

Research study report on situational analysis of nutrition and livelihood status of vulnerable families in Keonjhar District of Odisha



**Study Conducted By: Ideal Development Agency (IDA)
Keonjhar ,Odisha**



Supported By: Stichting Kinderpostzegels Nederland (SKN)

Abbreviation

IDA	Ideal Development Agency
PDS	Public Distribution System
SHG	Self Help Group
NTFP	Non-timer Forest Produce
MNREGA	Mahatmagandhi National Rural Employment Guarantee Act
GP	Grama Panchayat
TOR	Terms of Reference
SC	Scheduled Caste
ST	Scheduled Tribe
OBC	Other Backward Community
BPL	Below Poverty line
AAY	Antodaya Anna Yojana
VCPC	Village Child Protection Committee
VDC	Village Development Committee
SMC	School Management Committee
GKS	Gaon Kalayan Samiti
MFI	Micro Finance Institution
PM	Prime Minister
PMAY	Prime Minister Awas Yojana
BPAY	Biju Pucca Awas Yojana
ICDS	Integrated Child Development Scheme
NGO	Non Government Organization
DHH	District Homeopathy Hospital
RSBY	Rastriya Swasthya Bima Yojana
BKKY	Biju Krushak Kalyan Yojana
BSKY	Biju Swasthya Kalayan Yojana
RBSKY	Rastriya Bal Surakshya Kariyakram Yojana
ANM	Auxiliary Nurse Midwife
AWC	Angawadi Centre
AWW	Anganwadi Worker
THR	Take Home Ration

Contents

Sl No	Contents	Page
1	Executive Summary	04
2	Chapter 1 Introduction, objective, methodology and limitation	06
3	Chapter 2 Section -1 – General Information	13
4	Chapter 3 Section -2 Status of livelihood	18
5	Chapter 4 Section -3 Access to Govt. schemes	22
6	Chapter 5 Section 4 – Status of Agriculture	24
7	Chapter 6 Section 5 – Status of Livestock	28
8	Chapter 7 Section 6- Status of NTFP	29
9	Chapter 8 Section 7- Status of wage labour	31
10	Chapter 9 Section 8- Status of health	35
11	Chapter 10 Section-9 Status of nutrition	31
12	Chapter -11 FGD	44
13	Chapter -12 Recommendations	49
14	Annexure Section wise Tables -1-9 Copy of questionnaire Check list for FGD and interview	52

Executive Summary

Ideal Development Agency (IDA), conducted a research study on nutrition and livelihood status of the vulnerable families in Keonjhar district of Odisha particularly covering Banspal, Keonjhar Sadar and Jhumpura blocks. The aim of the study was to assess the impact of the projects it had undertaken over a period of five years particularly on nutrition aspects, livelihood pattern and the extent of access to the Govt. sponsored schematic programmes by the vulnerable families.

The study was carried out in the Banspal, Jhumpura and Sadar block of Keonjhar district covering 12 GPs, 36 villages and 200 respondents.

As far as the social category of the families is concerned the respondents belonged to four different communities such as Scheduled Tribe, Scheduled Caste, Other Backward Communities and General. Majority of 154 (77%) respondents belonged to ST communities while 12 (06%) belonged to SC communities, 33 (16.5%) belonged to OBC communities and only 1 (5%) belonged to general community.

The study reveals that out of 200 total respondents a majority of 123 (61.5%) were illiterate. 29 (14.5%) had achieved primary level of education while 25 (12.5%) achieved Upper Primary, 17(8.5%) achieved high school education, 04 (2%) achieved higher secondary level and only 02(1%) achieved under graduate level education.

It is found that 97% of the families are below poverty line and all of them have ration cards under the PDS. The average income earned at the minimum end is Rs 250/- per family per annum while at the maximum end it comes to Rs 2013/- per family per annum. The major source of income comes from agriculture (about 47%) and wage labour (about 46%). It means people are surviving on a marginal level with the food support provided by Govt.

With regard to housing the study found that 64% families live in Kachha houses. In spite of the housing schemes of the Govt. they have not been able to avail those facilities.

While about 38% families are involved in SHGs, a large majority of 74% are not involved in any of the village level institutions.

In terms of availing the Govt schemes it is observed that there are procedural difficulties which the people face in availing the facilities. There are families who are deprived of such facilities as do not complete the procedure. There are families who do not get the full entitlements and they don't know where to report and get justice.

About 47% families depend on agriculture for their primary source of income. They only undertake single cropping in Kharif season. The cash crop is very rare. In the absence of modern agricultural practices the agriculture productivity is less. 36% families do not own any cultivable land.

Only 76 (38%) families possess the livestock. It is found to be an insurance benefit to the families at the time of urgency.

Since the project area comes under the forest area there are varieties of NTFPs (flower, fruits, tubers, mushroom, leaf etc.) that are available in the forest. People get access to those produces. While part of it is consumed, the surplus is sold in the market. Had there been value addition the families would have earned more.

This is a matter of concern that the families who work as daily labour (46%) actually receive very less compared to what the Govt. has declared. Effort should be made to assert rights of the daily wage labour before the employers to ensure the declared rates by the Govt. There is discrimination between men and women wages which is not permitted by Govt.

The job card holders under the MNREGA are getting less than 25% of their entitled jobs under the scheme. Similarly, substantial number of families do not have labour card (83%) which is provided by the Labour department. Under the card they are entitled to certain benefits besides the wages they get. They should be enabled to avail the facilities.

In terms of sanitation there are families who have not yet installed the toilet at their homes. They need to be linked with the Govt. scheme to get the facility. It is found that those who have toilets do not use the same.

With regard to nutrition the families follow their regular diet that includes cereal, pulses and vegetables. The protein part is found to be deficient.

CHAPTER-1

Introduction, objective, methodology, process and limitation

Backdrop

The district Keonjhar is located in northern parts of Odisha and lies between 21°1'N and 22°10'N latitudes; between 85°11'E and 86°22'E longitude and at 480 meter altitude. The geographical area of the district is 8240 square kilometres with a population of 1801733 according to 2011 census. Topographically the district may be broadly classified as upper part representing hills, terrains and forests; and the lower part with maximum plains. The tribal population of the district is recorded at 818078 about 45% of the total population. Other than 2 primitive tribal groups Juang and Bhuyan, there are 14 other tribal groups live in the district. The overall literacy position of the district is 68.24 % where the male and female literacy rates stand at 78.12% and 58.28% respectively. The district is endowed with rich mineral resources and about 30% of the total area is covered with dense tracts of forest. The district is famous for its ethnic tribal groups, flora and fauna and particularly for its rich bio diversity in one hand and deposits of vast mineral resources on the other.

Despite of the endowments, poverty is acute and significantly visible in many parts of the district as if the tribal groups are not able to take the advantage with wide gaps in distribution of wealth. It is important to mention here that the tribal groups in this part are cultivators and some of them rely on shifting cultivation. Majority of the cultivable lands are undulated in nature, rain –fed with negligible scopes for irrigation. Mostly, Forest contributes to their livelihood reasonably and one of the major livelihood support system to many of them. Both the aspects have never been viable for them due to rapid decline of the forest, the bio-diversity and the adverse effect of climate change on the entire ecology and more particularly the cultivation. As a result the tribal groups particularly bear the pang. The plights are innumerable; be it pollution, bad road communication, malnutrition, lack of access to resources, lack of good health care service etc. that make their life condition wretched.

The Govt. and civil society organizations have been taking initiatives to promote development for a long time. Ideal Development Agency (IDA) is one such agency that has been working in the district of Keonjhar particularly in the blocks of Banspal, Jhumpura and Keonjhar Sadar since 1990. It works for poor and vulnerable sections with focus on women and children. Livelihood promotion, education, community based natural resource management, strengthening community based organizations, reproductive health and nutrition, care of the aged, child protection are its priority areas of intervention.

Ideal Development Agency (IDA), conducted a research study on nutrition and livelihood status of the vulnerable families in Keonjhar district of Odisha particularly covering Banspal, Keonjhar Sadar and Jhumpura blocks. The aim of the study was to assess the impact of the projects it had undertaken over a period of five years particularly on nutrition aspects, livelihood pattern and the extent of access to the Govt. sponsored schematic programmes by the vulnerable families.

Objectives of the study

- To gather general information and household details of the vulnerable families
- To assess the status of the livelihood of the families particularly their income from primary and secondary sources, the status of credit, pattern of migration if any, income sources from agriculture, horticulture, fishery, NTFP and livestock.
- To assess the existence of the Govt. schemes and the extent of people's access to such schemes in terms of getting benefits.
- To assess the status of health, nutrition and sanitation of the surveyed families.

Area covered under the study

The study was carried out in the Banspal, Jhumpura and Sadar block of Keonjhar district covering 12 GPs, 36 villages and 200 respondents.

The names of the blocks, GPs and their respective villages are as follows;

Sl No	Name of Block	Name of the GP	Name of villages
1	Sadar Block	Sankiri	Sankiri,Jodipada,upardiha
		Gopinathpur	Jalabang,Harsapur, Khuntapada
		Raisuan	Raisuan,
		Padmapur	Dabank
		Gobardhan	Gobardhan
		Mahadeijoda	Dalimapur,Salarapentha,Naupada, Mahadeijoda,Tikarpada, Madarangajodi
		Baradapal	Baradapal,Upper Kusumita,Tala Kusumita,Upper Kampodihi,Tala Kampodihi
2	Banspal Block	Talakainsari	Tala Kainsari,Upper Kainsari,Ichhinda,Jaladihi,Vegidihi, Medinpur
3	Jhumpura Block	Khuntapada	Asuki
		Asanpat	Chitrapur
		Nahabeda	Ghuntiposi ,Nahabeda,Balarampur, Baghianasa
		Nayadhanurjayapur	Nayadhanurjayapur

Sampling

The GPs like Mahadeijoda, Baradapal & Tala kainsari 50% sample of vulnerable families already surveyed was taken. It is to be mentioned here that IDA is working with SKS, Netherlands in a project titled “Alternative Care for Vulnerable Children and Families”. In rest of the GPs such as Padmapur, Raisuan,Gopinathpur,Gobardhan,Sankiri,Asanapat,Nahabeda,Khuntapada & Naya Dhanurjoypur which do not come under the SKS project 20% sample was taken.

Tahasil Map of Keonjhar district



Focus Group Discussion with women

The GP and village wise sample of family respondents are as follows;

Sl no	Name of the Block	Name of the GP	Total No of Villages	No of Villages covered under the survey	No of Family covered under the survey	Sampling
1	Sadar	Mahadeijoda	6	6	66	50% sampling
		Baradapal	5	5	37	50% sampling
		padmapur	8	1	2	20% sampling
		Raisuan	3	1	2	20% sampling
		Gopinathpur	6	3	20	20% sampling
		Gobardhan	6	1	1	20% sampling
		Sankiri	5	1	4	20% sampling
2	Banspal	TalaKainsari	9	6	22	50% sampling
3	Jhumpura	Asanpat	5	2	8	20% sampling
		Nahabeda	8	5	15	20% sampling
		Khuntapada	7	3	20	20% sampling
		Naya Dhanurjoy pur	4	3	3	20% sampling
		TOTAL		72	37	200

Study Methodology

The information was collected from both primary and secondary sources. While the primary source included direct interview with the respondent beneficiaries, discussion with them in Focus Groups, the secondary information source included information available with the Govt. officials, PRIs, available reports and documents. Structured questionnaire was administered to collect information from the household respondents, Anganwadi Workers and Mothers. Besides, Focus Group Discussions were conducted among the children, men & women and farmers.

Manpower Involved in the study and their role

A team was formed consisting of 11 members that included 3 GP level Community Organizers, 5 Community Resource Persons, 02 Block Coordinators headed by one Study Coordinator. Besides, the assistance of the external Consultant was taken for developing the study design, the tools, writing of the report etc. The plan for conducting the study indicating the roles of different members is presented below.

Sl. No	Study Tasks	Responsibility Person
1	TOR development & basic orientation on Research study	Consultant/ Project Coordinator
2	Development of study tools	Project Coordinator
3	Sharing tools with Consultant	Project Coordinator
4	Finalization of tools	Consultant/ Project Coordinator
5	Pre testing of tools	Panchayat level staff & Block Coordinator
6	Modification of the tools	Consultant/ Project Coordinator
7	Orientation of team on strategy and planning of study	Project Coordinator
8	Data collection	Panchayat level staff
9	Data check and quality information	Block Coordinator
10	Data entry	Block Coordinator
11	Compilation of data and table generation	Block Coordinator
11	Data recheck and sharing with the Consultant	Project Coordinator

12	First draft report	Consultant/ Project Coordinator
13	Sharing the report with staff & stakeholders through workshop for validation	Project Coordinator
14	Finalization of report	Consultant
15	Sharing the final report with stakeholders & Donor	Project Coordinator

Each and every respondent was briefed on the purpose and objective of the study and their consent was taken prior to collection of information.

Limitation of the study

The study was planned to be completed within 45 days. However, practically it took more time than planned as villages were located in scattered locations and travelling to villages was bit problem due to lack of adequate transportation facilities. Secondly, it was also difficult to find the beneficiaries in one go as the respondents were not available. There were festive occasions on which it was not possible to disturb people. Thirdly, the veracity of the information collected very much depends on what the respondents have told. Fourthly, the findings of the study are limited to only the study area villages with limited sample size. Therefore, the same should not be generalized for the entire district.



Interview of respondents at the household level

CHAPTER -2

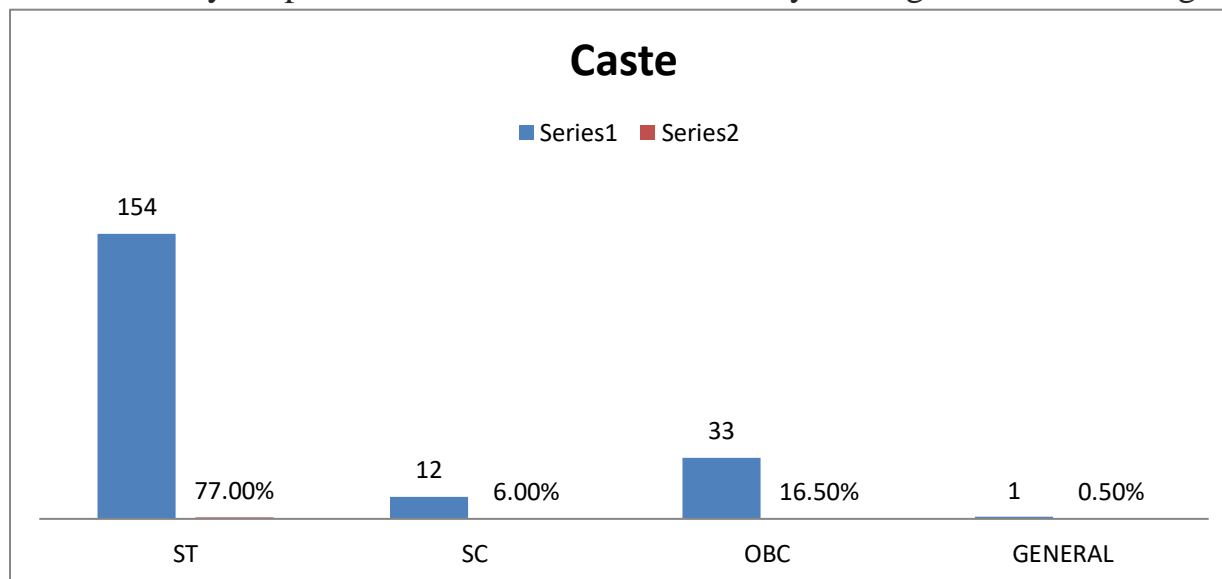
FINDINGS OF THE STUDY

GENERAL INFORMATION ABOUT THE RESPONDENTS

1.1 Background of the respondents

Out of 200 respondents, a majority of 158 (79%) were female and the remaining 42(21%) were male. In terms of the age of the respondents, maximum 65(32.5%) belonged to the age group of 31-40 years while 59 (29.5%) belonged to 41-50 age group, 40(20%) belonged to 18-30 age group, 26 (13%) belonged to 51-60 age group and only 10 (5%) belonged to 61 and above age group.

As far as the social category of the families is concerned the respondents belonged to four different communities such as Scheduled Tribe, Scheduled Caste, Other Backward Communities and General. Majority of 154 (77%) respondents belonged to ST communities while 12 (06%) belonged to SC communities, 33 (16.5%) belonged to OBC communities and only 1 (5%) belonged to general community. All the family respondents covered under the study belonged to Hindu religion.



1.2 Population of the respondent families

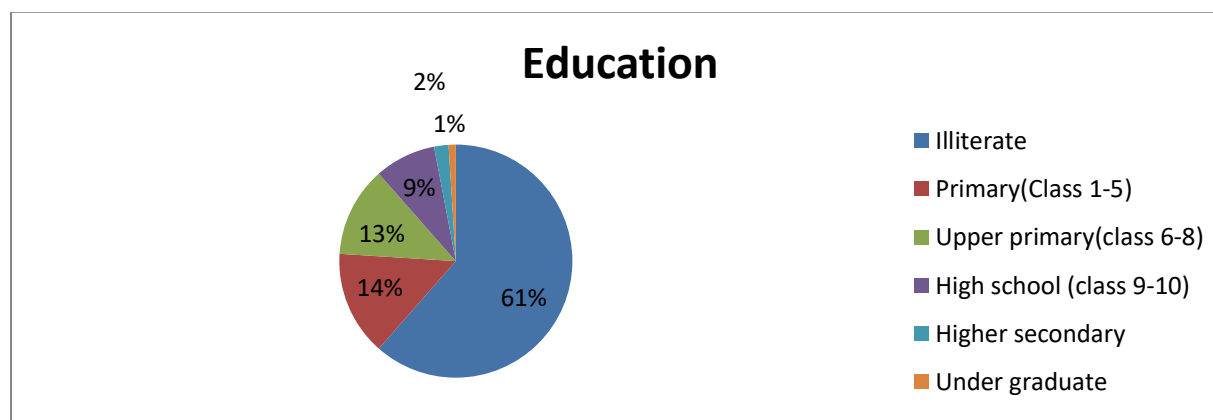
There are 826 members in the 200 respondent families out of which 401 are male and 425 are female. The age group wise population is presented in the table below.

Population Details:			
Age category	Male	Female	Total
0-5 years	30	17	47
6-14 years	116	100	216
15-18 years	56	60	116
18-49 years	149	176	325
50-60 years	43	57	100
60 & Above	7	15	22
Total	401	425	826

From the above table it is understood that substantial number of people i.e 325 are in the productive age group of 18-49 years.

1.3 Educational status

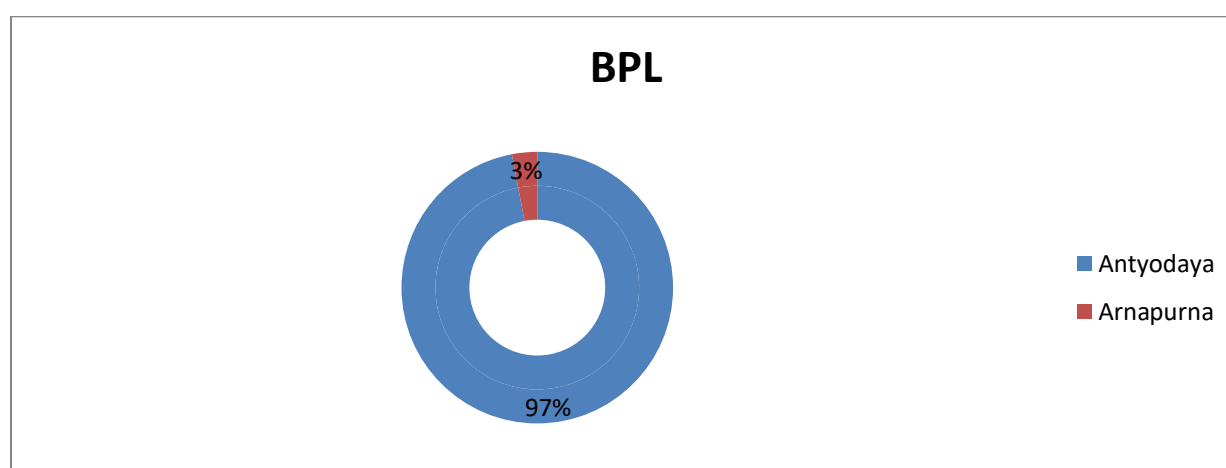
The educational achievements of the respondents included primary education (1-5), upper primary (6-8), High School (9-10), Higher Secondary and undergraduate. The study reveals that out of 200 total respondents a majority of 123 (61.5%) were illiterate. 29 (14.5%) had achieved primary level of education while 25 (12.5%) achieved Upper Primary, 17(8.5%) achieved high school education, 04 (2%) achieved higher secondary level and only 02(1%) achieved under graduate level education.



This reflects very poor educational status of the respondents. No one has achieved graduation or post graduation level education.

1.4 Poverty Indicators

All the respondent family members belonged to BPL category and possessed ration card for getting subsidized ration under the Public Distribution System (PDS) of the Govt. They were found to have possessed two types of ration cards- one is Antodaya Card and the other is Annapurna Card. While a large majority of 194 (97%) respondents possessed Antodaya Card, only 06(3%) possessed Annapurna Cards.

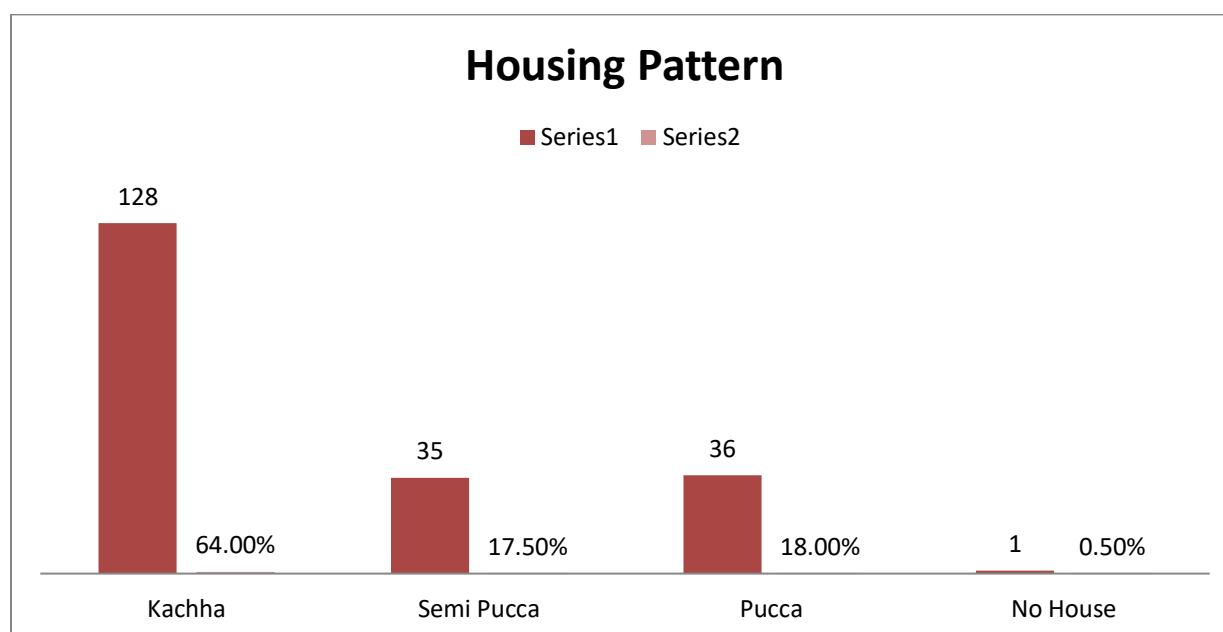


Antyodaya Anna Yojana (AAY) is one of the public distribution system schemes in India implemented from 2000. The main objective of the scheme is to ensure food security and to create hunger-free India. AAY scheme covers the poorest of the poor (below Rs15000/- income per annum) in India by supply of food and other important commodities for their daily needs on subsidized rates. Under AAY scheme wheat is provided for Rs.3 per Kg and rice is given for Rs.2 per Kg. Eligible family gets 35 Kg of rice per month. AAY families can buy 1 kg of sugar at a rate for Rs.18.50 per Kg via ration shop.

On the other hand the Annapurna Scheme aims at providing food security to meet the requirement of those senior citizens who though eligible have remained uncovered under the National Old Age Pension Scheme. The target group receives 10 kgs of food grains per month free of cost.

1.5 Housing Pattern of the Families

The houses of the dwelling families in the study area are found to be mostly Kachha (mud wall and no concrete roof), Semi Pucca (Brick Wall but no concrete roof and Pucca(brick wall and concrete roof). The study reveals that a majority of 128 (64%) family respondents had Kachha houses while 35(17.5%) had brick wall without concrete roof and 36 (18%) had pucca houses with concrete roof. Only 01 (0.5%) beneficiary had no house of his own. The pattern indicates that the majority of families live in Kachha and Semi-Pucca houses. One important aspect to be noted here is that 18% of the respondents have pucca houses. Besides their own contribution, the Indira Awas Yojana and Pradhan Mantri Awas Yojana of the Govt. have lot of contribution to construction of these houses.



The living rooms in the house ranged from one to four. While a majority of 117 (58.5%) had two living rooms in their houses, 44 (22%) of them had single rooms, 30(15%) of them three rooms and 07 (3.5%) had four dwelling rooms. Only 1% had no living rooms in their houses.

As far as the safety of the houses are concerned a majority of 128 (64%) respondents said that their houses are safe and secured while 72(36%) said that their houses are not safe and secured. This is to be mentioned here that presently the Govt. gives priority to converting kachha houses to pucca houses. The families need to be capacitated to avail the benefits provided by the Govt.

1.6 Institutional Involvement of the Families

The institutions such as SHG, VCPC, VDC, SMC, Farmer's club, Puja Committee, GKS exist at the village level. The study found that out of 200 respondents, a majority of 77 (38.5%) are involved in SHGs while 40(20%) are involved in Village Child Protection Committee (VCPC), 01(.5%) in VDC, 02(1%) in SMC, 03 (1.5%) in Farmer's Club, 02(1%) in Puja Committee and 01(.5%) in GKS. While their representation in SHG is considerable, in other institutions it looks very thin. It is important to note that 74(37%) respondents had no involvement in any of the village level institutions. There could be different reasons for no involvement/less involvement of such families in institutions. However, the families' priority concern for livelihood sustenance could be an important factor.

Their participation and involvement particularly in the PRIs is very essential now-a-days since those bodies determine their development priorities. Their participation in different institutions would help them to share their concerns with others.

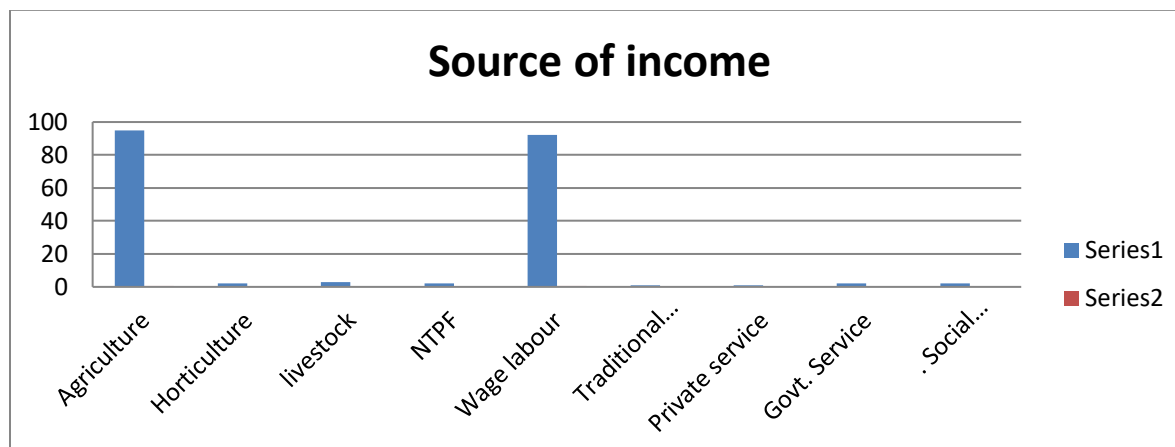
(The GP wise tables may be seen in section-1 given in the annexure.)

CHAPTER -3

Livelihood Status of the Families

2.1 Primary source of Income

The primary source of income of the families included agriculture, horticulture, livestock, fishery, NTFP, wage labour, traditional occupation, business, private service, Govt. Service, Social Security Schemes and remittances. The study reveals that a majority of 95 (47.5%) respondents have agriculture as their primary source of income while 92 (46%) have wage labour as their primary source of income. About 6.5% respondents had other occupations as their primary source of income. This reflects that most families find agriculture and wage labour as their primary source of income.



2.2 Secondary source of income

On the other hand 24(12%) respondents have agriculture as their secondary source of income while 34(17%) have livestock, 8(4%) have NTFP, 56(28%) have wage labour, 03(1.5%) have business, 4(2%) have private service, 01(.5%) has Govt. service, and 19 (9.5%) have social security schemes as their secondary source of income. A majority of 51(25.5%) respondents said that they had no secondary source of income.

2.3 Annual Income Earned through different sources

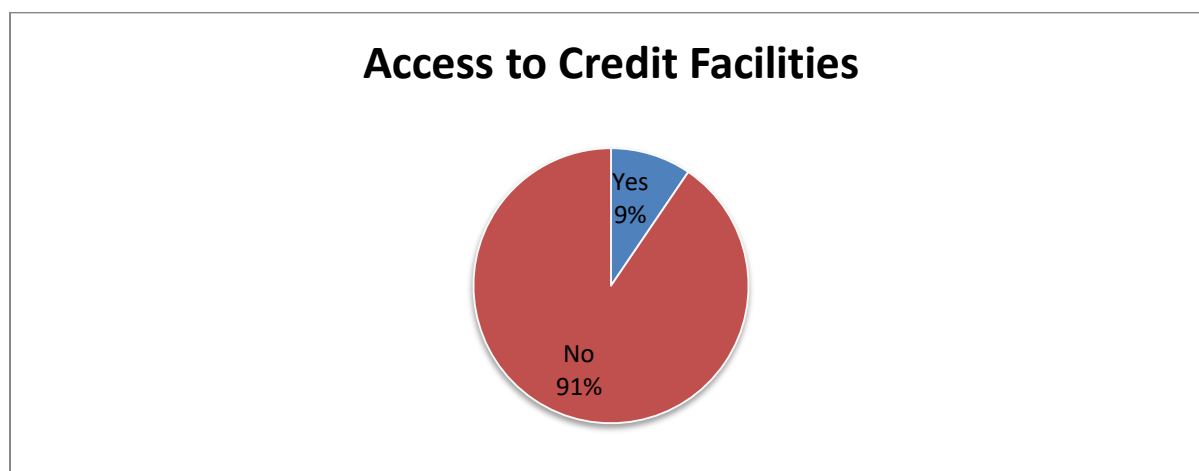
The annual income earned through different sources included agriculture, horticulture, livestock, fishery, NTFP, wage labour, traditional occupation, business, private service, Govt. Service, Social Security Schemes and remittances. The study reveals that from all these sources a minimum income of Rs 49,980/- is earned by the respondents annually while the maximum goes up to Rs 4,02,600/-. The source wise income ranges are presented in the table below.

Income through various sources	Annual Earning (Minimum Amount)	Annual Earning (Maximum Amount)
Agriculture	780	60000
Horticulture	100	400
Livestock	1000	25000
Fishery	100	5000
NTFP	1000	8000
Wage labour	1000	75000
Traditional occupation	500	30000
Business	1000	48000
Private service	12000	72000
Govt. Service	24000	60000
Social Security Schemes	3500	7200
Remittance	0	0
Others(<i>please specify</i>)	5000	12000
Total	49980	402600

It reflects that the average income per family at minimum end comes to Rs 250/- and at maximum end comes to Rs 2013/- which seems to be very negligible. As it appears from the table the lion share of the income i.e., 44% goes to private service, Govt. service and business in maximum end income while in minimum end it is 74%. This reflects inequitable distribution of income among the respondent families. The income from agriculture, livestock and wage labour looks critical for the livelihood sustenance of the vulnerable families. Their income level, for a standard living, needs to be increased.

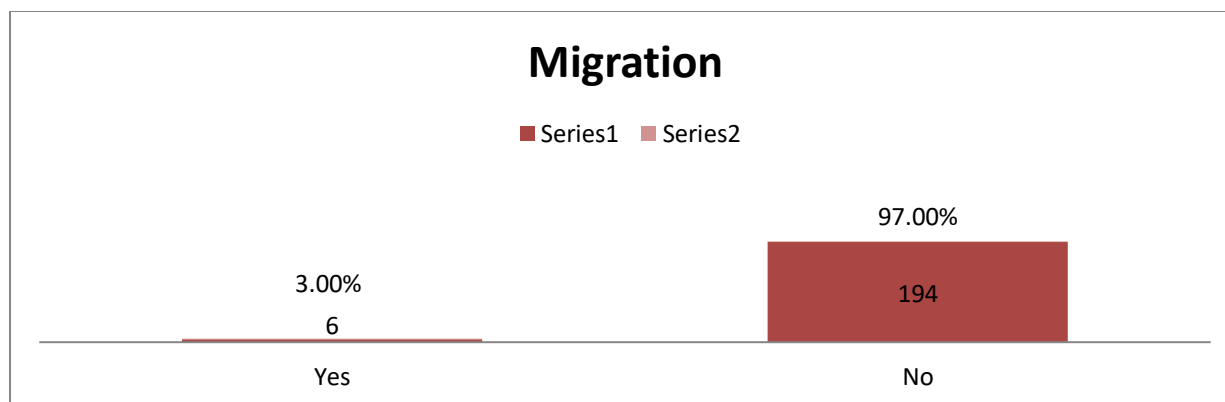
2.4 Access to Credit Facilities

With regard to access to credit facilities the study depicts that a large majority of 181(90.5%) do not have any access to credit facilities while only 19 (9.5%) have access to such facilities that include family members, bank, SHG and MFI. Out of 19 members maximum 11 (57.9%) have availed credit from the SHG while 4(21.1%) from bank, 3(15.8%) from MFI and only 01(5.3%) from family members. Only 6(3%) families said that they have availed credit during the last two years while 13(6.5%) did not avail any credit. However, for a large majority of 181(90.5%) respondents it was not applicable. In terms of credit repayment only 5(2.5%) respondents said that they have paid back the credit on line while it was inapplicable to 195(97.5%) respondents.



2.5 Migration

The study reveals that only 06(3%) respondents' family members migrated outside for getting employment while for 194(97%) respondents no one in their families migrated to outside for employment.



The nature of migration was seasonal in 04(66.7%) cases within the district while it was permanent in 02(33.3%) cases which were not within the district.

(The GP wise tables may be seen in section-2 given in the annexure)



Discussion with Vulnerable Family

CHAPTER -4

SECTION -3

Status of Families Access to Govt. schemes

3.1 Families Access to different schemes

The study reveals that all 200(100%) families have access to Govt. schemes as part of their entitlements. It is to be noted that the families have access to schemes such as National Old Age Pension, Widow Pension, Disable Pension, Madhubabu Pension, PM Jibanjyoti Yolanda, PM Ujjala Yonjana, Biju Krushak Kalyan Yojana, Adhar Card, Ration Card, Voter Card, Job Card, Education Stipend, Scholarship, Cycle, Nirman Shramik Card, BPL electrification, PMAY scheme and BPAY scheme.

A majority of 68 (34%) respondents in Mahadeijoda GP had access to different schemes while 37(18.5%) had access in Baradapal GP. In Khutapada, Talakainsari and Gopinathpur GPs 10% of the respondents from each GP accessed the Govt. schemes. In rest of the GPs it was below 10%. While the maximum respondents i.e 15(7.5%) were in Nahabeda GP, the minimum was .5% in both Raisuan and Padmapur GPs.

3.2 Assistance to avail scheme benefits

In terms of getting assistance to avail such schemes, a majority of 191(95.5%) said that they have received help from different sources to avail the schemes while only 09(4.5) said that they did not receive anyone's help. Those who received assistance mentioned that they received the assistance of GP, Block, School, SSA, Labour Department, Health Department, ICDS, Agriculture Department, Veterinary Department, Bank and NGO. Out of 191, a majority of 132(69.1) received the support of the GP to avail the Govt. schemes. In other cases it varied from 6.8% to .5% who received assistance from sources other than GP. It seems GP is primary level institutions with whom people have immediate access to get schematic information and the required assistance to avail the schematic benefits.

3.3 Challenges in accessing Govt. schemes

However, the respondent families faced challenges in terms of lack of complete information, incomplete document, hassle in completing the application procedure, delay in allotment of the scheme benefits and irregular disbursement of the allotted amount. A majority of 85 (42.5%) respondents are of the view that they do not get complete information on the scheme while 58(29%) said that they faced the hassles in completing the entire application procedure, 28(14%) said that there was delay in getting the allotment, 24(12%) said that they could not complete the document and only 5(2.5%) said that there was irregular disbursement of the allotted benefit. Two important aspects are visible here. One is getting the complete information and the other is the hassles of completing the entire application procedure.

(The GP wise tables may be seen in section-3 given in the annexure)



Interview with Family

CHAPTER -5

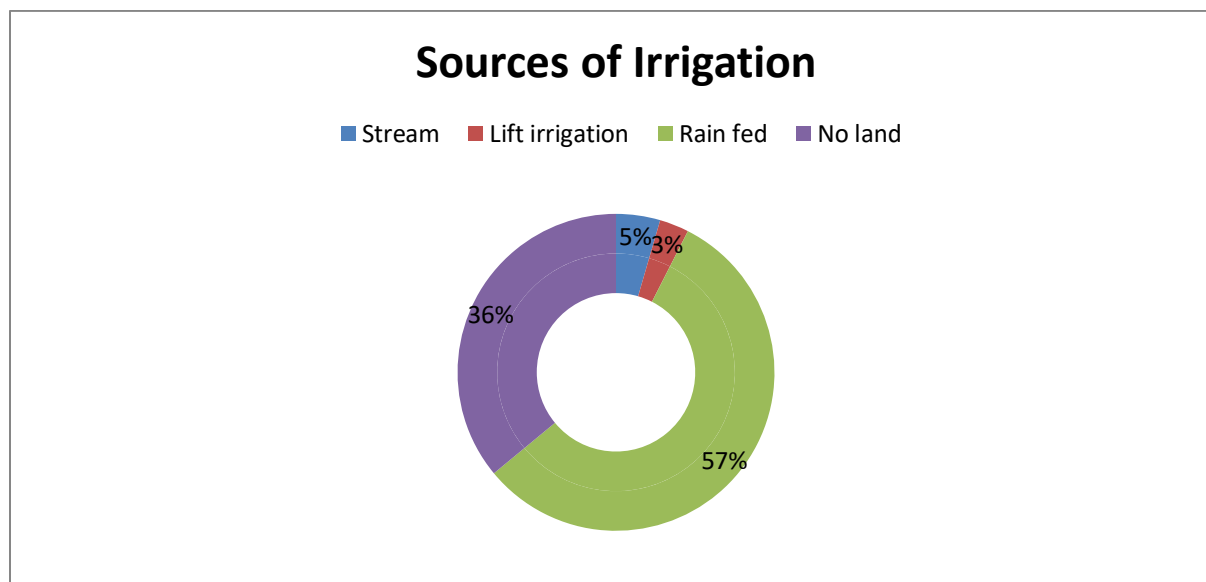
Status of Agriculture

4.1 Families undertaking Agriculture

From among 200 respondents, 107(53.5%) undertake agriculture in their own land while 12(6%) undertake agriculture on sharecropping basis. 09 (4.5%) respondents undertake agriculture both on their own land as well as on sharecropping basis. It is important to note here that substantial number of families i.e 72 (36%) do not have any land to undertake agricultural activities. This means these families do not get any income from agriculture and depend on either wage labour or any other sources for earning their livelihood. These families neither do any sharecropping also. Either land is not available to them or the arrangement is not beneficial to them.

4.2 Sources of Irrigation

In terms of irrigation of the land the families depend on perennial streams, lift irrigation and rain. While majority of 113 (56.5%) depend on rainfall, 09 (4.5%) depend on perennial stream and 06 (3.0%) depend on lift irrigation.



4.3 Agriculture Season

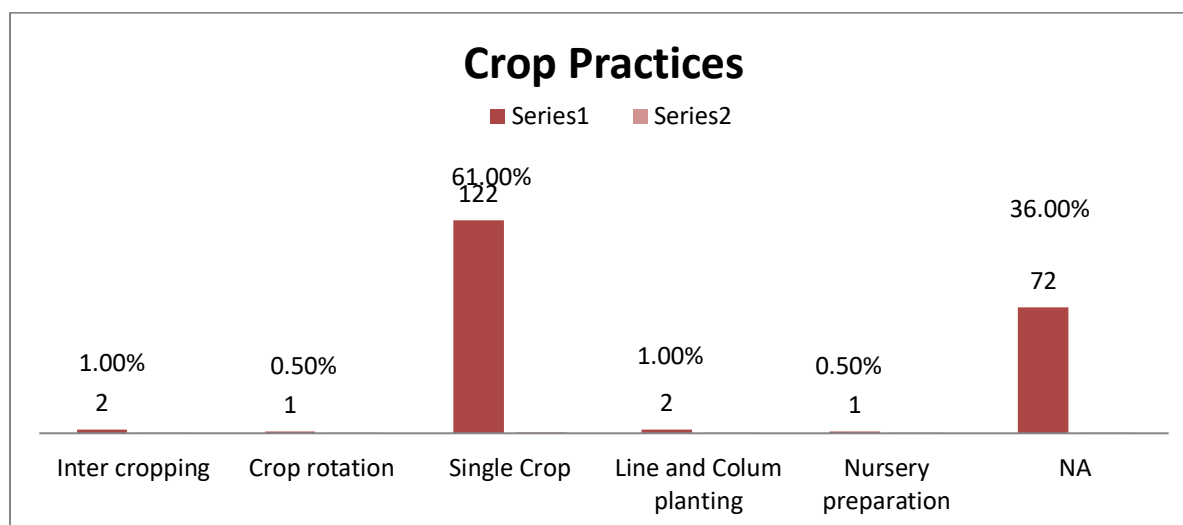
In terms of seasons of agriculture majority of 115 (57.5%) families undertake kharif season crop which is in rainy season while 11(5.5%) undertake Rabi season crop which is in winter season and only 02(1%) undertake summer season crop. For other 72 (36.0%) it is not applicable as they don't have land. This reflects that most people undertake kharif season crop which is mainly the paddy crop under rain fed conditions.

4.4 Types of crops grown

Two types of crops are grown. One is food crop and the other is cash crop. Majority of 127(63.5%) grow food crops while only 1(.5%) grow cash crop. Rest others do not grow any crop as they do not have any land.

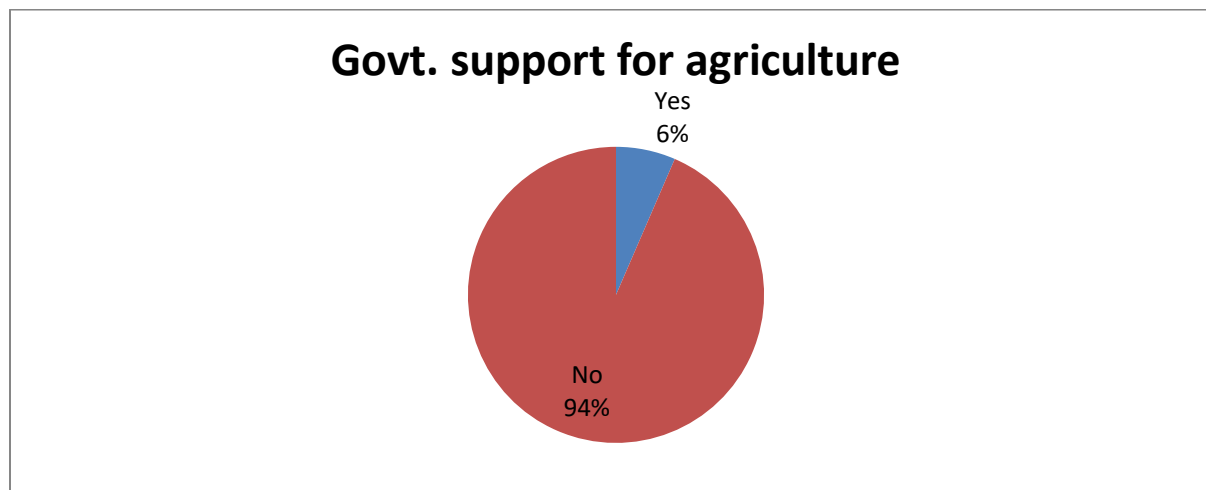
4.5 Crop Practices

Similarly, in terms of crop practices families undertake intercropping, crop rotation, single cropping, line and column planting and nursery preparation. The study found that a majority of 122(61%) families undertake single cropping practice while other practices are very negligible. 1-2 families only take up intercropping, crop rotation, nursery and line planting practices. This shows that there is no much impact on cost effective and productive agricultural practices.



4.6 Govt. support for agriculture

With regard to receiving Govt. support for undertaking agriculture only 13 (6.5%) families have received such support while rest other 187 (93.5%) have not received any support. Out of 13 families who have received support 4(30.8%) mentioned that they received support in the form of training while 09(69.2%) received support in the form of fertilizer.



4.7 Use of manure in crops

Coming to use of fertilizer in crops majority of 109(54.5%) said that they used chemical fertilizer while 11(5.5%) used cow dung and 8(4%) used organic manure. The fact to be mentioned here is that due to the repeated uses of chemical fertilizer, the soil fertility is gradually decreasing. The scientists recommend for balanced use of both chemical and organic manure to keep the soil health in good condition. The benefits of using organic manure may be shared with the farming families in workshops or training programmes.

4.8 Use of seeds

In terms of use of seeds it is found that people use local variety seeds, high yielding and hybrid seeds for cultivation. While a majority of 73(36.5%) go for use of local variety seeds, 29(14.5%) use high yielding variety and 26(13.0%) use the hybrid seeds. For rest others 72(36.0%) it was not applicable. For effective germination of local variety seeds, the famers may be imparted training on the scientific process of seed preservation.

4.9 Marketing of the agricultural produces

There are three ways to market the crops. One is local Haat, second is middlemen and third is nearest market. It is found that maximum 98 (49%) families sale their products to the middlemen while 18(9.0%) sale their products in local haat and 12(6%) sale in the nearest market. Middlemen are actually exploiting the famers by giving them less price. On the other hand the famers do not have exposure to secondary markets to fetch a good price on the produces. Sometimes the farmers sell the produces at very less price under distress conditions.

In terms of receiving proper price of the products 95 (47.5%) say that they get the proper price while 33 (16.5%) did not receive the proper price. It was not applicable to 72(36.0%) families. On the one hand the farmers lack the market information and on the other hand they need immediate cash. This is the situation under which the farmers sell and realize the price while the middlemen play with them to get a loin share from the price of the produce sold in the market.

(The GP wise tables may be seen in section-4 given in the annexure)



Focus Group Discussion

CHAPTER -6

Status of Livestock

5.1 Families possessing livestock

The study reveals that out of 200 family respondents, a majority of 124(62%) do not have any livestock in their families. Only 76 (38%) families are found to have possessed livestock. The livestock mainly include cattle, poultry and Goat. 46(23%) families are found to have possessed goat while 18(9%) possess cattle and 12(6%) only poultry. In tribal areas the livestock is generally considered as the insurance of the poor. The trend shows that less people are having livestock. This is one activity which needs to be promoted with improved practices and capacity building of the families so that the needy family earns additional source of income. The women in the families may be engaged in undertaking these activities as source of income earning. Particularly, poultry and goat rearing are found to be very profitable. The women can go for backyard poultry for effective rearing management.

5.2 Support received from Govt. to rear livestock

In terms of getting the support of the Govt. or NGOs it found that only 30 (15%) families have received the support while a large majority of 170 (85%) have not received the same. Under IGP schemes promoted by Govt. the activities like poultry rearing and goat rearing are given preference. The effort should be made to link the interested families with the appropriate schemes of the Govt.

For marketing, 34(17%) of the families sale the livestock in the local market while 17(8.5%) sale in the nearby market and only 09(4.5%) sale to the middlemen. It is not applicable to 170 (70%) families. Only 22(11%) said that they received the proper price of their products while 37(18.5%) did not receive the same.

(The GP wise tables may be seen in section-5 given in the annexure)

CHAPTER -7

Status of Non-timer Forest Produces (NTFP)

6.1 Types of NTFPs available

The non-timber forest products that are available in the area are of different varieties such as fruits, flowers, roots, leafs, mushroom, sal stick etc. Maximum 60 (30%) families mentioned about sal sticks, 50 (25%) families mentioned about flowers, 33(16.5%) mentioned about leafs, 19 (9.5%) about mushroom, 26 (13%) mentioned about different types of roots and 12 (06%) families mentioned about varieties of fruits like lemon, guava, mohua, sopeta etc. The women may be engaged in sal leaf stitching and making of leaf plates and cups. This would be value addition to the leaf they collect. By doing this they could earn more prices on the produces.

6.2 Access to NTFP

In terms of accessing those produces the study reveals that maximum 50(25%) families collect fruits while 49(24.5%) collect flowers, 37(18.5%) collect roots, 28(14%) collect leaf, 20 (10%) mushroom and 16(8%) collect Sal Stick. It is to be mentioned here that these produces are generally available in the nearby forest. While mostly tribal families collect these produces basically to meet their food requirements, part of it is also sold out to earn immediate cash income. Over the years the availability of these resources is getting reduced due to over exploitation, lack of appropriate conservation practices, adverse climate change impact etc. Forest is known to be part of tribal life and livelihood. The tribal families may be capacitated to conserve their forest with due support from Govt. and non-Govt. agencies.

6.3 Challenges in getting access to NTFP

However, these families, while accessing forest produces have often faced lot of difficulties. In terms of difficulties the study found that a majority of 117(58.5%) face difficulty in entering forest as the Forest Department prohibits them. Similarly, 78(39%) families get fear of wild life animals, 2 families say that often false cases are lodged against them by the Forest Department people and only 3(1.5%) families have faced demand of bribe from the forest officials. These are

the instances where the poor families do not know what to do. They need to be properly guided.

In terms of sales a majority of 192 (96%) sale the produces to the middlemen while rest 08(4%) sale to others in the market or through vending in villages.

6.4 Price realization on NTFP

In terms of price realization on sale of produces a majority of 68(34%) are of the opinion that they do not get the proper price on the produces. The middlemen actually take the lion share of the product price in the market. There should be proper market price information dissemination among the families so as to help them to access the right market for the sale of their produce.

Similarly, 66(33%) mentioned that they face difficulties in adding value to the products and 66 (33%) mentioned about lack of proper marketing system to sale the NTFP. The possible value addition activities like making of sal leaf and cups, dried mushroom, pickle making etc. could be promoted to help the needy families to earn more.

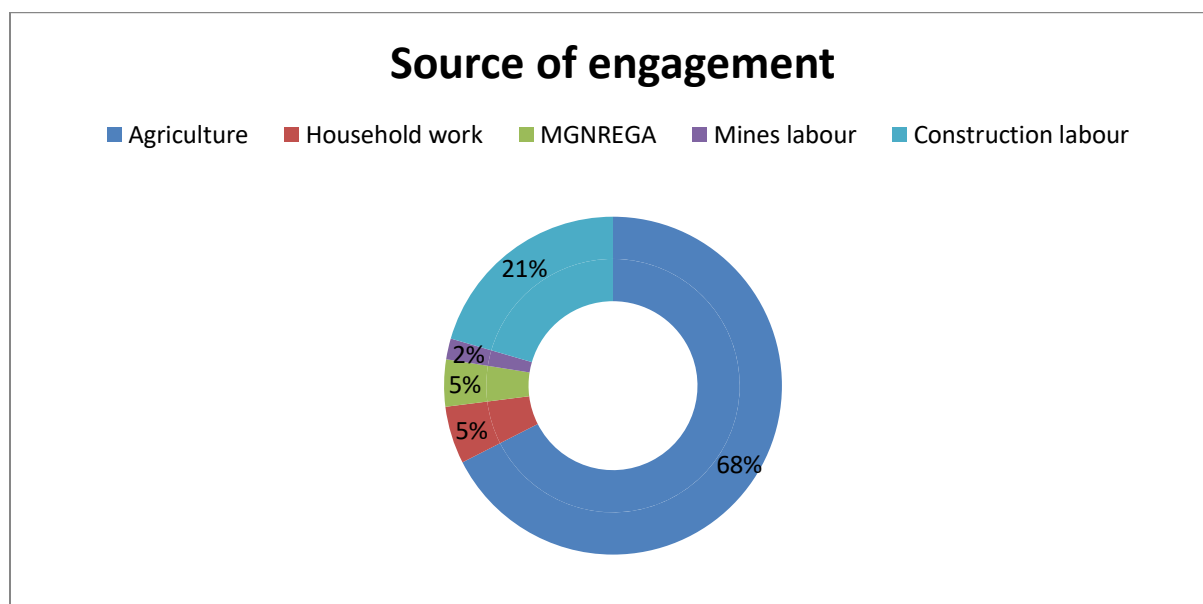
(The GP wise tables may be seen in section-6 given in the annexure)

CHAPTER-8

Status of Wage Labour

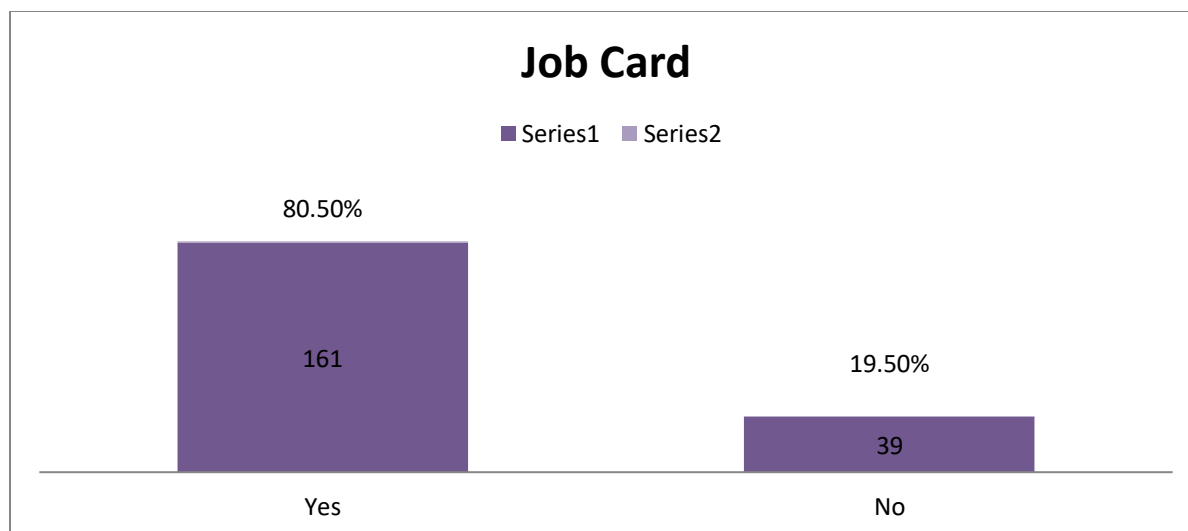
7.1 Source of engagement

From the income analysis given above it is found that wage labour is a major source of income for the marginalized communities. The families work as wage labour in agriculture, household work, MNREGA, mines and construction industries. The study depicts that maximum of 135 (67.5%) get wage labour in agriculture sector while 41(20.5%) get the same in construction industry, 11(5.5%) work as wage labour in household works and 09 (4.5%) in MNREGA. It is to be mentioned here that under the Mahatma Gandhi National Rural Employment Guarantee Act minimum 100 days work is assured to the job card holders. However, due to deficiencies in programme execution particularly delayed payment, less people now showing interest to work under the scheme.

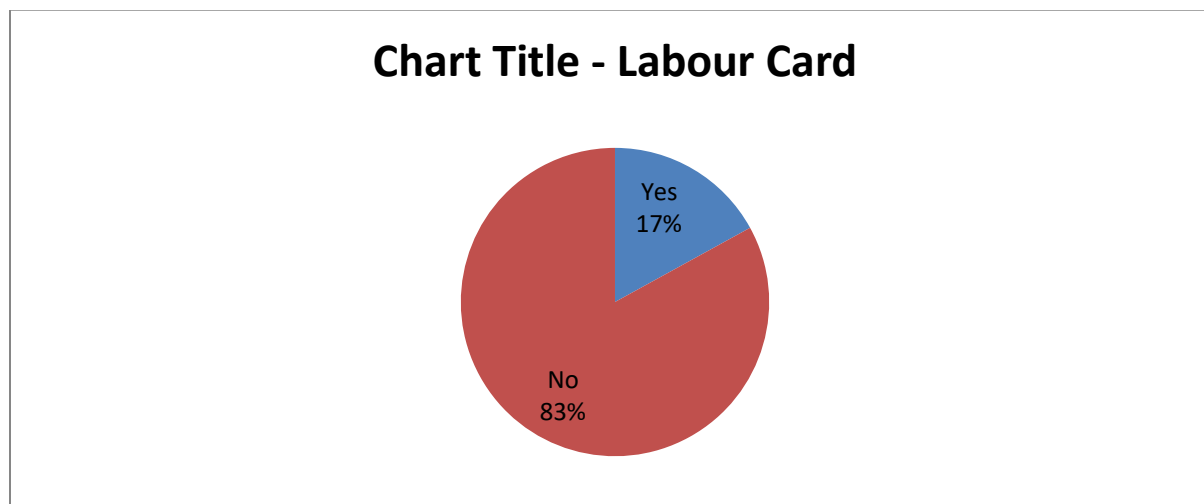


7.2 Job Card and labour card holders

The study reveals that out of 200 family respondents, majority 161(80.5%) have the job cards under the MNREGA while other do not have. Similarly, it is also found that only 34(17%) families possess the labour card and get the benefit while a large majority of 166(83%) have not availed such facilities. Even in terms of awareness on labour card only 15(7.5%) are aware of this while a large majority of 185(92.5%) do not have any information on this.



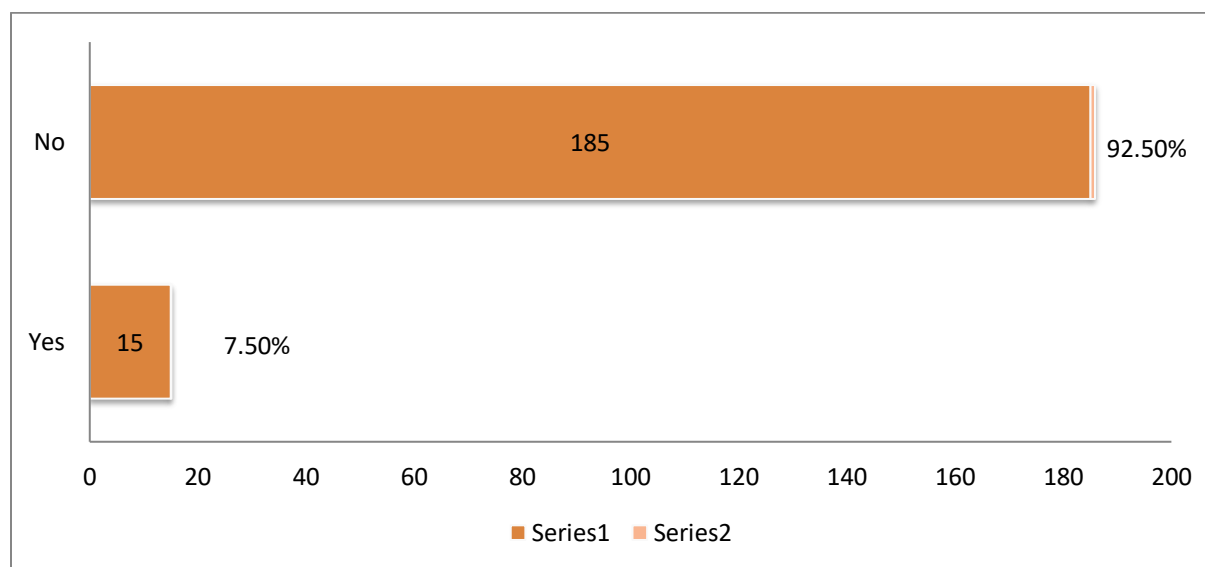
It is to be mentioned here that the labour card is an identity proof of workers which is issued by the Labour Department. A card holder, besides getting the wages also gets other benefits from the Govt.. Unfortunately majority families are not aware of this. Although 20.5% families work in construction industry, only 17% have the cards. This benefit should be availed by others who are working in other sectors. With focused attention of the Govt. to provide benefits and pensions to labourers, it holds much importance that those who work as daily labour should possess the labour card.



7.3 Benefits received from Govt. or Company

With regard to receiving benefits from the company or Govt. while working as daily labour, the study found that only 85(42.5%) have received benefits while rest

115(57.5%) have not received the same. The benefits availed include engagement, safety and cycle. While majority of 74 (86.0%) got engagement, 10(11.67%) cycle and 1(1.2%) received safety benefits.



7.4 Days of wage employment

In terms of average days of work one labour gets the study reveals that 47 (54.7%) get work from 15-20 days while 21(24.4%) get for 15-20 days, 9(10.4%) get for 5-10 days and 08(9.3%) work for 10-15 days.

7.5 Wage labour in practice

With regard to actual payment of wage the study depicts that maximum number of 150 (67.5%) respondents mentioned the actual wage rate of Rs 150/- per day while 35 (17.5%) mentioned Rs 200/-, 21(10.5%) mentioned Rs 100/- , 02 (1%) mentioned Rs 250/- and 06(3%) mentioned Rs 300/- as daily wage. This looks much below the minimum wage declared by Govt. for skilled and semi-skilled labour. It is to be noted here that the Govt. of Odisha has declared the minimum wages for unskilled labour Rs 280/-, semiskilled – Rs 320, skilled – Rs 370 and high skilled Rs 430/-. This is a matter of concern that the families who work as daily labour actually receive very less compared to what the Govt. has declared. Effort should be made to assert rights of the daily wage labour before the employers to ensure the declared rates by the Govt.

7.6 Daily wage for men and women

Coming to men and women wage per day the study found that the actual daily wage rate for men varies from Rs150/- Rs 250 while for the women it varies from Rs 75/- to Rs200/-. While 108(54%) respondents mentioned Rs 150/- as daily wage for men, 36(18%) mentioned Rs 200/- and 56 (28%) mentioned Rs 250/- as daily wage for men. Similarly, a majority of 67(33.5%) mentioned Rs 75/- as daily wages for women, 64(32%) mentioned Rs 100/-, 45(22.5%) mentioned Rs 150/- and 24 (12%) mentioned Rs 200/- as daily wage for women. Here the study finds discrimination between men and women daily wage while Govt. prescribes no discrimination in wage payment to men and women.

7.7 Wage employment under MNREGA

In terms of work under MNREGA scheme the study reveals that there are only 21 respondents who have worked under the MNREGA scheme. Out of 21 a majority of 20 (95.2%) get less than 25 days engagement while only 01(4.8%) gets engagement from 26-50 days. This means getting below 25% of the entitled jobs under the scheme.

(The GP wise tables may be seen in section-7 given in the annexure)



Focus Group Discussion with the women farmers

CHAPTER -9

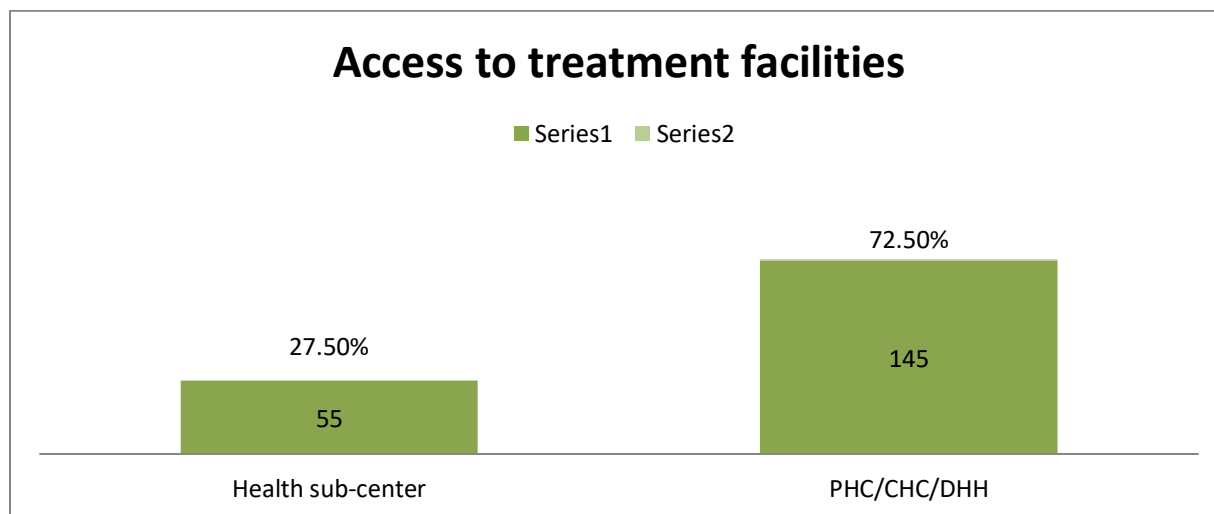
Status of Health and Sanitation

8.1 Suffering in family

With regard to suffering from any disease in the family the study found that 184(92%) families suffered different diseases while only 16(8%) did not suffer during last one year. It indicates that majority people suffer from different diseases in the area. Out of 184, 181 (98.4%) suffered from fever while only 03 (1.6%) suffered from malaria.

8.2 Access to treatment facilities

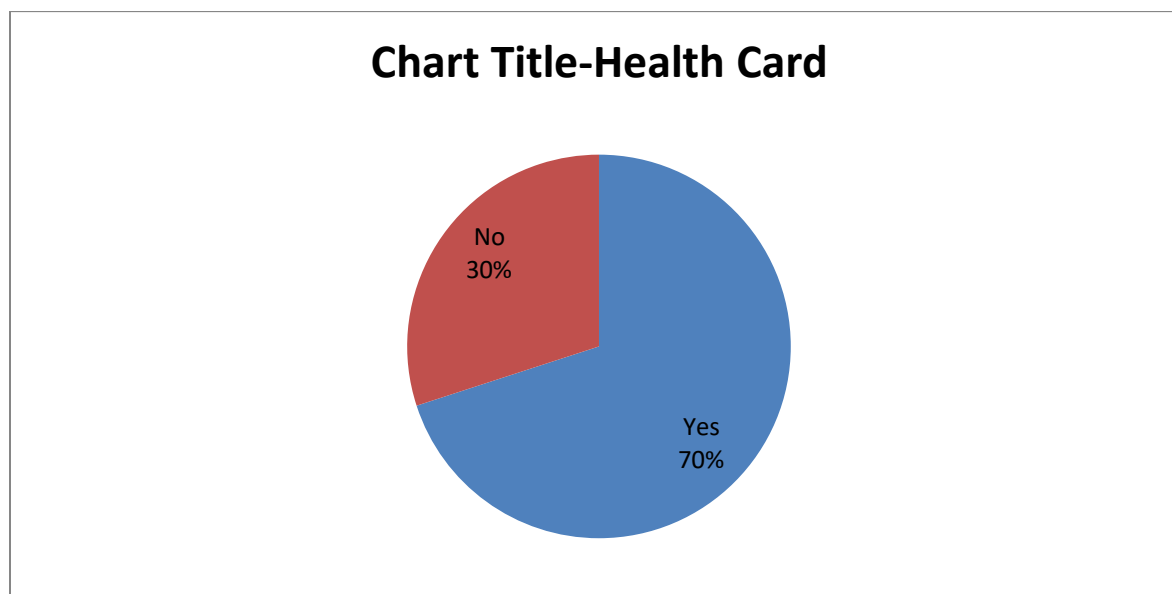
Study also reveals that a majority of 145(72.5%) families generally get access to Primary Health Centre/Community Health Centre/ DHH for treatment when someone in their family is ill. Only 55(27.5%) get access to the Health Sub-centre in the nearby locality.



8.3 Health Card

In terms of availing a health card a majority of 140(70%) were found to have possessed the health card while 60(30%) do not have the same. From among 140, a majority of 130 (92.9%) have possessed the health card under the Rastriya Swasthya Bima Yojana (RSBY) while 5 (3.6%) each were found to have possessed the health card under the Biju Krushak Kalyan Yojana(BKKY) and Biju Swasthya Kalyan Yojana(BSKY) respectively. The study depicts that only 37 families have

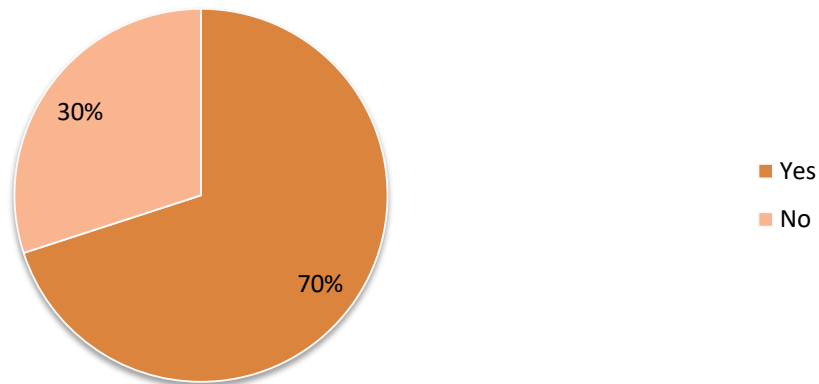
used these cards for getting treatment. Out of 37, 13 (35.1%) families received yearly treatment, 9 (24.3%) received the treatment monthly and 13(35.1%) received the treatment quarterly and only 2(5.4%) received the half yearly treatment.



8.4 Cases of pregnant women

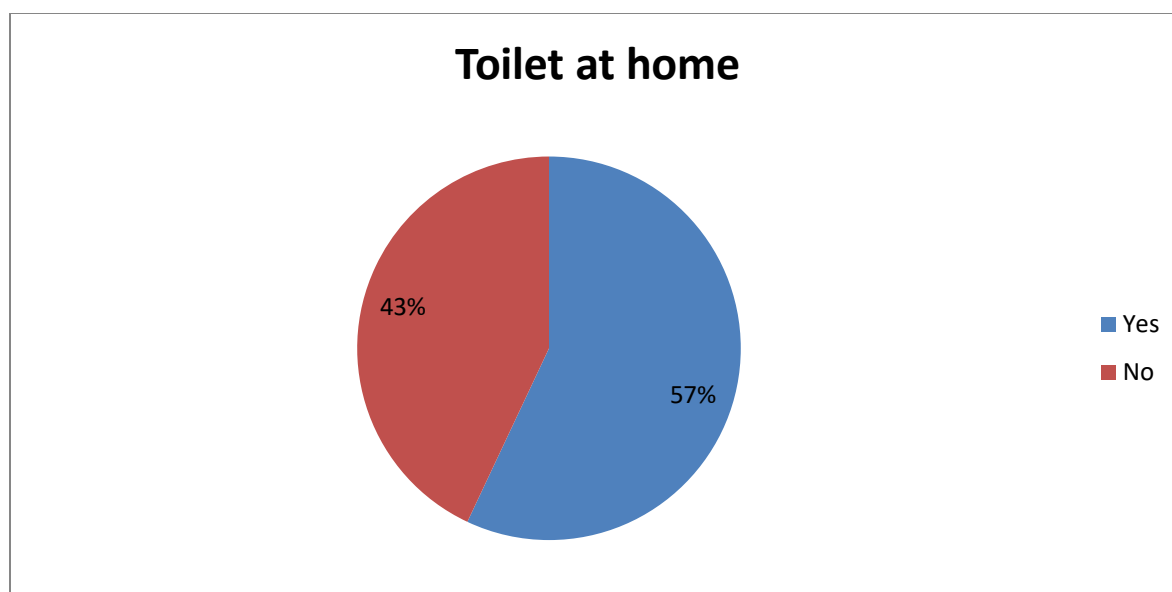
With regard to pregnant women the study found that only 22 (11%) families had pregnant women in their families during the last three years while a large majority of 178(89%) had no pregnancy of women. Out of 22 families, a majority of 21 (95.5%) got registered with the Govt. Hospital while only 1(4.5%) did not register. It could be mentioned here that with the prevailing schemes of the Govt. if a pregnant women is registered with Govt. hospital, they are entitled for benefits. These being the reason coupled with awareness on benefits of institutional delivery people are now tilted to go for Hospitals instead of delivery at home. Out of 22, 19 (86.5%) families are found to have received the antenatal care during pregnancy from the hospital while 03(13.6%) did not receive the same. Similarly, 19 of them went for institutional delivery while only 03 did not go for the same. In terms of lactating mothers in the families during last three years the study reveals that there were lactating mothers in 24 (12%) families while in 176 (88%) families no lactating mothers were there. With regard to receiving postnatal (three) care during lactating it is found that out of 24 , majority of 23 (95.8%) received the same while only 1 (4.2%) did not receive the same.

Antenatal Care During Pregnancy



8.5 Toilet at home

In terms of having a sanitary toilet, the study reveals that a majority of 114(57%) have sanitary toilets at their homes while 86 (43%) do not have the same. It is to be noted here that in spite of the Swachhha Bharat Mission of the Govt. 43% families still do not have the same. With regard to the use of toilets by every member of the house the study found that out of 114, in 66(57.9%) families the family members are using the same while in 48 (42.1%) families all members are not using the same. In terms of washing of hands before eating and after toilet, the study reveals that in majority of 103 (51.5%) families all members wash their hands with soap before eating and after toilet while in 51(25.5%) no one wash the hand with soap and in 46(23%) families some of the family members wash their hands with soap.



8.6 Drinking Water

With regard to the sources of drinking water study found that the families mainly depend on tube well, dug well and supply water for drinking water purpose. It is observed that a majority of 186(93%) families depend on Tube Well for drinking water while 13(6.5%)- depend on supply water and only 1 (.5%) depends on dug well.

In terms of treating water before drinking the study reveals that a majority of 193 (96.5%) families do not treat the water before drinking while only 07(3.5%) families treat the water.

8.7 Use of Mosquito Net

With regard to use of mosquito net by the families, it is found that a majority of 162(81%) use the same while only 38(19%) families do not use. It is to be mentioned here that Keonjhar district is a malaria prone district and the percentage of death cases due to malaria is high in Keonjhar.

Therefore, use of mosquito net is very essential. About 20% of the families are vulnerable to malaria since they do not use the mosquito nets. The results showed a low incidence of malaria which is 03 (1.6%) suffered from malaria.

8.8 Cleanliness and personal Hygiene

With regard to cleanliness of the houses every day it is found that majority of 190 (95%) families clean their houses every day while rest others (5%) do not do the same. In terms of cleaning the surroundings (homestead area) the study reveals that majority of 191 (95.5%) families clean their surroundings while rest 4.5% does not do the same.

With regard to cleaning of cloth it is found that a majority of 188(94%) families wash their cloth while rest 6% does not do the same. Similarly, for using soap while bathing it is found that 188 (94%) families use the soap while bathing and the rest 6% do not use any soap.

The frequency of using soap in a week varies from once to daily in a week. The study reveals that a majority of 113(65.5%) use the soap daily while 87(43.5%) use the same once in a week.

By and large it reflects a trend that people have started adopting practices of maintaining cleanliness and personal hygiene baring few who are yet to adopt such practices.

(The GP wise tables may be seen in section-8 given in the annexure)

CHAPTER -10

Status of Nutrition

9.1 Food Intake

In terms of food intake per day the study reveals that a majority of 162(81%) families take meals thrice daily while 35(17.5%) take the meal twice and only 03(1.5%) take the meals four times daily. It is quite natural that the families do physical labour every daily and to sustain their energy they would require food more than twice which is a general practice among different families.

9.2 Access to Food Basket

With regard to access of families to different food baskets for their food intake the study reveals that a majority of 121 (60.5%) have access to food baskets such as cereals, green vegetable and tuber, pulses, cereal and green vegetable, cereal and pulses and green vegetable and pulses and they consume those as per their choice and preference. Out of remaining families 11(5.5%) have access to cereals, 20(10%) to green vegetable and tuber, 3 (1.5%) to pulses, 24(12%) to cereal and green vegetable, 03 (1.5%) to cereal and pulses and 18(9%) have access to green vegetable and pulses.

9.3 Food basket in a day

In this aspect the study depicts that a majority of 177(88.5%) have green vegetable and tuber in their daily food basket while 18(9%) have cereal and only 5(2.5%) have pulses. It shows that most people have access to vegetable and tuber. Tuber is generally collected from the forest and a vegetable is cultivated by them.

9.4 Additional protein supplement in food intake

It is found that a majority of 168(84%) families take egg in their food intake as additional protein while 28(14%) take fish and only 4(2%) take meat. In terms of frequency of taking such supplements the study found that a majority of 144 (72%) respondents take the supplement once in a month while 14(7%) weekly and 17(8.5%) bi-weekly. However, 25(12.5%) respondents never take any protein supplement.

9.5 Possession of Ration Card by the families

The study reveals that a majority of 189(94.5%) families possess the ration card while only 11(5.5%) do not have the same. In terms of receiving the ration every month it is found that all the card holders receive the ration every month. While 177 (88.5%) receive the ration as per their entitlement, 23(11.5%) do not receive the same.

The fact to be noted here is that 11.5% families do not get the benefits as per the entitlement. The matter may be pursued at the authority level to ensure that these families get benefits. There could be a system error which could be rectified.

9.6 Health Status of the children

9.6.1 Children going to school

It is found that in 129 (64.5%) families the children go to school while in 71(35.5%) families children do not go to school. The children not going to school could be either no children in the family or children go for college education or employed in some other occupation or are drop outs.

As 35.5% do not go to school this aspect needs to be explored further to find out the reasons and take appropriate action.

9.6.2 Mid-day meal in the school

With regard to mid-day meals in the school every day the majority of 127(63.5%) families mention that mid-day meals are provided every day in the school while 73(36.5%) differ on this.

9.6.3 Children's coverage under the RBSKY

In 110(55%) families the children are covered under the RBSKY scheme and in 90(45%) families there is no coverage of children under the scheme.

9.6.4 Children going to Anganwadi Centre:

The children in the age group of 3-5 years go to Anganwadi centres in 165(82.5%) families while in case of 35(17.5%) families their children do not go to Anganwadi.

9.6.5 Children coming under the red zone

Only in 12 (6%) families the children come under red zone while there are no children in red zone in case of a majority of 188(94%) families.

9.6.6 Supplementary food in Anganwadi Centre for children under red zone

Only 32(16%) respondents say that the children under red zone get supplementary food while a large majority of 168(84%) mention that the children are not provided supplementary food.

9.6.7 Immunization at Anganwadi Centre:

Only 36 (18%) respondents mention that their children received immunization at Anganwadi centre while in case of 164 (82%) respondents their children did not receive any immunization.

9.6.8 Vitamin Supplement to children at Anganwadi Centre:

Only 39(19.5%) respondents mentioned that the children get vitamin supplement at the Anganwadi centre while majority of 161(80.5%) differ on this.

9.6.9 Varieties of Supplementary food at Anganwadi Centre:

Out of 39 family respondents who said that their children are getting supplementary food mentioned the varieties such as Chhatua, egg, cooked food and Mung. While a majority of 35 (89.7%) mentioned that their children get chhatua as supplementary food, only 1 (2.6%) each mentioned about egg and cooked food respectively and only 2 (5.1%) mentioned that their children are getting Mung as supplementary food.

9.6.10 Exclusive breast feeding to children from 0-6 months:

It is found that only 22(11%) families provided exclusive breast feeding to their children from birth to 6 months while other 178(89%) did not provide the same. Breast feeding is very vital for the growth of the children. Since a large majority is not following this, there may be awareness and education programme for them so as to sensitize them on the importance of breast feeding.

9.6.11 Children getting cholesterol:

In this regard only 20(10%) respondents mentioned that their children are getting cholesterol while a large majority of 180(90%) say no.

9.6.12 Semi-liquid food to children after 06 months:

In this regard the study reveals that only in case of 23 (11.5%) family respondents their children are provided with semi-liquid food after 06 months while in case of a large majority of 177 (88.5%) this is not practiced.

(The GP wise tables may be seen in section-9 given in the annexure)



Focus Groups discussion with children

CHAPTER- 11

Focus Group Discussion and Interview with AWC

10.1 Interview with Anganwadi Worker and Mother

Anganwadi Workers and mothers were interviewed in 17 Anganwadi Centres (AWCs). The details of their participation in the interview are as follows.

Sl No	Name of the AWC	Name of AWW	No of children	Distance form village
1	Medinipur	Tikina Behera	10	30 meter
2	Vegidihi	Tikina Behera	02	1/2km
3	Uparkaisari	Sakuntala Dehury	12	100 meter
4	Talakainsari	Ranjeeta Naik	15	30 meter
5	Jchinda	Susama Mohapatra	25	0km
6	Talakusumita	Bhubaneswari Munda	25	100 mtr
7	Jaladihi	Gulamani Mandal	10	100 mtr
8	Uparkusumita	Jahaja Naik	17	10 mtr
9	Baradapal	Kuntala Barik	26	10 mtr
10	Uparkampodihi	Jasoda Dehury	22	3 km
11	Talakampodihi	Kanchan Kuarruli	15	50 mtr
12	Tikarpada	Sakuntala Behera	37	100 mtr
13	Dalimapur	Manjulata Munda	19	100 mtr
14	Nuapada	Gouri Naik	35	0km
15	Madanangjodi	Lilabati Barik	27	100 mtr
16	Mahadeijoda	Nilima Munda	42	10 mtr
17	Solarpentha	Manjulata Palaian	27	100 mtr

The discussion centred around number of children attending AWC, behavior of the AWC, distance of the AWC form the village, regularity of the functioning, regularity of the AWW, regularity of the Helper, sanitarily condition at the AWC, weekly feed menu, visit of the ANM to the AWC, regularity of weight measurement of the children, celebration of THR and nutrition day at AWC, attendance of the lactating and pregnant mothers on the nutrition day, dress to children, safe drinking water facilities, toilet facilities, playing materials for the children etc.

It is found that on an average 21 children attend the AWC. The average distance is about 100 meter from the village except some cases where children come from ½ to 3kms distance. The behavior of the AWW is good. Barring few centres, other centres are running on a regular basis and the AWWs are coming to the centre regularly. Helper is regular at the centres. In addition to cooking food she also maintains cleanliness at the centre. There is weekly menu for the food distribution. ANMs visit the centres on regular basis to provide the health services. Weight measurement of the children is also taken on a regular basis. The THR and nutrition days are organized on a regular basis. The lactating and pregnant mothers are participating on these days to get education and dry food. All children are provided with dress. Barring some cases where tube well water and toilets are not there, in other centers the drinking water and toilet facilities are available. Except few centers, in other centers there are no playing materials for the children.

Irregular functioning of the AWC, absence of the AWW, irregular food menu, lack of playing materials, lack of safe drinking water facilities, toilets etc. distance factor for the children who come from ½-3km distance are some of the concerns which need to be addressed.

10.2 Summary of Focus Group Discussion with farmers

The FGDs were conducted with men and women farmers in 17 project area villages. The discussion centered on the following:

- Status of Agriculture
- Status of Livestock
- Status of NTFP
- Status of Wage
- Status of Migration
- Status of Traditional Skills
- Status of Social Security schemes
- Status of Nutrition

Contents of discussion

Agriculture: the families mainly undertake the Kharif crops i.e paddy under rain fed conditions using chemical fertilizer. During winter season very few families undertake vegetable cultivation. Most people are depended on agriculture for their livelihood sustenance. For agriculture they take loan from the bank or SHG. They

consume the agriculture produce at home and the surplus they sell in local haat or the middlemen. In terms of getting proper price on produces, it is not assured. It depends on the supply and demand. Besides agriculture, horticultural activities are very rare. Most people have not received the Govt. facilities under different schemes. In terms of demarcation of community forest under the FRA, it has not been done so far. About 36% of families do not have land to cultivate. Compared to men, the women are devoting more time in agriculture.

Livestock: The families generally keep cattle, goat and hen. While bullocks help them in agriculture work, the other animals are like insurance for them. They sell the goat and hen and get price to add to their family income. It helps them in emergency situation. Since there is forest area and pasture land the animals move around and get food.

NTFP: Since forest is nearby, the tribal community people get access to the forest and collect different produces like flowers, fruits, tubers, mushroom, leaf etc. Some of these are source of food for them. Sometimes they also sell out the produces to the middlemen and in nearby market to get immediate cash in hand. Mostly in rainy and summer season the produces are available in sufficient quantity.

Wage: Majority of families depend on wage labour for earning their livelihood. While the scope is less in agriculture, they get more work in construction sector. Although MNREGA work is available, the payment is delayed. People prefer to earn immediate income. The average prevalent wage rate is Rs150/-. The women get fewer wages compared to the men although they do the similar kind of work. During rainy season they do not get much wage employment in the village.

Traditional Skills: Very few communities depend on their traditional skill based occupation like potter, blacksmith, carpenter etc. Nowadays these families do not get enough income. Secondly, the new generation is not showing interest to take up the traditional skill based occupation. They struggle to earn their livelihood.

Social Security Schemes: The families get monthly ration, old age pension, widow pension, job card under the MNREGA, health insurance, labour card etc. However, there are families who have been deprived of getting benefits. Some

families also do not get the benefits even if they are entitled. They do not know the process and procedure to get justice from the authority.

Nutrition: The families particularly adopt different food practices that include mainly cereal, pulses, vegetable, egg, fish and meat. The children going to Anganwadi Centre get the mid-day meal and supplementary food. A balanced diet menu is maintained at the AWC. The weight measurement of the children is taken care there. Accordingly the children are provided food diet. The undernourished children are referred to hospital for treatment. Similarly, now-a-days the lactating mothers and pregnant mothers come to the AWC for health care counseling. They are also provided with nutritious food. The ANM visit the AWC and provide the health services to the children, pregnant women and adolescent girls. Immunization also takes place at the AWC.

10.3 Summary of Focus Group Discussion with the Children

The FGD was conducted among the children in all 17 project area villages.

The synopsis of the discussion is as follows;

There are some parentless children in the village who need to be supported for their education and livelihood. All children are aware of the child protection institutions at the district, block, gp and village level. There are child clubs in the villages and the children are the members in the clubs.

About 10% of the children do not go to school. It is due to their poverty condition and lack of interest of the parents for their education. The teachers teach the children in the school in a punishment free environment. If they do not understand, the teacher makes them understand. In a few cases the teachers are regular in the schools. In some of the schools there are no sufficient teachers that affect the proper teaching. Mid-day meal is provided in the school which is good. They are aware of the school education committee but they are not much aware of the meetings of the committees. The teacher praises them when some good work is done by them. In a few cases, there are safe drinking water facilities like tube well in the schools. They get the study material and dress from the school. Some of the children are aware about Rastriya Bal Swasthya Karyakram and mention that they get iron tablets and immunization under the programme. There is no discrimination by teacher while teaching. He/she pays equal attention to all children. Some of the children are getting stipend and girl children cycle. Most

children have bank account now-a-days. Baring few cases, the average distance of the school from the village is around 03 kms. For higher studies they trek a long way. Communication is not safe while they go to school. They are vulnerable to accidents. In some cases the teacher visits the house of the drop out children and undertakes counseling to the parents and the child.

At home they take breakfast, lunch and dinner. In breakfast it is mainly cake, biscuit and other light refreshment. In lunch it is mainly rice, dal and veg curry. Sometimes they also consume egg, fish and meat. Baring some cases, their parents never take alcohol at home. Neither have they quarreled in front of them. Baring some cases, although there are toilets at home, they are not using it regularly. They rarely wash their hands with soap. They clean their dress every day. They wash their hand before taking food and use mosquito net while sleeping. On holidays they go for playing and reading. If anyone scolds them in bad language they feel very bad. All of them are drinking tube well water which is found to be safe.

Learning of the team members

This area is a tribal populated area having a number of issues that affect the children as well as the families, like maternal poverty, illiteracy, scattered settlement with less infrastructure, poor education and lack of awareness, child labours, negative impact of the mining, unhygienic practices, unmarried motherhood, inborn death, child sexual abuse , non-accountability of the duty bearers, no livelihood option for the people, maternal death cause single parent , parentless children and the child marriage. People lack access to the Social security schemes launch by government. There is lack of preventive measures to protect the children from any form of vulnerability. People are not participated in the social development process. The single mothers are unable to take care of the children because of the lack of livelihood opportunities and income with them.

The poverty situation of the community is the root cause which affects the livelihood of the families. They are lacking nutritional food, health, sanitation, education facilities that cause severe damage to the family as well as the children. Government has the schemes for antipoverty but there is no any sustainable food security option for these families. The community is not so literate and aware to take the issue of the families as well as the children as a prime issue with the authority which affects the village livelihood and the vulnerability.

CHAPTER 12

RECOMMENDATION

Education: As per the findings 61.5% are found to be illiterate which is a major concern. Similarly, 1% is undergraduate level education and 17% is high school education. This presents a poor status of education among the target area people. Therefore, effort should be made to undertake non-formal education for the illiterates. Similarly, there should be awareness and sensitization on importance of education so that children go to school. Scholarships and tuition facilities may be provided to the children to go for higher education and achieve quality education.

Poverty: It is found that 97% of the families are below poverty line and all of them have ration cards under the PDS. The average income earned at the minimum end is Rs 250/- per family per annum while at the maximum end it comes to Rs 2013/- per annum. The major source of income comes from agriculture (about 47%) and wage labour (about 46%). It means people are surviving on a marginal level with the food support provided by Govt. It is therefore necessary to introduce IGP programme for the most vulnerable so that they earn good income to maintain a quality living. With regard to credit families it is found that 90.5% do not have any access to credit families. There few families who get credit from SHGs. Therefore, effort should be made to link these families with the banking system and enable them to avail credit for productive purposes.

Housing: The study found that 64% families live in Kachha houses. In spite of the housing schemes of the Govt. they have not been able to avail those facilities. The effort should be made to link these families with the appropriate schemes of the Govt. and enable them to avail the benefits.

Institutional Involvement: While about 38% families are involved in SHGs, a large majority of 74% are not involved in any of the village level institutions. It is to be noted that their participation in PRIs are very important that determines their development priorities. Similarly, they should also be involved in other village level institutions to raise their issues and concerns. In this regard they need to be sensitized.

Accessing Govt. schemes: It is observed that there are procedural difficulties which the people face in availing the facilities. There are families who are deprived of such facilities as do not complete the procedure. There are families who do not get the full entitlements and they don't know where to report and get justice. In this regard the vulnerable families may be guided and enabled to complete the procedure and approach the right authorities to get justice.

Agriculture: About 47% families depend on agriculture for their primary source of income. They only undertake single cropping in Kharif season. The cash crop is very rare. In the absence of modern agricultural practices the productivity is less. Therefore, effort should be made to introduce commercial agriculture with modern practices to enable farming families to earn better income. About 36% families do not have cultivable land. For them the other suitable income generating activities may be taken up.

Livestock: Only 76(38%) families possess the livestock. It is found to be an insurance benefit to the families at the time of urgency. Since people in these areas are familiar in goat and chicken rearing, these activities may be promoted in medium scale on a commercial basis so that the families earn reasonable income.

NTFP- Since the project area comes under the forest area there are varieties of NTFPs (flower, fruits, tubers, mushroom etc.) that are available in the forest. People get access to those produces. While part of it is consumed, the surplus is sold in the market. If value addition is made to the produces, this could provide higher income to the families. The forest department staff sometimes harass the people by asking for bribe and not allowing them to enter into forest. These cases may be taken up with appropriate authorities for appropriate remedial measures.

Wage Labour

This is a matter of concern that the families who work as daily labour actually receive very less compared to what the Govt. has declared. Effort should be made to assert rights of the daily wage labour before the employers to ensure that they get as per the declared rates by the Govt. There is discrimination between men and women wages which is not permitted by Govt.

The job card holders under the MNREGA are getting less than 25% of their entitled jobs under the scheme. Similarly, substantial number of families do not have labour card which are to be provided by the Labour department. Under the card they are entitled to certain benefits besides the wages they get. They should be enabled to avail the facilities.

Health and Sanitation:

There are families who have not yet installed the toilet at their homes. They need to be linked with the Govt. scheme to get the facility. It is found that those who have toilets do not use the same. In this regard regular awareness and sensitization campaign may be undertaken. On personal hygiene home visits may be made to introduce the best practices and ensure a habit among the people to follow the same. Mosquito nets may be provided to the vulnerable families who do not have the same. As Keonjhar district is malaria prone it is necessary that they continue to use the mosquito net. The adolescent girls and young women in the villages may be provided with subsidized sanitary napkins to prevent infection from menstruation.

Nutrition: The families follow their regular diet that includes cereal, pulses and vegetables. The protein part is found to be deficient. There may be sensitization needed regarding taking of egg, meat, milk and fish on regular intervals. Breast feeding is not practiced by 89% families. As breast feeding for 0-6 months is vital for the growth of the child it should be promoted through observation of breast feeding days and sensitization workshops.

