

CHAPTER-V

THE ROLE OF WOMEN PANCHAYAT MEMBERS IN IMPROVING THE PLIGHT OF RURAL WOMEN

5.1 Introduction

Since ancient times India's villages have always been the basic units of administration. Panchayats have been in existence in our country since times immemorial. Indeed, rural progress depends entirely on the active participation of Panchayat and involvement of people including weaker sections into common programmes and development activities. Gandhiji is being considered a great advocate of Panchayati Raj.

The main objectives of Panchayati Raj Institutions as per provision in the Article 40 of the Constitution of India are to uphold economic development and social justice. And achievement of these objectives may be possible by introducing reservation for weaker sections of the society like Scheduled Castes, Scheduled Tribes and women in the three tier Panchayat system.

First time in the history of Panchayat women were viewed as active agents of development programmes through the 73rd Constitutional Amendment Act which states that one-third of the local seats in local self-government institutions shall be statutorily reserved for women. The legislation has several important implications for the empowerment of women.

The objective of the Act is to build the Panchayat as an effective decentralised political institution at the grass roots level. The division of functions in its Eleventh Schedule makes it in reality, essentially an implementing agency for developmental activities.

Following are the 29 items of activities as enunciated in the Constitution Part IX, 243G Article. This Article especially stands for powers, authority and responsibilities of Panchayats. The items are:

1. Agriculture including agricultural extension.
2. Land improvement, implementation of land reforms, land consolidation and soil conservation.
3. Minor irrigation, water management and watershed development.
4. Animal husbandry, dairying and poultry.
5. Fisheries.

6. Social forestry and farm forestry.
7. Minor forest produce.
8. Small-scale industries, including food processing industries.
9. Khadi, village and cottage industries.
10. Rural housing.
11. Drinking water.
12. Fuel and fodder.
13. Roads, culverts, bridges, ferries, waterways and other means of communication.
14. Rural electrification, including distribution of electricity.
15. Non-conventional energy sources.
16. Poverty alleviation programmes.
17. Education, including primary and secondary schools.
18. Technical training and vocational education.
19. Adult and non-formal education.
20. Libraries.
21. Cultural activities.
22. Markets and fairs.
23. Health and sanitation, including hospitals, primary health centres and dispensaries.
24. Family welfare.
25. Women and child development.
26. Social welfare including welfare of the handicapped and mentally retarded.
27. Welfare of the weaker sections, and in particular of the Scheduled Castes and Scheduled Tribes.
28. Public distribution system.
29. Maintenance of community assets.

All the above items will be effective only by active involvement and participation of the elected Panchayat member from all sections of the society. In 1931, at the Round Table Conference, Gandhiji recommended the Panchayat system as a true representative of government. Gandhiji had defined his vision of village Panchayats as a complete republic based on perfect democracy and individual freedom. According to Gandhiji there are four meanings of freedom as India's national independence; as individual political freedom; as group freedom from poverty; and as the capacity for personal self-rule.

From the Gandhiji's four meaning of freedom it is clear that village development as well as country's development will come true when country will get free from poverty by applying own political capacity. Gandhiji's view of village development is similar to the ideas of twenty-nine items in the eleven schedule.

73rd Amendment Act has given the opportunity to women Panchayat members to take the participation in the decision making process for village development and this village development will only be possible by removing poverty and through the child and women development.

5.2 Evolution of Rural Development Programmes

Eradication of poverty remains a major challenge of planned economic development. Agricultural wage earners, small and marginal farmers and casual workers engaged in non-agricultural activities, constitute the bulk of the rural poor. Small land holdings and their low productivity, poor educational base, unskilled workforce and low wages are the causes of poverty. There are various dimensions of poverty, relating to health, education and other basic services. For alleviation of poverty, India has under taken large numbers of social securities and protection programmes since 1970s. Social protection system need to evolve to meet the needs of their populations and developments in the economy. In this respect, large numbers of social securities or protections were initiated since 1970s. For poverty alleviation in rural areas government had taken mainly four kinds of programmes like self-employment, wage employment, housing programmes and social security schemes.

For self-employment opportunities in the form of subsidy and bank credit for rural poor, government introduced Integrated Rural Development Programme (IRDP) in 1978-79. From 2nd October 1980 it was implemented in all blocks of the country. Under IRDP for specific needs of the rural population some sub-programmes were introduced like Training of Rural Youth for Self Employment (TRYSEM), Development of Women and Children in Rural Areas (DWCRA), Ganga Kalyan Yojana (GKY), Million Wells Scheme (MWS), Supply of Improved Tool Kits to Rural Artisans (SITRA) etc. On 1st April 1999 Swarnajayanti Gram Swarozgar Yojana (SGSY) was introduced instead of IRDP and allied programmes. This programme has in built safeguards for the weaker sections of the rural society. It is a holistic programme and aims at covering all aspects of self-employment, namely, training, participatory approach to planning of self-employment and provision of infrastructure facilities, technology, credit and marketing arrangements.

An important component of the anti-poverty strategy was Wage Employment Programme. It provides employment opportunities during lean agricultural seasons, after floods, draughts and other natural calamities. In fact National Rural Employment Programme (NREP) was started during the Sixth Five Year Plan (1980-85) period. This employment programme was for those rural poor people who have no source of income particularly during the lean agricultural period.

On 15th August 1983 the Rural Landless Employment Guarantee Programme (RLEGP) was introduced. There were two objectives of this programme: a) improving and expanding employment opportunities for the rural landless people with a view to provide guarantee of employment to at least one member of every landless household up to 100 days in a year; and b) creating durable assets for strengthening the infrastructure so as to meet the growing requirements of the rural economy. This was a central sector programme where the financial burden was fully borne by the Central Government.

In the last year of the Seventh Five Year Plan (1985-90) i.e. NREP and RLEGP was merged together to launch a new programme in the new name of Jawahar Rozgar Yojana (JRY). This programme was for generation of meaningful employment opportunities for the unemployed and underemployed in rural areas through the creation of economic infrastructure and community and social assets and it was a centrally sponsored scheme with 80 percent contribution of the Government of India and 20 percent share of the States. But according to the Eighth Five Year Plan (1992-97) document expression the implementation of JRY in the first two years i.e. 1989-90 and 1990-91 did not provide satisfactory outcome. The Ninth Five Year Plan (1997-2002) provided the results of a review that the performance of JRY was not satisfactory (Dey and Ghosh, 2015).

To provide additional wage employment opportunities in the lean agricultural seasons Employment Assurance Scheme (EAS) was launched on 2nd October 1993. A description of Ninth Five Year Plan about the introduction of EAS was that “The main objective of the EAS is to provide about 100 days of assured casual manual employment during the lean agricultural season, at statutory minimum wages, to all persons above the age of 18 years and below 60 years who need and seek employment on economically productive and labour intensive social and community works”. It was a centrally sponsored scheme. For fund sharing between the centre and states was in 75:25 ratio. In the initial years of implementation of EAS, there was no system of giving allocations of funds to the states. About the evaluation of EAS the Programme Evaluation Organization of the Planning Commission gave a discussion that “The EAS is a demand driven scheme, but the method of planning and implementation adopted is top-down instead of bottom-up.”

On 1st April 1999 the Jawahar Rozgar Yojana was revamped as Jawahar Gram Samridhi Yojana (JGSY). JGSY aims at creation of demand-driven community village infrastructure that would enable rural poor to increase opportunities for sustained employment. But in this programme the problem was that the village Panchayats did not get sufficient funds for implementation of this programme.

In 2000-2001 Food for Work Programme (FFWP) was started as a component of the Employment Assurance Scheme in eight notified drought affected states but later it was expanded to form of any wage employment scheme of the Central and State Governments being implemented in the notified districts during the periods of natural calamities such as drought, flood, cyclone or earthquake. It was a labour intensive work and any families (APL and BPL) are eligible for employment.

On 25th September 2001 the Sampoorna Grameen Rozgar Yojana (SGRY) was launched, by merging the ongoing wage employment programmes of JGSY, EAS and FFWP. The objectives of the programme are to provide wage employment and food security in the rural areas alongside the creation of durable community social and economic assets in the rural and development of infrastructure. For cost sharing the Centre and States contribute funds for SGSY in the ratio 75:25. But it was also not successful because of various reasons. There was insufficient monitoring due to involvement of contractors (in violation of SGRY guidelines), lack of availability of infrastructure to store food grains increased the cost of transportation incurred by the State Government etc.

In November, 2004 a new programme National Food for Work Programme (NFFWP) was launched in 150 most backward districts. The Ministry of Rural Development justified the introduction of this new programme in the Annual Report 2004-05 that the existing resources in the SGRY were not sufficient to meet the requirement of additional wage employment in most backward districts. The additional resources should be channelized into some focus areas like water conservation and drought proofing areas. NFFWP was 100 percent centrally funded programme where food grains also were provided free of cost to the State Governments.

All wage employment programmes in rural areas were inactivate after introduced the National Rural Employment Guarantee Act (NREGA) in 7th Sep. 2005. Under this Act the all wage employment schemes are sponsored by Central Govt. In West Bengal, the scheme under this Act became operational from February 2006 with the notification by the govt. of West Bengal as West Bengal Rural Employment Guarantee Scheme, 2006.

In 1985-86, the Indira Awas Yojana (IAY) was the core programme for providing free housing to BPL families in rural areas and targets SC/STs households and freed bounded labourers. The evaluation of the IAY shows that the programmes has certainly enabled many BPL families to acquire pucca houses, the coverage of the beneficiaries is limited given the resource constraints. In addition, there have also been high level of leakages with a large number of non-eligible beneficiaries getting houses.

For Social Security in the rural area the Government of India on 15th August 1995 included the National Social Assistance Programme (NSAP) in the Budget for 1995-96. The NSAP has three components:

1. National Old Age Pension Scheme (NOAPS);
2. National Family Benefit Scheme (NFBS);
3. National Maternity Benefit Scheme (NMBS).

These programmes are meant for providing social assistance benefit to the aged, the BPL households in the case of death of the primary breadwinner and for maternity. Subsequently the National Maternity Benefit Scheme was renamed as Janani Surakshya Yojana (JSY) and implementation of the scheme was transferred to the Health and Family Welfare department with effect from 1st April, 2001 (Dept. of Panchayat & Rural Development).

Land reform was another way of poverty alleviation programme in rural area. The land reforms programme was the implementation of land ceiling laws, security of tenure to tenants, preventing alienation of tribal lands, land rights of women and consolidation of land holdings, computerisation of land records. Conferment of ownership rights to the tenants was the ultimate goal of tenancy laws.

The main target of the Tenth Plan was to reduce poverty and creation high quality of gainful employment during the plan period. The delivery of programmes would improve only if the PRIs emerge as strong players in the social and economic life of the country. NGOs and other civil society organisations can facilitate the evolution of PRIs as institutions geared to promote the well-being of the rural poor.

5.3 Introduction of Panchayat System in West Bengal

West Bengal is an agriculture based state. The development of panchayats and implementation of poverty alleviation programmes through land reform and political mobilisation of the rural poor are the distinguishing features of development since 1977. Year 1977 is a very important year in panchayat history of West Bengal. In this year Left Front Government came to the power and regular five yearly elections of all local self-governing bodies begun.

Before 1977 Congress was the power of West Bengal. During the Third Five Year Plan Period, in 1963, the West Bengal Zilla Parishad Act was passed to provide for re-modelling of rural local government with a view to associating the local authorities with development activities and bringing about democratic decentralization and people's participation in planning and development. The two Acts provided four-tier structure of

panchayats i.e. Zilla Parishad, Anchalik Parishad, Anchal Panchayat and Gram Panchayat (Datta and Datta, 2002). Due to the political disturbance, unprecedented food crisis in 1965 and Govt. instability in the State, panchayat system did not work properly. In March 1972 when the Congress captured the power, a new West Bengal Panchayat Act, 1973 was enacted. The Act provided for a three tier Panchayat System which is still now exist.

The 1973 Act was based on the original Acts of 1957 and 1963. The Left parties had criticized the Panchayat system because it was not possible to ensure genuine participation of the people in the countryside without altering rural class structure through land reforms and at the same time in the state, there was no effective, efficient and acceptable leadership in the Congress Party. In the years between 1970 and the election of the Left Front Government in 1977, elections to local self-governing bodies had been extremely irregular. Election to the local self-government bodies were held regularly when the Left Front came to the power in 1977.

As instruments of rural development and social change with the help of panchayats Left Front did land reforms which changed the correlation of class forces in the countryside. Though there was reservation for the SC/ST in the West Bengal state panchayat system, but there was no provision of reservation seats for women. It provided for a token inclusion of two women in every panchayat and if they were not elected, they could be nominated. Naturally such nominations were by the party having a majority in the given panchayats.

Several state governments, including West Bengal, opposed the 73rd and 74th Amendments to the Constitution when it was proposed by Central Government, because according to them local self-government is a state subject, not a central responsibility. But, immediately afterwards, the West Bengal Government passed its own amendment to the panchayat law, introducing one-third reservation for women, including SC/ST women, at all three tiers of the panchayati system and in 1993, the first election was held with such reservations.

Chattopadhyay and Duflo (2004) observed that in West Bengal, the experience was very disappointed as very few women (only 196 out of 3,324 GPs) were advanced to the position of Pradhan, which is the only one effective power post and is the only member of the council with a full-time appointment. To conform to the 73rd Amendment, the Panchayat Constitution Rule of West Bengal was again modified in April of 1998 [Government of West Bengal 1998] to introduce reservation of Pradhan positions for women and SC/STs.

The successful implementation of rural development programmes is only possible by proper utilisation of adequate funds, appropriate policy implementation and effective delivery mechanism. Accordingly the main responsibility of the gram panchayats is the selection of beneficiaries who have limited amounts of resources within specified sectors within the village.

5.4 Role of Women Panchayat Members in Implementation of Rural Development Programmes

In the present study, the researcher has tried to find out the contribution of women panchayat members in carrying out development work.

In 1992, the 73rd Amendment to the Constitution of India established a three-tiered panchayat system with regular elections throughout India. It was stated that the G.P. will take the primary responsibility for implementing development programmes, as well as in identifying the needs of the village under its jurisdiction.

The major responsibilities of the G.P. are to administer local infrastructure (public buildings, water, roads) and identify targeted welfare recipients. The main source of financing is still the state, but most of the money that was previously earmarked for specific uses is now allocated through four broad schemes: The Jawar Rozgar Yojana (JRY) for infrastructure (irrigation, drinking water, roads, repairs of community buildings, etc.); a small additional drinking water scheme; funds for welfare programmes (widow, old age, and maternity pensions, etc); and grant for GP functioning.

We have discussed below about the performance of women Panchayat members in promoting women empowerment as well as village development activities. Different kinds of indicators as have been used for this purpose are noted below.

For self-employment SGSY including SHG has been considered. For wage employment MGNREGS has been considered. For housing IAY has been considered. For child care – child immunization, child education, separate toilet for girls' children in the school, mid-day meal has been considered. For mother care – minimum age at marriage, antenatal check-up, Janani Suranksha Yojana, child delivery at hospital has been considered. We shall discuss below all indicators mentioned above and we shall analyse these indicators with the help of primary data.

5.4.1 Self-Employment Programmes

Poverty alleviation has been one of the guiding principles of the planning process in India. Anti-poverty programmes that seek to transfer assets and skills to people for self-

employment, coupled with public works programmes that enable people to cope with transient poverty.

Before the introduction of SGSY, the Integrated Rural Development Programme (IRDP) had been continuing from 2nd October 1980 to 1st April 1999 in all blocks of India as a major self-employment scheme for removing rural poverty in the form of provision of subsidy and bank credit for productive employment opportunities.

SGSY was launched in April, 1999. It is a holistic programme covering all aspects of self-employment such as organization of the poor into self-help groups, training of the group members, extending credit facilities, imparting appropriate technology, supporting infrastructure building and rendering marketing assistance. SGSY is a credit-cum-subsidy programme.

The objective of this programme is to bring the poor families above the poverty line by providing them income generating assets through a mix of bank credit and government subsidy.

One of the important manifestations of this SGSY scheme was the promotion of Self-Help Groups (SHGs) with women as the principal target. The formation of Self-Help Groups by itself contributes to the empowerment and economic well-being of the poor by improving their collective bargaining position. This approach recognizes the contribution of women in productive activities to economic growth. In this scheme women are focused because they bear the burden of poverty more due to well-being of the household. So increasing women's access to micro-finance enable them to make greater contribution to household income which in turn improve women's power in household decision-making (Chowdhury and Debabrata, 2012).

The SHG system was initiated by NGOs, such as Myrada in the mid-1980s in India. The poverty alleviation paradigm underlies many NGO integrated poverty-targeted community development programmes. Some NGOs act as banking intermediaries, channelling finance to different SHGs, others have formed collectives of several SHGs federations and linking them to banks (Tapan, 2010). According to one estimate (Sadhan, 2001), NGOs have promoted about 80 percent of SHGs linked to banks. The launching of NABARD's pilot phase of the SHG-Bank Linkage programme in February 1992 was a landmark development in rural banking with the poor. The entry of the government into the SHG movement was through the Rashtriya Mahila Kosh. In April 1999 SGSY launched along with employment generation programmes and started playing role in SHG formation.

SGSY plays a vital role in SHG-based development. GPs play a very vital role in the implementation of the programme such as approving the list of BPL families, identifying the potential swarojgaris for taking up the designated activities, being informed of the swarojgaris having been selected for bank loans, taking steps to provide from its funds under JGSY, monitoring the performance of the swarojgaris with attention to their regular repayment of loans etc.

Micro financing through SHGs as a tool to meet the requirements of financial service of the poor and their consequent empowerment has come to be an explicit part of government policy in India. This financial service through the SHGs empowered rural women economically and psychologically which enable the power of the self-esteem and self-confidence and give ability to earn and control economic resources. This empowerment brings the capabilities of decision-making power by own, power of gathering the information, give ability to involvement in the growth process etc.

The relationship between SHGs and women Panchayat members is very significant. For poverty alleviation it is necessary for every Panchayat to encourage rural women to form a group for self-employment and economic independence. Increase in political participation of women through 73rd Amendment Act, was not only a political connotation but also for reaching social impact which will lead the development of women. Participation of women in Panchayati Raj System has been considered as the most effective instrument to remove the inequality, invisibility and powerlessness of women.

Through participation in Panchayat administration, women leaders can help womenfolk in the village in a more constructive way by involving themselves into the understanding of the need of SHGs for poor women. Women Panchayat members can easily understand the problems of womenfolk and according that they can give advice to the Groups.

As a lady, women Panchayat members can take the initiative or encourage to make groups of the rural women for self-help and they can also provide information to SHGs about the government facilities like SHGs can get banking loan at low rate of interest.

In West Bengal the SHG movement has had a late start. Within this research period (2003-08), there were more than three and a half lakh SHGs in the state, out of which little more than 1.5 lakh SHGs have been formed under the SGSY alone. The efficacy of the SHGs can be considerably enhanced if symbiosis can be worked out between the SHGs and the PRIs. SHG is an important instrument of empowerment and development (social and economic). It is being dynamic, evolve and develop over time.

Women's empowerment will not be achieved unless it is linked to other kinds of activities like training on awareness, concept of self-esteem and on the meaning of benefits of empowering women. SHG is a strategy for women's development. The main aim behind launching the concept of SHG was the economic betterment of the members of the group.

The following box will show the brief outline of the model of SHG-Panchayat linkage followed by different promoting agencies:

Model 1	Model 2	Model 3
<p>Gram Panchayats are</p> <ul style="list-style-type: none"> • Made involved right from the preformation stage in the process of selection of hamlets, target member, mode of assistance to be provided by the promoting agencies • Encourage the group for maintaining collaborative relationship with the Gram Panchayats without disturbing the key focus of group initiatives. 	<p>Gram Panchayats are</p> <ul style="list-style-type: none"> • Intimated after formation of groups and • Assistance are sought for formal recognition by the GP Pradhan before opening a savings account in a bank • Invited during training programmes conducted by the promoting agencies • Formally informed about the activities of SHGs. 	<ul style="list-style-type: none"> • Gram Panchayats are usually bypassed in promotional phase as well as in the process of delivering institutional support to the SHGs • Assistance/ collaboration is looked for collective venture especially in case of social action.

Source: Choudhury and Basu, 2012

Right since the inception of the SGSY, PRI members were required to be involved in the whole process of its operation – from selection of beneficiaries to grading of SHGs in the state. GPs play a vital role and responsibility regarding group formation, facilitation, nurturing and identifying the potential swarojgaries, giving information for bank loans, monitoring regarding the regular repayment of loans.

In the following Tables it has been shown how women panchayat members in the two selected districts are connected with the SHGs or help the SHGs.

**Table 5.1: Mode of Assistance Provided to SHG Members by Women Panchayats
Members in Cooch Behar District**

Block	G.P.s	Keep contact/ Meeting	Training	Loan	Total= Col.3+ Col.4+ Col.5	No facility	G.T. (Col.6+ Col.7)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Cooch Behar-II	Madhupur	-	-	9(100.00)	9(69.23)	4(30.77)	13 (100)
	Patlakhawa	-	-	5(100.00)	5(33.33)	10(66.67)	15 (100)
	Pundibari	-	-	5(100.00)	5(55.56)	4(44.44)	9(100)
	Sub-total	-	-	19(100.00)	19(51.35)	18(48.65)	37(100)
Dinhata-I	Gitaldah-II	-	1(33.33)	2(66.67)	3(75.00)	1(25.00)	4(100)
	Goshanimari-I	1(20.00)	1(20.00)	3(60.00)	5(71.43)	2(28.57)	7(100)
	Putimari-I	1(25.00)	1(25.00)	2(50.00)	4(57.14)	3(42.86)	7(100)
	Sub-total	2(16.67)	3(25.00)	7(58.33)	12(66.67)	6(33.33)	18(100)
Mathabha nga-I	Bairagirhat	1(20.00)	3(60.00)	1(20.00)	5(83.33)	1(16.67)	6(100)
	Pachagar	1(25.00)	1(25.00)	2(50.00)	4(66.67)	2(33.33)	6(100)
	Shikarpur	-	3(60.00)	2(40.00)	5(83.33)	1(16.67)	6(100)
	Sub-total	2(14.29)	7(50.00)	5(35.71)	14(77.78)	4(22.22)	18(100)
Tufanganj-I	Balarampur –I	2(66.67)	-	1(33.33)	3(75.00)	1(25.00)	4(100)
	Chilakhana-II	-	1(33.33)	2(66.67)	3(75.00)	1(25.00)	4(100)
	Deochaira	1(16.67)	3(50.00)	2(33.33)	6(85.72)	1(14.28)	7(100)
	Sub-total	3(25.00)	4(33.33)	5(41.67)	12(80.00)	3(20.00)	15(100)
Total		7(12.28)	14(24.56)	36(63.16)	57(64.77)	31(35.23)	88(100)

Source: Field Survey

Note: i) Figures in bracket represent percentage.

ii) Percentage calculation of 3rd, 4th and 5th columns on the basis of 6th (total) column.

iii) Percentage calculation of 6th and 7th columns on the basis of 8th column.

From the above Table it can be seen that women Panchayat members in Cooch Behar district are more interested to discuss about the loan related matters with the members of SHGs rather than training and others. Block Cooch Behar-I is showing special picture that panchayat members are not interested to talk about other matters which are also similarly

important for developing strong and successful groups. Like for capacity building in SHG it is required to impart training and for regular payment of loan and smooth running of their self-employment activities it is required to keep contact with the members of the SHGs also.

Table 5.2: Mode of Assistance Provided to SHG Members by Women Panchayat Members in Nadia District

Block	G.P.s	Keep contact/ Meeting	Training	Loan	Total= Col.3+ Col.4+ Col.5	No facility	G.T. (Col.6+ Col.7)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Harin ghata	Birohi-I	-	1(50.00)	1(50.00)	2(40.00)	3(60.00)	5(100)
	Haringhata-I	4(57.14)	2(28.57)	1(14.29)	7(77.78)	2(22.22)	9(100)
	Mollabelia	1(20.00)	2(40.00)	2(40.00)	5(50.00)	5(50.00)	10(100)
	Sub-total	5(35.71)	5(35.71)	4(28.58)	14(58.33)	10(41.67)	24(100)
Karim pur-II	Dhoradaha-II	2(66.67)	-	1(33.33)	3(60.00)	2(40.00)	5(100)
	Nandanpur	2(50.00)	1(25.00)	1(25.00)	4(66.67)	2(33.33)	6(100)
	Rahamatpur-II	3(50.00)	2(33.33)	1(16.67)	6(75.00)	2(25.00)	8(100)
	Sub- total	7(53.86)	3(23.07)	3(23.07)	13(68.42)	6(31.58)	19(100)
Krishna nagar-II	Dhubulia-I	-	1(50.00)	1(50.00)	2(66.67)	1(33.33)	3(100)
	Nowapara-II	-	-	2(100.00)	2(50.00)	2(50.00)	4(100)
	Sadhanpara-II	1(33.33)	1(33.33)	1(33.33)	3(100.00)	-	3(100)
	Sub-total	1(14.28)	2(28.57)	4(57.14)	7(70.00)	3(30.00)	10(100)
Rana ghat-II	Baidyapur-I	3(75.00)	-	1(25.00)	4(80.00)	1(20.00)	5(100)
	Duttaphulia	4(80.00)	-	1(20.00)	5(55.56)	4(44.44)	9(100)
	Raghunathpur Hijuli -II	2(40.00)	2(40.00)	1(20.00)	5(100.00)	-	5(100)
	Sub-total	9(64.28)	2(14.28)	3(21.43)	14(73.68)	5(26.31)	19(100)
	Total	22(45.83)	12(25.00)	14(29.17)	48(66.67)	24(33.33)	72(100)
Cooch Behar + Nadia (Grand Total)		29(27.62)	26(24.76)	50(47.62)	105(65.63)	55(34.37)	160(100)

Source: Field Survey

Note: i) Figures in bracket represent percentage.

ii) Percentage calculation of 3rd, 4th and 5th columns on the basis of 6th (total) column

iii) Percentage calculation of 6th and 7th columns on the basis of 8th column.

From the above Table it can be seen that women Panchayat members in every block (except Krishnagar –II) has given more importance in continuous contact with members of the SHGs. Then they have given importance on loan related matter and then on training. Panchayat members said that during the meeting SHG member share their group related problems and Panchayat members also get a chance to give all kinds of information which will help the groups or through the meetings they can communicate regularly and they can get the feedback how the SHGs run. But from the above Table 5.2 it can be said that loan (47.62 per cent) is the important part for swarojgaries. Comparison of Nadia and Cooch Behar districts reveals that Cooch Behar is more concentrating on loan related matter (i.e. 63.16 percent whereas in Nadia it is 29.17 percent) but from the secondary data it is evident that percentage wise economic activity of SHGs, leading by women groups is more in Nadia district than in Cooch Behar. The data are given below:

Table 5.3: Performance of SHGs of Cooch Behar and Nadia Districts in Different Years from 2003-04 to 2006-07

Economic activities of only women folk SHGs'	2003-04		2004-05		2005-06		2006-07	
	Cooch Behar	Nadia	Cooch Behar	Nadia	Cooch Behar	Nadia	Cooch Behar	Nadia
Total SHGs	3526	2441	7305	3855	9130	6356	9996	8250
Only Women group SHGs	3364	1995	7113	2687	8938	4892	9804	6536
Total economic activity by SHGs	20	133	200	412	251	559	540	861
Only women group SHGs' economic activity	6 (0.18)	31 (1.55)	176 (2.47)	154 (5.73)	48 (0.54)	86 (1.76)	277 (2.82)	155 (2.37)

Source :Annual Reports of Different Years of Ministry of Panchayat and Rural Development of West Beng

Note: Percentage calculation in 5th row is derived from the 3rd row i.e. (5th row ÷ 3rd row) x 100

The above Table 5.3 shows that total number of SHG is higher in Cooch Behar district than Nadia. Women group of SHG is also higher in Cooch Behar district than Nadia. But the percentage of economic activity done by women folk SHGs is higher in Nadia district in all the financial years under consideration. Not only that the number of economic activity of SHGs made by women folk is higher in Nadia district but also women Panchayat members of Nadia district have been more successful in helping to provide economic benefits to whole village than that of Cooch Behar. Tables 5.1 and 5.2 show that Nadia district's women Panchayat members are more communicative in nature (through meetings

and keeping contact) than Cooch Behar which helped SHG members for economic up gradation. Other reason is that the banking facilities in Nadia district are better than Cooch Behar district (Table 5.4). From the secondary data we get a clear picture about banking facilities in both the districts.

Table 5.4 : Performance of District Cooperative Banks in Respect of SHGs of Two Districts of West Bengal

Central Cooperative Bank (CCB) /Districts	Target for Savings linkage 2006-07	Target for Credit linkage 2006-07	Target for Credit linkage of Additional SHG Members	No. of Primary Agriculture * Cooperative Society (PACS)
Nadia DCCB Ltd.	3500	5600	49700	182
Cooch Behar CSO/SCB	2000	1500	15100	62

Source: Choudhury and Basu, 2012

Note: **CSO**=Civil Society Organization **SCB**=State Cooperative Bank

From the above Table it can be said that district cooperative bank facilities is higher in Nadia district, that is why from the banking side target of savings linkage, credit linkage with SHGs are higher in Nadia district and because of that the target for credit linkage with additional SHG members is also higher in Nadia district. Number of PACS is also high in Nadia district. For the banking facilities NABARD supported SHG-Bank Linkage programmes is also higher in Nadia district than Cooch Behar. The following Table shows the formation of SHGs under two programmes.

The two major programmes which had been supporting the movement of SHGs are: 1) the SGSY and 2) the NABARD supported SHG-Bank Linkage programmes. In Cooch Behar district number of SHGs is higher than Nadia district, formed under SGSY (Table-5.5). But number is more in Nadia district than Cooch Behar, formed under NABARD. The following Table expresses the position briefly.

Table 5.5: Formation of SHGs under Two Programmes (SGSY and NABARD) in Two Districts (Cooch Behar and Nadia) of West Bengal

Districts	Number of groups formed under SGSY	Number of groups formed under NABARD	Total
Cooch Behar	9,130	12,181	21,311
Nadia	6,356	24,836	31,192

Source: Government of West Bengal, Ministry of Panchayat and Rural Development, July 2006

From the above Table 5.5 it can be seen that the total number of SHGs is higher in Nadia district than Cooch Behar.

From the field survey undertaken, it has emerged that there are certain reasons behind the comparatively less economic activities of women SHG groups which are given below:-

- i) Women Panchayat members are showing less interest about the SHGs because of lack of time;
- ii) Panchayat members are not aware about the functioning of SHGs;
- iii) Internal differences among the SHGs members;
- iv) Due to different party followers within the same group;
- v) Panchayat members are pressurised by political party that they want members only look after those groups in which all members are the supporters of their own party;
- vi) Due to poverty a good amount of loan is used for unproductive purposes like marriage of daughter or sister and others.

The popular belief is that, due to the scarcity of wage employment it is significant for self-help groups to operate/play self-employment micro-enterprises which are linked to their livelihood. These micro-enterprises are characterised by ease of entry and requires low start-up capital. Due to these reasons GP members are giving importance to give advice about loan and finance related (micro-credit) activities. Many SHGs in Cooch Behar district are making cane and bamboo products, jute products and doing animal husbandry like rearing of chicks; goats etc. and doing agriculture like growing of potato, water melon etc. For marketing of their products local bodies as well as State Government give support by organizing district or state level fairs. From the Table 5.5 it can be seen that under SGSY programme number of SHG is higher in Cooch Behar district than Nadia but under NABARD, SHGs are higher in Nadia district. Economic activity of the SHGs giving women economic independence can increase considerably if all the stakeholder in the development process, that is, State Government banking institutions, political parties, Panchayat members and villagers are willing to establish proper banking infrastructure in the rural sector.

5.4.2 Wage Employment Programmes

In the post liberalisation phase, the major problem confronted by India is the lack of an efficient mechanism, which enables all the sections in the society to get the benefits of

economic growth and development. Like many other developing countries, India devotes much attention to alleviate poverty.

In India, 70 percent of population live in rural area and among them major percentage is dependent on agriculture related work and most of the poor people belong to rural area. Wage employment programmes are very important component of anti-poverty strategy. Through these programmes lots of poor unemployed rural people can engage themselves in the unskilled works.

Previous (during the Sixth Five Year Plan) wage employment programmes were National Rural Employment Programme (NREP) and Rural Landless Employment Guarantee Programme (RLEGP). But with the passage of time, the programmes were modified and came in different ways like Jawahar Rozgar Yojana (JRY) in 1989, Employment Assurance Scheme (EAS) in 1983, Jawahar Gram Samridhi Yojana (JGSY) in 1999, and in 2001 a new form of these programmes was Sampoorna Gramin Rozgar Yojana (SGRY). But all the programmes in rural areas became inactive after introduction of the National Rural Employment Guarantee Act (NREGA) on 7th September 2005. The differences between previous wage employment programmes and the NREGA are that in the previous employment programmes there were no provision of employment guarantee but this Act (NREGA) provides employment right to the rural people and another difference is that previously in most of the wage employment programmes there were no fixed share for women in the total employment generation. NREP and RLEGP were the centrally sponsored programmes but no specific share for women in the total employment generated was fixed.

In the last year of the Seventh Five Year Plan (1985-90), on 1st April 1989 a centrally sponsored employment scheme i.e. Jawahar Rozgar Yojana (JRY) was introduced. It was a special safeguard for the SCs, STs and women but the Midterm Appraisal of the Ninth Five Year Plan pointed out many weaknesses of JRY. Two observations in this appraisal related to women were that “The share of women in employment generated under the programme was only 17 percent,” and “There have also been instances of differential wages paid to male and female workers.”(Dey and Ghosh, 2015)

For supplementing JRY, from October 2, 1993 the Government of India brought in an employment guarantee programme in the name of Employment Assurance Scheme (EAS). It was a centrally sponsored and demand-driven scheme.

Table 5.6: Performance of EAS, All India

Year	Resource available (Rs in crore)	Expenditure (Rs in crore)	Percentage of expenditure	Employment generation (in million man-days)	Share of SC/ST (in %)	Share of Women (in %)
1993-94	685.96	183.75	26.79	49.47	38.92	13.54
1994-95	2127.82	1235.45	58.06	273.95	58.60	30.87
1995-96	3204.36	1720.61	53.70	346.53	57.55	31.81
1996-97	3384.04	2160.41	36.84	403.02	55.93	31.27
1997-98	3706.66	2904.97	78.37	471.77	53.56	27.91
1998-99	3357.81	2882.18	85.84	427.93	54.94	27.28
1999-00	2909.27	2182.61	75.02	278.61	55.32	26.06
2000-01	2205.65	1861.11	84.38	218.39	56.55	27.29
2001-02	1255.28	530.92	42.29	66.62	53.26	30.54
Total	13434.67	10361.79	77.13	2536.29	53.73	27.40

Source: Dey and Ghosh, 2015, pp.-30

From the above Table 5.6, it can be seen that full utilization of available fund had never been done under the EAS programme. Except in the year 2001-02, in every year the share of women in total employment generated was less than 30 percent. So EAS did not fulfil the objectives.

From April 1, 1999 Jawahar Gram Samridhi Yojana (JGSY) was launched to ensure development of rural infrastructure at the village level. In this programme thirty percent of employment created in JGSY was reserved for women. This programme was entirely dedicated to the development of rural infrastructure at the village level and is being implemented by the Village Panchayats. But the village Panchayats did not get sufficient funds for implementation of this programme.

Given the complementarity of JGSY, EAS and Food for work programme, all of which aim at the creation of employment opportunities in the rural areas, and they were revamped and merged under the new Sampoorna Gramin Rozgar Yojana (SGRY) scheme from 25th September 2001. The basic aim of the scheme was generation of wage employment, creation of durable economic infrastructure in rural areas and provision of food and nutrition security to the poor. In the programme guidelines it was mentioned that efforts would be made to provide 30 percent of employment opportunities for women. But no specific physical and financial targets were fixed for women under the programme as SGRY. From the concurrent evaluation of SGRY in 2003-04, it was seen that only 12 percent of beneficiaries

were women. In the Annual Report 2004-05 of Ministry of Rural Development, it was that “the existing resources in the SGRY were not sufficient to meet the requirement of additional wage employment in most backward districts.”

Table 5.7: Performance of SGRY in Two Selected Districts of West Bengal

Year	Cooch Behar			Nadia		
	Total Man-days generated (in lakh)	Share of Women (in lakh)	Percentage of women	Total Man-days generated (in lakh)	Share of Women (in lakh)	Percentage of women
2002-03	11.25	1.31	11.64	7.07	0.02	1.87
2003-04	31.13	4.05	13.01	13.47	0.07	0.52
2004-05	30.32	3.84	12.66	9.50	0.02	0.21
2005-06	45.03	6.27	13.92	20.95	0.14	0.67
2006-07	29.14	5.19	17.81	14.24	0.41	2.88

Source: Annual Report of Different Years of Ministry of Panchayat and Rural Development, Government of West Bengal

Above Table shows that women participation in both districts is very less and even it was so far from the target (30 percent participation of women) of SGRY programme.

(A) Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS)

With the launch of National Rural Employment Guarantee Scheme in 2006, the right to employment was put into practice, eventually phasing out SGRY until it was discontinued in April 2008 (the date was the 3rd phase of implementation of NREGA). In fact in Cooch Behar and Nadia districts SGRY was discontinued in April 2007. From April 2007, NREGA was started to implement in these two districts.

NREGA, renamed as Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) from 2009 is one of the largest rights-based social protection initiatives in the world. It is a job guarantee scheme for rural Indians. This Act is a powerful instrument for inclusive growth in rural India through its impact on social protection. It provides a steady source of income and livelihood security for the poor, vulnerable and marginalised rural people.

The main objective of the Act is to provide to every rural household (whether APL or BPL) a guarantee of at least 100 days of wage employment during a financial year by providing unskilled manual work in rural areas to those adult members of rural households who volunteer to do such work.

Operational Guideline of NREGA, makes some basic provision of the Act to contain minimum features of this employment scheme. Some of them are follows:

- 1) The scheme provides a legal guarantee for at least 100 days of paid employment in every financial year to adult members of any household willing to do unskilled manual work related to public work at the statutory minimum wage rate.
- 2) A written application seeking work is to be made to the GP or Block Office, stating the time and duration for which work is sought. The GP will issue a dated receipt of the return application for employment against which the guarantee of providing employment within 15 days operation.
- 3) If the employer fails to provide the job/work within 15 days of the job card holder's application, he/she shall be entitled to a daily unemployment allowance which will be paid by the state government.
- 4) Under no circumstances the labourer shall be paid wages less than the prevailing wage rate.
- 5) The gram panchayat is the pivotal body for planning and implementation of the project. Labour-intensive works are preferable for this scheme.
- 6) Provisions for regular inspection and supervision of works taken up under the scheme shall be made to ensure proper quality of work as well as to ensure that the total wages paid for the completion of the work is commensurate with the quality and quantity of work done.
- 7) All accounts and records (including muster rolls) relating to the scheme shall be made available for public scrutiny.

(B) Provisions of NREGS Related to Women

Gram Panchayat is only responsible to issue job card which is an entry pass for 100 days work and in this job card all the particulars of the adult members of the household has given details. In this Act women workers receive the special attention. There are few paragraphs in Schedule II, the NREGA, and 2005 where women interests are directly addressed. These are follows:

- 1) At the time of providing employment, priority shall be given to women in such a way that at least one-third of the beneficiaries shall be women. (Paragraph-6)
- 2) For looking after children of women workers, child care facilities at the worksite will be mandatory when more than five children under six years of the age will present and one such women worker will be depute to look after such children. (It was mentioned in Paragraph 28)

- 3) This is an employment scheme which provides equal wage earning right for all adult members (male and female) of the family. It implies that there is a provisions of the Equal Remuneration Act, 1976, no gender discrimination. (It was mentioned in Paragraph 34)
- 4) Paragraph 27 contains the worksite facilities to be provided: "The facilities of safe drinking water, shade for children and periods of rest, first aid box with adequate material for emergency treatment for minor injuries and other health hazards connected with the work being performed shall be provided at the worksite."
- 5) In the Operational Guidelines, 2006 it was mentioned that if some applicants have to be derected to report for work beyond 5 km of their residence, women (specially single women) and older persons should be given preference to work in the worksites nearer to their residence. If they go beyond a radius of 5 km of their village(s), the provision is that workers will get ten percent of the wage rate as extra wages to meet additional transportation and living expenses.

The NREGA provides legal entitlements to work, that is, it promises work on demand. In fact the NREGA has opened up many opportunities for rural people, for women in particular. For example, this Act provides for equal wages for men and women (in contrast with the private sector where women often earn less). By getting equal wages women can feel gender equality and get status in the family as well as in the society. This economic power will give them confidence to take decision for any kind of challenge. Another one it is an important provision of child care arrangements which is not available in any kind of job. And it is to be provided within five kilometres of the residence of the applicant-this is feasible condition for women to come for work.

The National Rural Employment Guarantee Act, 2005 was notified on 7th September, 2005. It came into force on 2nd February 2006 in 200 districts. All 150 backward districts were included within 200 districts of Phase-I. In the financial year 2007-08 an additional 130 districts were included in phase-II (Among them 113b districts were notified with effect from 1st April 2007, and 17 districts in Uttar Pradesh (UP) were notified with effect from May 15th 2007). The remaining districts of the country were notified under NREGA with effect from 1st April 2008.

In West Bengal NREGA became operational from February 2006 with the notification by the Government of West Bengal as West Bengal Rural Employment Guarantee Scheme, 2006. In this state, the NREGS had been introduced in phases. Initially in the first phase, the scheme was introduced in ten districts, namely, Jalpaiguri, Uttar Dinajpur, Dakshin Dinajpur,

Malda, Murshidabad, Purulia, Birbhum, Bankura, Paschim Midnapur and South 24-Parganas. In the second phase, 1st April 2007 seven more districts namely Cooch Behar, Darjeeling, Nadia, Burdwan, North 24-Parganas, Hooghly, Purba Midnapur were brought under its coverage. Remaining district Howrah was added in the third phase, 1st April 2008.

From 1st April 2007, the scheme was operational in both the selected districts of West Bengal and SGRY was ineffective from April 2007 in both the districts. Due to no gap between the time of withdrawing SGRY scheme and implementation of NREGA, the Panchayat members were unaware about the difference between the two schemes. In fact some members thought that NREGS is another type of wage employment work under the SGRY scheme for rural poor people. The following table shows the awareness of women panchayat members about the difference between SGRY and NREGS.

Table 5.8: Awareness of Women Panchayat Members about the Difference between SGRY and NREGS

Districts	Total number of selected Panchayat members	Aware		Not Aware	
		Numbers	%	Numbers	%
Cooch Behar	88	17	19.32	71	80.68
Nadia	72	37	51.39	35	48.61
Total	160	54	33.75	106	66.25

Source: Field survey

From the above Table it can be seen that majority of women Panchayat members did not know about NREGS separately. It is also obvious that they did not know about the criteria of this Act which gives lots of facilities for rural women beneficiaries. From the field survey it has been seen that no women Panchayat member has known about the most important provision about women beneficiaries i.e. that at the time of providing employment, priority shall be given to women in such a way that at least one-third of the beneficiaries shall be women. But more than 50 percent women Panchayat members told that village women are participating in this scheme. The following Table shows the G.P. level situation.

**Table 5.9: Women Participation (under NREGS) as per Women Panchayat Members'
Response in Cooch Behar District**

Block	G.P.s	Yes	%	No	%	G.T.
Cooch Behar-II	Madhupur	6	46.15	7	53.85	13
	Patlakhawa	13	86.67	2	13.33	15
	Pundibari	9	100	-	-	9
	Sub-total	28	75.68	9	24.32	37
Dinhata-I	Gitaldah-II	2	50.00	2	50.00	4
	Goshanimari-I	5	71.43	2	28.57	7
	Putimari-I	7	100	-	-	7
	Sub-total	14	77.78	4	22.22	18
Mathabhanga-I	Bairagirhat	6	100	-	-	6
	Pachagar	6	100	-	-	6
	Shikarpur	4	66.67	2	33.33	6
	Sub-total	16	88.89	2	11.11	18
Tufanganj-I	Balarampur –I	3	75.00	1	25.00	4
	Chilakhana-II	4	100	-	-	4
	Deochaira	3	42.86	4	57.14	7
	Sub-total	10	66.67	5	33.33	15
Total		68	77.27	20	22.73	88

Source: Field Survey

The above Table shows that majority of women panchayat members reported that women were working under the NREGS project.

Table 5.10: Rural Women Performance (under NREGS) as per Women Panchayat Members' Response in Nadia District

Block	GPs	Yes	%	No	%	Grand Total
Harin ghata	Birohi-I	1	20.00	4	80.00	5
	Haringhata-I	2	22.22	7	77.78	9
	Mollabelia	9	90.00	1	10.00	10
	Sub-total	12	50.00	12	50.00	24
Karim pur-II	Dhoradaha-II	5	100	-	-	5
	Nandanpur	5	83.33	1	16.67	6
	Rahamatpur-II	8	100	-	-	8
	Sub- total	18	94.74	1	5.26	19
Krishna nagar-II	Dhubulia-I	3	100	-	-	3
	Nowapara-II	3	75.00	1	25.00	4
	Sadhanpara-II	2	66.67	1	33.33	3
	Sub-total	8	80.00	2	20.00	10
Rana ghat-II	Baidyapur-I	-	-	5	100	5
	Duttaphulia	2	22.22	7	77.78	9
	Raghunathpur Hijuli -II	1	20.00	4	80.00	5
	Sub-total	3	15.79	16	84.21	19
Total	Total	41	56.94	31	43.06	72
Cooch Behar + Nadia (Grand Total)		109	68.13	51	31.88	160

Source: Field Survey

From the above two Tables 5.9 and 5.10 it can be seen that according to Panchayat members women were joining in the work under NREGS project and in Cooch Behar more than 77 percent women Panchayat members reported that rural women were joining the work and in Nadia district more than 56 percent women Panchayat members reported that women were joining in the work under NREGS project. On the basis of their opinion it can be said that percentage of women participation in NREGS may be more than 30 percent. The following Table shows the women's share in employment generation in the financial year 2007-08 on the basis of secondary data:

Table 5.11: Women's Share in Employment Generation

Distict /State/Country	Women share in employment generated in the FY 2007-08
Cooch Behar	40.27
Nadia	9.55
West Bengal	26.32

Source: Department of Ministry of Panchayats and Rural Development, Government of West Bengal

Note: All figures are in percentages.

The above Table shows that Nadia district did not reach the stipulated provision of 'at least one-third of the beneficiaries shall be women' but Cooch Behar district crossed the one-third limit. In West Bengal women's share in employment generation was also poor. But it was the beginning year for both the districts.

5.4.3 Housing Programme / Indira Awaas Yojana (IAY)

Housing is one of the basic requirements for human survival. Construction of houses was one of the major activities under the National Rural Employment Programme (NREP) which began in 1980, and the Rural Landless Employment Guarantee Programme (RLEGP), which began in 1983. In June 1985, Govt. of India announced, a part of the RLEGP funds was earmarked for the construction of houses for SCs/STs and freed bonded labourers. As a result, Indira Awaas Yojana (IAY) was launched during 1985-86 as a sub-scheme of RLEGP. IAY thereafter continued as a sub-scheme of Jawahar Rozgar Yojana (JRY).

From 1st January 1996 IAY was delinked from JRY and made an independent scheme. It is a centrally sponsored scheme to provide houses to rural poor people who live below the poverty line. Its objectives are enhancing the quality of life of the poor and providing social security to the poor.

The features of the scheme were no engagement of contractors for construction of the house of beneficiary; mandatory provisions for smoke less oven and sanitary latrine in the house and assignment of the house in the name of a female member of the beneficiary family or alternatively in the joint names of the female head of the family and her spouse. Not beneficiaries priorities will only for those community who are female but also those persons who are socially oppressed, families affected by natural disaster or displaced due to implementation of any development project, homeless families headed by a widow or an unmarried women etc.

On the basis of feature of IAY especially “assignment of the house in the name of a female member of the beneficiary family” it is worthy to see whether the scheme is really is working in the ground level or not. The following Table shows the scenario in our two selected districts of study.

Table 5.12: Women’s Share in IAY as per Women Panchayat Members’ Response in Cooch Behar District

Block	G.P.s	No	%	Jointly	%	Yes	%	Grand Total
Cooch Behar- II	Madhupur	3	23.08	1	7.69	9	69.23	13
	Patlakhawa	-	-	-	-	15	100	15
	Pundibari	4	44.44	-	-	5	55.56	9
	Sub-total	7	18.92	1	2.70	29	78.38	37
Dinhata-I	Gitaldah-II	1	25.00	-	-	3	75.00	4
	Goshanimari-I	-	-	-	-	7	100	7
	Putimari-I	-	-	-	-	7	100	7
	Sub-total	1	5.56	-	-	17	94.44	18
Mathabha nga-I	Bairagirhat	-	-	-	-	6	100	6
	Pachagar	-	-	-	-	6	100	6
	Shikarpur	-	-	1	16.67	5	83.33	6
	Sub-total	-	-	1	5.56	17	94.44	18
Tufanganj -I	Balarampur –I	1	25.00	-	-	3	75.00	4
	Chilakhana-II	-	-	-	-	4	100	4
	Deochaira	-	-	1	14.29	6	85.71	7
	Sub-total	1	6.67	1	6.67	13	86.67	15
Total		9	10.23	3	3.41	76	86.36	88

Source: Field Survey

The above Table shows, most of the women panchayat members are giving houses to women beneficiaries’ name under IAY scheme.

Table 5.13: Women's Share in IAY as per Women Panchayat Members' Response in Nadia District

Block	GPs	No	%	jointly	%	Yes	%	Grand Total
Harin ghata	Birohi-I	-	-	-	-	5	100	5
	Haringhata-I	-	--	-	-	9	100	9
	Mollabelia	-	-	-	-	10	100	10
	Sub-total	-	-	-	-	24	100	24
Karim pur-II	Dhoradaha-II	-	-	-	-	5	100	5
	Nandanpur	-	-	-	-	6	100	6
	Rahamatpur-II	-	-	-	-	8	100	8
	Sub- total	-	-	-	-	19	100	19
Krishna nagar-II	Dhubulia-I	-	-	-	-	3	100	3
	Nowapara-II	-	-	-	-	4	100	4
	Sadhanpara-II	1	33.33	-	-	2	66.67	3
	Sub-total	1	10.00	-	-	9	90.00	10
Rana ghat-II	Baidyapur-I	1	20.00	-	-	4	80.00	5
	Duttaphulia	-	-	-	-	9	100	9
	Raghunathpur Hijuli -II	1	20.00	-	-	4	80.00	5
	Sub-total	2	10.53	-	-	17	89.47	19
Total	Total	3	4.17	-	-	69	95.83	72
Cooch Behar + Nadia (Grand Total)		12	7.50	3	1.88	145	90.63	160

Source: Field Survey

The above two Tables show that in both the districts Panchayat members are giving women beneficiaries the houses under IAY. But they could not allot some houses to women's name because of unavailability of BPL card on their name. Panchayat members want the BPL card to be made for women members in the family to enable allotment of house under IAY.

From 1st April 2005 onwards, the unit cost of a new house has been fixed at Rs.25000 for ordinary soil. There is a provision that state government will provide an additional amount for RCC roofing cost in addition to its matching share. It is funded by the centre and the state in the ratio of 75:25. With effect from 2006-07, the above RCC roofing cost has been

raised from Rs.9000 to Rs.12, 000 per house. New houses as well as upgradation of kutcha houses are being taken up under the scheme. During the primary data collection it has been seen that all houses under IAY were kutcha houses in Cooch Behar district. Very few houses in Nadia district under IAY were RCC roofing house. It is clear that for better facilities it is required that both beneficiaries as well as Panchayat members should be conscious about the facilities which Central Government as well as State Governments provide for the betterment of people and people should use it properly.

It was rather surprising to know from the Panchayat members that beneficiaries are getting somewhere Rs.25000 and somewhere Rs.20000 including sanitary facility. But from 1st April 2005 in new housing scheme there was no provision of Rs.20,000.

5.4.4 Social Security Schemes

The prime objectives of Panchayati Raj Institutions are to promote economic development and social justice. Article 41 of the Constitution of India directs the State to provide financial assistance to its citizens in case of unemployment, old age, sickness and disablement. For these noble principles the Government of India on 15th August 1995 included the National Social Assistance Programme in the Central Budget for 1995-96.

Social Welfare Department of West Bengal is to implement the different types of pension schemes, i.e., Old Age Pension, Widow Pension and Disability Pension Scheme. We will discuss here only Old Age Pension Scheme. From November 2007 National Old Age Pension Scheme (NOAPS) has been renamed as Indira Gandhi National Old Age Pension Scheme (IGNOAPS). The amount of Old Age Pension was increased four fold, i.e., from Rs. 100/- per month to Rs. 400/- per month during the 2006-07 financial year, which is shared equally by the Central & State Governments i.e. on a 50:50 basis. The following Table will show the performance of West Bengal in National Old Age Pension Scheme.

Table 5.14: Year-Wise Performance of West Bengal under National Old Age Pension Scheme

Year	No. of Beneficiaries	Expenditure in crores
2002-03	3,32,876	30.20
2003-04	3,09,896	33.70
2004-05	2,91,671	39.05
2005-06	4,51,579	59.86
2006-07	4,74,106	239.18

Source: www.department of panchayat and rural development govt of wb

Under the scheme, West Bengal Financial Department provides the facilities to those beneficiaries who full fill the following criterias:

- 1) Beneficiary should be permanent Resident of West Bengal
- 2) Beneficiary should be above 60 years of age
- 3) Who can not earn his / her livelihood and even has no close relative to look after

On the basis of above conditins 4,74,106 beneficiaries received 239.18 crores in 2006-07 financial year. But from the field survey we get different pictures i.e. the old women who already crossed 75 years is not getting old age pension. The reason is that according to panchayat member the lady did not cross even 50 years. Due to non-availability of birth certificate and unawareness of the government facilities, panchayat members can do wrong things with the rural poors and illiterate persons. So we did not get proper data which is related to Old Age Pension work as a social security.

5.5 Performance of Women Panchayat Members in Total Rural Sanitation Programme

One of the most important obligatory duties of Gram Panchayats is to ensure installation of sanitary toilet in each and every household due to completely stop the unhygienic practice of open defecation. Individual health and hygiene is largely dependent on adequate availability of drinking water and proper sanitation. In order to ensure sanitation facilities in rural areas with the broader goal “Total Sanitation Campaign” (TSC) was launched by Rajiv Gandhi National Drinking Water Mission, Government of India.

5.5.1 Rural Sanitation

In 1986 primarily Government of India started the Central Rural Sanitation Programme (CRSP) with the objective of improving the quality of life of the rural people and also to provide privacy and dignity to women. Government of India wanted to cover all households with water and sanitation facilities and promote hygienic behaviour for overall improvement of safe water, home sanitation, garbage disposal and health in rural areas. With this broader concept of sanitation, CRSP adopted a “demand driven” approach with the name “Total Sanitation Campaign” (TSC) with effect from 1999. A nominal subsidy in the form of incentive is given to the rural poor i.e. Below Poverty Line (BPL) households for construction and usage of individual household latrines (IHHL).

This sanitation programme was originally launched by the West Bengal government in 1990 in undivided Midnapore district in collaboration with the Ramkrishna Mission Lokshiksha Parishad (RKMLP), a non-governmental organisation (NGO) and the UNICEF. This was thereafter integrated with the centrally sponsored programme and extended to the

whole state. The programme was implemented with focus on community-led and people centered initiatives like Individual Household Latrines, School Toilet Units, Community Sanitary Complex (CSC) and Anganwadi Toilets.

The objectives of the programme were: Improving and sustaining health environment; securing privacy and dignity of women; enhancing quality of life; motivate communities and Panchayati Raj Institutions promoting sustainable sanitation facilities through awareness creation and health education. Government of India launched the Nirmal Gram Puraskar (NGP) to ensure full sanitation coverage. In fact in housing scheme i.e. Indira Awaas Yojana it was the provisions for sanitary latrine in the house and it is also mentioned in the sanitary programme guidelines that “all houses constructed by the beneficiaries under Indira Awaas Yojana (IAY) or any other state rural housing scheme which did not have toilets shall also be eligible for the incentive for creation of sanitation facilities for the targeted groups under Nirmal Bharat Abhiyan.” TSC is being renamed as “Nirmal Bharat Abhiyan” in to encourage the success of NGP. It is a “demand-driven” and people-centered sanitation and drinking water programme.

From the field survey it has been seen that most of the villages are running the sanitation programme especially sanitary latrine. The following Table presents women panchayt members’ performance towards the success of giving security and dignity of women by providing sanitary latrine.

Table 5.15: Latrine Facility of Individual Household in the Villages as per Women Panchayat Members' Response in Cooch Behar District

Block	G.P.s	Yes	%	No	%	Grand Total
Cooch Behar –II	Madhupur	6	46.15	7	53.85	13
	Patlakhawa	5	33.33	10	66.67	15
	Pundibari	5	55.56	4	44.44	9
	Sub-total	16	43.24	21	56.76	37
Dinhata – I	Gitaldah-II	1	25.00	3	75.00	4
	Goshanimari-I	1	14.29	6	85.71	7
	Putimari-I	6	85.71	1	14.29	7
	Sub-total	8	44.44	10	55.56	18
Mathabhanga-I	Bairagirhat	1	16.67	5	83.33	6
	Pachagar	3	50.00	3	50.00	6
	Shikarpur	3	50.00	3	50.00	6
	Sub-total	7	38.89	11	61.11	18
Tufangan j-I	Balarampur –I	1	25.00	3	75.00	4
	Chilakhana-II	4	100.00	-	-	4
	Deochaira	1	14.29	6	85.71	7
	Sub-total	6	40.00	9	60.00	15
Total		37	42.05	51	57.95	88

Source: Field Survey

The above Table 5.15 shows that according to 42.05 per cent women panchayat members in Cooch Behar district, villagers have individual latrine facility which is very less in respect of maintaining women and children's security and dignity.

Table 5.16: Latrine Facility of Individual Household in the villages as per Women Panchayat Members' Response in Nadia District

Block	GPs	Yes	%	No	%	Grand Total
Harin ghata	Birohi-I	5	100.00	-	-	5
	Haringhata-I	7	77.78	2	22.22	9
	Mollabelia	10	100.00	-	-	10
	Sub-total	22	91.67	2	8.33	24
Karim pur-II	Dhoradaha-II	5	100.00	-	-	5
	Nandanpur	6	100.00	-	-	6
	Rahamatpur-II	7	87.50	1	12.50	8
	Sub- total	18	94.74	1	5.26	19
Krishna nagar-II	Dhubulia-I	3	100.00	-	-	3
	Nowapara-II	3	75.00	1	25.00	4
	Sadhanpara-II	2	66.67	1	33.33	3
	Sub-total	8	80.00	2	20.00	10
Rana ghat-II	Baidyapur-I	3	60.00	2	40.00	5
	Duttaphulia	8	88.89	1	11.11	9
	Raghunathpur Hijuli -II	5	100.00			5
	Sub-total	16	84.21	3	15.79	19
Total	Total	64	88.89	8	11.11	72
Cooch Behar + Nadia (Grand Total)		101	63.12	59	36.88	160

Source: Field Survey

From the above Tables 5.15 and 5.16 it can be seen that comparing Cooch Behar and Nadia districts, women Panchayat members in Nadia district (88.89 percent) are more successful to provide sanitary latrine for keeping women's security and dignity as well as healthy and quality life in their villages. In Haringhata and Karimpur-II blocks of Nadia district women panchayat members have been able to provide more than 90 percent latrine facility in their villages. Cooch Behar district is far behind in this sanitation programme.

The consciousness about sanitation among the women panchayat members in their own house also affects the villagers thinking of latrine at their houses. In Chapter 3, from

Tables 3.31 and 3.32 it can be seen that women panchayat members' own latrine facility in Cooch Behar district is 88.64 per cent which is lower than drinking water facility (98.86 per cent) and in Nadia district it is 88.89 per cent which is higher than drinking water facility (62.50 per cent). But in both the districts 100 per cent latrine facility is not there in their (women panchayat members) own house which is very necessary for achieving 100 per cent success for providing security and dignity of village women and children.

It (lack of consciousness about latrine facility) is one of the reasons behind the lack of success of 100 percent fulfilment of Total Sanitation Programme for securing privacy and dignity of village women. It brings improvement in environmental conditions. Usage of latrines reduce incidence of rape case.

For overall improvement of sanitation in the rural areas, a nominal subsidy in the form of incentive is given to the rural poor households for construction of latrines/toilets. From the drinking water and sanitation guideline it could be known that the incentive amount to Below Poverty Line (BPL) household/ identified APLs for construction of one unit of IHHL shall be Rs.4600 (Rs.5100 for difficult and hilly areas). The central share out of this shall be Rs.3200 (Rs.3700 in case of hilly and difficult area) and State Government share shall be Rs.1400. Minimum beneficiary share shall be Rs.900 in cash or labour. State Governments are allowed the flexibility to provide higher incentive for a household toilet from their own fund.

Some features of Rural Sanitation Scheme in West Bengal Government are:-

- To create demand for sanitary latrines and adaptation of hygienic practices;
- Cost effective technology of sanitary latrines with various options;
- Cost sharing by users;
- Subsidy of Rs.200.00 for BPL families for construction of sanitary latrine.

The panchayat members especially in Cooch Behar district are giving subsidy opportunity to BPL families for construction of sanitary latrine. Panchayats are giving advice to the beneficiaries to share (Rs.200) half of the cost of slab of latrine then they will provide a slab through the Sanitary Mart. In this way panchayat members are trying to give latrine facility as well as women security and dignity to all families in their rural areas.

5.5.2 Rural Sanitary Marts

The Rural Sanitary Marts (RSM) is an outlet dealing with the materials, hardware and designs required for the construction and delivery of the components of sanitary latrines to the villagers on demand. The RSMs are self-supporting commercial enterprises with a social objective. The Marts are allowed to retain a profit margin of Rs.40.00 only out of which

Rs.20.00 is given to the motivators. For the subsidy of Rs.200.00 the BPL families have to apply with a certificate form the Pradhan of the Gram Panchayat. On its satisfaction, the Panchayat Samiti reimburses the sum to the RSM. The Zilla Parishad, the Panchayat Samiti and the Gram Panchayat have important roles to play in implementing the programme. The NGOs are also playing an important role particularly in creating awareness among people, setting up and running Sanitary Marts etc.

25 per cent of selected women panchayat members have confirmed availability of sanitary marts in their area in Cooch Behar district and same way 31.94 per cent of selected women panchayat members have confirmed availability of sanitary marts in Nadia district.

5.5.3 Drinking Water

Individual Health and hygiene are largely dependent on adequate availability of drinking water and proper sanitation. For maintaining good health adequate availability of drinking water is required. For availability of water in rural area, the Government of India has taken some objectives in “Nirmal Bharat Abhiyan”. These are:-

- i) Enhancing quality of life
- ii) Improving and sustaining health environment
- iii) Checking incidences of air borne and water borne diseases
- iv) Reducing loss of working days due to illness

The Panchayat and Rural Development Department is in overall charge of execution of the scheme. The scheme is applicable to any family on option in rural areas only.

Water borne diseases pose one of the greatest health hazards in the less developed world (Basu and Chakraborty, 2012). Supply of drinking water should get the top priority in public health functions of the Panchayat members. The following Table shows the performance of women Panchayat members on availability of drinking water in their villages in two districts.

Table 5.17: Water Availability as per Women Panchayat Members' Response in Cooch Behar District

Block	G.P.s	Yes	%	No	%	Grand Total
Cooch Behar –II	Madhupur	5	38.46	8	61.54	13
	Patlakhawa	8	53.33	7	46.67	15
	Pundibari	2	22.22	7	77.78	9
	Sub-total	15	40.54	22	59.46	37
Dinhata – I	Gitaldah-II	1	25.00	3	75.00	4
	Goshanimari-I	5	71.43	2	28.57	7
	Putimari-I	6	85.71	1	14.29	7
	Sub-total	12	66.67	6	33.33	18
Mathabhanga-I	Bairagirhat	5	83.33	1	16.67	6
	Pachagar	5	83.33	1	16.67	6
	Shikarpur	3	50.00	3	50.00	6
	Sub-total	13	72.22	5	27.78	18
Tufanganj-I	Balarampur –I	2	50.00	2	50.00	4
	Chilakhana-II	2	50.00	2	50.00	4
	Deochaira	3	42.86	4	57.14	7
	Sub-total	7	46.67	8	53.33	15
Total		47	53.41	41	46.59	88

Source: Field Survey

The above Table shows that no panchayat members has been able to ensure 100 percent availability of drinking water. Village women in the above mentioned GPs are facing the drinking water availability problem. While installing tube well in different areas within their villages, sometimes they do not discuss with the area's women about its suitable location. Out of 88 women panchayat members 86 panchayat members did not discuss with the women of their areas.

Table 5.18: Water Availability as per Women Panchayat Members' Response in Nadia District

Block	GPs	Yes	%	No	%	Grand Total
Harin ghata	Birohi-I	-	-	5	100.00	5
	Haringhata-I	1	11.11	8	88.89	9
	Mollabelia	1	10.00	9	90.00	10
	Sub-total	2	8.33	22	91.67	24
Karim pur-II	Dhoradaha-II	-	-	5	100.00	5
	Nandanpur	-	-	6	100.00	6
	Rahamatpur-II	-	-	8	100.00	8
	Sub- total	-	-	19	100.00	19
Krishna nagar-II	Dhubulia-I	1	33.33	2	66.67	3
	Nowapara-II	-	-	4	100.00	4
	Sadhanpara-II	1	33.33	2	66.67	3
	Sub-total	2	20.00	8	80.00	10
Rana ghat-II	Baidyapur-I	-	-	5	100.00	5
	Duttaphulia	1	11.11	8	88.89	9
	Raghunathpur Hijuli -II	-	-	5	100.00	5
	Sub-total	1	5.26	18	94.74	19
Total	Total	5	6.94	67	93.06	72
Cooch Behar + Nadia (Grand Total)		52	32.50	108	67.50	160

Source:Field Survey

The above Table 5.18 shows that in Nadia district the availability of drinking water is much less compared to Cooch Behar district (Table-5.17). One of the main reasons is that more than 60 per cent women Panchayat members in Cooch Behar district said that in their villages they have different water-borne diseases. So they are giving more importance on availability of drinking water. But in Nadia district, more than 75 percent women panchayat members reported that they have no water related diseases. Negligible water related diseases is the one of the cause for less awareness about drinking water in Nadia district.

In Cooch Behar district villagers suffer from water-borne diseases like diahorrea, problem of indigestion of food, stomach problem, gastroenteritis, stone in kidney, iron in water and teeth problem etc. In the case of Nadia district it was reported that there are

problems of drinking water, these are insufficient tube well supply and maintenance, and the main disease from water is skin disease.

If we look at Panchayat members' personal socio-economic profile (Ch.3) then it becomes clear that drinking water availability in women Panchayat members' house is higher in Cooch Behar district (more than 98 per cent) than that of Nadia district (62.50 per cent). We can see its effects on the above two Tables 5.17 and 5.18. Women panchayat members in Nadia district told that non-availability of tube-well is the main reason for low availability of drinking water

5.6 Performance of Women Panchayat Members in Health Related Issues of Rural Women and Newly Born Babies

Minimum age at marriage, antenatal check-up and Institutional birth are some of the important indicators of development of rural women at village. And child immunisation, school attainment and separate girl's toilet at school are also the important indicators of child development. So all the above are the rural development indicators. We shall analyse the condition of each of these indicators below.

5.6.1 Minimum Age at Marriage

From the NFHS-3 it can be seen that in West Bengal more than 54 percent of women got married before the legal minimum age of 18 and 27 percent of men got married before the legal minimum age of 21. A woman in West Bengal has an average fertility level of 2.3 children in her lifetime. Fertility in rural areas, at 2.5 children, is almost one child higher than in urban areas where fertility is 1.6 children. Among young women of age 15-19 in West Bengal child bearing is much higher than the national average (16%) and also higher than in all other Indian states except Jharkhand. Young women in rural areas are almost three times as likely to be mothers or pregnant, as young women in urban areas. Children born to mothers under the age of 20 years are much more likely to die in infancy than children born to mothers at older ages. Infant mortality is 68 per 1,000 for teenage mothers, compared with 46 for mothers of age 20-29 and 32 for mothers of age 30-39. The median interval between births in West Bengal is about 35 months. Fifty-two percent of non-first-order births occur within three years of the previous birth. Research shows that waiting at least three years between children reduces the risk of infant mortality (NFHS-3, West Bengal). The infant mortality rate in West Bengal is 48 deaths before the age of one year per 1000 live births, almost the same as the NFHS-2 estimate of 49. The under-five mortality rate is 60 deaths per 1000 live births. These rates imply that 1 in 21 children still die within the first year of life. And 1 in 17 die before reaching age five. Infant mortality in rural areas (50) of

West Bengal is 19 percent higher than that in urban areas (42) of the state. The main reason of infant mortality is teenage pregnancy i.e. early marriage.

The following Table shows the picture of minimum age at marriage of village women in the women Panchayat members' area in both the selected districts:

Table 5.19: The Minimum Age at Marriage of Village Women as per Women Panchayat Members' Response in Cooch Behar District

Block	G.P.s	Less than 18 years	%	18 years and above	%	Grand Total
Cooch Behar -I	Madhupur	2	15.38	11	84.62	13
	Patlakhawa	4	26.67	11	73.33	15
	Pundibari	3	33.33	6	66.67	9
	Sub-total	9	24.32	28	75.68	37
Dinhata -I	Gitaldah-II	3	75.00	1	25.00	4
	Goshanimari-I	3	42.86	4	57.14	7
	Putimari-I	3	42.86	4	57.14	7
	Sub-total	9	50.00	9	50.00	18
Mathabhanga-I	Bairagirhat	1	16.67	5	83.33	6
	Pachagar	1	16.67	5	83.33	6
	Shikarpur	2	50.00	4	50.00	6
	Sub-total	4	28.57	14	77.78	18
Tufanganj-I	Balarampur -I	3	25.00	1	75.00	4
	Chilakhana-II	2	50.00	2	50.00	4
	Deochaira	4	57.14	3	42.86	7
	Sub-total	9	60.00	6	40.00	15
Total		31	35.23	57	64.77	88

Source: Field Survey

The above Table 5.19 shows that in villages teenage marriage for girls still exists. Women panchayat members said that poor families in Muslim community are used to get their daughters married at teen age, i.e. between 14 to 17 years. 35.23 percent women panchayat members said that the girls marriage age is below 18 years.

Table 5.20: The Minimum Age at Marriage of Village Women as per Women Panchayat Members' Response in Nadia District

Block	GPs	Less than 18 years	%	18 years and above	%	Grand Total
Harin ghata	Birohi-I	-	-	5	100.00	5
	Haringhata-I	-	-	9	100.00	9
	Mollabelia	-	-	10	100.00	10
	Sub-total	-	-	24	100.00	24
Karim pur-II	Dhoradaha-II	-	-	5	100.00	5
	Nandanpur	-	-	6	100.00	6
	Rahamatpur-II	3	37.50	5	62.50	8
	Sub- total	3	15.79	16	84.21	19
Krishna nagar-II	Dhubulia-I	-	-	3	100.00	3
	Nowapara-II	-	-	4	100.00	4
	Sadhanpara-II	1	33.33	2	66.67	3
	Sub-total	1	10.00	9	90.00	10
Rana ghat-II	Baidyapur-I	4	80.00	1	20.00	5
	Duttaphulia	5	55.56	4	44.44	9
	Raghunathpur Hijuli -II	5	100.00	-	-	5
	Sub-total	14	73.68	5	26.32	19
Total	Total	18	25.00	54	75.00	72
Cooch Behar + Nadia (Grand Total)		49	30.62	111	69.38	160

Source:Field Survey

In Nadia district also minimum age at marriage for girls below 18 years still exists. The panchayat members reported that they took initiatives to prevent this marriage before 18 years by doing meeting with the villagers and through the self-help group's members and health camp. Compared to Nadia, Cooch Behar district is having more teenagers' marriage for girls. One of the most basic reason is that in Cooch Behar more than 50 percent population is Scheduled Caste and from NFHS-3 it can be seen that Scheduled Caste – Muslim community-uneducated-rural people have tendency to give marriage of their daughters at early age.

Maternal Health: Maternal health is the health of women during pregnancy, childbirth and the postnatal period. The health care is required to reduce maternal morbidity and mortality. Three major elements are very essential to maternal death prevention. One, “at least four antenatal visit to check and monitor the health of mother and foetus during pregnancy. Secondly, skilled birth attendance with emergency backup such as doctors, nurses and midwives who have the skills to manage normal deliveries and recognize the onset of complications. Lastly, postnatal care which is the six weeks following delivery. During this time bleeding, sepsis and hypertensive disorder can occur”. (https://en.wikipedia.org/wiki/maternal_health).

5.6.2 Antenatal Care (ANC)

Antenatal care is the care received from healthcare professionals during the pregnancy. It is a series of appointments with a doctor who specialises in pregnancy and birth. Maternal health care package of antenatal care (ANC) is the main programme of National Rural Health Mission (NRHM). ANC provided by a doctor, Auxiliary Nurse Midwife (ANM) or other health professional comprises of physical checks, checking position and growth of foetus and giving Tetanus Toxoid injection (TT) at periodic intervals during the time of pregnancy. It is also incorporates weight measure, blood pressure checking, abdominal examination, blood and urine test, folic acid tablets. At least three check-ups are expected to complete the course of ANC to safeguard women from pregnancy related complications. Institutional delivery and post-natal care in a health facility is promoted in NRHM through the Janani Suraksha Yojana (JSY) to prevent maternal deaths. Antenatal care is an acknowledged measure for the reduction of maternal mortality.

NFHS-3 of West Bengal states that most women in West Bengal receive some antenatal care during pregnancy. Almost all urban women (97%) received antenatal care from a health professional for their last birth in the five years preceding the survey (NFHS-3); in rural areas 90 percent of women received antenatal care from a health professional. But 62 percent of mothers had three or more antenatal care visits; urban women (86%) were much more likely to have three or more visits than women in rural areas (55%).

In NFHS-3 it has been seen that during pregnancy women do not receive most of the services needed for their pregnancy. In fact in this research it has been seen that some women only had taken iron and folic acid supplements; some women only received tetanus toxoid vaccine during the pregnancy; panchayat members were saying that those pregnant women who go to public health centre or private doctor or private hospital they are receiving all the services during the pregnancy time. Panchayat members are trying to give the antenatal care facilities to all the pregnant ladies through the health camp, anganwadi

worker or ICDS worker, self-help group members, sub-centre facilities, public health centre and for critical case they go to town/city hospital.

The following table shows how the village ladies receive their antenatal care as per women panchayat members response.

Table 5.21: Different Health Institute from Which Village Women Receiving Antenatal Care Who Gave Birth in the Three Years, as per Women Panchayat Members' Response in Cooch Behar District

Block	GPs	Sub-centre	Primary health centre	Hospital	Health camp	Health centre	Not going anywhere	G.T
Cooch Behar - I	Madhupur	7 (53.85)	1 (7.69)	2(15.38)	1 (7.69)	-	2(15.38)	13
	Patlakhawa	8(53.33)	2(13.33)	-	-	-	5(33.33)	15
	Pundibari	5(55.56)	-	1(11.11)	-	2(22.22)	1(11.11)	9
	Sub-total	20(54.05)	3(8.11)	3(8.11)	1(2.70)	2(5.41)	8(22.22)	37
Dinhata -I	Gitaldah-II	3(75.00)	-	-	-	-	1(25.00)	4
	Goshanima ri-I	6(85.71)	-	1(14.29)	-	-	-	7
	Putimari-I	6(85.71)	-	-	-	1(14.29)	-	7
	Sub-total	15(83.33)	-	1(5.56)	-	1(5.56)	1(5.56)	18
Mathab hanga-I	Bairagirhat	4(66.66)	-	-	-	1(16.67)	1(16.67)	6
	Pachagar	2(33.33)	1(16.67)	-	1(16.67)	2(33.33)	-	6
	Shikarpur	2(33.33)	1(16.67)	1(16.67)	-	1(16.67)	1(16.67)	6
	Sub-total	8(44.44)	2(11.11)	1(5.56)	1(5.56)	4(22.22)	2(11.11)	18
Tufang anj -I	Balarampur -I	2(50.00)	-	-	-	1(25.00)	1(25.00)	4
	Chilakhana -II	2(50.00)	-	-	-	1(25.00)	1(25.00)	4
	Deochaira	6(85.71)	-	-	-	-	1(14.28)	7
	Sub-total	10(66.67)	-	-	-	2(13.33)	3(20.00)	15
Total		53(60.23)	5 (5.68)	5(5.68)	2(2.27)	9(10.23)	14(15.91)	88

Source: Field Survey

Note: Figures in bracket represent percentages.

From the above Table 5.21 it can be seen that village women in Cooch Behar district are going to sub-centre, primary health centre, health camp and hospital for receiving antenatal check-up. According to Panchayat members some rural women do not go to any

health centre. For effective implementation, panchayat members are involving self-help group members as the link between health sub-centre and people. Panchayat members also arrange health camps for increasing the awareness level of the people. The above Table states that 60.23 percent women go to sub-centre for antenatal check-up. Panchayat members used this term 'health centre' to mean all kinds of medical institutes including sub-centre, PHC, hospital, private doctor etc.

Table 5.22: Different Health Institutes from which Village Women Receiving Antenatal Care who gave Birth in the Three Years, as per Women Panchayat Members' Response in Nadia District

Block	GPs	Sub-centre	Primary health centre	hospital	Health camp	Health centre	ICDS	Not going anywhere	Grand Total
Harin ghata	Birohi-I	1(20.00)	-	-	-	4(20.00)	-	-	5
	Haringhata-I	-	1(11.11)	-	-	7(77.78)	1(11.11)	-	9
	Mollabelia	2(20.00)	-	-	-	8(80.00)	-	-	10
	Sub-total	3(12.50)	1(4.17)	-	-	19(79.16)	1(4.17)	-	24
Karim pur-II	Dhoradaha-II	-	-	-	-	5 (100)	-	-	5
	Nandanpur	-	-	-	-	6(100)	-	-	6
	RahamatpurII	1(12.5)	-	1(12.5)	-	5(62.50)	1(12.50)	-	8
	Sub- total	1(5.26)	-	1(5.26)	-	16(84.21)	1(5.26)	-	19
Krishna nagar-II	Dhubulia-I	-	1(33.33)	-	-	2(66.67)	-	-	3
	Nowapara-II	-	-	-	-	4(100)	-	-	4
	Sadhanpara-II	-	1(33.33)	-	-	2(66.67)	-	-	3
	Sub-total	-	2(20.00)	-	-	8(80.00)	-	-	10
Rana ghat-II	Baidyapur-I	-	1(20.00)	-	-	4(80.00)	-	-	5
	Duttaphulia	1(11.11)	2(22.22)	-	-	6(66.67)	-	-	9
	Raghunathpur Hijuli -II	-	-	1(20.00)	-	3(60.00)	1(20.00)	-	5
	Sub-total	1(5.26)	3(15.79)	1(5.26)	-	13(68.42)	1(5.26)	-	19
Total	Total	5(6.94)	6(8.33)	2(2.78)	00	56(77.78)	3(4.17)	00	72
Cooch Behar + Nadia (Grand Total)		58 (36.25)	11 (6.87)	7 (4.38)	2 (1.25)	65 (40.63)	3 (1.87)	14 (8.75)	160

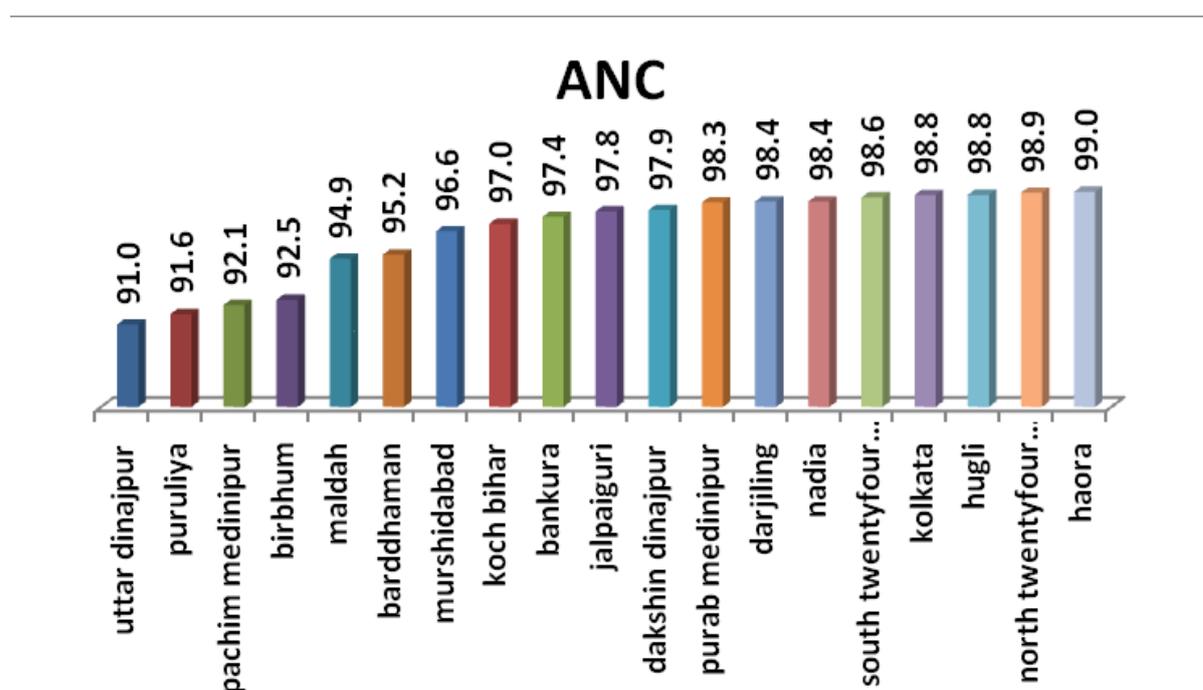
Source: Field Survey

Note: Figures in bracket represent percentages.

From the above Table 5.22 it can be seen that village women in Nadia district are going to sub-centre, primary health centre, hospital and ICDS (Integrated Child Development Scheme) for receiving antenatal check-up. ICDS is a Central Government sponsored scheme. The main job of this scheme is to arrange for cooking and distribution of specified nutritious food for pregnant and lactating mothers and children up to six years of age and to conduct non-formal education for the latter.

Generally panchayat members do not say precisely about the difference between sub-centre or PHC or any other medical institutes. They generalise all the medical institutes as health centres. Sub-centres are the lowest tier of the health delivery system in West Bengal and sub-centres are coming under the supervision of the GP. So the Panchayat members only can look after the availability of basic amenities in the sub-centres. The sub-centres are operated by the staff of the health department like health assistant – male and female – and ANMs (Auxiliary Nurse Midwife) who report to the Health Supervisor attached to the G.P. who in turn is accountable to the B.M.O.H. (Block Medical Officer of Health). One of the primary functions of the sub-centre is health check-up of pregnant and lactating mothers as well as babies. The following figure shows the status of Antenatal Care (ANC) in the districts of West Bengal:

Figure-5.1
Status of Antenatal Care (ANC) in the Districts of West Bengal



Source : Public Health in West Bengal –Current Status and Ongoing Interventions 2009

The above figure shows that the position of Nadia in ANC is better than Cooch Behar district. But Cooch Behar district ANC is higher than West Bengal (96.1).

Proper antenatal check-up is very important for reducing morbidity and avoiding mortality of the mother as well as the infant. Women who either do not receive ANC or have received an incomplete course of ANC are exposed to the risk of maternal death. About half of the women in West Bengal had post-delivery complications (46 percent). The major type of post-delivery complication is lower abdominal pain (62.5 percent) followed by other problems (53.6percent) and high fever (43.1 percent) (GOWB: 2007-08).

Anaemia can be another cause of maternal mortality, weakness, diminished physical and mental capacity, increased morbidity from infectious diseases, premature delivery, low birth weight etc. In West Bengal anaemia is a major health problem, especially among women and children in Scheduled Tribe community and uneducated families. So anaemia treatment is very necessary for reducing maternal mortality and morbidity from infectious diseases.

5.6.3 Institutional Birth

In order to reduce maternal mortality rate or MMR (number of death of women while pregnant or within 42 days of termination of pregnancy out of one lakh live birth) (Public Health in West Bengal, 2009) and to ensure safe delivery under trained hands the Central Government has declared the goal of 100 per cent institutional birth along with the incentive scheme called the Janani Surakshya Yojana (JSY), launched on 12th April 2005. In West Bengal MMR is 145 in the years 2007-09. This is the 5th rank in India among 16 states. One of the main reasons of inability in reducing MMR is lagging behind in institutional delivery. Others are inadequate facilities like beds and specialist doctors in government hospital, lack of access to the health centres, poor status of nutrition and early age at first birth of the child are also contribute to higher MMR in this state. Distance of the nearest PHC is an important indicator of high MMR. Basu and Chakraborty (2012) have shown in their study that MMR varies among religious community. They had seen that for child birth Hindu families have taken more in institutions than Muslims and Christians in rural areas. They found low income and education as other factors for inability of reducing MMR.

JSY provides financial incentives to pregnant women. In West Bengal, financial incentives i.e. Rs.500/- are available to SCs, STs and BPL women aged 19 years or more up to two live births. In addition Rs. 200/- and Rs. 100/- are paid for institutional delivery to rural (Total Rs.700/-) and urban (Total 600/-) pregnant women respectively for delivering in a government or accredited private institution.

In West Bengal, there is a voucher scheme for pregnant women. The voucher scheme is meant to complement the JSY and ensures free transport to the beneficiaries and is another step to encourage institutional delivery. The modified JSY card has vouchers attached to it as perforated add-ons, this ensures automatic distribution of vouchers with the JSY card. The three attached vouchers are to be used for specific needs. Part 1 is meant for transportation from home to hospital for delivery, part 2 is for travelling back from hospital to home and part 3 is for referral to the higher hospitals from RH/BPHC, where necessary. Beneficiaries may use the ambulance available at BPHCs, under PPP scheme.

The Ayushmati scheme has been designed to encourage institutional deliveries in the state. This scheme aims to cut down out of pocket expenditure by promoting cash free institutional delivery. The beneficiaries are pregnant women from BPL and SC/ST families who have proof of identity such as BPL Card / Gram Panchayat certificate / JSY Card / MCH Card / SC or ST certificate / SC or ST certification by the Gram Panchayat. However, clients are entitled to free delivery at any empanelled private facility only if they have been registered with ANM and have had three antenatal check-ups.

Some several states like Tamilnadu and Maharashtra has reached nearly 100% in institutional delivery but West Bengal reached nearly 70 percent only (Public Healthin West Bengal, 2009). The following Tables show the situation of institutional birth rate in both selected districts, Cooch Behar and Nadia:

Table 5.23: Institutional Birth in Cooch Behar District as per Women Panchayat Members' Response

Blocks	G.P.s	Yes	%	No	%	Grand Total
Cooch Behar –I	Madhupur	8	61.54	5	38.46	13
	Patlakhawa	4	26.67	11	73.33	15
	Pundibari	4	44.44	5	55.56	9
	Sub-total	16	43.24	21	56.76	37
Dinhata –I	Gitaldah-II	2	50.00	2	50.00	4
	Goshanimari-I	7	100.00	-	-	7
	Putimari-I	6	85.71	1	14.29	7
	Sub-total	15	83.33	3	16.67	18
Mathabhanga-I	Bairagirhat	3	50.00	3	50.00	6
	Pachagar	6	100.00	-	-	6
	Shikarpur	6	100.0	-	-	6
	Sub-total	15	83.33	3	16.67	18
Tufanganj-I	Balarampur –I	4	100.00	-	-	4
	Chilakhana-II	4	100.00	-	-	4
	Deochaira	5	71.43	2	28.57	7
	Sub-total	13	86.67	2	13.33	15
Total		59	67.05	29	32.95	88

Source: Field Survey

The above Table 5.23 states that according to 67.05 per cent women panchayat members in Cooch Behar district, village women give birth of their babies in the health institutions. But women panchayat members in Goshanimari-I GP in Dinhata-I block, Pachagar and Shikarpur GPs in Mathabhanga-I block, Balarampur –I and Chilakhana-II GPs in Tufanganj-I block said all pregnant ladies in their villages go to health institution for giving birth of their babies.

Table 5.24: Institutional Birth in Nadia District as per Women Panchayat Members' Response

Blocks	GPs	Yes	%	No	%	Grand Total
Harin ghata	Birohi-I	5	100.00	-	-	5
	Haringhata-I	8	88.89	1	11.11	9
	Mollabelia	10	100.00	-	-	10
	Sub-total	23	95.83	1	4.17	24
Karim pur-II	Dhoradaha-II	4	80.00	1	20.00	5
	Nandanpur	5	83.33	1	16.67	6
	Rahamatpur-II	6	75.00	2	25.00	8
	Sub- total	15	78.95	4	21.05	19
Krishna nagar-II	Dhubulia-I	3	100.00	-	-	3
	Nowapara-II	2	50.00	2	50.00	4
	Sadhanpara-II	3	100.00			3
	Sub-total	8	80.00	2	20.00	10
Rana ghat-II	Baidyapur-I	5	100.00	-	-	5
	Duttaphulia	9	100.00	-	-	9
	Raghunathpur Hijuli -II	4	80.00	1	20.00	5
	Sub-total	18	94.74	1	5.26	19
Total	Total	64	88.89	8	11.11	72
Cooch Behar + Nadia (Grand Total)		123	76.88	37	23.13	160

Source: Field Survey

From the above two Tables 5.23 and 5.24 it can be seen that in Cooch Behar district percentage of institutional birth (67.05) is lower than Nadia district (88.89). There are some reasons for institutional birth rate being higher in Nadia district in comparison to Cooch Behar district.

Different types of health centres are there in urban and rural areas. In urban and rural areas there exists a network of health care system. In the rural areas there are sub-centres, Primary Health Centres (PHC), Block Primary Health Centres (BPHC) and rural hospitals. In addition, there are sub-divisional hospitals at every sub-division, district hospital at the district headquarter, State General Hospital and Medical Colleges. The Sub-centre in

villages provide only outdoor services. The sub-centres in villages provide only outdoor services. In other health centres there are different number of bed system according to their capacities. The following Table shows the availability of beds per 10 thousand populations in two districts of West Bengal.

Table 5.25: Availability of Beds in State Government Health System per ten thousand Population in Cooch Behar and Nadia Districts

Districts	Population in 2001	Total no. of Beds	Availability of Beds
Cooch Behar	2478280	1311	5.29
Nadia	4603756	4573	9.93
West Bengal	80221171	50729	6.32

Source :Chatterjee and Ghosh (2003)

The above Table shows that per 10 thousand availability of beds is higher in Nadia than Cooch Behar district. It is also higher than the State average. So it is the indicator of higher institutional birth rate in Nadia district. There is another reason, it is very nearer to Kolkata metropolitan city where institutional birth rate is 100 percent in 2000, 01 and 02 (Chatterjee and Ghosh, 2003). This positive aspect affects the health seeking behaviour of population of neighbouring district favourably. In Cooch Behar district there is a tendency of child marriage i.e. marriage before 18 years, and after marriage very next they become pregnant. For early age pregnancy their gurdians do not agree to bring them (pregnant ladies) to the health institutes for legal constraint. Some pregnant ladies in Muslim community do not go to health institute due to their aurthodox behaviour.

But overall, in West Bengal the institutional delivery improved progressively from 39 percent in DLHS-1 (District Level Household Survey) and 46 percent in DLHS-2 to 49 percent in DLHS-3 (GOWB:2007-08)

5.6.4 Immunization

According to NFHS-3, full immunization coverage in West Bengal at 64 percent (between the ages 12-23 months) is not only much higher than the national average i.e. 44 percent but it is better than the previous year i.e. the time of NFHS-2(44 percent).

Child immunization is very important for preventing infant mortality rate (IMR) (number of children dying within one year after birth out of 1000 live birth). To promote child survival and prevent infant mortality, NRHM envisages new-born care, breastfeeding and food supplementation at the right age and a complete package of immunization for children. This immunization package includes BCG+DPT 1,2,3+OPV 1,2,3+Measles.

WHO offers three recommendations for infant and young child feeding (IYCF) practices for children 6-23 months old: continued breastfeeding or feeding with appropriate calcium – rich foods if not breastfed; feeding solid or semi-solid food for a minimum number of times per day according to age and breastfeeding status; and including foods from an appropriate number of food groups per day according to breastfeeding status.

Vitamin A deficiency can cause eye damage and a higher risk of dying from measles, diarrhoea or malaria. The Government of India recommends that children under three years receive vitamin A supplements every six months, starting at age 9 months.

To prevent anaemia eating foods rich in iron and taking iron supplements can prevent anaemia. The following Table shows the status of immunization of two districts of West Bengal as per DLHS-3 (GOWB:2007-08).

Table 5.26: Status of Immunization

Districts	Percentage
Cooch Behar	77.2
Nadia	89.2
West Bengal	75.7

Source : District Level Household Survey (DLHS)-3

The above Table shows that in West Bengal there is 75.7 per cent child immunization and percentage of child immunization is higher in Nadia district than in Cooch Behar district. Percentage of success depends on awareness level and sufficient number of health infrastructure. In rural areas this awareness level depends on Panchayat members' awareness and their mode of work for village development. The following Tables will show the awareness level of women Panchayat members in both the selected districts.

Table 5.27: Programme Done by the Village Women for Child Immunization as Per Women Panchayat Members Response in Cooch Behar District

Block	G.P.s	Polio,BCG	Polio,BCG & DPT	Polio,BCG,DP T& Measles	Complete* Immunization	Grand Total
Cooch Behar –II	Madhupur	6 (46.15)	3 (23.08)	1 (7.69)	3 (23.08)	13
	Patlakhawa	13 (86.66)	1 (6.67)	-	1 (6.67)	15
	Pundibari	8 (88.89)	-	-	1 (11.11)	9
	Sub-total	27 (72.98)	4 (10.81)	1 (2.70)	5 (13.51)	37
Dinhata – I	Gitaldah-II	2 (50.00)	2 (50.00)			4
	Goshanimari-I	2 (28.57)	1 (14.29)	1 (14.29)	3 (42.85)	7
	Putimari-I	1 (14.28)	3 (42.86)	-	3 (42.86)	7
	Sub-total	5 (27.78)	6 (33.33)	1 (5.56)	6 (33.33)	18
Mathabhanga-I	Bairagirhat	6 (100.00)	-	-		6
	Pachagar	5 (83.33)	-	-	1 (16.67)	6
	Shikarpur	4 (66.66)	-	1 (16.67)	1 (16.67)	6
	Sub-total	15 (83.33)	-	1 (5.56)	2 (11.11)	18
Tufanganj-I	Balarampur – I	1 (25.00)	2 (50.00)	-	1 (25.00)	4
	Chilakhana-II	2 (50.00)	-	-	2 (50.00)	4
	Deochaira	2 (28.56)	3 (42.86)	1 (14.29)	1 (14.29)	7
	Sub-total	5 (33.33)	5 (33.33)	1 (6.67)	4 (26.67)	15
Total		52 (59.08)	15 (17.05)	4 (4.55)	17 (19.32)	88

Source: Field Survey

Note: Figures in bracket represent percentage

***Complete immunization:** The six vaccine preventable diseases are tuberculosis (BCG), diphtheria, whooping cough and tetanus (DPT), poliomyelitis (polio) and measles.

Table 5.28: Programme Done by the Village Women for Child Immunization as per Women Panchayat Members Response in Nadia District

Block	GPs	Polio,BCG	Polio,BCG & DPT	Polio,BCG,DPT& Measles	Complete Immunization	Grand Total
Harin ghata	Birohi-I	3 (60.00)	2 (40.00)	-	-	5
	Haringhata-I	4 (44.44)	5 (55.56)	-	-	9
	Mollabelia	9 (90.00)	1 (10.00)	-	-	10
	Sub-total	16 (66.67)	8 (33.33)	-	-	24
Karim pur-II	Dhoradaha-II	4 (80.00)	1 (20.00)	-	-	5
	Nandanpur	4 (66.67)	2 (33.33)	-	-	6
	Rahamatpur-II	6 (75.00)	2 (25.00)	-	-	8
	Sub- total	14 (73.68)	5 (26.31)	-	-	19
Krishna nagar-II	Dhubulia-I	2 (66.67)	1 (33.33)	-	-	3
	Nowapara-II	4 (100.00)	-	-	-	4
	Sadhanpara-II	3 (100.00)	-	-	-	3
	Sub-total	9 (90.00)	1 (10.00)	-	-	10
Rana ghat-II	Baidyapur-I	5 (100.00)	-	-	-	5
	Duttaphulia	7 (77.78)	2 (22.22)	-	-	9
	Raghunathpur Hijuli -II	5 (100.00)	-	-	-	5
	Sub-total	17 (89.47)	2 (10.53)	-	-	19
Total	Total	56 (77.78)	16 (22.22)	-	-	72
Cooch Behar + Nadia (Grand Total)		108 (67.50)	31 (19.37)	4 (2.50)	17 (10.63)	160

Source: Field Survey

Note: Figures in bracket represent percentage.

The above two Tables 5:27 and 5:28 show that in Cooch Behar district women Panchayat members have more knowledge about child immunization than Nadia district. But the women Panchayat members in Nadia district said that village women or mothers are more conscious about child immunization than the Panchayat members. That is why women Panchayat members are not knowing properly the complete immunization programme.

But all women Panchayat members in both the districts have taken the initiatives to increase the awareness level among the villagers as well as newly become mothers about

the importance of child immunization. Through the different health centre or announcement by loud speaker or conducting camps or through members of self-help groups or through ICDS members or anganwadi centres they are doing awareness work.

5.7 Performance of Women Panchayat Members in Girls' Education at the Age of 6-10 Years

Education is one of the most important socio-economic factors influencing human development of a society. The thrust areas of development of the education sector in the Ninth Five Year Plan were universalisation of elementary education, achievement of full adult literacy, raising the quality of education at all levels for upliftment of educational status of socially disadvantaged groups viz. Scheduled Caste / Scheduled Tribes and girls, alleviating regional imbalances etc. In West Bengal also, the primary aim of the State Government in education sector is to achieve universalisation of elementary education and attain total literacy within the shortest possible time (Chatterjee and Ghosh, 2003).

With the launch of Sarva Shiksha Abhiyan (SSA), free and compulsory education to the children of 6-14 years of age group is a Fundamental Right (86th amendment to the Constitution of India) for achievement of Universalization of Elementary Education (UEE). Official age-group for primary (I-V) classes is 6-10 years and official age-group for middle level (VI-IX) classes is 11-14 years.

Table 5.29: Percentage of Children Attending Education at the Age-group 6-10

Census/surveys	All persons	Female	Male	Rural	Urban
Population census, 2001	69	66	72	66	79
NFHS-3 survey (2005-06)	83	81	85	81	88
NSSO survey (2007-08)	88	87	89	87	91

Source: Government of India Ministry of Statistics and Programme Implementation, New Delhi

From the above Table it can be seen that percentage of children education is increasing from 2001 to 2008 and in rural area it is 87 percent. Here girl children education is 87 percent all over. From the primary data we can have an idea about the attendance of girls children in different selected GPs of the present research study. The following Tables show the attendance of 6-10 age group girl children in education as per women panchayat members' response.

Table 5.30: School Going Girl Children at the Age Group 6-10 Years in Cooch Behar District as per Women Panchayat Members

Block	G.P.s	No	%	Yes	%	Grand Total
Cooch Behar – II	Madhupur	4	30.77	9	69.23	13
	Patlakhawa	6	40.00	9	60.00	15
	Pundibari	-	-	9	100.00	9
	Sub-total	10	27.03	27	72.97	37
Dinhata –I	Gitaldah-II	1	25.00	3	75.00	4
	Goshanimari-I	2	28.57	5	71.43	7
	Putimari-I	-	-	7	100.00	7
	Sub-total	3	16.67	15	83.33	18
Mathabhanganga-I	Bairagirhat	-	-	6	100.00	6
	Pachagar	-	-	6	100.00	6
	Shikarpur	-	-	6	100.00	6
	Sub-total	-	-	18	100.00	18
Tufanganj-I	Balarampur – I	-	-	4	100.00	4
	Chilakhana-II	-	-	4	100.00	4
	Deochaira	-	-	7	100.00	7
	Sub-total	-	-	15	100.00	15
Total		13	14.77	75	85.23	88

Source: Field Survey

Table 5.31: School Going Girl Children at the Age Group 6-10 Years in Nadia District as per Women Panchayat Members

Block	GPs	No	%	Yes	%	Grand Total
Harin ghata	Birohi-I	-	-	5	100.00	5
	Haringhata-I	-	-	9	100.00	9
	Mollabelia	-	-	10	100.00	10
	Sub-total	-	-	24	100.00	24
Karim pur-II	Dhoradaha-II	-	-	5	100.00	5
	Nandanpur	-	-	6	100.00	6
	Rahamatpur-II	-	-	8	100.00	8
	Sub- total	-	-	19	100.00	19
Krishna nagar-II	Dhubulia-I	-	-	3	100.00	3
	Nowapara-II	-	-	4	100.00	4
	Sadhanpara-II	2	66.67	3	100.00	3
	Sub-total	2	20.00	10	100.00	10
Rana ghat-II	Baidyapur-I	-	-	5	100.00	5
	Duttaphulia	1	11.11	8	88.89	9
	Raghunathpur Hijuli -II	-	-	5	100.00	5
	Sub-total	1	5.26	18	94.74	19
Total	Total	3	4.17	69	95.83	72
Cooch Behar + Nadia (Grand Total)		16	10.00	144	90.00	160

Source: Field Survey

From the above two Tables it is revealed that in Cooch Behar district 14.77 per cent women panchayat members reported that girls children are not going to school because of financial crisis. In Dinhata block especially in Gitaldah-II G.P. girl children are involved in illegal market for selling salt and sugar in Bangladesh and in Cooch Behar –II block poor families are migrating to other cities or states for regular income. Due to these reasons girls' children are not able to attend the school regularly. In Nadia district only 4.17 percent women panchayat members reported that girls at the age group (6-10) are not going to

school. They are engaged in brick-making industry. Due to poverty girl children do outside work for earning money.

Also because of cost of education, for domestic work, early marriage, girl children are not going to school. From NFHS-3 data it can also be seen that in West Bengal 83 per cent of primary school children at the age group of (6-10 years) in rural areas attend school. In fact the report said among children age group 6-10 years in rural areas girls are attending the school at higher proportion (84 per cent) than boys (82 per cent). Mid-day meal is not only the way to bring children at school regularly. Another reason is that due to non-availability of separate toilet in schools girl children are not going to school.

5.7.1 Sanitation at School

To maintain individual health and completely stop the unhygienic practice and to ensure sanitation facilities in rural areas government had introduced a programme called 'Total Sanitation Campaign' (TSC). The key intervention areas were Individual Household Latrines (already discussed), School Sanitation and Hygiene Education, Community Sanitation and Hygiene Education, Community Sanitary Complex and Anganwadi Toilets.

The objectives of the programme in the school were that arresting dropouts of girls, improving awareness level of health environment. Non availability of separate toilet for girls is one of the reasons of non-attendance of girl children at school. From the following Tables it can be discussed how many panchayat members take the initiative to make separate toilet for girl students at primary school within their areas.

Table 5.32: Separate Toilet at School as per Women Panchayat Members Response in Cooch Behar District

Block	G.P.s	No	%	Yes	%	Grand Total
Cooch Behar – II	Madhupur	3	23.08	10	76.92	13
	Patlakhawa	3	20.00	12	80.00	15
	Pundibari	-	-	9	100.00	9
	Sub-total	6	16.22	31	83.78	37
Dinhata –I	Gitaldah-II	2	50.00	2	50.00	4
	Goshanimari-I	5	71.43	2	28.57	7
	Putimari-I	5	71.43	2	28.57	7
	Sub-total	12	66.67	6	33.33	18
Mathabhanga-I	Bairagirhat	2	33.33	4	66.67	6
	Pachagar	-	-	6	100.00	6
	Shikarpur	-	-	6	100.00	6
	Sub-total	2	11.11	16	88.89	18
Tufanganj-I	Balarampur – I	2	50.00	2	50.00	4
	Chilakhana-II	-	-	4	100.00	4
	Deochaira	1	14.29	6	85.71	7
	Sub-total	3	20.00	12	80.00	15
Total		23	26.14	65	73.86	88

Source: Field Survey

Table 5.33: Separate Toilet at School as per Women Panchayat Members in Nadia District

Block	GPs	No	%	Yes	%	Grand Total
Harin ghata	Birohi-I	-	-	5	100.00	5
	Haringhata-I	-	-	9	100.00	9
	Mollabelia	-	-	10	100.00	10
	Sub-total	-	-	24	100.00	24
Karim pur-II	Dhoradaha-II	-	-	5	100.00	5
	Nandanpur	-	-	6	100.00	6
	Rahamatpur-II	-	-	8	100.00	8
	Sub- total	-	-	19	100.00	19
Krishna nagar-II	Dhubulia-I	1	33.33	2	66.67	3
	Nowapara-II	3	75.00	1	25.00	4
	Sadhanpara-II	-	-	3	100.00	3
	Sub-total	4	40.00	6	60.00	10
Rana ghat-II	Baidyapur-I	-	-	5	100.00	5
	Duttaphulia	2	22.22	7	77.78	9
	Raghunathpur Hijuli -II	-	-	5	100.00	5
	Sub-total	2	10.53	17	89.47	19
Total	Total	6	8.33	66	91.67	72
Cooch Behar + Nadia (Grand Total)		29	18.13	131	81.88	160

Source: Field Survey

The above two Tables 5.32 and 5.33 show that the condition of separate toilet for girls in the school in Nadia district is better than Cooch Behar district. In fact Tables 5.14 & 5.15 also show that the latrine facility is also better for villagers in Nadia district than the Cooch Behar district. It implies that Nadia district women panchayat members are taking more initiative to give 100 percent quality of life of village women and school girls.

5.8 CHAPTER SUMMARY

This chapter deals with the performance of women panchayat members for improving the situation of rural women. From the primary data we have seen that 64.77 per cent women panchayat members in Cooch Behar district help the SHGs' members in different ways and in Nadia district 66.67 per cent women panchayat members help the SHGs' members for their betterment of the economic activity. Among the different ways 'Keep contact' with the SHGs members is the effective way towards success of the groups for economic activities. In Cooch Behar district 12.28 per cent women panchayat members keep contact with the SHGs members and in Nadia district it is 27.72 per cent. Nadia district is more successful in SHGs' economic activities (Table 5.3) in comparison with Cooch Behar.

For wage employment, women panchayat members could not make out the difference between SGRY and NREGS. In Cooch Behar district 19.32 per cent women panchayat members only knew the difference between SGRY and NREGS. But in Nadia district panchayat members are more aware and 51.39 per cent know the difference between SGRY and NREGS. But women panchayat members in both the districts do not know about the special facilities given to rural women beneficiaries under NREGA like, "at the time of providing employment, priority shall be given to women in such a way that at least one-third of the beneficiaries shall be women". From the field survey we have seen that women panchayat members only know that ladies can get work under this project. From the primary data we have found that 77.27 per cent women panchayat members in Cooch Behar district and 56.94 per cent women panchayat members in Nadia district reported that, ladies are working under the NREGS project.

86.36 per cent women panchayat members in Cooch Behar district had allotted house only to ladies name under IAY project and in Nadia district 95.83 per cent women panchayat members had allotted IAY to the names of ladies only.

For health and hygiene government provides proper sanitation and adequate drinking water facilities. In Cooch Behar district 42.05 per cent women panchayat members have provided individual latrine facility and 53.41 per cent women panchayat members said that they were able to provide only drinking water facility. In Nadia district 63.12 per cent women panchayat members have been able to provide individual latrine facility whereas 32.50 per cent said, they have provided drinking water facility. In fact in both the districts, not all the women members have latrine and drinking water facilities in their own house.

35.23 per cent of women panchayat members in Cooch Behar district said that the girls in their area get married before attaining the age of 18 years and in Nadia district 25 per cent of women panchayat members said the same. 15.91 per cent women panchayat

members in Cooch Behar district said that pregnant ladies in their areas do not go to any health institution for antenatal check-up but in Nadia district almost all rural pregnant ladies go to health institution for antenatal check-up. 32.95 per cent of women panchayat members in Cooch Behar district said that pregnant ladies do not go to health institution for giving birth of a baby and in Nadia district it is 11.11 per cent. First reason is that there is insufficient infrastructural facilities from government side in Cooch Behar district and second is not conscious about their health and third is lack of awareness campaign in the area.

The present researcher has collected the primary data on child immunization and school going girls. From the primary data it can be said that all rural mothers are conscious about their baby's health and they at least know about the polio and BCG and DPT. From Tables 5.27 and 5.28 we have seen rural mothers in Cooch Behar district are more aware about the child vaccination than Nadia.

85.23 per cent of women panchayat members in Cooch Behar district said that girl children at the age of 6-10 years are going to school and in Nadia district 90.00 per cent women panchayat members said that girl children, at the age of 6-10 years are going to school.