishing a market on their own usually doesn't yield too much success and hence, these tie-ups can make the skills more useful in meeting their end goals of generation of income and therefore, keep up the motivation. SHGs within the village can also be formed by bringing together the various women who learned the skill by providing initial financial and technical support.
- 5. **Training for People with Disability**: PWDs can be taught the skills of DTP/ Xerox, or can be provided with STD/PCO booths or petty shops. The investment can be made by both IOCL and the individual in a share pre-decided by the company. Special loans can also be arranged for in collaboration with national banks.

A community mobilizer can call for a youth meeting to find out the kind of skills the youth are interested in. Taking the opinion of the locals and making them part of the decision-making process will increase success of implementation by manifolds. The youth and unemployed adults below the age of 35years can be provided vocational training. It should be ensured that there is no gender preference put by the company on the kind of training provided and it should be open to all based on interest.

5.4 Priority 2: Education – Long Term Intervention

The literacy level of these villages is considerably lower than the national literacy level in all villages, except BalJattan, and demands immediate intervention. One of the major reasons for drop-out recorded during the survey is the distance of educational facilities given that most of the villages only have schools up to secondary education after which children need to travel to other villages to receive formal education. Girl education, especially, needs to be promoted in these villages as many reported dropping out due to schools being too far which is seen as unsafe for girls. Promotion of education and development of infrastructure are interrelated concepts. Meaning a developed infrastructure and facility will automatically draw more students, whereas inversely, it is also true that the growing number of students will accelerate the pace of development in the educational hub of society.

5.4.1 Village specific findings:

Village 1: Dadlana

A Government senior secondary school is available in the village. The students from other nearby villages are also availing higher secondary education from this school. In this village, it is noticed that girl's education is not considered important. However, due to the presence of government higher secondary school they are educated up to the 12th standard but after this, very few get a chance to get enrolled in college. The data shows that 9.2% of the population quit their studies due to early marriage and 4.5% quit as they have to attend the domestic chores. It is also observed that students are not aware about the options available for them after higher secondary education. The data also shows that 4.5% dropouts from formal education as they are not able to bear the expenses of education. In this village, it is required to create awareness among the parents about the importance of education for girls and financial assistance to the students who are not able to meet the expenses of their education by providing scholarships to them.

Village 2: Rajapur

The Government middle school in the village has classes up to 8th standard. In order to attain further education, one needs to go to faraway places. The government higher secondary school is at Badoli village which is at the distance of more than 5 km from the village. The large population of the village

consists of SC community (87.7%) and it is observed that considerable households belong to difficult financial backgrounds. Due to these reasons, the dropout rate is very high. As per the data, 12% quit their study as they have to work and support their family. The distance is another barrier especially among girls as 10% dropout from the formal schooling as school was too far and parents did not allow them to go there due to the security issues. As per the respondents, lack of safe and public transport facility also adds to the fear of not sending their daughters at far places for higher secondary education.

Village 3: Sithana

It is analysed from the data that the girls in the village attain education up to 8th standard as government middle school is available in the village and data shows that 4.5% dropout from formal school as they are required to do household chores. It was observed that parents do not want to send their daughters to schools because they connect it directly with their future tasks and according to them their daughters are going to take care of household chores for which education is not needed, hence the girls end up dropping out from school. The nearest government higher secondary school is at the distance of 3 km from the village and facility of public transport is not available at all as per the villagers. Therefore, to decrease the dropout rate of young girls, transportation facility may be provided to them. Apart from this, awareness related to importance of education is also required to spread among the parents to break the prejudices.

Village 4: Kachroli

Apart from the government primary school, there is no government secondary and high school in the village which results in high dropout rates especially amongst the girls. The data also shows that nearly 8% students dropout from formal education because the school was too far. The government higher secondary school is at Badoli which is nearly 3 km away from the village and due to the unavailability of public transport the commutation becomes an additional expenditure to the families to spend on the education which also results in a drop out from the education. As per the data, 21.6% dropouts have resulted just because they have to work and support their families. To reduce the dropout rate, scholarships, academic and material support can be provided to the students which will help in reducing the dropout. Bicycles can be provided to girls which would help them in reaching school on their own.

Village 5: BalJattan

In BalJattan, it is observed that college education is mostly limited to those who have strong financial background. As per the data, 26.7% people quit their studies as they have to work and support their families. It is also reported by the villagers, that only single private bus is available if they have to commute to Panipat. The college is located at Panipat and lack of transportation also restricts or acts as add on to not send their children especially girls to college.

Village 6: New Baholi

In New Baholi, education is not considered important to girls. The data also shows that 5.9% dropped out from their studies as they were required to attend household chores and the same percentage quit because of the security concerns. The problem of alcohol addiction is observed in the village. Apart from this, it is also observed that education is not considered important even by the youngsters who are studying in 11th or 12th or in college. They are enrolled in the institutions but they do not attend the classes on regular basis in their educational institutes. They are also found to be indulged in consuming alcohol and smoking. There is a need to motivate them about the need of education in their life. The school faculty also reported that sometimes drunk persons enter the school premises and create problems by shouting and abusing which affects the school environment. There is also a need to aware the parents about the importance of education especially for their female child.

Village 7: Kutana

In this village, 17.9% dropped their studies as either they failed or irregular or too poor in studies. The motivation towards education is lacking in the students. The mentality of the villagers is biased in case of girl's education as they do not encourage their girl child to go out of village for formal schooling. Around 7% drop their formal education due to early marriage and 7.2% drop as they were required to attend domestic chores. To promote education in all the surveyed villages, there is a need to conduct awareness campaigns for parents as well as children so that they would not restrict their girl child in accessing higher education.

INTERVENTIONS

Bicycles

As children have to travel far from their villages due to unavailability of educational facilities beyond primary education in majority of the villages, the drop-out rate is high apart from education not given its due importance. Bicycles can be provided to students from 5th to 10th standard to reduce the drop-out rates.

Scholarships

A large portion of the youth is currently not receiving any education and looking at the data, unavailability of educational facilities within the village could be a major cause for this phenomenon. Scholarships can be provided to students which would cover academic fee costs, study material costs as well as travel costs. Books, stationary and other study material can be provided for free till class 10th for both girls and boys to eliminate financial constraints as a reason for not receiving an education. These facilities can be provided on the base of merit in the previous standard. For example: the top 15% of the

students in class 5th will receive these incentives for class 6th education. Again the top 15% from 6th would receive benefits for class 7th as so on. For providing the scholarship, a base has to be decided and students have to be chosen. These students have to be provided scholarship and after one year, meritorious scholarships can be introduced. Providing these benefits as incentives will help keep the students motivated and find value for the facilities provided ensuring maximum and effective usage. Monetary scholarships can be provided for higher education also.

Teachers Training

Teacher Interactive training workshops can be provided with the objective to equip teachers with necessary skills and expertise to implement creative teaching to make the process of learning an enjoyable one for students. Various theories in the field of educational psychology helped establish that interactive and creative methods of teaching involving methods other than books has the capacity to engage and simulate minds, thereby, developing stronger analytical and thinking brains. Training programmes can be conducted to introduce alternate methods of teaching using various teaching-aids, to increase the quality of education and thereby, the involvement of students.

Infrastructural aid for use of these interactive techniques, too, can be upgraded in time. Technological assistance such as introduction of computers in schools and use of projectors can be introduced once the infrastructure is in place.

Career guidance cell

Given that there is a high percentage of youth which is not engaged in income generation or education, a career guidance cell can be provided in higher secondary school facilities. This could help give further direction to students and aid in them making informed decisions about their future educational or career options by making them aware of all the options available to them.

Advocacy: Awareness about importance of education

For the literacy level to increase, students as well as parents need to be educated about its importance and benefits in the long run. Education needs to be seen as primary for children. Awareness programmes need to be carried out for parents. This can be done in the form of relatable plays, narration of success stories etc. People can be made aware about various government schemes too, in regards to education. Youth groups from within the village can be manage these events; motivational speakers can also be approached (educated individuals belonging to the same village and district and IOCL officials).

5.5 Priority 3: Health Care Facility – Medium Term Intervention

Data from the survey illustrates that the villages of Panipat do not have provision of basic health care facilities such as Primary Health Centre and Sub-Health Centres. Due to this, more than 80% of the population from almost all the villages prefer and resort to unqualified local doctors for treatment, generally called as quacks. Since these doctors lack a professional degree, their credibility cannot be established. Health care is a basic facility and should be available to all; inaccessibility of the same should not be the cause for any fatalities to life and degradation of the quality of life.

5.5.1 Village specific findings:

Village 1: Dadlana

A community health centre is available in the village but due to the absence of doctors, Para-medical staff and other health commodities, people visit this facility rarely. As a result, 84.8% people prefer RMPs as their primary mode of treatment. The RMPs are easily available in the village and are cheap. It is noticed that RMPs generally gives loose medicines. They give it on the basis of experiences. There is a need to provide professional primary health care services in the village to reduce the dependency on the RMPs. Apart from this, there is also a need to aware the villagers about the institutional deliveries as 20% deliveries took place at home in the absence of any trained midwives and 26.6% took place at home in the presence of birth attendant.

Village 2: Rajapur

The health clinic in this village was started in this village and positive outcomes have been noticed. It is observed that villagers are not aware about the health clinic, its timings and the day of working. Apart from this, it is also not known to villagers that IOCL has started this health clinic as no one responded to it during data collection. There is still a majority of people (96.9%) seek primary treatment from RMPs/quacks and 50% of the deliveries took place at home in presence of birth attendant, still the awareness among the masses is required to promote institutional deliveries.

Village 3: Sithana

The health clinic is also started in this village where doctor visits thrice a week and stays at the clinic for two hours. As per the respondents, the two hours' time is not sufficient and should be increased. As it was started few months ago before the survey conducted, only 4.5% have reported to access the services of this clinic for their primary treatment and still majority of the population (86.5%) seek the services of RMPs for their primary treatment. People of the village have appreciated the health facility provided by the IOCL but awareness and consequences of seeking treatment from RMPs/quacks need to be created among the villagers so that they can avail the treatment from qualified doctors.

Village 4: Kachroli

Apart from RMPs, no healthcare service provider is available in the village. The PHC is at the distance of 3 km from the village and commutation is always a problem as per the respondents because of unavailability of public transport facility. This enforces the villagers to seek treatment from RMPs and seeking treatment from them is always a risk to health. The available data shows that only 7.2% have accessed the services of private clinics for their primary treatment and rest of the villagers seek treatment from RMPs. The village is prone to diseases such as malaria, diarrhoea, cholera, etc. and lack of adequate health facilities in the village can cause serious illness if not treated at right time. The medicines provided by RMPs are merely on the observations which can make the illness critical.

Village 5: BalJattan

The population of the village is 3000 and only a sub health centre of government is available and that too rarely visited by the villagers as health personnel remain absent or visits sometime as per the respondents. A health clinic is also started in this village by IOCL but it is less known to people. It is also observed that the households near to the clinic access the clinic and not even communicate with other villagers about the clinic. The facility should be reached to everyone in the village and for this it is required to spread the information of its opening time, working days and kind of treatment provided. As per the data, still 76.7% seek primary treatment from RMPs/quacks which is a risk to their health.

Village 6: New Baholi

As per the data, majority of the population (93.3%) seek treatment from RMPs (unqualified and without license). The economic status of the village is observed as weak which is one of the reason to not seek the services of qualified doctors. The local doctors are cheap, available and accessible to the villagers. The village is connected by road but lack of public transport also restricts people to visit government hospitals. Apart from this, 13.3% of the deliveries took place at home in the absence of the nurse or birth attendants. The treatment during gestation period is also provided by RMPs to the women, which came out during the discussions with villagers. This makes the situation of women vulnerable as they are not able to tell the problem to RMPs who are mostly males. Apart from this, no medical store is available in the village.

Village 7: Kutana

A health clinic by IOCL is functional in this village but people have less information about it. Apart from this, no other health institution is available in the village. A medical store is also available in the village which is also accessed by the villagers as a substitute to professional medical treatment. The villagers give preference to RMPs as 89.7% population seek primary treatment from them. The Government

hospital is at the distance of 14 km from the village and only accessed by 1.7% of the population for their primary treatment. The low income of the villagers is also observed as a hindrance in seeking treatment from the qualified doctors. The health clinic started by IOCL may bring good results if people become aware about its services. The services of the health clinic can be extended by providing labour room facility as 12.5% deliveries are conducted at home in the presence of birth attendant and same is observed in most of the surveyed villages.

INTERVENTION

It has been estimated that around 55% of the deaths in India are due to chronic diseases. Looking at the sanitation scenario in the villages, a need for quality health care becomes even more essential. Health care is a basic right and should be available to all.

Health Clinic

In four of the seven villages namely, Rajapur, Sithana, BalJattan and Kutana, IOCL has recently opened a dispensary which is visited by a doctor thrice a week for two hours each. Dispensary is receiving a good response and can be replicated in the rest of the villages with a few improvements. The dispensary only has one qualified individual i.e. a doctor. A qualified nurse can be appointed who can be present at the dispensary for longer hours and all the days of the week as the residents complained about the services being available for some days for short span. Presence of a nurse, if it is not feasible to increase the hours of the doctor, will ensure that correct medicines are being dispensed and through a medical professional. The nurse can also monitor the quality and quantity of medicines required so as to ensure optimum stock at all times. She can keep a check on the expiry dates, too.

Awareness about the existence of the dispensary, too, needs to be disseminated as it was observed to be low amongst the villagers. A community mobiliser can be appointed for the initial 'spreading of the word'. It can be done through increased involvement of local authorities and posters, too.

Mobile Medical Van

A Mobile Medical Van service can be started in the villages. The van can make two visits in a week to each of the villages and should be equipped with the medical equipment of good quality fit for primary diagnosis. The van should stay in the village for at least 3 hours at a central location which is accessible to all. The van can even divide the village area and decide 3 locations at which it can wait for an hour each so as to maximise accessibility, wherever the villages are big. It should have an examination table and curtains so that the patient can feel comfortable. The van should have two qualified doctors; one male

and one female, one pharmacist, one driver and a community mobiliser. Two doctors are required because women may not feel comfortable with a male doctor.

Role of the community mobiliser would be to speak to the local authorities, organise meetings with the local population and disseminate information about the MMV. People should be made aware about the services provided by the MMV and should be encouraged to seek professional medical help for treatment.

The medicines can be provided at subsidised/ minimal cost to maintain the value of the services provided as this is a common phenomenon to correlate free to poor. The doctors can also conduct awareness programmes for a gathering of villagers once a week about various diseases and preventive measures. Additional information and maintenance of overall health along with importance of health and timely treatment can be spoken about. Basic home remedies can be discussed with villagers for basic ailments.

The MMV should provide referrals for ailments which require wider medical attention since the MMV can only provide primary care. For this, they need to tie-up with a few hospitals around the villages.

Health Cards

In collaboration with a tertiary hospital, a health-card system can be initiated. Villagers can be provided with coupons or health-cards for a particular amount e.g. Rs. 5000 for a year or a particular number of visits e.g. 5 visits in a year (according to cost-effectiveness and requirement) to the health care facility where they would be required to pay only a percentage of the treatment cost (e.g.: 10-20%), rest being covered by the card/ coupon. This could be done for particular kinds of treatment and services according to the cost-effectiveness. This would ensure quality health care to villagers, mitigation the issue of non-affordability and eliminate the need to construct a whole new medical facility by making use of an existing one.

5.6 Priority 4: Smokeless Chulla – Short Term Intervention

The economy of India, in its current stage, finds itself at the crossroads between innovation and challenges. While we take a great leap forward in terms of our economy, we also have people who still use traditional methods from centuries before. Multiple studies have confirmed the adverse health consequences of using the traditional chullas that are used rampantly in our villages till today, despite availability of alternate methods and cleaner fuels.

Empirical studies have shown that cooking stove smoke can contain hundreds of chemicals components. The well-studied products include total suspended particulates (TSP), polycyclic aromatic hydrocarbons (PAH), and carbon monoxide (CO). The noxious and hazardous products of combustion from stoves, particularly indoors, in poorly ventilated houses, are a major source of health problems including acute and chronic respiratory diseases, malignancies of the aero-digestive tract and lungs, burns, eye diseases, low birth weights and increased infant mortality. Acute Respiratory Infection, Chronic Airway Disease, Tuberculosis, Asthma, Lung Cancer, Eye Diseases can also be causes due to prolonged contact with smoke emitted chemicals.⁴ It is harmful for the environment given all the smoke and emission of harmful gases along with putting a pressure on natural resources such as wood.

Women and children are at maximum risk due to ill effects of smoke as they are in constant contact with the harmful emissions.

In all the surveyed villages, people are using traditional chullas and the percentage is above 90%. In Rajapur and Kutana, all the surveyed households have reported that they use traditional chullas and the sources of fuel used by them are grass, wood, cow dung, etc. The problem is in high percentage and this is harmful for the health of women.

INTERVENTION:

There are cases of LPG usage as observed in these villages, however, the traditional methods, too, are used by almost all households. Utility of traditional methods despite availability of modern methods indicates that the shift to cleaner fuels needs to be made gradual and step wise. Till the time, the villagers are ready to do away with chullas altogether; smokeless chullas can be provided to each household where LPG usage is minimal to not at all. Smokeless chullas are said to reduce the effects on health by manifold and are considered a much safer option in comparison to traditional chullas. It is estimated that around 600,000 individuals in India itself die due to lower respiratory infections from cooking smoke.⁵ It is also said that despite a smoke-reducing stove available since the 1980s' it has only found its way in rural India to about 5% households. The smokeless chulla is believed to require no external power and vents nearly all the smoke that is produced in the process of cooking. Reduced smoke emission in itself eliminates various risks involved and can be considered a viable option in these villages.

⁴<u>http://www.bioenergylists.org/stovesdoc/Environment/staton.pdf</u> ⁵http://web.mit.edu/adnane/www/adnan/portfolio/idd/stove.html

5.7 Priority 5: Electricity – Short Term Intervention

Although over 90% of the households in all villages except Rajapur have electricity connection but they face inconvenience due to frequent and long power cuts and hence require alternatives to provision of grid electricity to enhance overall quality of life.

INTERVENTION

Solar lamps can be used as an option which can be provided to the households which are not connected to the grid. It can be provided to households as back-up during untimely power cuts majorly during nights. Solar powered lighting is cost-effective and is a convenient and efficient replacement for traditional kerosene lamps as it reduces fire and pollution hazards. The Panchayat can be consulted about the need and probable acceptance of this intervention by the villagers. This can be provided at household levels so that the maintenance issue can be curbed out. Also, this can be installed at major places and points which will help people in commutation.

Village	Priority	Problems	Interventions	Nature of
				Intervention
	6	SchoolInfrastructure:InGovernmentPrimarySchoolthestrength is of above300 students.Theprimesourceofcommunicationbetweenteacherand student in the classroom is notavailable.	education in the Government primary school, company can provide blackboards in the school. Apart from this, benches are also	Short term intervention.
Kutana	7	<i>Cleanliness &Hygiene</i> : There is a pond within the village. Accidents took place several times where children have drowned in it. Also the water is stagnated and keeps on stinking, which pollutes the environment and affect human health.	A boundary wall and gate are required so that children do not go close to the pond. Moreover, the pond also needs to be cleaned and insecticides need to be sprayed. There is a need of proper spraying and fogging in whole village to prevent mosquito breeding to prevent diseases such as malaria, dengue, etc.	
	8	<i>Drinking Water facility</i> : There is insufficient supply of water in the SC community. Due to the poor financial backgrounds of people they are not even able to install their own private taps or bore wells.	The need of drinking water can be solved by installing a submersible with few tap points at a common place in the SC community. The task can be done in consultation with the community leader and concerned government department of that area.	
Kachroli	6	Open Defecation is prevalent in the village even after receiving Nirmal	A list of the households without toilet facility can be obtained from	

5.8 Village Specific Problems and Recommendations

		Gram Puruskar. Nearly hundred	the Panchayat representatives.	
		households are in the village	• •	
		without toilet facility.	them in constructing toilets.	
			Rather than offering the money to	
			the villagers, it would be feasible	
			to give them the sufficient	
			equipment and building material	
			so that they can build toilets on	
	7		their own.	01 4 4
	7	Veterinary Facility: Most of the		Short term
		villagers have cattle at their homes	animals/cattle, health check-up	intervention.
		but there is no veterinary clinic in	camps for animals can be	
		the villages to provide services to	organised twice or thrice in a	
		the animals when they fall sick. A	month to ensure better health of	
		veterinary clinic is at the distance	the cattle/ animals in the village.	
		of 4 Km from the village but	The medicines can be provided at	
		remains close due to the	nominal cost. Before conducting	
		unavailability of the veterinary	such camps, initial mobilisation	
		health personnel. Due to the	should be taken into consideration	
		unavailability of the veterinary	to take villager's view and	
		doctor, villagers mostly overlook	increase their awareness.	
		the diseases of the cattle/ animals.		
		This results in death of cattle/		
		animals. Also, there are families in		
		the village that are solely dependent		
		on cattle / animals for their		
		livelihood.		
	6	Infrastructure: The main	A Plain concrete cement road can	Short term
		connecting road of the village is not	be constructed by the company	intervention.
Sithana		in travelling condition because of	with proper drain lines on both the	
		potholes and breakages. The key	sides of roads to minimise the	
		participants also reported that	problem faced by the villagers.	

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		during monsoons it becomes	The drain lines will help in exiting	
		difficult to pass through this way.	waste/rain water out from the	
		Due to the absence of the drainage	village and reduce the problem of	
		lines, stagnation of the water is	water stagnation.	
		another problem on this road which		
		also leads to the breeding of		
		mosquitoes ultimately increases the		
		chances of affecting human health.		
	6	Cleanliness of the small stream: As	It is required to clean that stream	Short term
		per the key participants, a small	on urgent basis so that the	intervention.
		stream flows adjoining the village	diseases like malaria, dengue,	
		which is totally dirty. This stream	cholera and other water borne	
		has become the home for the	diseases do not affect the health of	
		mosquitoes breeding and it keeps	the villager. This can be done with	
		on stinking. Further, it affects the	the help of community	
Rajapur		health of the children and old age		
		people.		
	7	Construction of Community Hall	There is need of community hall	Short term
			in the village where people can	intervention.
			arrange meetings, different	
			functions and marriages. This task	
			can be taken up in consultation	
			with village Panchayat.	

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 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:
Informant name Informant s	tatus <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
P02	Total, irrigated, non-irrigated (rain fed), grazing (pasture) land, forest land, wasteland area in the village (RECORD ALL FIGURES IN ACRES)	TOTAL AREA1IRRIGATED2NON-IRRIGATED3GRAZING4FOREST5WASTELAND6
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	FLOOD PRONENESS

	 ALKALINITY – OR CLAY SOIL, THAT IS HIGH IN ALKALINE, LOW INFILTRATION CAPACITY CAUSING RAIN WATER TO EAILSY STAGNATE/ LOG WATER LOGGING - THE WATER TABLE (LEVEL) OF THEGROUND 	
	WATER IS TOO HIGH FOR AGRICULTURE TO TAKE PLACE	
	 SOIL EROSION – SOIL THAT GETS WASHED AWAY EASILY BY WIND OR WATER 	
	5. DROUGHT PRONENESS – LAND THAT IS SUFFERS NORMALLY FROM DROUGHTS, I.E. LACK OF RAINS IN THE REGION	
P05	What are the various sources of irrigation in the	TANK/PONDA
	village?	STREAM/RIVERB
	(NOTE: WITH OR WITHOUT MOTOR)	CANALC
	(ASK FOR ALL SOURCES)	OPEN WELLD
		TUBE WELLE
		OTHERF
		NONEX
P06	What are the various sources of water for the use of households in the village? Rank them in order of importance?	TANK/POND. 1 STREAM/RIVER. 2 CANAL. 3 OPEN WELL. 4 TUBE WELL. 5 PUBLIC TAP/OVERHEAD TANK. 6 PRIVATE (HH) TAP. 7 TANKER WATER. 8 OTHER 9
P07	Number of public/common tap water posts and number of households with individual tap connections by the Government.	PUBLIC/COMMON TAP POINTS

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?	CROP NAME CODELAND AREA	

Q02	What are the sources of livelihood for the people of the village?	OWN FARM ACTIVITIESA AGRICULTURAL LABOURB NON-AGRI LABOUR (RURAL)C				
	ENCIRCLE MULTIPLE OPTIONS	FACTORY LABOUR (MODERN) SALARIED EMPLOYMENT PETTY BUSINESS/TRADE CATTLE REARING COLLECT & SALE FOREST/M PRODUCTS RENT/PENSION/REMITTANCE ARTISAN (TRADITIONAL) OTHER	E F G INING H			
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 CULTIVATION4 COAL COLLECTION5 OTHER6	A B CA B CA 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 YES, FEW MIGRATE RARE	2	06		
Q05	Where do people migrate for work?	Within the state (Agri Labour) Within the state (Non-A Labour) Outside state (Agri Lab Outside state (Non-Agri Labour) Other	gri 2 our)3 4			
Q06	How many children of this village are currently (this year) staying and studying outside the village ?	NUMBER OF CHILDREN				

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	
		OTHER7	

R02	What is the caste/ tribal composition of this village? (ASCERTAIN AND RECORD APPROXIMATE PERCENTAGE OF HOUSEHOLDS) (CATEGORY – 1 GENERAL, 2 SCHEDULED CASTE, 3 SCHEDULED TRIBE, 4 OTHER BACKWARD CLASS, 5 NOMADIC TRIBE, 6 DENOTIFIED TRIBE)	Caste/Tribe CATG. Code HHs 1
R03	Recreation/Common facilities available in the village such as playground, Samaaj Mandir, gymnasium (vyayamshala), conference hall etc. (ASK ALL SOURCES)	PLAYGROUNDA SAMAAJ MANDIRB GYMNASIUM (VYAYAMSHALA)C COMMUNITY HALLD LIBRARYE CREMATION/BURIAL PLACEF OTHER G
R04	Which are the nearest towns to which people of your village often go for buying household goods and for services including medical services? How far they are from your village (km)? How many trips public/state transport buses MAKE in a day to these towns from or through your village?	Town Distance Trips 1 2 3

S: Physical, Educational and Health facilities

		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							
Nearest Physical Facilities							
FACILITIESCODECEMENT/ TAR ROAD1BUS STOP2PUBLIC TELEPHONE BOOTH.3DAILY/EVENING MARKET4WEEKLY MARKET5PDS SHOP6Grocery shop7DTP/XEROX CENTRE8		VILLAGE/ TOWN NAME					
Nearest Local Institutions							
INSTITUTIONSCODEPOST OFFICE1RAILWAY STATION2POLICE STATION3GRAM PANCHYAT OFFICE4COOPERATIVE SOCIETY5BANK FOR S/B ACCOUNT6BLOCK DEVT OFFICE7TALUK HEADQUARTERS8DISTRICT HEADQUARTERS9WAREHOUSE10APMC/MANDI11		<u>VILLAGE/ TOWN NAME</u>					
Nearest Educational InstitutionsFACILITIESCODEPRE-PRI/NURSERY SCHOOL1GOVT PRIMARY SCHOOL2CHARITABLE PRIMARY3PVT PRIMARY SCHOOL4GOVT SECONDARY SCHOOL5CHARITABLE SECONDARY6PVT SECONDARY SCHOOL7HIGHER SEC SCHOOL8DEGREE COLLEGE9ITI/POLYTECHNIC10		<u>VILLAGE/ TOWN NAME</u>					
	Nearest Physical Facilities FACILITIES CODE CEMENT/ TAR ROAD1 BUS STOP2 PUBLIC TELEPHONE BOOTH.3 DAILY/EVENING MARKET4 WEEKLY MARKET	Nearest Physical Facilities CODE DISTANCE FACILITIES CODE DISTANCE CEMENT/ TAR ROAD1 BUS STOP2 DUBLIC TELEPHONE BOOTH.3 DAILY/EVENING MARKET4 DISTANCE WEEKLY MARKET5 DISTANCE PDS SHOP6 DISTANCE Grocery shop7 DIP/XEROX CENTRE8 Nearest Local Institutions DISTANCE POST OFFICE8 DISTANCE POST OFFICE8 DISTANCE POST OFFICE8 DISTANCE POLICE STATION2 DISTANCE POLICE STATION2 DISTANCE POLICE STATION3 DISTANCE GRAM PANCHYAT OFFICE4 DISTANCE POLICE STATION3 DISTANCE BLOCK DEVT OFFICE7 DISTANCE TALUK HEADQUARTERS88 DISTRICT HEADQUARTERS9 WAREHOUSE10 DISTANCE PRE-PRI/NURSERY SCHOOL1 DISTANCE PRE-PRI/NURSERY SCHOOL2 DISTANCE PRE-PRI/NURSERY SCHOOL4 DISTANCE PVT PRIMARY SCHOOL4 DISTANCE PVT PRIMARY SCHOOL7 DISTANCE <td>Nearest Physical Facilities FACILITIES CODE DISTANCE VILLAGE/ TOWN NAME CEMENT/ TAR ROAD1 </td>	Nearest Physical Facilities FACILITIES CODE DISTANCE VILLAGE/ TOWN NAME CEMENT/ TAR ROAD1				

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S04	Nearest Health/Medical Facilities			
304		DISTANCE VII.	LAGE/ TOWN NAME	
	HEALTH SUB-CENTRE1			
	PRIMARY HEALTH CENTRE2			
	CHC/GOVT GEN HOSPITAL3			
	PVT CLINIC (RMP+)4			
	PVT CLINIC (MBBS/BAMS+).5			
	PRIVATE HOSPITAL6			
	Ayush HOSPITAL7			
	VETERINARY CLINIC8			
	MEDICAL SHOP/CHEMIST9			
	ASHA WORKER10			
	DAI(TRAINED/UNTRAINED).11			
S05	Does any mobile medical team visit	this village?	YES1	
		C	NO2-	►S09
S06	How often does the team visit this v	village?	DAILY1	
		0	FEW DAYS A WEEK2	
			WEEKLY	
			FORTNIGHTLY/LESS FRQNTLY4	
S07	By whom is the Mobile Medical Van	service provided?	BY PHC/CHC1	
	(PROVIDE DETAILS OF THE AGENCY)		BY MISSIONARIES2	
			BY COMPANY3	
			BY OTHERS4	
S08	What services are provided by Mob	ile Medical Vans?	MINOR AILMENT TREATMENTA	
	MCH – Mother Child Healthcare		CHRONIC DISEASES TREATMENTB	
			MCH SERVICESC	
			BLOOD/URINE TESTSD	
			SCANING RELATED TESTSE	
			BP/DIABETIC RELATED TESTSF	
			HIV/STI RELATED SERVICESG	
			OTHERH	
S09	Number of Anganwadi centres in th	e village	ANGANWADI CENTRES	
S10	Number of self-help groups (SHGs) i	-	SHGS' FOR WOMEN1	
	women, men, mixed, production/bu	usiness activity-	SHGS' FOR MEN2	
	based		SHGS' MIXED	

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	Туре	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	1		
extension officer, patwari)	2		
	3		
2. Rural development (Gram sevak, Collector,	1		
BDOs, CDOs, DM, Panchayat officials)	2		
	3		
3. Health and social welfare (e.g. Doctors, ANM,	1		
ASHA Health Inspector, Anganwadi Worker/	2		
Anganwadi Sahayika, Supervisor/CDPO)	3		
4. Other government functionaries	1		
	2		
	3		
5. NGOs	1		
	2		
	3		

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	No. of Job	No. of be	neficiaries	Minimum Wage	-	
	whom?	Cards (If MGNREGA)	Females	(As per Panchayat)	Implementation		
(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	Туре	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 Scaning 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

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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)

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

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	Medium of	Transport	Number of	Mid-day	Cost of
		(from-to)	instruction	facility by	students	meals	education
				institution		served	
(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, 40ther, 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

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

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

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.

Sr. No.	Name	Father's/ Husband's name		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)

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

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, 1Do 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	Agency	Year of	Approx.	No. of	Maintenance	Functional or
	activity	provided	activity	cost	beneficiaries	Ву	not?
		the benefit	(As it is)	(As it is)	(if applicable)		
(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):	·						
АМ/РМ							
Names of Respondents 1:							
2:							
3:							
Name of Interviewer:	Code:						
After Checking/Editing Questionnaire							
Name of Supervisor:	Code:						
Name of Editor:	Code:						

A: Household, Water and Sanitation backgr	ound
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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	
A03	Do you come under scheduled caste, scheduled tribe, nomadic tribe, or other backward class? Which one?	SCHEDULED CASTE.1SCHEDULED TRIBE.2NOMADIC TRIBE.3DENOTIFIED TRIBE.4OTHER BACKWARD CLASS (OBC)5GENERAL.6DON'T KNOW.7	
A04	TYPE OF HOUSE (RECORD AS PER GUIDELINES BASED ON TYPE OF WALL, ROOF AND FLOOR)	RCC 1 PUCCA 2 SEMI-PUCCA 3 KUCHCHA 4 HUT 5 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 - RENTED2 RENT-FREE(EMPLOYER'S)3 RENT-FREE(RELATIVE'S)4 LAND FREE & CONSTRUCTION OWN5 CONST/ALLOTED WITH SUBSIDY6 ALLOTED UNDER SCHEME7 OTHER8	A07
A06	Allotted under which scheme?	INDIRA AWAS YOJNA1 GHARKUL YOJNA2 BY CONCERNED PSE UNDER REHAB3 OTHER4	
A07	Do you have registered papers (patta) of this land?	YES1 NO2	
A08	HOUSE ELECTRIFIED?	YES1 NO2	
A09	What type of toilet facility do you have?	FLUSH TOILET (OWN)1PIT TOILET (OWN)2FLUSH TOILET (COMMUNITY)3PIT TOILET (COMMUNITY)4OTHER5NONE6	► A11

		1 1	
A10	If own, how was the toilet constructed?	FULLY OWNER EXPENSE1 SHARED BY HOUSEHOLDS2 WITH SUBSIDY	12
A11	Would you like to have a (flush) toilet for your household? (ASK FOR THOSE HAVING "PIT TOILET (OWN)" ALSO)	NOT INTERESTED1 YES, IF PROVIDED FREE2 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)	RESPINTWRNONEXXWATER STAGNATIONADRAINAGE/SEWAGEBCATTLE BASED WASTECOPEN AIR DEFECATIONDWASTE DUMPINGEOTHERFF	
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	
A14	What types of fuel does your household use for cooking? (ASK FOR ALL SOURCES/ MULTIPLE RESPONSE POSSIBLE)	GRASS/CROPRESIDUE/WOODACOWDUNGBCOAL/CHARCOALCKEROSENEDBIOGASESOLARENERGYFLPG/NATURALGASGELECTRICITYHOTHERI	

B: Household composition

In total how many members are there in your household including those staying away for studying, working, delivery	NUMBER OF MEMBERS	
and other purposes?		

SI.No.		Relation to		Sex	Age		Education	Studying?	Reasons for	Occup	ation
(MID)	Name of Member	Head	Status	(M=1) F=2)	Completed	Status (10+)	(7+)	(Y=1,N=2) (3-24)	dropout/no schooling (7-18)	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											

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

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/Aunty, 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, 50ther (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.

B03: CHECK B02 AND LIST ALL PERSONS STUDYING (CODE 1 IN COLUMN 9) AND THE	EN ASK DETAILS
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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, 3Private-unaided, 4Other (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).

Did you or any of your household members receive any vocational skill training in the last 3 years?	YES1	
(READ THE LIST OF VOCATIONAL SKILLS)	NO2-	C01

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	training	and year	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/DAI1LOCAL DOCTOR/RMP2CHEMIST SHOP3MOBILE CLINIC4SHC/ASHA/ANGANWADI5PHC/CHC6GOVT HOSPITAL7PRIVATE CLINIC8PRIVATE HOSPITAL9COMPANY/AIDED HOSPITAL10NO TREATMENT11DEPENDS ON AILMENT12OTHER13	
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/DAIA LOCAL DOCTOR/RMPB CHEMIST SHOPC MOBILE CLINICD SHC/ASHA/ANGANWADIE PHC/CHCF GOVT HOSPITALG PRIVATE CLINICH PRIVATE HOSPITALJ COMPANY/AIDED HOSPITALJ OTHERK NO TREATMENTX NOBODY FELL SICKY	

Birth Details

C03	Did any woman in your household give birth to a child in the last 3 years	YES1	
	(that is, since January 2010)?	NO2 -	► _{D01}

CO4: Please give the following details in respect of all the **births**, **including live and still births** (OCCURRED IN THE LAST 3 YEARS).

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

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 subcentre, **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?	YES1 NO2 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)	Nil0 → 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)	CANALA PONDB WELL.CC RIVERD MOTOR PUMPE TUBE WELL.F BORE WELLF BORE WELL.GG DAMH OTHERI NONEX
D06	Does your household own any livestock? (READ LIVESTOCK LIST)	YES1 NO2 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 BUFFALOA SHE BUFFALOB COWC BULLOCKD SHEEPE GOATF PIGGERYG POULTRYH OTHERI

E: Public Distribution System and Outstanding Loans

E01	What type of PDS/Ration card does your household possess?	APL CARD	► E04
E02	Do you avail ration from PDS?	YES, REGULARLY1 YES, SOMETIMES2 NO3	►E04
E03	What are the reasons for not (regularly) availing PDS ration? (ASK FOR ALL REASONS/ MULTIPLE RESPONSE POSSIBLE)	NOT INTERESTEDA POOR QUALITY OF GRAINB NO PDS SHOP/IRREGULARC SHOP TOO FARD HAVE APL CARDE NO MONEY DURING PDS SUPPLYF USE OWN FARM PRODUCE PARTLYG OTHERI	

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.	
-	
4.	
5.	