

MONITORING THE IMPACT OF STRUCTURAL ADJUSTMENT PROGRAMME (SAP) ON THE POOR HOUSEHOLD ECONOMY OF GUJARAT

(RESULTS OF A LONGITUDINAL STUDY)

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Study Conducted by

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PREFACE

The present study emerged consequent to our concern over Structural Adjustment Programme (SAP) in addressing the issues of poverty. We as NGOs have been trying to make ourselves relevant in creating alternate, people centred development. We thought, a critical look at the ground level, subsequent to SAP may provide some insight into the macro policy and its link to the micro reality.

Without the commitment of the seven grass root groups who are associated in this participatory research process, this study would not have been completed. They were not only involved in the data collection but created environment for critical involvement of people in the research process which made the study participatory. Our sincere thank to the communities who not only participated in such a long process uncomplainingly sharing their living conditions but also took pain to understand the purpose of undertaking such an enquiry. This made their participation meaningful and reinforced our faith on participatory research process.

A large number of NGOs, academicians and friends from media continuously supported us in the study process. Their meaningful participation in all the consultations subsequent to each round of the study inspired us and their critical questions made us to maintain the rigour of the study. My sincere thanks to all of them.

I am thankful to all my colleagues at UNNATI who extended their support in the study process. I am particularly thankful to Ms. Alice Morris, Ms. Trupti Jain who carried the study forward. I am also thankful to Mr. Kanu Lakum for his help in coding and data monitoring.

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I hope we will continue receiving such support and solidarity in the next phase of this participatory study in which we aim to take up a joint policy advocacy.

Binoy Acharya
UNNATI
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PART I : AN OVERVIEW OF THE STUDY

CHAPTER I

BACKGROUND OF THE STUDY

Since India went in for a Structural Adjustment Programme (SAP) in 1991, much has been written about the relevance and otherwise of SAP to India. Of particular concern to NGOs working to eradicate poverty has been the impact of SAPs on the poor and marginal sections of rural and urban areas. The experiences of Africa and Latin America on the impact of SAP on the poor demonstrated conclusively that the policies were not conducive for the welfare of the poor. This formed basis for many NGOs expressing their apprehension on the likely impact of SAP on the poor. With the largest number of the absolute poor in India, living conditions of the poor is necessarily an issue of concern.

Several publications including UNICEF's "Adjustment with a Human Face" and "Structural Adjustment: By Whom, For Whom" by the International Labour Organisation and ARTEP have been critical of SAP programmes of Sub Saharan Africa and Latin America. Even studies conducted within the Bretton Woods institutions, (Kakwani et al, 1990; Heller et al, 1988), have shown SAP to have an adverse impact on the living standards of the poor in the adjusting countries. However, some of these studies argue that, in the long-run, due to corrections in the economies of the adjusting countries, the poor will also benefit due to trickle down effects of growth. They, thus, emphasize the need for identifying vulnerable groups that will be adversely affected in the short-run and designing 'Safety-net' programme to support them during the period of stabilisation and structural adjustment, which collectively go under the title of SAP.

Unfortunately very little of what has been said so far on the impact of SAP on the poor in India has been based on primary empirical evidence. In the absence of studies based on hard primary data it may be difficult to both influence policies being pursued under SAP and for different actors, particularly for NGOs working to eradicate poverty, to work effectively to safeguard the interest of the poor. How SAP is affecting the lives of the Indian poor, three years after its commencement, is a burning question that demands an answer.

It is with this concern in mind UNNATI initiated a study in late 1993 after several consultations with NGOs to monitor the impact of SAP on poor households in some areas of Gujarat State. Seven NGOs, who are working with tribals, agricultural labourers, unorganised sector workers,

urban poor have been involved in the field level study. ACTIONAID is supporting this study.

This longitudinal study aims not only to generate data to be used to influence government policy relating to adjustment, but would also enable the participating organisations to build an information base about their target area, target group and the issues which warrant immediate attention from their programme point of view. All effort have been made in this study to make it participatory and to keep the academic rigor intact. It has been achieved through the active involvement of local NGOs and academicians.

This report is based on four rounds of data collected during April 94 and Dec. 94, May 95 and December 95. At the end of every round, area report have been prepared so that local NGOs can utilise the data in their public education and awareness building.

This report aims to articulate policy level recommendations for advocacy. This report is divided into three parts. Part I discusses theoretical issues related to SAP and methodology followed in this monitoring study in three separate chapters. Part II presents main findings of the study in four chapters covering area profiles, trends in employment and wages, trends in cropping pattern and consumption, trends in availability of credit and access to health services. Part III covers emerging trends on the living conditions of the poor from the findings and discusses implications for policy changes.

CHAPTER II

A THEORETICAL OVERVIEW OF STRUCTURAL ADJUSTMENT

I. Origins of Economic Crisis and Corrective Measures

External shocks and internal mismanagement of the economy drove several developing countries into very serious debt and balance of payments problem during the eighties. Typically, the decline in export prices of primary commodities, an increased import bills, ballooning internal budget deficits (due to mismanagement), and production distortions in the economy (due to over-regulation) cumulatively resulted in economic chaos necessitating strong corrective measures.

During the early 1980s India did away with its hitherto cautious approach to foreign capital and embarked on a borrowing spree that increased its external debt burden nearly ten-fold in a decade. This profligacy coupled with internal mismanagement brought the crisis to a head in early 1991 when the country had to mortgage its gold to bolster its precarious foreign exchange position. Faced with the possibility of defaulting on its international financial obligations, India, like many other developing countries before it, approached the International Monetary Fund for funds to bail it out and thus was forced to accept the reform conditionalities dictated under the Stabilisation and Structural Adjustment Programme.

The Corrective Measures

The corrective process generally involves a short term stabilisation and a longer term structural adjustment of the economy. The stabilisation process - which is guided by the IMF - is a short-term measure involving restoring the external sector balance. Structural adjustment measures - which are undertaken at the behest of the World Bank and which follow stabilisation - are supposed to steer the economy towards a higher growth path and are long run in nature.

The policy instruments during the stabilisation process aims at short term demand management. They include devaluation of the domestic currency, contraction of public spending (in terms of reduction in wages, subsidies and investment), increase in taxes and tightening of monetary and credit policies. These measures are expected to improve the export performance, reduce import

demand and reduce the budget deficit (See Chart 1).

The Structural Adjustment measures, on the other hand, are directed at removing the supply side constraints in the economy. Policy reforms in the areas of trade, industry and finance aim at reducing the role of the government in running the economy, and increasing the role of the markets, which are believed to be more efficient resource allocators (See Chart 2). Thus these reforms advocate privatisation, opening up of the economy for foreign investment and freeing of the policy instruments that regulate a country's economy.

Thus the reforms initiated in 1991, as some analysts point out have down played the earlier emphasis of the government on long term planing and growth and self reliance goals. The reform process has looked not beyond medium term at the most.

Reforms related to trade, industry, labour, finance and banking and the public sector are few important changes that have witnessed during the past four years. It is to be noted that based on the political sentiments and fiscal compulsions, some sectors were not reformed to the desired (by IMF/WB) extent so far in this reform process. For example, the public sector reforms have remained at disinvestment measures, which enabled government to meet the fiscal deficit but policies related to future of loss making units or decision making autonomy of the chiefs of these units are not taken so far mainly due to political compulsions. Similar instances can be seen in other sectors as well.

II. Elements of Structural Adjustment

(A) Correction of Production Distortions:

Production had become distorted through the internal policy actions of governments, coupled with the inability to adjust rapidly to fairly quick changes in the external environment. Since independence, the government has generally followed a dirigiste development strategy, administering the Indian economy in pursuit of a variety of growth, equity and political goals. This web of controls can be broadly conceived as operating across five markets. These are :

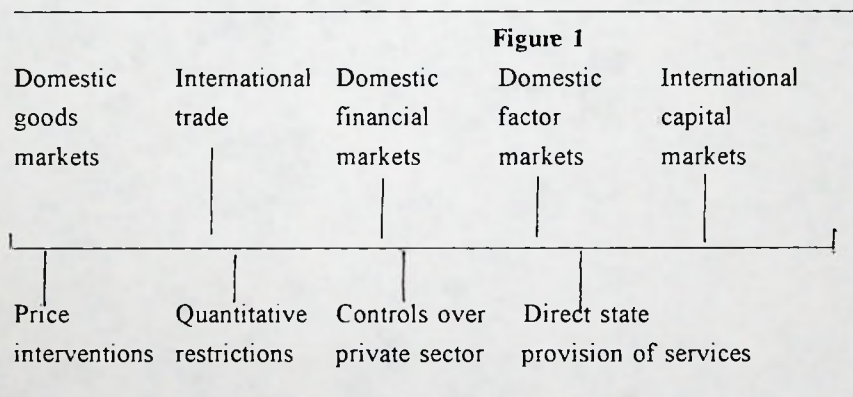
- *domestic markets for goods and services, such as agriculture, industry, transport and communications, and energy
- *domestic factor markets

- *domestic financial markets
- *international trade
- *international capital markets

In each of these markets, government actions had taken the form of price interventions, quantitative restrictions, controls over private sector activity and direct involvement in service provision and production.

This is represented schematically in Figure 1. Some examples of the nature and objectives of these controls in each of the various areas are :

Domestic markets for goods and services. In agriculture, procurement prices were set on a pan-territorial basis. In some cases additional procurement prices have been held down to raise revenues for industrial development. The effects of this implicit taxation have been partially offset by the provision of input subsidies like subsidy in fertilisers, water and power.



Consumers also had been subsidised through the provision of food at prices that are insufficient to cover the price paid to producers plus marketing costs. Quantitative restrictions on produce movement and private sector marketing had been imposed through a concern for food security. Restrictions were placed on private sector involvement in agricultural activities because this sector was held to be monopolistic and exploitative, and could not be relied upon to provide guaranteed market outlets at reasonable prices, particularly in remote areas. Governments have, therefore, directly assumed marketing responsibility through the public distribution system.

In industry, ex-factory product prices in respect of some goods have been controlled to maintain the real incomes of consumers. Because of difference in perceptions, inadequate access to finance and skills in the indigenous sector, the government has directly invested in industry and through institutional financing like industrial development corporations.

Direct state production has occurred for two main reasons :

*It was held-that the private sector was insufficiently endowed and motivated to carry out functions that were central to the achievement of the state's development goals. The state must, therefore, carry out these activities itself in order to force the pace of development.

*Because the private sector was driven by profit, its operations will not reflect the government's social and equity objectives. The exploitative nature of the private sector was compounded by its monopolistic structure arising through limited access to finance and skills.

Private sector operation in various markets were, therefore, subject to restrictions and often prohibited altogether. However, government structures were not flexible enough to react rapidly to changed opportunity costs. Resources were inevitably allocated on the basis of political considerations. Incentive structures were hard to create in the public sector and operational inefficiency resulted. As will be examined in more detail later, it was as a result of this that structural adjustment policies have sought to reduced the role of the state to the minimum central government functions. Where the remaining activities may have implications for resource allocation and therefore efficiency (for example in budgetary allocations) structural adjustment loan (SAL) policy has included measures to ensure that resources are allocated by government on the basis of social benefit : cost considerations.

Domestic factor markets. In agriculture there were and are often restrictions on the free operation of the land market and rents have been held down under the different Land Reform Laws. In addition, tradition and social customs may prevent many factor markets developing along "commercial" lines and a government is reluctant to interfere with these customary practices.

Domestic financial markets. In domestic financial markets, interest rates were repressed frequently at negative real levels in order to encourage investment in industry and provide cheap credit in agriculture. Quantitative restrictions have been used to direct the allocation of commercial banks lending portfolios to specific uses such as priority sector lending and export credit by commerce

banks.

International trade. The domestic currency were overvalued to cheapen the price of capital imports. Tariffs and quantitative restrictions on imports were imposed to protect domestic industries. Foreign exchange rationing was developed which protected domestic industry from import competition to control its access to imported inputs.

International capital markets. The government imposed restrictions on the free flow of capital, prevented domestic firms from raising capital abroad, limited the repatriation of profits by foreign-owned firms and have ill-defined or restrictive investment codes.

In summary, governments themselves have negated extensively in economic activity and administered a network of prices in all markets in pursuit of a variety of growth, equity and political goals. To force the pace of development, or because of equity considerations, political problems associated with market prices or the operation of the private sector, administered price relativities have had deviated extensively from those that would occur through the free operation of the market. These points are discussed fully in the Berg report (World Bank, 1981a).

Moreover, controls over resource allocation also emerged in response to macro-economic crises. Tariffs and quotas, for example, were often a response to untenable balance-of-payments situations.

(B) Concern About The Structure of Production : The Rationale

At the macro-level, a structural problem results in insufficient generation of foreign exchange, limiting the ability to import capital goods and raw materials and therefore limiting productive investment. At the same time it may create an inflationary gap between revenues and expenditures which may ultimately worsen the balance-of-payments situation.

The distorted production structure created through policy interventions is inherently unstable in macro-economic terms. In terms of fiscal (internal) balance, if production is distorted in relation to opportunity costs this structure may only be maintained through a series of subsidies that create budgetary imbalance. State enterprise, which characterizes the dirigiste strategy, has proved to be inefficient in virtually all sectors barring few honorable and subventions to state enterprise have had a major negative impact on public savings. The effect of dirigism in reducing the value

of output and slowing growth reduces the tax base. Weak revenue mobilisation efforts and lack of expenditure planning have also been termed structural problems and these have contributed to budgetary deficits.

In terms of external balance, policies that act as a disincentive to agricultural export crop production, such as low producer prices and overvalued exchange rates, clearly have an adverse effect on export revenues. The situation is made worse by the fact that overvalued exchange rates have encouraged imports. Resultant shortages in foreign exchange have reduced the availability of imported inputs and this had further restricted growth in export production.

These tendencies to macro-economic imbalance were exacerbated by the failure of the government to adjust their expenditure to reflect reduced output levels. Typically, consumption levels were maintained despite falling national incomes and foreign exchange availability.

At the micro-level, if the structure of production or resource allocation in an economy differs from that which would follow if resources were allocated on the basis of opportunity cost, it would be possible to reallocate existing resources and increase the value of total output, that is, increase the allocational efficiency of resource allocation. Therefore, there is concern with structural "distortions" because they result in sub-optimal per capital incomes from a given resource base. The economy is said to be operating within the production possibility frontier.

A second reason for concern over distorted production structures is that they limit the rate of growth of output over time, that is, the magnitude of outward shifts in the production possibility curve is restricted. Suppressing agricultural prices, for example, reduces agricultural incomes with adverse consequences on savings, investment and technological innovation in the leading sector. (Agriculture contribute about 30% of GDP and supports about 70% of the total population). Equally, holding down interest rates reduces savings and leads to credit rationing. This is inefficient in terms of allocation and leads to the development of parallel credit markets characterised by much higher rates. In an inward-looking trade policy environment, firms outputs are directed toward the domestic environment, thereby limiting the possibilities of economies of scale and stimulation from foreign competition.

Internally administered prices and the extensive role of government in economic activity based on strategic concerns creates inflexibility in the productive system and prevents resource reallocations in response to changes in opportunity costs represented by free market price

relativities.

In summary, a distorted structure of production directly and indirectly creates unsustainable macro economic imbalance, places unnecessary limitations on the value of national output, limits the rate of growth of output and creates inflexibility which prevents resource reallocation in response to changes in relative international prices. As a consequence of these effects of distortions in the structure of production, governments are unable to meet their development goals.

The world Bank (1988b) provides a classic description of the forces leading to macro-economic imbalance and its consequences in respect of a developing country.

"The imbalance and deterioration of the Ghanaian economy in the 1970s and early 1980 s stemmed from a combination of inappropriate economic policies and exogenous shocks both at home and abroad. Large budget deficits, in part required to support an extensive and inefficient public sector, led to, marked acceleration of inflation. Given a reluctance to adjust the nominal rate of exchange, the real rate appreciated significantly, shifting relative incentives away from the production of tradables to non-tradables. The resulting fall in the production of exports and import substitutes, combined with disenchantment amongst aid donors with Ghana's economic management, caused a prolonged foreign exchange crisis necessitating foreign exchange controls and quantitative restrictions on imports which further constrained production and growth. The decline in the tax base due to the reduction exports and imports and the related drop in economic activity forced major cuts in government recurrent and capital expenditure. The resulting deterioration in Ghana's once well developed social and physical infrastructure further reduced its productive capacity. The government responded to emerging shortages with additional price controls and rationing which worsened the problem by eroding production incentives and creating a vast black market, with related corruption, smuggling and tax evasion. Ghana's economic problems were further exacerbated in the early 1980s by a severe draught, worsening terms of trade and immigration back from Nigeria".

III. Structural Adjustment Programmes

Because existing production structures were inherently unstable in macro-economic terms and placed constraints on the value of national output and its rate of growth, the International Monetary Fund(IMF) and the World Bank have developed specific lending initiatives to address the problem. These provide balance- of -payments and budgetary support conditional on reform

of the policies and weaknesses that have resulted in structural problems.

The need for these initiatives was given additional force by the series of external shocks experienced by India during the Gulf War of 1991. These included rising interest rates, increases in the price of oil following the Gulf War of 1991, and a deep recession in the developed world.

Adjustment programmes generally consists of two categories of policy. Stabilization policies which work on the demand side to bring absorption into line with output and sustainable capital inflows. (or levels of living in line with available means), and structural or supply-side policies which act to increase output over the medium term (i.e. increase means to sustain improved levels of living). In practice this distinction is not clear cut. Stabilization policies, such as devaluation, have structural or supply-side implications while structural policies such as subsidy removal have implications for stabilization.

A. Stabilization

Stabilization comprising generally demand-side policies, try to achieve reductions in the current account deficit of the balance of payments and the fiscal deficit to levels that can be financed on a sustainable basis, and aims to reduce inflation. The theoretical basis of stabilization policy is the link between the budget deficit, money and credit creation, and disequilibrium in either aggregate absorption or in the non-tradables market. Policy changes or exogenous events started in any of these can then cause imbalances that can transmit to other components.

The orthodox theory emphasizes that correction of a balance-of-payments deficit will inevitably entail a reduction of living standards to bring absorption into line with output. As Dornbusch (1980) points out:

"In the orthodox model, stabilization and reduction in the standard of living are thought to be virtually tantamount. The burden of orthodoxy is that correcting an external imbalance hurts - almost always."

Devaluation, to be successful, must result in a fall in the real wage rate and often a fall real disposable income. If the nominal value of wages increases by the same percentage as the devaluation, there will have been no real depreciation of the exchange rate. The political and social consequences of these adjustments in living standards are one of the reasons why many

countries (and commentators) have been reluctant to accept the International Monetary Fund/World Bank prescriptions, particularly when they consider that there are other impediments to their economies which will prevent the devaluation bringing out the required external balance.

An implication of the orthodox theory is that resources must be shifted out of the production of non-tradeables and into the production of tradeables, while consumption must be shifted out of tradeables and into non-tradeables, so that the net exports of tradeables may rise. This process requires a change in the price signals between the two groups: the price of tradeables must rise relative to that of non tradeables, to induce producers to shift resources into tradeables and to induce consumers to shift consumption to non-tradeables. The rise in equilibrium prices in the non tradeable sector represents the induced inflationary pressure of devaluation, which suggests that a devaluation must be accompanied by monetary and fiscal restraint.

If the sole objective of an adjustment programme were simply to secure a short term improvement in the balance of payments. Policies designed to control aggregate demand (reduce absorption), such as the restraint of domestic credit expansion, would be sufficient in most instances. In fact, adjustment programme are aimed at a broader set of development objectives including sustained increased in living standards. Reliance on a single instrument, namely demand management, would be incompatible with these objectives, since it would restore macro-economic balance at an unacceptable low level of national income. Indeed, the emphasis of the orthodox theory on reduced expenditure may reduce investment and therefore growth potential.

The Structural Adjustment Programmes now being pursued in India has, therefore, emphasized achieving external, adjustment through policies that will ensure a satisfactory rate of economic growth, i.e. "adjustment with growth". Rather than limiting levels of living to existing means, these policies theoretical to increase means, thereby allowing increases in levels of living. However, consumption must still be constrained to a slower growth than output to release resources for investment purposes. Structural or supply-side policies accompany stabilization policies in such programmes.

(B) Structural or Supply-Side Policies: Stabilization

A review of structural adjustment efforts in (World Bank, 1988) reveals that although individual programmes have emphasized different policy issues reflecting country priorities and objectives, the emphasis os supply-side policies has been in four key areas:

- (i) Mobilization of domestic resources through fiscal, monetary and credit policies, together with support for revenue enhancing and expenditure reducing measures.
- (ii) Improvement of the efficiency of resource allocation in general and by the public sector in particular. This includes support for rationalizing public sector investment, strengthening the operational efficiency of public sector and parastatal enterprises, and rationalizing public sector programmes including divestiture of public holdings in enterprises.
- (iii) Reform of the structure of economic incentives to reduced distortions, promote more efficient resource allocation and thus create a more productive economic structure. Within this area two sets of policy issues are receiving the greatest attention. One is trade reforms designed to reduce the bias against exports, and to lower the level and rationalize the pattern of protection, the other price system reforms designed to make price more accurately reflect opportunity cost. This applies mainly to agriculture, but also to public enterprises and the energy sector.
- (iv) Institutional reforms intended to support adjustment with growth.

During the course of structural adjustment, supply-side policies have increasingly emphasized micro-economic policies of market liberalization. Measures of this type are intended to elicit supply response on two levels by: (i) Enduring appropriate prices in the broadest sense, the flow of output from a given stock of resources is maximized: and (ii) Enhancing the medium-to long-term growth rate of output.

IV. Efficiency and Structural Adjustment:

Three concepts of efficiency are important to this strategy of structural adjustment.

Allocation efficiency: Resources are allocated in line with opportunity cost, thereby maximizing the value of output.

Operational efficiency: Unit costs of production are minimized through efficient management and the adoption of the appropriate technology.

Economic efficiency: Combined, allocational and operational efficiency ensures that consumer's needs are satisfied at prices which reflect the minimum sustainable costs of production. Output maximized from the existing resources stock and growth is enhanced. Suppressing agricultural prices, for example, reduces agricultural incomes with adverse consequences for savings, investment and technological innovation in this leading sector. Another example is artificially holding down interest rates which reduces saving and leads to credit rationing, which is allocationally inefficient and, leads to the development of parallel credit markets characterized by much higher interest rates.

The liberalized economy is also held to be more flexible, the removal of controls leading to increased response to changes in the external environment.

The term "Structural adjustment" implies that the structure of production will be improved. In line with the above analysis, an improved structure of production will bring resource allocations in line with opportunity allocation, increasing the value of current output, and improving prospects for the rate of growth of output over time thereby avoiding the need for subsidies and taxes in support of the production structure.

While this is the centre element of an improved structure, structural improvements in practice have also included diversification measures which attempt to increase the flexibility of the structure in response to external shocks. At the macro-level, in the improved structure, more of the nation's resources will be allocated to the production of tradable.

The drive for efficient resource allocation does not, in fact theoretically, preclude state participation in economic activity. However, particularly so in the providing private consumption goods and investment goods, has proved to be both allocationally and operationally inefficient. Government structures are inflexible to react rapidly to changed opportunity costs, resources are inevitably allocated on the basis of political considerations, incentive structures are hard to create and operational efficiency resulting from the lack of incentives is common. As a result, structural or supply-side policies have also involved reducing the role of the state to the minimum central government functions. Where these may have implications for resource allocation and therefore efficiency, for example in budgetary allocations structural adjustment policy has included measures to ensure that resources are allocated by governments on the basis of comparative advantage.

Measures to return the economy to the discipline of the market, or make "liberalization can be conceived of as comprising the elements illustrated in Figure 2 and briefly discussed below:

- (i) A return to market prices which reflect scarcity. Output prices will be determined by the market and reflect economic scarcities. Subsidies must be removed. Interest rates (the price of credit) will rise as will the price of foreign exchange through currency depreciation.
- (ii) Measures to promote the private sector: The efficiency operation of the market, providing consumers and producers with what they want at prices which reflect costs of production, requires measures to ensure the development of a competitive private sector.
- (iii) Measures that reduce the operations of government to the minimum of central government administrative functions. It was noted that it is extremely different for governments to administer resource allocations on allocationally efficient grounds because political considerations and the inflexibility of the government system inevitably prevent this. The difficulties of creating appropriate incentive structures within government also militate against the achievement of operational efficiency. It should be noted that divestment includes closure, privatization and contracting out.
- (iv) Measures to ensure that the remaining government functions are carried out efficiently, without subsidy, and that their role is well defined. It must be recognised that government has major role in a market-oriented economy in administering the state and in the provision of public goods and activities in which social benefits exceed private benefits. The fact that these activities are carried out by the state does not mean that they should not be carried out according to allocation efficiency criteria. For allocation of the budget sectoral and inter sectoral should proceed on the basis of social benefit/cost consideration. In relation to activities that are socially profitable, e.g., agricultural research, these should take place in areas of comparative advantage. Measures to improve the operational efficiency of the state can be achieved through improved operational and financial targeting processes, and the development of appropriate incentive structures.
- (v) Measures to remove quantitative restrictions and administrative barriers on trade. In addition to price controls, measures that directly control the quantity of domestic and international trade should be removed. Examples are the movement of agricultural

produce within the domestic market, controls over food exports and imports and quota removal. Administrative arrangements include licensing, e.g., for traders, and non-tariff barriers to international trade.

V. Macro-Micro Linkages

The experience of Africa and Latin American countries adopting SAP clearly show the macro-micro linkages. The adjustment policies have made adverse impact on the household economy of the poor.

David Woodward (1992) provides an analytical framework on the linkages between macro changes and their implications at the household level. Typically, adjustment policies affect people in the following ways;

- a) Through their effect on sources of income, i.e. changes in employment status, real wages, product and input prices (for those selling directly to the markets), taxation.
- b) Through their effect on use in the quality of goods available for a given price). This effect may be termed as expenditure effect.

Both these has its special effect on women (Baker 1994). Related to these two effects, SAP also affects households through:

- c) availability of goods and services (like education, health, drinking water, etc, which are particularly important in the context of developing countries)
- d) non financial aspects of goods and services (like leisure time , migration, intra household distribution of time, etc) and
- e) effects women as managers of household consumption budget because of indirect taxes and decrease income (Baker 1994)

SAP policies affect different sections differently, depending on the nature of economic activity the individuals(gender) are engaged in and their resource endowments. In the initial phase of policy changes, especially under stabilization period, there will be a general contraction of overall

economic activities (due to reduction in expenditure and hence demand) This, as empirically evidence from African and Latin American countries suggest, will have negative effects on urban sections of the poor and lower middle class people., who are generally dependent on resource transfer(eg: benefits from subsidies). In rural areas such effects of stabilisation may take a relatively longer time to manifest.

At the same time, the fall in real incomes of the organised sector will be steep in the initial phase compared to unorganised sector. But a reduction in demand for labour due to overall decline in economic activity will effect those in rural landless category and in the urban informal sector who depend on wage employment.

The purchasing power of the household will be affected which can be termed as part of income effect. This necessitates households to develop coping strategies to compensate their lower incomes.

Expenditure effects of policy changes essentially relate to changes in the relative prices of tradable goods and non- tradable in the economy. The fiscal policy changes and accompanying inflationary/deflationary tendencies will affect the purchasing power of different sections of the society. Restructuring of public sector services pricing, and of other services provided by the government, will have impact on the household expenditure pattern.

The expenditure effect of policy changes will again depend on the consumption pattern of the household and the household's coping strategies. Some people argue it is the basic goods whose prices will increase faster and they constitute a major chunk of the consumption basket of the poor. This section does not comprise indexed wage earners.

Also decline in access to basic services due to curtailment of state expenditure will also effect the poor households, who will be on the margins of the economic activity.

If we focus on the poor households, evidence from Africa and Latin America suggest that the impact happened be dis-proportionately severe on the poorer sections in both rural and urban areas.

Looking at the theoretical and empirical evidences so far available from other countries four broad areas can be identified on which adjustment policies will have considerable impact on the

poor.

1. Employment

SAP envisages reduction in government plan and non plan expenditure which will have direct implications for employment creation, especially in rural areas and in the un-organised sector, privatisation of the public sector may reduce the employment in organised sector.

The policy changes in fiscal and industrial sectors it is argued would reduce the overall employment potential of the economy. Already there exists large scale unemployment and under employment both in the rural and urban areas. SAP, it is argued, would throw out large sections of people from the private organised sector due to the labour policy changes.

In the un-organised sector, due to the influx of retrenched labour, there will be surplus labour force which may reduce the earning capacity of people in that sector.

In rural areas changes in agricultural patterns and the incentive system to agriculture may reduce the employment potential. Along with this, due to expenditure contraction measures there may be a reduction in public works activities and thereby less employment opportunities for landless poor in the off-season. Hence employment opportunities in both rural and urban sector could decline due to SAP.

2. Wages

As a result of decline in employment opportunities and increasing numbers in the labour force, the bargaining capacity of the poor in the labour markets may eventually decline and this may result in low/subsistence wages in both rural and urban sectors. Also the changes in the agricultural pattern may lead to a reduction in wages due to demand and supply factors.

3. Social Services

Social services are directly influenced by government spending, services like education, health and public distribution come under direct financing of the government. These are crucial sectors for the economy. In fact, much of the expenditure on these are met by state governments. The austerity measures imposed on the states will have implications for expenditure in these sectors.

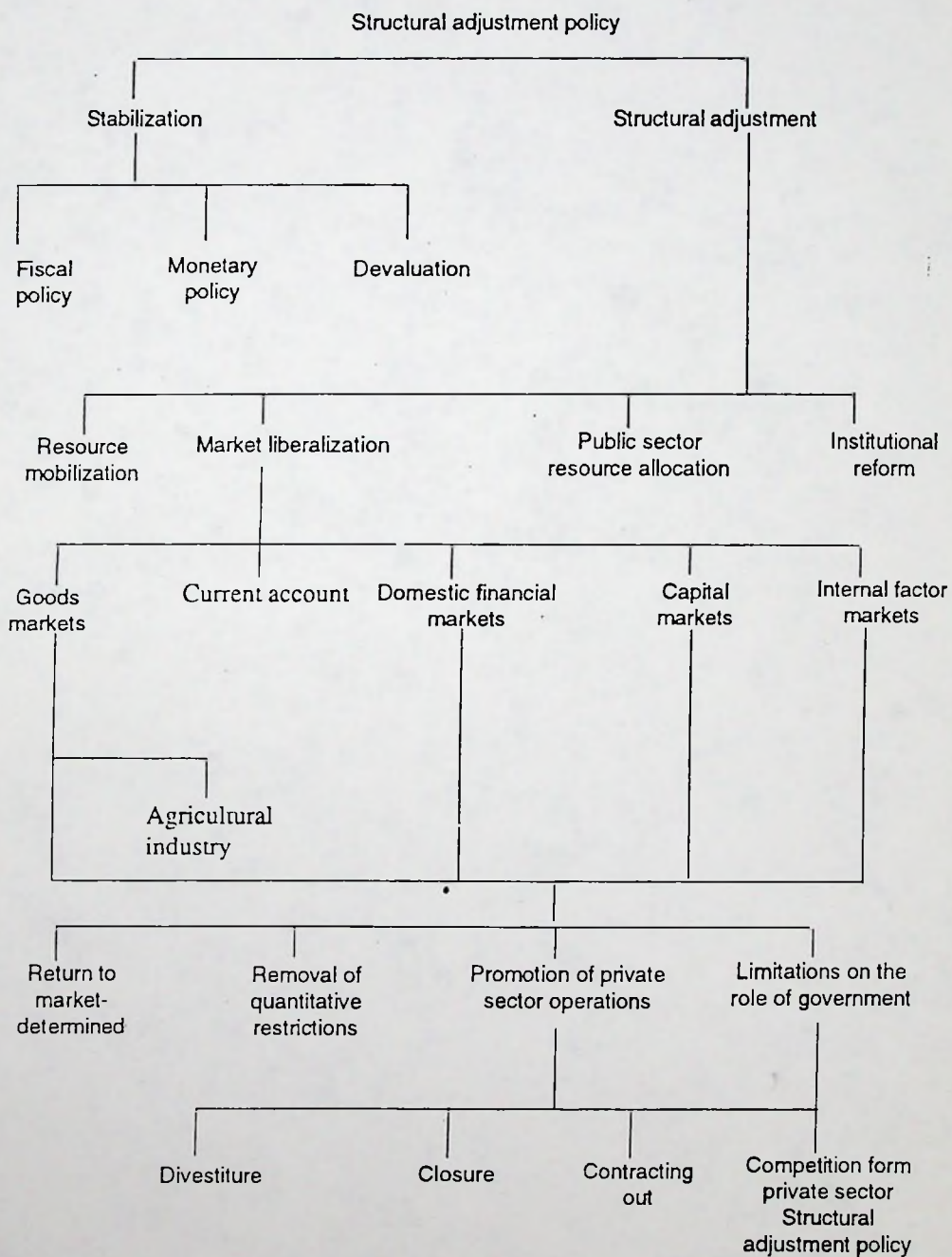
4. Changes in Agriculture Pattern

With increased market orientation in agriculture there could be a possibility of small and subsistence farmers turning to cash crops instead of food crops. This could jeopardize the food security of such households since they depend on the land for their food needs. This shift in the cropping pattern will have macro implications. In terms of aggregate food security of the country and household food security as well.

Changes in input prices(of fertilizer, water and power) would also affect agriculture in terms of changes in land use pattern and use of inputs. These changes will have long term environmental implications like, an increase in cultivable fallow, soil degradation due to inappropriate use of nutrients etc.

Figure 2

A schematic representation of structural adjustment policy



CHAPTER III

STUDY METHODOLOGY

The study methodology has been evolved through a process of consultation and participation by a group of NGOs. It is to be noted that, the consultation process has led to a lot of learning and mid way correction in the methodology were administered to get more focussed.

In March 1992 UNNATI called a Western India consultation to understand the implication of SAP on poor household economy. In this consultation the idea of monitoring the impact of SAP was mooted. After this several informal meetings were held with field based NGOs to carry out the impact study. In February 1993 another consultation was called to finalise the methodology of study. Meanwhile efforts were made at the national level to carry out a nation wide study.

A uniform methodology was proposed, which will be carried out across the country and aggregations would be possible to get insights into the living conditions of the poor under SAP regime across the country. This was welcomed by many NGOs, but such a vast scale of monitoring study covering Gujarat was kicked off in 1993, which was to cover ten geographical locations within Gujarat to ensure spatial representation. But when it came to carrying out the research only seven NGOs came forward, willing to participate in the study. Thus from April 1994, seven NGOs formed the core team and participated in the study. These NGOs are located in various parts of the state, but this by no means is a representative sample covering the states. But the study covers diverse groups like dalits, tribals, urban slum dwellers and rural people which forms the poor. Before the April 1994 round of study, a pilot round was initiated with five NGOs in September 1993.

Since the study is a joint effort of grass root NGOs, their target population formed the universe of the study. All the NGOs were working mostly with the poor as their target group, defined by their own criteria. Thus the stratification of the population is based on the local criteria. Among the target population about 8-10 per cent of the households are taken as sample for the monitoring study on arandom sampling method. The differences in sample size is mainly due to flexibility that are accorded to NGOs and the capacities of the NGOs in undertaking such a survey based work.

Since the study is longitudinal in nature, there has been drop outs during the four rounds of data collection. But that does not alter our results radically, as overall drop out is comparatively low. Table 3.1 presents sample size over the four rounds of data collection.

Table 3.1 INFORMATION ON SAMPLE SIZE

Groups	No. of Households	No. of Villages/Chalis	No of Households Surveyed			
			Apr 94	Dec 94	May 95	Dec 95
Ahmedabad Slum (Pottery)	1361	*	88	86	81	77
Ahmedabad Slum	2504	5	207	175	173	170
Ahmedabad Rural	2255	7	240	238	232	227
Kutch Rural	1780	8	248	239	223	238
Sabarkantha Rural (**)	3850	10	312	310	309	310
Junagadh Rural	3025	11	143	142	143	143
Sabarkantha Tribal	2070	8	205	202	201	203
Total	16845		1443	1392	1362	1368

Notes : (i) (*) Indicates that 75% of the forms were filled from the dwelling in 20 factory premises and the remaining from 5 chals.

(ii) The difference in the sample size between the two rounds is because of migration.

A household questionnaire was canvassed by the trained investigators who were drawn from the NGOs. The data was supplemented by PRAs conducted in two rounds in one village each in all the participating NGO areas. Case studies involving intensive discussion with the household members in selected households (5 households in each area) were conducted by using case study method. The latter two sources of data would provide substantiation for the findings of the study.

The four rounds of data collection were conducted during April 1994, December 1994, May 1995 and December 1995. At the end of each round the findings of the study were fed back to the concerned NGOs and they in turn discussed with the local people. In this research process communists are critically oriented about the economic policies. This research tries to in build people's education into the methodology. At the end of each round a consultation was carried out involving NGOs, academicians and the media to collectively understand the findings. A systematic media coverage highlighting the local conditions during the SAP period was conducted. This study is designed as to be used for advocacy for policy changes at both macro and micro level.

Profile Of The Study Areas

This section provides a brief overview of the seven study areas of the seven grassroot groups.

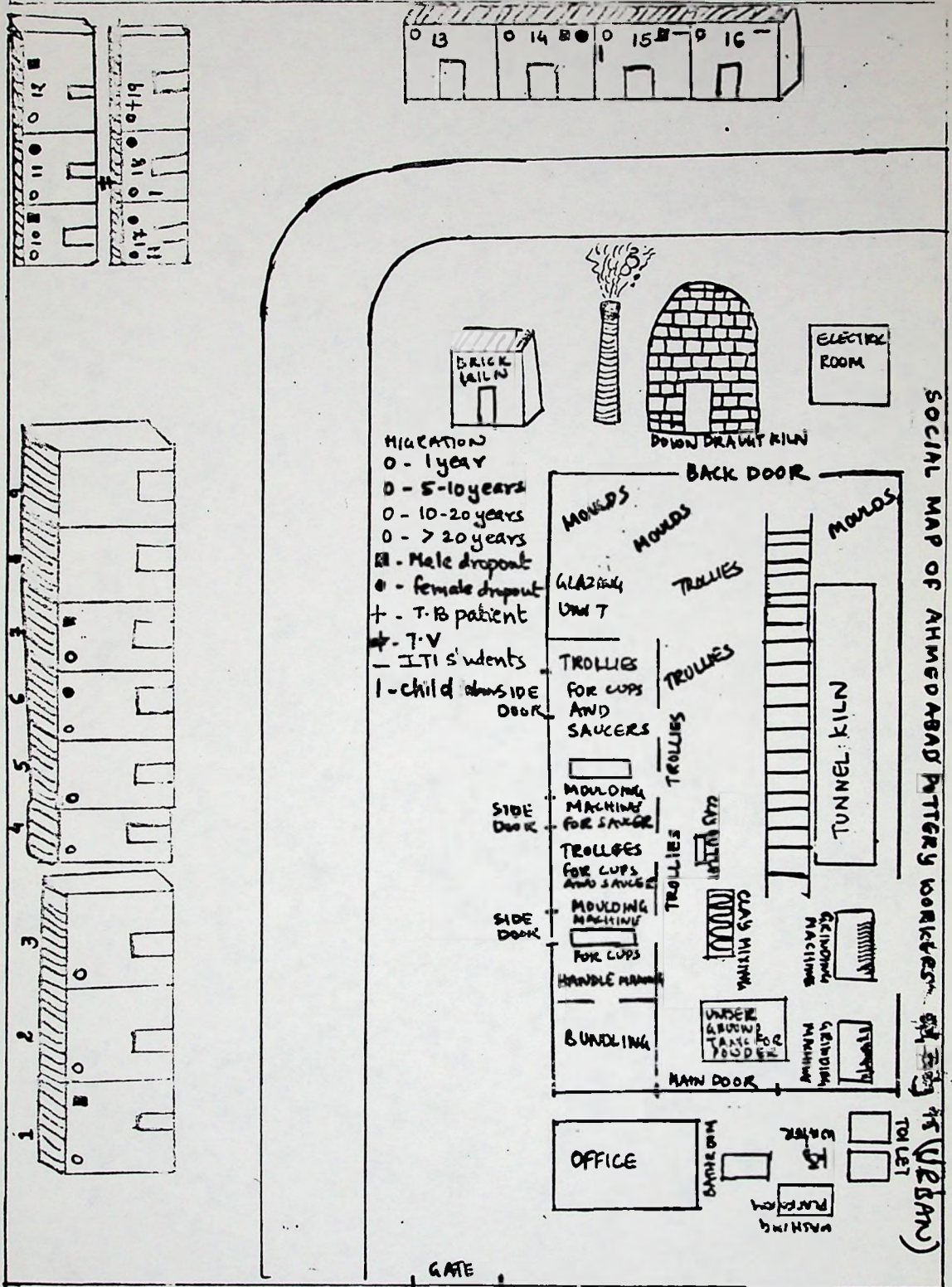
1. Ahmedabad slum (Pottery Workers)

Pottery workers located in the Naroda region of Ahmedabad is covered under this group. Pottery workers of Ahmedabad are migrants from Than area in Surendranagar district of Gujarat. These people have migrated into the city in the last 10 - 15 years. They live in the factory premises, in small dingy accommodation provided by the employer. Basic facilities like sanitation are lacking in the houses. Social map of one area studied is presented below (chart. 1) as an illustration, to get an idea on the settlement pattern and living conditions of this group. Women and children work in the same units along with the main male workers. They work on piece rate basis.

The literacy rate is very low among this group. Female adult literacy is about 38 per cent which has not picked up in recent years. Primary school enrolment is limited to about 78 per cent of the total eligible children. The enrolment for female children is 69 per cent. The incidence of children working is very common and children work in the pottery units as soon as they complete primary schooling. -- 20-25%

The proportion of population above 45 years is only 7%. Most of the workers are exposed to silica while at work and hence susceptible to occupational diseases, 'Silicosis'. This is a major threat to the life of the workers. There were instances of death occurring due to the 'Silicosis', which were reported more frequently during the last five years. The NGO participating in this

Bonded, no union, keep moving, low marriage, even a few get sick because of silica. People thought we were part of the state. Started work at 7 yr, 18 yr married, 3 children, died at 32, 15 days before attempted suicide. 22. 2) girl - hair caught in machine - scalp peeled.



study, **Shramik Seva Sansthan (SSS)** works among these households in organising, for increasing their bargaining capacity for better wages, living conditions, compensation and health facilities.

2. Ahmedabad Slum

The sample households covered under this category includes households working in textile units and in unorganised sector. These households are migrants from outside, mainly from Uttar Pradesh and other Northern states, who have come to Ahmedabad city for want of work some twenty years back. Most of the households live in 'chalis' which is densely populated row of houses with common water and sanitation facilities. Some parts of the area studied did not have electricity. Most of the residents take illegal electric connections from the nearby areas. Most of the households of this area used to work in textile mills of Ahmedabad. They used to get relatively high wages till the textile industry became sick. This has resulted in many of the workers entering into other occupations in unorganised sector.

The overall literacy and educational level of this group is high. More than 60 per cent of the females of this area are literate. School enrollment at the primary level is relatively high but many children opt out of the school after the primary level.

Loss of men's employment and loss of wage as they enter unorganised sector has led to women to work outside, which was not the case in the earlier period, where women used to stay at home. It is a very recent phenomena.

Textile workers suffer from occupational diseases like 'Byssinosis' and loss of hearing. Most of these workers do not get adequate compensation for these occupational diseases. The NGO participating in this study, **Kamdar Swasthya Suraksha Mandal (KSSM)** is working with the workers. It is addressing the issue of workplace hazards and compensation for the workers incapacitated due to occupational diseases.

3. Ahmedabad Rural

Villages of Daskroi Taluka of Ahmedabad District is covered under this area. This area is just 8 k.m away from the Odhav Industrial estate. The households are primarily farmers, agricultural labourers and are engaged in livestock activity. A small section of population work in the unorganised sector in the city. They commute to the city every day for employment.

A major problem faced by the households is lack of irrigation. Majority of the households engaged in farming take mainly kharif crop. There is a trend towards increased livestock activity in recent years, particularly among women. Private dairies are active in this area which has increased dairy activity in these villages.

Literacy rate is comparatively low. About 38 per cent of women are literate among this group. Though the primary school enrolment is high, the incidence of child labour is about 10 per cent in this area. Children help families in agriculture and livestock activities.

In recent years, there has been an increase in land alienation and transfers in this area. Land being mortgaged to take loans or sold to meet household expenses. Recent amendments of land purchase laws of the government has accelerated this process, (as we shall see in the findings in the later part of the report).

Centre for Economic and Social Concern (CESC), the participating NGO of this study, works with this community, to better their standard of living and towards poor people better access to government programmes. Their interventions include provision of credit support to the poor households through self help groups.

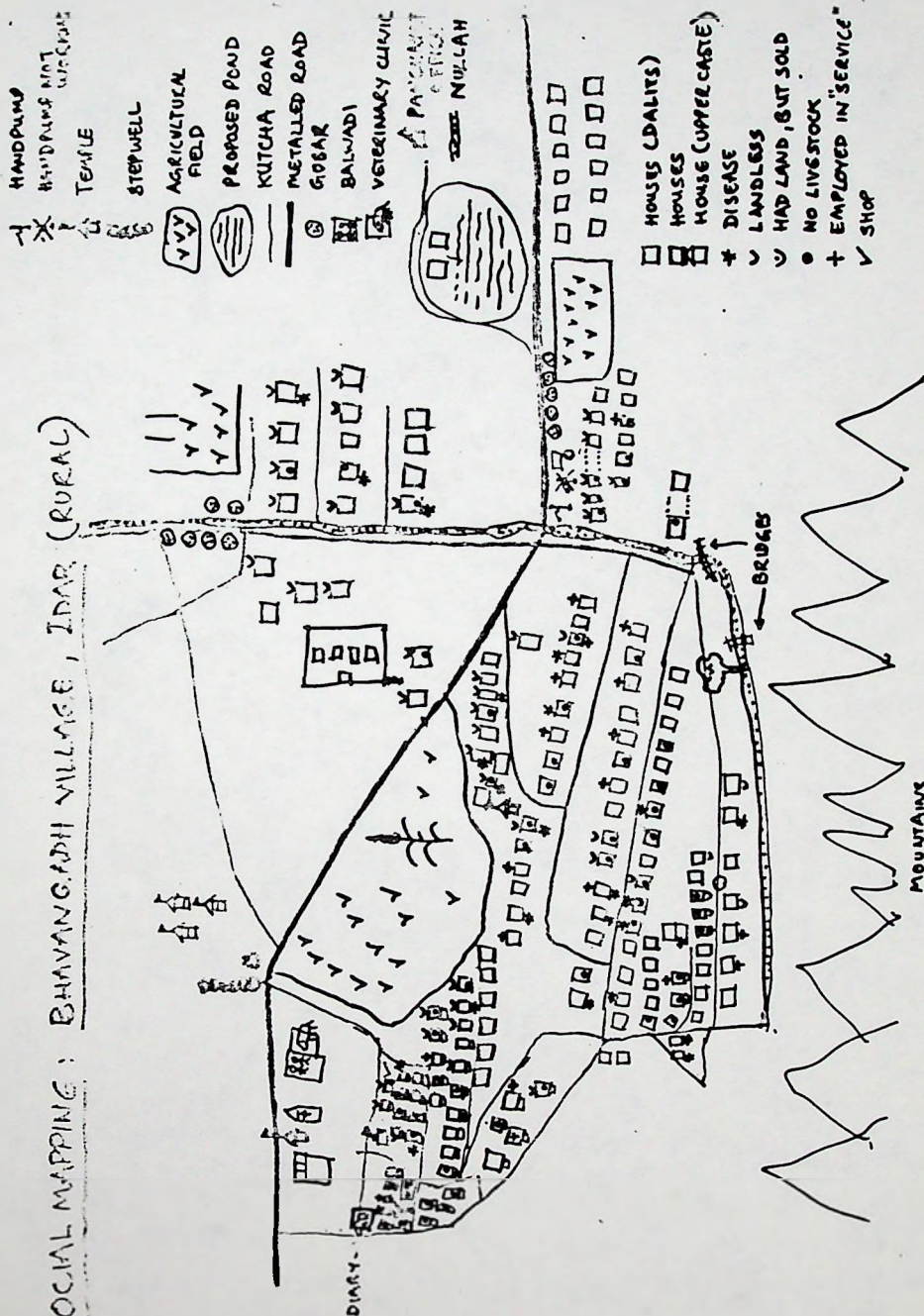
4. Kutch Rural - 24% of population, worked for 20 years, realised need to work poor, 20% of population, worked for 20 years, realised need to work

Households in this area are marginal farmers of Mandavi Taluka of Kutch district. Some Part of the area covered under this study, is having irrigated land (3 villages) while in the other area (5 villages) dryland agriculture is prevalent. The land is saline in many parts of the studied villages. Ground water level has fallen over the years, due to excess dependence on ground water for irrigation. To overcome this problem, the NGO which is involved in this study **Vivekananda Research and Training Institute (VRTI)** has introduced drip irrigation. Migration from this area is a regular phenomenon particularly from the dry land villages. Most of the out migration is to other cities of the region and to West Asian (Gulf) countries.

The traditional occupations of the area, cattle rearing and handicrafts are declining due to lack of support in terms of production and marketing. Most of the households engage in agriculture and work as labourers in agriculture and non agriculture sectors.

Literacy rate is low in the studied villages. The overall literacy is 62 per cent and it is 55 per

SOCIAL MAPPING: BHUVANGADI VILLAGE, IDAR (RURAL)



cent among females. Due to low population density and non availability of school facilities, most of the children do not attend school beyond primary level.

VRTI works among the farmers. They have formed co-operatives societies which provide seeds and fertilizers to farmers. They also do research and training on methods of farming and demonstrate the techniques to be adopted in the desert region.

5. Sabarkantha Rural

The households studied in this area come under Idar Taluka of Sabarkantha district. Most of the households are small and marginal farmers and agricultural labourers. About 80 per cent of the households belong to the Dalit community. Most of the poor work as agriculture labourers. Dairying is coming up as an additional main occupation.

Tuberculosis (TB) is highly prevalent in this area. Drinking water of this area has fluoride content and this has been a major reason for many illnesses among these people.

Literacy rates is very low particularly among females. Even with high primary school enrolment, there are very few children who are in the middle and secondary school. Children who do not attend school, work as labourers in agriculture. The incidence of child labour is about 12 per cent.

This area is irrigated to a large extent but the average size of land holding is small. Farmers cultivate both consumption crops like bajari, jawar, wheat and cash crops like pulses, cotton and castor (oilseed). The participating NGO, **Gram Vikas Seva Trust (GVST)**, work with the dalit community of the area, towards political empowerment and economic and social upliftment.

6. Junagadh Rural

The area studied falls in the Mangrol Taluka of Junagadh district. The households included in the study are entirely dalits. Most of them are landless agricultural labourers and there are very few marginal farmers in the sample.

Most of the agriculture in this area depend on monsoon. There are no irrigation facilities available in this area. Very few farmers resort to well irrigation. This is a Semi arid area with

TB - prob. govt. pub. price - causes serious ec. prob.

27

Low - subsidy & < 5000 sq ft. ground lease - poor specific prices & supply.
New tech - harvesters & work. : food security & , hard purchase policy of govt.
Dist. from holdings - no legalised, cash crop - depend on land & livelihood. : fish farming
Subst. dis - TB + leishmaniasis, loans for health expend - high expend - govt. health
phenomenon - pub. sector, #1 fam - 7 deaths, health system & ,

high level of salinity. This has resulted in farmers growing ground nut during the kharif season. One recent phenomenon observed in the area is leasing of government lands for mining by the government, which has resulted in increase in employment opportunities for the local population in mining and construction activities. **Gramya Kamdar Seva Kendra (GKSK)**, the participating NGO in this study, is working with the Dalits of the area, creating awareness for their basic rights. They are also helping the community in acquiring agriculture land and in maintaining the control over land.

7. Sabarkantha Tribal

Poshina area of Sabarkantha district is included under this area. The households studied here are farmers with small size land holdings. These tribals are also facing the threat of eviction from their land by the forest department. Agriculture in this area does not provide subsistence income throughout the year to the farmers. About six months of the year they migrate to other areas in search of wage employment. The surrounding forest does not provide any means of livelihood except for a very limited period of one month, when 'tendu' leaves are collected.

Literacy rate is very low particularly among females of the area. Primary school enrolment is around 50 per cent and it is still low among the female children. Child labour is highly prevalent here particularly among the girls. Most of the children engage in household work and help in agriculture.

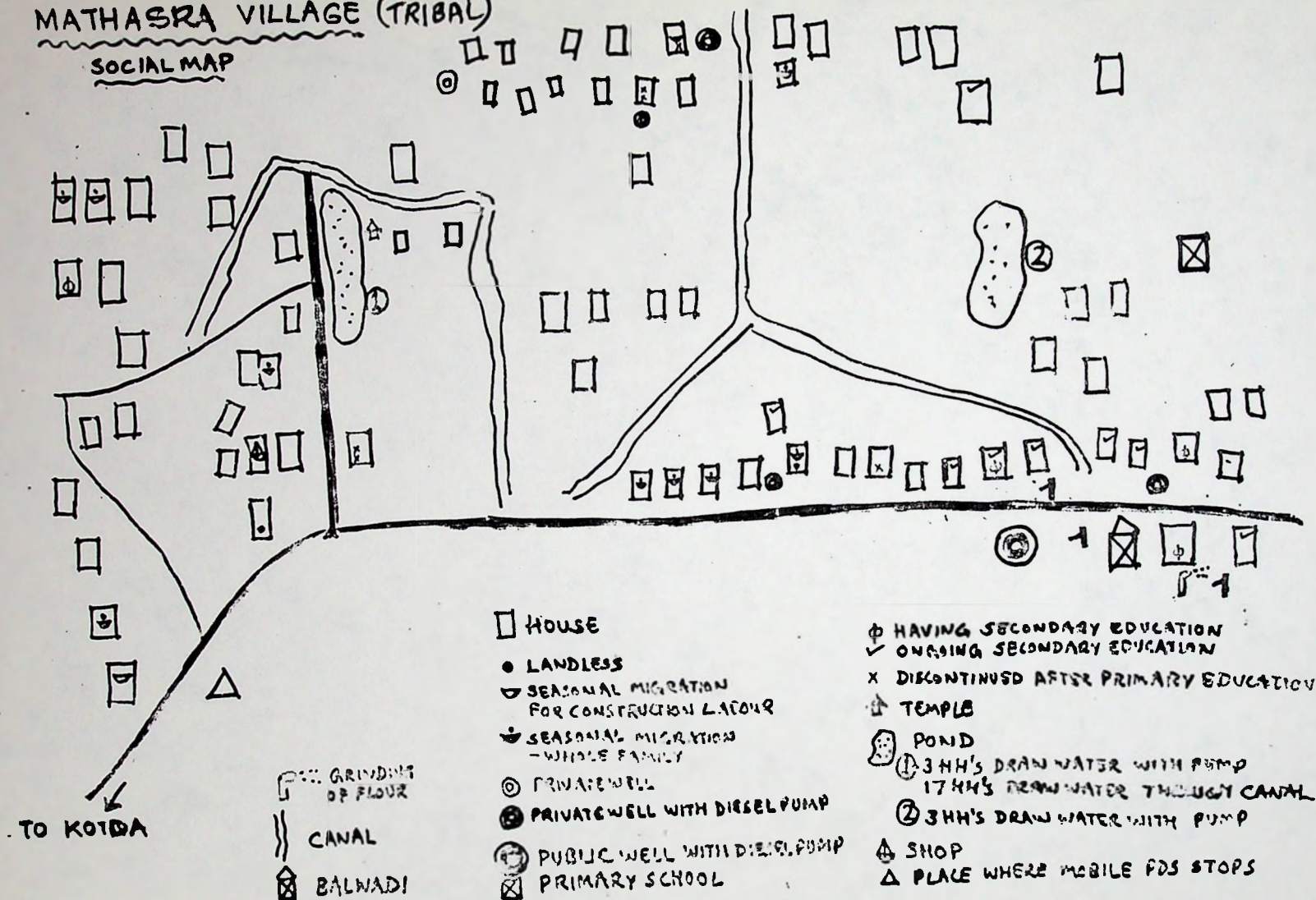
There are limited health services in the area. Government health facilities are not available within the cluster of villages, and people have to go to the nearest town to get simple medication. Most of the households depend on private health care system.

The participating NGO, **Navdeep Pragati Yuvak mandal (NPYM)** is involved in this area, helping the community to assert their rights over forest land, forest produce and increasing productivity of agriculture through land leveling, rain water harvesting and providing agriculture inputs.

POS-motilevan - main road, wrong time, not utilised, Outcrop: T, other stuff not willing to stay in PHC
 Hlt services - poor - no HBS, do not go to PHC, other stuff not willing to stay in PHC
 (Cooperation declining, ↓ cereal prod - Re 900 tax: to go to Hosp, further to case study - retained on 10 days, nothing could be done at either place, child died on way back, Indebtedness
 Women - none employ, but 28% explant
 Forest - after decades of explant - Stone - quarries, no outside contractor
 Overall tribal life deteriorated

MATHASRA VILLAGE (TRIBAL)

SOCIAL MAP



PART II

MAIN FINDINGS

CHAPTER IV

TRENDS IN EMPLOYMENT AND WAGES

I. Urban employment and wages

The trends in employment and wages in the last two years has been analysed separately for urban, rural and tribal areas. Labour Force participation has been considered as the key indicator to understand the shifts.

Labour Force Participation Rate (LFPR) has been defined as the number of persons working for more than 20 days a month (previous month of the survey period) between the age group 15-59 years. The LFPR for all the groups is given in the table (4.1).

LFPR among the urban households show a mixed trend. It has remained almost the same in the case of Ahmedabad slum population but it had declined in the case of pottery workers. The male participation declined from 87.2% to 81.1% and female participation from 73.7% to 68.5% between April 94 and Dec'95 in the case of pottery workers. In Ahmedabad slum area male participation has increased from 68% to 72% during the same period. The female participation increased from 2.2% in April 94 to 13 % May 95 and subsequently declined to 8.8% in Dec 95.

Tables (1) & (2) presented in the appendix provides detailed employment pattern of urban groups over the period under study. In Ahmedabad slum (pottery), the main source of employment are the ceramic units which are categorised as part of the manufacturing. This sector has employed 85% to 90% of the total workforce during the period. During the four rounds of the study, this rate has almost remained the same. Male and female employment has remained the same over the study period. The proportion of females working in pottery was 40% in April 94, 37% in May 95 and 40% in December 95. Apart from pottery work, people of the area are engaged in construction and services. Construction has attracted both men and women workers, but more and more women are entering into this activity over the period.

*LFPR Pottery - 1, const. T, small margin +
urban variety of employ. has
level - report prob + mfg, male T, ♀ const.*

TABLE 4.1
LABOUR FORCE PARTICIPATION RATES

Groups	April 94			December 94			May 95			December 95		
	M	F	T	M	F	T	M	F	T	M	F	T
Ahmedabad Slum (Pottery)	87.2	73.7	80.6	90.9	79.8	86.0	87.1	68.5	78.1	81.1	68.5	74.9
Ahmedabad Slum	68.0	2.2	41.2	66.8	13.5	43.4	67.6	13.0	43.6	71.9	(8.8)	44.2
Ahmedabad Rural	83.9	52.5	68.8	82.5	50.7	67.2	79.4	65.0	72.3	81.6	9.2	46.0
Kutch Rural	87.7	44.6	67.0	83.6	30.1	57.7	84.4	23.2	57.8	64.1	5.5	35.6
Sabarkantha Rural	81.1	40.2	61.3	82.0	54.8	68.8	83.9	46.5	65.8	94.7	46.8	71.3
Junagadh Rural	80.2	55.1	68.5	83.8	62.1	73.3	78.2	63.7	71.2	85.4	51.4	68.5
Sabarkantha Tribal	84.8	40.9	63.5	87.3	47.6	67.6	86.4	44.9	66.2	94.0	35.0	65.5

Notes :

1. Labour force participation gives the number of persons in the age 15-59 years who are employed.
2. Participation for males and females has been calculated seperately.

5* 7 apr 1995
6* go for cons. 1 apr 1995



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In Ahmedabad slum the employment in manufacturing has remained the same between Dec 94 and Dec 95. The share of manufacturing in employment in this group is 50%. Within the manufacturing only 20-23 % of the employment is in textile mills. The remaining employment is in small scale manufacturing which has shown an increase over the period. The small scale units include tiny units of welding, metal fabrication, sugar candy making and such activities. These units are unorganised and usually do not come under labour and environment laws. Work in these units is often hazardous.

This trend is indicative of the fact that the organised sector is not able to sustain employment. As a result of this, the role of unorganised employment has increased in urban slum areas.

Coming to wage rates, there has been a stagnation in real wage rate among the pottery workers between May '95 and Dec.95. The money wage per day has increased from Rs. 19 to Rs.30 between Sept.'93 and Dec.95. Translating this into real wages reveal that the real wages have increased from Rs.20 in April 94 to Rs.25 in Dec.95. In this, the increase between May '95 and Dec'95 is very marginal.

Among the textile workers, the money wages have actually declined from Rs.63 in Sept '93 to Rs. 50 in Dec.95, reaching an all time low of Rs.43 in Dec.94. This decline is automatically reflected in the decline in real wages as well as table (4.2) demonstrates.

The increase in wages in the construction sector in urban areas is a feature observed in the last two rounds viz., May 95 and Dec.95. This could be one reason for an increase in employment rate of this sector witnessed during the Dec.95 round. The wage rate has increased on an average from Rs. 33 to Rs.40 between May.95 to Dec.95.

Among both the urban groups job loss has been witnessed. Table (4.3) gives the data on job loss among the urban workers.

Many changes are taking place in both ceramic and textile industries in the State which reflects on the employment situation. In Gujarat, the ceramic industry has been facing sickness since the eighties and a number of units have been closed. Even those units which are operating are working at 50 % of installed capacity. Among the Ahmedabad Pottery households surveyed, both males and females have lost jobs from ceramic units between April 94 and Dec 95. During this period 97 persons, 54 males and 43 females lost jobs. Almost all the jobs lost were from the

TABLE 4.2

AVERAGE WAGE RATES IN URBAN AREA FOR MALES (In RS).

Sectors	Ahmedabad Slum (Pottery)					Ahmedabad Slum				
	Sept 93	Aprl 94	Dec. 94	May 95	Dec. 95	Sept.93	Aprl 94	Dec. 94	May 95	Dec.95
Manufacturing (Pottery)	19	21 (20)	25 (22.5)	29 (24.5)	30 (25)					
Manufacturing (Textile)						63	65 (62)	43 (36)	45 (38)	50 (41)
Manufacturing (Others)				40 (34)	33 (33)				34 (29)	42 (34)
Construction	-	-	-	34 (29)	40 (33)	36	43 (41)	35 (31.2)	33 (28)	38 (31)
Services				38 (32)	26 (22)				43 (36)	44 (37)

Following are the wage rates for the pottery sector in Ahmedabad Slum (Pottery) for the year 1993-94.

Notes :

- (i) To arrive at real wage rates for April 94 we have used Sept. 93 as the base. We had done a study in Sept 93 in which the wage rates in various activities were collected. So we decided to use this point as the base. To arrive at the real wage in April 94, we have divided the wage rate in April 94 by the ratio of cost of living index for Sept. 93 and April 94. Similarly exercise was done for arriving at the real wage rate for Dec. 94, May 95 and Dec. 95.
- (ii) We have used the cost of living index for urban industrial workers for urban workers.
- (iii) Figures in bracket give the real wage rates.

low holding size 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

TABLE 4.3

JOBS LOST IN URBAN AREAS (Nos)

Study Period	Ahmedabad Slum (Pottery)			Ahmedabad Slum		
	Male	Female	Total	Male	Female	Total
April 94	20	19	39	35	-	35
December 94	19	12	41	6	1	7
May 94	8	4	12	36	2	38
December 95	7	8	15	32	3	35
All Rounds	54	43	97	109	6	115

pottery units. The major reasons for loss of job are retrenchment, closure of units and under utilization of productive capacity in that order.

In Ahmedabad slum area, 109 males and 6 females have lost jobs between April 94 and Dec 95. It is to be noted that in this group, to begin with the female labour force participation is very low (13%). Fifty percent of the jobs lost are from the manufacturing sector which include textile mills, metal fabricating units and chemical units. The other 50 % were not able to retain their jobs in the construction, trade and transport sectors, which in any case are in the unorganised sector. Women have lost jobs from textile units and from trade activity. The main reasons here are retrenchment, closure of mills, conflict with employers and under utilization of capacity.

WORKER DIES OF HAZARDOUS OCCUPATION

Janben , aged 30 years has been living in Navdeep Pottery since the last 10 years. This unit is situated in Naroda Industrial area. She lives with her three children in the two room dwelling 'Kholi' inside the factory premises. The owner provides them this accommodation without any sanitation facilities. Houses have electricity connection but they avail electricity only at night. During summer it is too difficult to stay at home in the afternoon. When the research team visited this unit it was afternoon and it was very hot. Most workers were outside the house.

Janben and her husband were working in the glazing department of the pottery unit. They worked on piece rate basis. If they worked for 8 hrs in a day one person can earn Rs.35 per day. Sometimes they have to work for 10 to 12 hrs whenever owner calls them because they live in the factory premises. In a normal month (excluding the monsoon months) they get work for 20 days per month. During the monsoon they work only for five to ten days a month. During these months they have to borrow Rs 500 to Rs. 1000 from the owner. After the rains the owner cut this money from their salary.

Three years back Pethabhai Janben's husband suffered from some respiratory disease. Janben showed him to the Government hospital. The doctor gave him some medicine but it was not so effective. After that they went to ESIS hospital where doctor diagnosed that he was suffering from T.B. Pethabhai was admitted in the ESIS hospital for ten days. Still he did not recover. At that time somebody had told them to go to the Kothari Charitable Trust Hospital situated at Rajkot, 260 km away from Ahmedabad. But even this effort did not help. Again they came back to Ahmedabad. The owner referred him to a private hospital and spent Rs. 6000 for his treatment. But this did not help him and finally he died after one year. When he died he weighed only 27 kgs. He has left behind his wife and three children. To meet this health expenditure, Janben had sold her jewellery for Rs. 3000. She had also borrowed the Rs. 15,000 from the owner. She is now left alone to work and earn to maintain her children and to repay all the debts.

(555)

WHERE ARE ALL THE JOBS GONE-I ?

This family had twelve members and lived in D'colony in Naroda road. The joint family consisted of three brothers Givabhai, Hirabhai, Mohanbhai their wife and six children. The eldest brother Givabhai was a regular employee of Prabhat Pottery. The other brothers and his wife did casual work. They could manage the household with income from the multiple sources.

A year back Givabhai was forced to leave the pottery unit since there was no regular employment. Pottery units pay on the system of piece rate and therefore when there is no job there is no pay. He would get work only for about five days a month. Things worsened when the kilns were fired only once in a period of three months. They could get work only for a period 5 days prior to the firing. With this he was not able to maintain the family. So he left the factory to find casual work. He was given about 5000 as compensation and he was told that the remaining amount will be given to him later when the mill is completely closed. He now work as a casual labour earning about Rs.30 per day.

While talking to the family the researcher met another worker from the same ceramic unit, she was employed only for five days in three months. The rest of time she works as casual labour. The workers have been told that the unit will be closed and all the assets sold after which all workers will be compensated. The process of sale on. But whether the worker will be compensated is to be seen. Where will all these workers go for employment?

Two years back Prabhat pottery could provide on an average 20 days employment throughout the year. Many pottery units in the last three years have shifted from to tunnel kiln which is cost effective and gives higher quality output. The employer is a dalit workers and he says he has no assets to keep as collateral to get loan for investing in improved technology. So he has no other option but to close down. Similar situation also exist two other unit where a dalit are the owners.

Four months back the family split and the three brother now live separately. Givabhai had to build a house for which he and his wife have taken loan from the employer which they will repay by working for him. Mohanbhai the youngest brother has taken Rs. 2000 loan for his wife's delivery from him employer which he has to work and pay back. Part of his salary is cut to repay the loan. Hirabhai has build a small room behind the original house spending Rs 5000.

Mohanbhai's wife being the youngest didnt have many responsibilities in the joint family. Now she finds it difficult to manage the house with the single income of her husband. She therefore decided to purchase a sewing machine last month. She was lucky because her mother, sister and brother together gave Rs 6000 and is in no hurry to take back the money. Now she earns about Rs 10 per day by stitching readymade sari blouses for a cloth merchant who pays a Rs 3 per piece. There are so many uncertainties but with a smiling face she hopes that she will get more orders and will be able to earn better and help supplement the family income.

(SSS)

WHERE ARE ALL THE JOBS GONE- II ?

Abilashbhai is a retrenched textile mill worker. He stays with his wife Kamalben and two daughters aged 6 years and 6 months. Abilashbhai migrated about 16 years back from a village in Uttar Pradesh looking better prospects. His family lives in a two room house in a crowded chawli in the city.

He worked in Saraspur textile mill for 16 years. As a textile mill worker he was earning about Rs 2000 per month. Two years back he was asked to leave because there was not enough work. He is now working as a daily labourer polishing tiles in newly constructed houses. Now as a polisher he earns on a day he is employed Rs.30 which is about Rs.700-800 per month when he gets 25 days of employment.

He pays Rs 300 as rent and electricity for the house. The remaining amount is not enough to meet even the basic needs of the family. If he works in two shifts he can earn more. He does that very often during crises. Earlier because he was a regular worker he could buy basic food item from the shopkeeper on account. The shopkeepers were confident and he was able to repay. But now that he has lost his job they are reluctant to give him on account. He has about Rs.1000 loan on account and will be able to pay only if he get regular employment.

When he was a mill worker he could save out of the salary and send money home. In his village there are 5-7 family members. Now he has stopped sending any money. He has taken a loan of Rs.5000 for his sister's marriage at 3% interest in his village. He also took a loan of Rs 3000 from the mill. He has to repay these amount. This also includes part of Rs.6000 which they had to spend when his brother's wife was not well and had to be treated in Kameshwar Mahadev. All her ornaments have also been pawned during the last year to meet expenses of various nature.

When he was retrenched he was given about Rs.50,000 as compensation. He has purchased land in the village. His family in the village cultivates on this land. He doesn't get any benefit from the land. They do not want to go back because they will not be any work there. In this city they can atleast hope for at 15 days employment a month. Even if it is of hazardous in nature they are ready to work.

The women in the chali are socially constrained to work outside the house. But they are willing to get engaged in homebased job if help is provided. This will help them to earn and supplement the household incomes.

There is little hope for Abhilash bhai and his family. He cannot hope to get back his job in textile mill. There are many Ablishbhai's already in the city. Unless the government policy changes and there is restruction of the textile industry and new market are tapped, retrenchment of workers from this sector will continue.

(KSSM)

WORKING IN ORGANISED SECTOR WITHOUT SOCIAL SECURITY II

Mohanbhai Vania, lives in Delhi Chawli in Naroda with his wife, three sons, daughter in law and grandchildren. Mohanbhai was a permanent employee in a private iron product manufacturing company.

He started working in the year 1966 the year the company started. His salary at that time was just Rs. 150 then in the next year it increased salary was Rs.180. The company was giving bonus and medical facility also. Even bills from out side medical shop prescribed by company's doctor were reimbursed. They did not have canteen subsidy. They were quite comfortable and happy with the situation. His salary increased to Rs 1800/- by 1992. But the company stopped providing other facilities.

In 1992 when he was just 46 years old he developed serious health problem. He first took medicine from the company's doctor. But he did not get cured. He went to some private doctor who diagnosed it as T.B. and treated him. He continued the treatment for two months and spend around Rs 4000/-. Then he started taking medicines from civil hospital at Ahmedabad. There he took medicines for 6 months but again the medicine did not improve his health. Since last four months he is taking medicines from ESI hospital on his sons's card who is working with some factory.

During this period he became very weak and was not able to work with the heavy iron pieces. He could not be shifted to another department, because in that factory in all the departments the work is very hard and his health condition did not permit him to good to do such work. So finally in 1994 he had to leave the job. He received Rs.37,000 as a compensation.

He used the money to buy a second house for his son in the same row and remaining amount he used for his son's marriage. So now there is no money left for his treatment.

His younger son is working with a spinning mill and earning Rs 700 to 800 per month. While the other son is working in a fruit market and earning rupees 1000 to 1200 per month. At present Mohanbhai feels better with the medicine from ESI hospital. But some times when problem develops he has to spend money for the treatment which costs about Rs 300 to 400 or some times even Rs 700 to 800 per month.

They have already mortgaged their gold and silver ornaments for Rs 10,000 for Mohanbhai's treatment.

According to him in the Iron company, in the moulding department many people have developed T.B. He say this is because while breaking the mould is made of jaggery and clay certain amount of some smoke develops, which the workers inhale and this causes breathing problems.

The factory started in 1966 with 125 workers and in 1994 it employed 3000 employees. The company has grown fast but their pay scale has remained quite steady considering the rate of inflation.

(KSSM)

WORKING IN ORGANISED SECTOR WITHOUT SOCIAL SECURITY-I

Ganga Singh Keha Singh Rajput is the head of a six members family, his wife, two sons, daughter and daughter in law. They live in Delhi vali chawl in Naroda. Gangasingh was an employee of the Vijay Mill for 25 years i.e from 1963 to 1988 till the time the mill closed down. He was working in the binding department. According to Gangasinh he is eligible for compensation of Rs.60,000/-. But he received just Rs 17,000. The remaining amount he expects to get in installments. He utilized his compensation for his elder daughter's marriage. His second daughter is 18 years old and he is waiting for the second installment for getting her married. There is no other way he can get money for marriage expenses.

Gangasinh eldest son was just 14 years, he was forced to give up education to help the family as another pair of working hands. He was worked with a fruit merchant as a loader and earned about Rs 8 per day. His two sons are now rickshaw drivers and they take vehicle on rent basis and earn about Rs 25 to 30 each per day after paying Rs 40 for rent to rickshaw's owner and meeting petrol expenses. Females of the household make rolls of cotton 'Puni' and they earn about Rs 20 per day together. They are paid Rs 8 for 150 packets and each packet contains 18 Punis. The raw cotton is provided by traders and packets are taken to make cotton yarn, which is further used for weaving.

A year ago Gangasingh's wife was suffering from stomach ache. First she was treated by a private doctor, later when she did not improve she was taken to the Sharadaben hospital, where she had to undergo surgery to remove a tumor from the stomach. During this illness they spend around Rs 4000. This amount was arranged by her sons, through loan from their friends, for which they have to pay interest. Out of this, only a small amount has been paid back. She is still not completely okay and has to take medicines regularly. They are spending around Rs 400 to 500 per month for medicines.

Ganga singh owns 9 bigha of land alongwith his three brothers in their village. But it has already been mortgaged years back for Rs.12,000 to meet the daughter's marriage expenses. He exchanged his house in the village for the house in Delhi Vali Chawli.

Earlier when he had a permanent job things were not so difficult. They could buy basic items for the house on account from the local shops. Now the shop keepers are not giving anything on account because he doesn't have a permanent source of income. We cannot buy even a days provision without ready cash.

(KSSM)

II. Rural employment and wages

Labour force participation in the rural areas studied. In Ahmedabad rural area, shows an overall increase between Apr.94 to May 95. But in the subsequent round viz., Dec 95, witnessed a drastic decline. This decline is particularly high among females. this may be attributed to the non reporting of activities done by women.

In Kutch area too, the first three rounds witnessed some what stable labour force participation rate but a decline is witnessed during the last round from a high of 57.8 per cent in May '95 to 36 per cent in Dec.95. In this area, the decline is seen in both male and female.

Sabarkantha rural the overall participation rate has steadily increased from 61 per cent in Apr.94 to 71 per cent in Dec. 95. Male participation has increased from 81 per cent in Apr.94 to about 95 per cent in Dec.95. Female participation though it declined in May 95 remained the same in Dec 95.

In Junagadh rural although the overall participation remained the same, we can see fluctuations between the rounds. It has increased from 68.5% to 73.3% between April 94 and Dec 94 and declined in May '95 and Dec.95.

Thus the data show that there has been no drastic shifts in labour force participation except in the case of Ahmedabad rural and Kutch rural areas which have witnessed a decline in labour force participation rates.

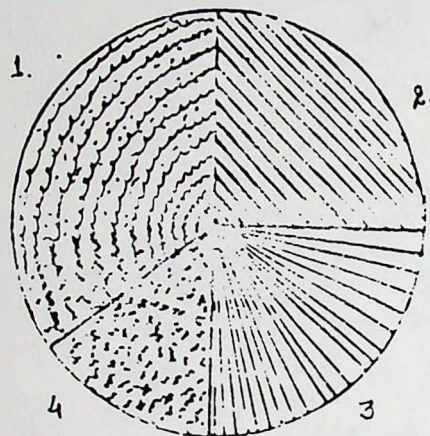
The detailed employment patterns in the four rural areas are given in Tables 3 to 6 in the appendix.





In Ahmedabad rural, the number of farmers and agricultural laborers have increased. The livestock activity in which women are predominantly engaged increased from 28 per cent to about 38 per cent between April 94 and May 95 and then suddenly shown a decline. in the last round. As mentioned earlier this is a reporting problem with reference to women's activities as in Dec 95 cutting grass has been reported under household activity. During May 95 there was a sharp decline in men involved in agricultural labour. However overall there is an increasing involvement in agricultural work. The involvement is sporadic. Agricultural laborers mostly go to construction activity. Eventhough the number involved in farming has increased many poor farmers are being partially delineated from their land.

One feature observed in this area is a steady increase in non household manufacturing. The figures show that between Apr.94 and dec.95, the share has increased from 6.7 per cent to 12.6 per cent. The locational advantage could be one more reason for men to opt for un organised manufacturing work.

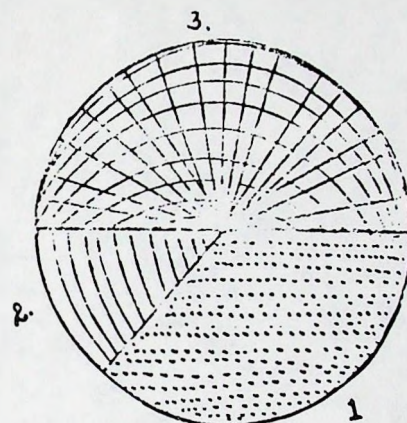
In Kutch rural there is a marginal but steady decline in the proportion of farmers over the four rounds. However there is a sharp increase in the number of agricultural laborers from 28 per cent




EMPLOYMENT PATTERN - MALE BHAVANGADH - IDAR RURAL



- 1. CULTIVATORS 37% 
- 2. LIVE STOCK 25% 
- 3. AGRICULTURAL LABOUR 25% 
- 4. NON-AGRICULTURE LABOUR 12% 

WORK DONE BY WOMEN IN BHAVANGADH (IDAR)



- 1  LIVESTOCK ACTIVITY
- 2  HOUSEHOLD WORK
- 3  AGRICULTURAL LABOUR

MINING OVER AGRICULTURAL LAND

Large tract of agriculture land is getting mined in Mandvi and Bhuj of Kutch for Bentonite. This clay is used for iron moulding, face pack by cosmetic companies etc., as it is a good water holding material. This material has high export potential.

Mining companies are buying the agriculture land indiscriminately wherever they see the land has Bentonite. The land is purchased with a range of Rs.6000/- to 6 Lakhs per acre as per the quantity and quality of available Bentonite. According to one local person who sold of his 7 acres of land just five years back for Rs.6000/- per acre, says now it costs 1 Lakh per acre in the same area. The open cast mining is done by bulldozers removing the top soil. In this process many farmers will turn into daily wage workers who work in grinding units of the Bentonite mine. Women who are in grinding process get Rs.35/- per day and men get Rs. 45/. Indiscriminate mining is going to make adverse impact on the agro ecosystem. On top of this one ecosystem will be disturbed. Most of these mines are even not regulated under the Mine Act.

(VRTI)

SUBSIDISING THE PRIVATE TRADERS

Animal husbandry is the main occupation in many rural areas in Gujarat. It is the main source of income for many families. This has led to the formation of co-operative and given rise to private dairies.

Co-operatives set the price based on the fat content in the milk. They also provide services like free veterinary services, subsidised cattle feed, insurance to cattle and loan for purchase of cattle. The private sector does not provide any such services. However the prices in the private sector tend to be higher than in the government.

The households take membership in both co-operatives and private milk buyers. If a family has four animals it gives part of the milk to the co-operative and receives price set by the co-operative and receives other services for all the animals. The private milk traders get their share without any investment and social commitment.

(GVST)

in Apr.94 to 67 per cent in Dec 95. Employment in construction has also declined sharply in this period. From the data it can be inferred that there is a complimentary relationship between agriculture labour employment and construction work.

In Sabarkantha rural there is an overall decline in number of agricultural laborers. There is an increase farmers and in those engaged in livestock activity. The proportion of person engaged in construction has increased from 0.9% in April 94 to 13.1% in Dec 95. The increase is seen among both males and females. However during the last two rounds i.e between May 95 and Dec 95, there was a decline in number of women employed in construction work. Manufacturing in the April 94 and Dec 94 has accounted for 1% of the employment but since then has increased to 3.4 per cent in Dec 95. These are mostly male workers. Many of them are working in food processing units which have recently come up in the area.

The increase in agriculture and livestock can be attributed to good monsoon during the last three years. In this area we also see an increase in the total area under cultivation. The shift from agriculture labour to construction is primarily because of higher wages in construction. How the households balance their income from different activities are presented in the cases below.

In Junagadh, there is a very small section of farmers. Most of the population is involved in either agricultural labour or construction work. This area which has agriculture labour of 71 per cent in May 94 has seen a decline in their numbers to 59 per cent by Dec 95. A steady decline was seen both among men and women workers till May 95. Though the last round has seen a turnaround, it did not reach the earlier figures.

There is an increase in employment in fishery and other services among males. The PRA in this area has revealed that there is an increase in employment in stone quarrying. During the last three years this area has witnessed an increase in the leasing of land to private companies. One feature observed is that, the proportion of work force engaged in construction has increased from 28.5 per cent in Dec 94 to 40.5 per cent in May 95 but it has declined to 20% in Dec 95. This decline can be attributed to male workers who are shifting to other unorganised activities.

TABLE 4.4

AVERAGE WAGES RATES IN RURAL AREAS (MALE) IN RUPEES

Sectors	Ahmedabad Rural					Subarkantha Rural					Jamnagadh Rural					Kutch Rural			
	Sept 93	Apr 94	Dec 94	May 95	Dec 95	Sept. 93	April 94	Dec 94	May 95	Dec 95	Sept. 93	April 94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95
Agr Lab	12	15 (14)	15 (13)	18 (15)	18 (14)	17	19 (18)	20 (17)	20 (17)	22 (17)	17	24 (23)	26 (22)	30 (25)	30 (26)	26 (25)	25 (21)	32 (27)	33 (26)
NHHI Manfg.	20	23 (22)	27 (24)	33 (28)	29 (24)				39 (33)	38 (31)				40 (34)	36 (30)	34 (33)	50 (45)	70 (59)	66 (54)
Construction			22 (20)	17 (14)	25 (20)	33	37 (36)	23 (20)	26 (22)	26 (20)		32 (27)	30 (26)	35 (29)	37 (29)	34 (32)	30 (26)	33 (28)	26 (21)
Services				38 (32)	38 (32)				35 (30)	27 (23)				49 (42)	56 (47)			54 (54)	44 (37)

Notes :

- (i) We have used the cost of living index for industrial workers to deflate the wage rates for NHH manufacturing and that for agricultural wages to arrive at real wage rates of agricultural labours and construction workers and index for urban non manufacturing to arrive at the real wages for services sector.
- (ii) To arrive at real wage rates for April 94 we have used September 93 as the base. We had done a study in Sept 93 in which the wage rates in various activities were collected. Therefore we decided to use this point as the base. We had done a study in Sept 93 in which the wage rates in various activities were collected. So we decided to use this point as the base. To arrive at the real wages for April 94, we have divided the wage rates in April 94 by the ratio of the cost of living index for Sept. 93 and April 94. Similar exercise was done for arriving at the real wages rates for Dec. 94, May 95 and Dec. 95.
- (iii) Figures in brackets give the real wages rate.

WHILE FOR THE OWNER IT IS A SUNNY DAY FOR THE WORKER
IT IS A RAINY DAY: TWO TALES

Mohan bhai Vadi aged 55 years lives in a hutment in a barren on the Ahmedabad Kotla highway in village Chandiel. This is the only hutment in that field. This field belongs to a meat seller who buys goats and keeps them for slaughter in this field. Mohanbhai and his family are watchmen of this slaughter house for many years. Mohanbhai, his wife and young son stays in this hutment which has barely a roof and wall. Few dry straws make the roof and broken bamboo mesh makes the wall. Not able to withstand the heat Mohanbhai spreads his Charpoy under the solitary mango tree in the field. The Charpoy was so weak that Mohanbhai could not offer the two researchers a seat. He was feeling uncomfortable that he is not able to offer. We all stood and started conversing. Meanwhile the owner of the slaughter house also joined. The young boy (owner) lives in Ahmedabad and comes every day to look after the management of the slaughter house.

In the last two years the sale of meat has increased. The price has increased from Rs60 to Rs 80 and this owner has now started selling the meat to Bombay market for further export. In contrast to this Mohanbhai and his family has not received any increased wage. Whatever he gets is just enough to buy minimum food. His son says, "for me having a cloth to cover the head is also a luxury and those who have a turban I call them fortunate." While saying this he indicated a small peasant with a turban passing the field.

This family who has been living in this field before but a year back his wife asked the owner if they could move to the village as they do not have any privacy. They moved to Village Kuha and lived with the Banjaras (nomads) on the Panchayat field. The goats were kept with in Kuha village. Everyday they have to bring the animals for slaughter. The owner did not find it convenient as there was risk involved of running over while crossing the highway. The owner asked them to come back to the field which they family doesn't like. Ishaben wife of Mohanbhai works sometimes as agricultural labourer. Staying in the village helps her to seek employment. Being in the highway away from the village she loses her opportunity to work elsewhere. Her involvement in the agricultural work gives them some additional money to meet unforeseen expenses. This family traditionally belong to a artisan group who used to make rings to provide a base to carry water on the head. Since this particular item is no more in demand they stopped producing it.

This family does not have access to drinking water, sanitation. The son doesn't go to the school. They have not gone to the doctor for a long time. The family does not have any hope, they have never received any benefit from any of the government poverty programmes and also do not expect to get in the future.

(CESC)

SOCIAL CUSTOMS AND LACK OF SOCIAL SECURITY TURNS FARMER INTO AGRICULTURAL LABOURER

Manguben is a 65 years old lady. She is from a village called 'Chandiel', near Odhav industrial area. She is the mother of six children, four daughters and two sons. All her daughters are married. One of her sons is married and has one son while the second son is unmarried.

It seems there is a severe scarcity of drinking water in the village. They have hand pumps, but three years after installation the pumps have stopped working. So at present they have to depend upon the private bore well in the village or they to go to a well across the river (around 4 Kms.) The women are very busy from morning 8 to 12 noon collecting water.

Five years ago the family owned 5 bighas of land. They were cultivating a variety of crops like Wheat, Rice, Bajara, Rajako etc. In addition to this Manguben's husband Ramsigh bhai was working in a mill in Ahmedabad city. Three years back they married their three daughters. They spent money according to their caste's and family's traditions.

Things took a dramatic turn when one day Ramsingh bhai fell ill and he lost his job. They went from one hospital to another for treatment. They took him to the Government hospital but due to non availability of doctor and medicines, they had to take him to the private doctor at 'Kuha'. But even there he could not get proper treatment. Finally they admitted him at V.S. hospital in Ahmedabad. There he was hospitalized for three months but even here the treatment was not effective and his condition didnot improve. They transferred him back to his house and after two months he died. The amount he received as compensation was utilized during the one year of and treatment.

After that Manguben married her fourth daughter, spending minimum for the marriage according to their custom and traditions which amounted to Rs.15,000. At this time only the two sons were working as casual labour. It was difficult to arrange for this amount. There are two to three 'Shahukars' in the village who lends at 2 to 3% interest per month. Since the land has no irrigation facility they could not depend on farming to earn enough to pay back any loan. They ultimately mortgaged 3 vigha of their land to a big Rajput farmer, who has facility for irrigation. This way they do not have to pay interest against the loan received.

So now Manguben and her sons who were farmers have turned to agricultural labourers. This incident happened about two years back. They still are not in a position to repay the money and release their land. They feel that only a miracle/ magic can help them to get their land back.

This was the case of Manguben, but in the village there are so many families who own land but has no irrigation facility and they mortgage land during crises, and unable to pay the money they loose their land. In this process rich farmers are becoming more richer, while poor farmers are loosing their land.

(CESC)

Oblivious of Any Policy: Living With the Blessing of
'Mathaji'

Chamanbai Moti bhai Bhangi belongs to the lowest cast rank in the village Chandap. Her family scavenger, for the village known as bhangis. This family has been traditionally cleaning the village and in return the village upper castes provide cooked food. This system has declined a great deal. Now the bhangi family only cleans the village street on some festive occasions or cleans the compound of houses for families at the times of death, birth and marriage. In return different families supply cooked food for few days. Since it is difficult to manage the house by just depending on the food supplied by the villagers, Chamanbai's husband learned driving and was working as a tractor driver for a big farmer in the village. He was earning five hundred rupees and one time food. During last two years he started feeling weak and is suffering from fever and cough and cannot not drive. Now he does not have a job. Last year the panchayat asked Chamanbai to clean the Panchayat premises. After an year long of cleaning the panchayat refused to pay as they claimed that they didnot have a grant. Chamanbai laments how long we are going to serve people when they have no concern for us. On the other hand she feels the villagers are the only asset. If the family is hungry someone will feed them. She has never visited a PDS shop and rarely purchases from the market to cover the day to day food needs. On most of the days one meals requirement is supplied by somebody.

Even though preliminary diagnosis of Chamanbai's husband health would declare T.B, he has refused to accept it. He is getting treated by unregistered practitioner for the disease but not T.B. He refuses to go to any other doctor. Last year their three year old girl suddenly died. They didnot go to local hospital when her vomiting started. It continued for a day. Both Chamanbai and her husband accepted this as desire of Mathaji.

This family as per government anti poverty programme is eligible for all kinds of subsidies but despite his own house in a complete dilapidated condition has not helped him to get housing support (Indira Awas Yojana). When Chamanbai opted for Tubectomy (family planning) he was not even provided the financial support that is due in the programme. Two children who go to school do not get their scholarships regularly. The family has not received any government support. This family being lowest among the lower caste is not allowed to collect water from the common water points.

They have to seek someones help to fill their earthen pitchers as villagers feel water will be polluted if the Bhangi touch the water source. If there is no body to help them in filling the water vessels they have to go to long distance to fetch water from natural streams. In performing the rituals at the death of their daughter they had to face hardship in collecting water.

(455)

In the rural areas, agriculture labour wage and wage for other activities are shown in table (5.4). The average money wage rates for agricultural labor has shown an increase in Sabarkanta rural Kutch rural and in Junagadh rural in all the four rounds. It remained the same in Ahmedabad rural between May 95 and Dec.95, though the initial period has seen an increase in money wages.

Average wage rates for manufacturing (household and non household) workers is higher than in agriculture and construction. It has shown an increase over the first three rounds and has declined in the last round from Rs.33 to Rs.29 between may 95 and Dec.95 in Ahmedabad rural area. Similar decline was seen in other areas as well.

Wage rates for construction in the rural areas have showed a decline in Ahmedabad rural between April 94 and May 95 but has increased subsequently in Dec 95. In Kutch and Sabarkantha rural, the decline was steady till Dec 95. In the Junagadh area it has shown a steady increase all through.

Although the money wages have shown an increase in the rural areas, the wage structure particularly in agriculture is very low therefore it would not result in any substantial improvements in the living standards of the poor. Non agriculture employment provides better wages but the wages in this case seems to be fluctuating over the period.

Although wage rates in construction are higher than other activities it is known that this sector has harsh working conditions.

Tribal employment and wages

In Sabarkantha Tribal below overall participation has remained the same (Table 4.1). Male labour force participation which has been around 85 per cent in the three rounds has increased to 94% in Dec 95. Female participation has shown a overall decline with fluctuations in the interim periods.

The main occupation among the tribal households is farming (Table 7 in appendix) More than 80% of the employment in April 94 and December 94 was in agriculture and allied activities. However in May 95 the number of farmers declined to 34 per cent and it was 40 per cent in Dec 95. There was a decline in agricultural laborers from 26% to 3.3% between April 94 and Dec 94. It has increased to 29.5% in May 95 and it declined to about 10% in Dec 95. This fluctuations in employment rates in agriculture could be due to seasonal variations as the predominant cultivation is Kharif. the Kharif information is collected in April 94 and May 95 data.

Level of livestock also shows an increase from 3.75 per cent in April 94 to 23 per cent in May 95 and further to 32 per cent in Dec 95. This increase has mostly been among the women. There is a decline in construction workers and an increase in mining and quarrying workers. The proportion of persons involved in these two activities put together has increased from around 3% in April 94 to about 11% in May 95 and to about 15% in Dec 95. This increase can be due to

RURAL LIVELIHOOD STRATEGY: GOVERNMENT EMPLOYMENT PROGRAMME UNABLE TO ADDRESS THE NEEDS

Nagjibhai doesnot want to migrate in search of work nor wants to send is young daughter. He feels that working on one's own field or in the village is more economical and human rather than earning elsewhere with higher wages. He owns one and a half acres of land of which one acre is irrigated. During Kharif he cultivates Maize on the drier area and Urdh, Moong and Tuar on the irrigated land. During Rabi, wheat is sowed. There is a well and diesel pump which is used by two families. He does the sowing and work for most of the time along with his family on the land. His wife and eldest daughter(15 years) help him. If the monsoon is favourable this gives him employment for about seven month. During the remaining months he seeks employment out side the village. He goes to Palanpur, Ambaji for work which include loading and unloading in truck, cutting tree etc. Last year he did not migrate because there was work in the village. Under the government employment scheme a pond was dug in which he got employment for one and half month. The wage rate for men was Rs. 25 per day and for women Rs.20 per day. Two persons from his family were employed. This year he along with seven other persons went in a group to Palanpur to seek employment. After travelling so far spending Rs 100 as trasport they got three days work and they earned Rs 150. When he came back to Ambaji he did not have any money and had to walk from Ambaji to his village which is around 30 Kms. In the work place they stay in the open and cook their own food. In fact they carry all basic essential like wheat, rice, masala, oil and cooking vessels when they migrate.

This year for the first time his eldest daughter went in a group to a 'Campa' (big farm) near Idar to work on cotton for a month. This group consisted of young boys and girls of the village. They carried essential food and vessels. They stay on the field in the open and cook their own food. They work from 6 in the morning to 11 and then from 3 to 7 in the evening. They only do the agriculture work. When the research team asked him why he send the young daughter so far for work, he replied that there was need for money in the family. The situation has worsened over the last two year. The money, she brought a necklace (Jewllery) for herself which is an asset for the marriage. This additional income also hepls to cover the mounting costs health care.

During the last delivery his wife had some problems and had to be immediately shift to a hospital. Four persons carried her in a bag made of thick cloths for about five kilometres and then hired a jeep for Rs.150. She was taken to a private hospital in Poshina and luckily the child was born it survived. She stayed in hospital for two days. He spend about Rs. 1200 for the whole episode.

(NPYM)

STRUGGLING TO DEVELOP A STABLE LIVELIHOOD STRATEGY

Nanabhai Motibhai lives in Kalsawad village in Poshina tribal area in Sabarkantha district. The house has two rooms and is kutcha wall made of mud and dung flooring. The roof is tatched with palm leaves. His family includes his wife two sons one daughter-in-law, daughter and two grandchildren. He owns two acres of land of which one acre is irrigated by well with a pump which he sells water to another family. Both the families share the cost of running the pump. During Kharif he cultivates maize in the drier area and in the irrigated area Tuwar, Urdh and wheat during Rabi. He also owns livestock which his daughter and younger son looks after.

The agriculture work on his own land provides employment for six months. As it is difficult to cover the household expenses from income from land so his son put up a small provision shop next to their house five year back. He got a subsidy of Rs.5000 from the government. He has a loan of Rs. 2500 on account for the goods purchased from the trader. About six months back they put up a chakki i.e flour mill with a total cost of Rs. 25,000. The government gave them a subsidy of Rs 10,000 and the family spend Rs. 15,000. This was mobilized from various sources. He took Rs.5,000 from a merchant and has to pay back Rs. 7000/- by October after the Kharif crop is harvested. He sold five goats for Rs. 5000 (Rs. 1000 each) and mortgaged gold at Poshina for Rs. 5000 for this he has to pay 3% interest which will amount to Rs. 8000 by October. The 'Chakki' brings in Rs. 50 per day. They earn about Rs. 150 from the shop. They have a total interest loan of about Rs. 17,500.

He is saving Rs.60 every month in savings Bank. He has only paid back on Rs. 2000 for the Chakki by selling grains. They have Rs. 1000 in their saving account. But they need Rs. 1500 to cover the 'Chakki' to protect it from the rain so they cannot repay any loan immediately.

Things would have been better if Nanabhai's wife had not fallen ill. She had severe pain in her stomach and had to be taken on a emergency bases to Lakshmipura to a hospital run by Seth Kasturbhai Lalbhai Trust. She was hospitalized for 12 days. They took her to Himatnagar for laboratory test. They spend about Rs. 2000/- for test, doctor's fee and medicines. They were waiting for the test result when the doctor treating her had to leave to attend a training. The test result came one day late and he said he will do the surgery when he gets back. Since they did not have money they went back him and hasn't gone back yet. She has taken all the medicines prescribed by the doctor. She has been suffering from pain for the last six years. According to her the cause of this pain is the Tubectomy (the new method) which she underwent about seven years back.

In the mean time the family took her to Dantha for local treatment in April. The treatment included using a hot iron and scaring the area of the pain. She says she feel better but she is not completely cured. They have spend about Rs. 300/- on this treatment to meet expenses on medicines they sold a buffalos calf for Rs. 2000.

The doctor has returned and has send messages through their neighbour asking her to come and undergo the operation. But they have not gone because there is no money. If they have to go back they need atleast Rs. 4000 i.e Rs. 2000 for food and stay, Rs 1000 for transportation and Rs 1000 for medicines. They are waiting for the harvest (October) and hoping that they will get enough money to spend on the treatment. In case there is an emergency they will have to sell food grain or livestock. They hope that it would not be needed and they can do it after the harvest.

(NPYM)

the increased mining activities in the surrounding areas.

TABLE 4.5

AVERAGE WAGE RATES IN SABARKANTHA TRIBAL (MALE) IN RUPEES.

Sectors	April '94	Dec. '94	May '95	Dec. '95
Agricultural Labour	25 (24)	25 (21)	23 (19)	25 (20)
Mining and Quarrying	25 (24)	28 (24)	25 (21)	25 (20)
Construction	25 (24)	28 (24)	24 (20)	25 (20)
Services	-	-	31 (26)	31 (24)

Notes :

- (i) We have used the cost of living index for agricultural laborers to arrive at real wages rates for workers in all the sectors.
- (ii) We have used September 93 as the base point to arrive at the real wages rates in April 94. We have divided the wage rates in April 94 by the ratio of cost of living index of September 93 to April 94. Similar exercise was done to arrive at real wages rates in December 94.
- (iii) Figures in bracket give the real wage rates.

Coming to wage rates in tribal area (table 4.5), the average money wage in agriculture has shown a stagnation between April 94 to May 95. There is also a decline in the wage rates in mining and in construction workers. Thus the real wages rates have also declined between April '94 and Dec 95. In this area there is no significant difference between wage rates in agriculture, mining and construction activities. The female wage rates in all activity is less than male wages. Significant difference in wage rates between male and female is seen in services where males earn Rs 31 whereas females earn only Rs 11 per day.

III. Extent of Child Labour

Child labour is measured by the number of children in the age group 6-14 years who are regularly employed. In Ahmedabad slum (pottery) children work along with their parents in the pottery units. This group shows a seasonal variation in number of children employed. There was an increase in the number of children engaged in Dec.94 and a decline in May 95 and an increase in Dec.95. This seasonality is seen in female children who work, whereas the number of male children who work remained around 3-5% during the period of study (Table 8 in the appendix).

In Ahmedabad slum there is an increase from 1.1 per cent to 1.92 per cent among male working children and an increase from 0.9 per cent to 3.5 per cent among female working children. They work mostly in book binding, metal processing units and other unorganised activity in the city.

Household income is a very important determinant of the level child labour. The low wage structure in pottery along with piece rate wage system has been a major factor for children from this group to seek jobs.

In the rural areas there is an overall increase in the number of children working in two areas. The increase is mostly among male children except in Junagadh rural where there was a sharp increase in the number of female working children.

The overall decline in the number of children working in Ahmedabad rural and Kutch rural was seen during the period. The decline is seen both among male and female children.

In Sabarkantha rural there has been an increase in number of male working children and a decline in female children. Junagadh rural also shows an increase in number of working children from 3.2% to 9% between April 94 and Dec 95. Although there was a decline in female working children between April 94 and Dec 94, it increased thereafter.

In Sabarkantha tribal area there was a sharp increase in the extent of child labour between April 94 and December 95. There was a decline in number of children working between December 94 and May 95. However it further increased between May 95 and Dec 95. The point to be noted is that this area had the highest population of working children even in May 95. Here 29% male children and 49% female children are working.

In the rural areas children are primarily engaged in agriculture and livestock activity. In tribal area many girls leave school to take care of the cattle. A considerable number of them engage in caring of their siblings and also children of neighboring houses which is commonly seen among the poor households.

Secondary Occupation

We have defined secondary occupation as an activity in which a person is engaged for

less than 18 days in a month. We have calculated the proportion engaged in such occupation as a proportion of the total labour force.

In both the urban groups, workers are employed in one main occupation. Given the decline as well as the low LFP rates particularly among Ahmedabad slum households one would expect a large number of workers to be engaged in secondary occupation to maintain their livelihood. But secondary occupation does not exist among these group. This could be due to the type of employment opportunities available in urban areas.

In rural areas, we find that a small portion of the work force is engaged in secondary occupation. These activities include agriculture, livestock as well as construction. As a proportion of total labour force we find that Sabarkantha rural and Junagadh rural has the largest (18.5%) number engaged in secondary occupation in Dec 95. They are engaged in livestock activity and there are larger number of women who are engaged in secondary occupation in these areas. In Ahmedabad rural about 16% of the work force is engaged in secondary occupation in Dec. 95. It was 17.5% in May 95. They are mainly engaged in agriculture labour. In the other areas, only about 1.5% of the work force is engaged in secondary occupation. Non availability of jobs throughout the year and the seasonal nature of agriculture is a major reason for people getting involved in secondary occupation.

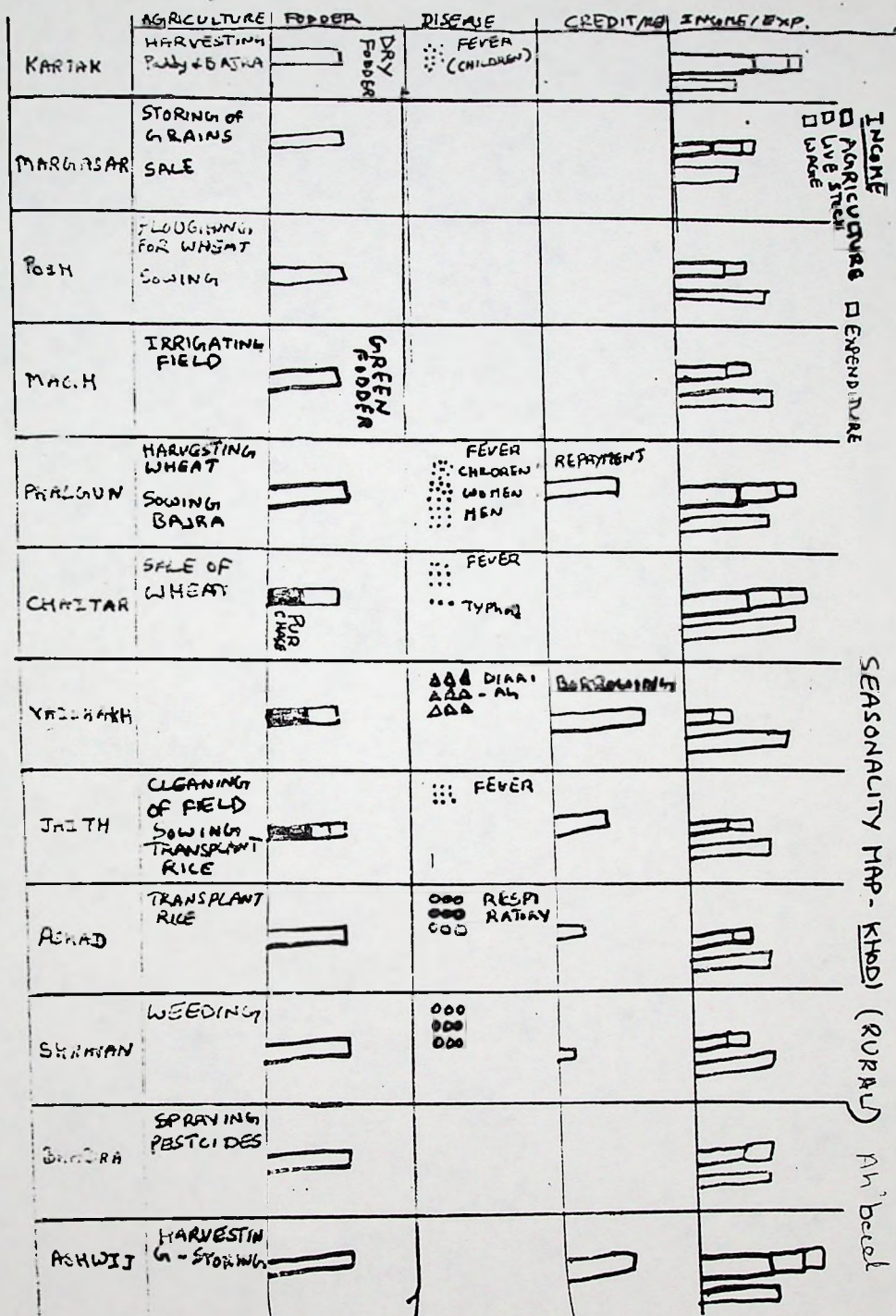
In tribal area we find that about 3.2% of the work force are engaged in secondary occupation in Dec 95. In May 95 it was about 17%. Their activities include agriculture related work, forest produce collection and construction. Collection of forest produce is mainly a female activity.

The PRA transcriptions of livelihood strategies given below provides the variety of mixed activity the rural and tribal poor are involved in.

NARODA - POTTERY WORKERS				SEASONALITY + SURVIVAL STRATEGIES - JULY 28, 1995 URBAN						
MONTH	EMPLOYMENT No. DAYS	HEALTH	CREDIT	EXPENDITURE						
ASHAD	X	FEVER SKIN INFECTION								
JYETH	X	X								
UNSAAN		X								
CHAITRA		X	X							
PHALGUN		X	X							
MAGH		RESPIRATORY								
PUSHYA		RESPIRATORY (GIRLS)								
PHARGUN	X	X								
KARTHIK		X								
ASHO		T.O	X							
CHADRA		DANGER								
SHRABAN		FEVER MALARIA								

- PARTICIPANTS
1. RAHIBEN
 2. SANU BEN
 3. MADHU BEN
 4. RATAN BEN

☒ SHOP KEEPER
☒ INTRA FAMILY
☐ OWNERS
☒ FOOD
☐ HEALTH
☒ FESTIVALS
☒ OTHER



INCOME
☐ AGRICULTURE
☐ LIVE STOCK
☐ WAGE
 EXPENDITURE

SEASONALITY MAP - KHOD (RURAL) IN LOCAL

SEASONALITY & LIVELIHOOD STRATEGY

MATHASRA VILLAGE (TRIBAL)

	DIARRHEA Fever	Malaria	Fever	Cough	Fever	Fever	Fever	CHILDREN MEN WOMEN DISEASE
SEP								<input checked="" type="checkbox"/> LAGGARD INCOME <input checked="" type="checkbox"/> TIMASRA INCOME <input checked="" type="checkbox"/> AGRI INCOME <input type="checkbox"/> EXPENDITURE
OCT								<input type="checkbox"/> INCOME & EXPENDITURE <input type="checkbox"/> TAKE LOAN <input type="checkbox"/> REPAYMENT
NOV								CREDIT
DEC								<input checked="" type="checkbox"/> PURCHASE FROM SHOP <input checked="" type="checkbox"/> OWN PRODUCTION ARRANGEMENT FOR FOOD
JAN								<input checked="" type="checkbox"/> IMMIGRATION IN VILLAGE LABOUR
FEB								AGRICULTURE
MAR								
APR								
MAY								
JUN								

RS-120
216
04540



CHAPTER V

TRENDS IN CROPPING PATTERN AND FOOD CONSUMPTION

I. CROPPING PATTERN

Landholding pattern and area under different crops for Kharif and Rabi seasons are studied separately to get the trends. In Ahmedabad rural majority of the households who are dependent on the land are small farmers. The average size of the land has declined from 4 acres to 1.5 acres between Apr.94 to Dec.95 (table 5.1).

TABLE 5.1
PATTERN OF LAND HOLDING

Groups	No of Cultivators (%)				Average Size of land(in acres)			
	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May 95	Dec. 95
Ahmedabad Rural	79.5	86.5	78.8	77.7	4.2	1.8	2.0	1.5
Kutch Rural	58.9	60.7	62.8	52.1	13.6	13.1	12.3	11.3
Sabarkantha Rural	60.6	72.6	70.5	74.5	2.7	2.3	2.5	2.2
Junagadh Rural	30.7	37.3	40.5	37.1	6.1	2.5	2.3	1.2
Sabarkantha Tribal	97.6	100	100	100	2.6	2.7	2.4	1.9

change in size of land - sale - other reasons, payment of land revenue

recent land grab of public land in good manner

to meet health expenses

Notes:

- (i) No of cultivators give the number of households who cultivate on own land as a percentage of total number of households.

This decline is due to the mortgage and sale of land to meet increasing expenses on health and on social occasions. This will further clarified under the section on credit. The case mentioned under employment also reveal this trend. Recent amendments in the land law which has lifted the ban on the purchase of land by owners residing in the 5 kms radius has accelerated the process of land transfers from rural small farmers to urban rich who want to

develop farm houses and captive plantations. But the number of farmers in the is area has remained same which indicates marginalisation of land ownership. This can be seen in other areas as well.

The average size of land holding was highest in Kutch rural (11.3 acres), in Dec. 95. In other areas it was between 1.2 to 2.5 acres in Dec.95. This means that in most of the areas farmers come under small and marginal cultivators category.

If we see over the four rounds, in Kutch there is a steady decline in average size of lands holding. In Apr.94 the average land holding was 13.5 acres and it has declined to 11.2 acres in Dec.95. In Junagadh the average landholding has declined sharply compared to any other area between April 94 and Dec.95 from 6 acres to 1.2 acres. In rest of the areas there was marginal decline in average land ownership.

Apart from purchase of land in rural areas by the urban rich as in the case of Ahmedabad rural, in Junagadh there is an increase in purchase of land for captive plantation and horticulture. The introduction of drip irrigation in the last few years has also encouraged the cultivation of these crops. Similar trend can be seen in other areas as well, which have shown decline in average land size.

There is no change in the proportion of irrigated land available for cultivation in Ahmedabad rural, Sabarkantha rural and Sabarkantha tribal as seen from the table 9 in the appendix. In Kutch rural there is an increase in proportion of irrigated land. In Kutch rural there is an increase in irrigation due to drip irrigation system which is been encouraged by the local NGO, VRTI and in Junagadh rural it is due to an increase in private wells.

To study the changes in cropping patterns we have looked at the area under each crop. We have looked at area under Kharif and Rabi crops separately. By comparing area under crops between different Kharif and Rabi season we get a clear picture of the actual changes that has come about in terms of crops taken up in these areas. Table (5.2) gives the details of the crops grown in each area along with the area under each crop.

In Ahmedabad Rural we find that there is no change observed in farming activity with respect to area under different crops during the two kharif and rabi seasons. Farmers of this area grows mainly one crop during kharif. Bajri and paddy are grown in kharif period. With decline in water availability the farmers have stopped growing wheat during the last rabi season (May.95) which has resulted in decline in area under wheat. In Kutch there is a overall decline in area under different crops between the two crop seasons during the last two years. This could be due to non availability of water, drought conditions and thereby a overall decline in agriculture activity in the area

TABLE 5.2

AREA UNDER CULTIVATION (CROP WISE) IN ACRES

Crops	Ahmedabad Rural				Kutch Rural				Sabarkantha Rural				Junagadh Rural				Sabarkantha Tribal			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Bajari	5*	137	50*	133.9	-	153	5	12.0	1*	6	-	5.4	-	1.4	3.2*	2.2	-	1	8*	-
Wheat	212	56	9	52.4	50	-	61	24.0	135	-	24.5	-	9	-	24	3.0	196	-	32	2.2
Castor	4	56	-	12.8	-	70	13	10.0	75	94	0.5	59.8	-	-	-	-	-	-	93	1.0
Jowar	-	4	6	8.7	3.5	490	6*	85.0	-	7	-	7.1	-	8	-	3.5	-	-	2	-
Paddy	-	103	-	114.7	-	-	-	-	-	-	-	3.1	-	-	-	-	-	-	-	-
Groundnut	-	-	-	1.7	-	475	83.5	176.0	-	-	-	-	-	199	2	300.7	-	-	7	-
Horticulture	-	-	-	-	-	7	34.0	-	-	15.0	-	-	2.0	2.0	-	-	-	-	-	-
Pulses	-	-	-	3.9	4.0	171	9.0	11.1	3	125*	156	109.3	-	-	-	42.0	1	125	4	217.8
Maize	-	-	-	0.3	-	-	2.0*	-	10*	191	125	151.3	-	-	-	1.0	-	266	22	162.0
Cotton	-	-	-	-	2.2	405	152	116.0	-	13	-	86.8	-	-	-	5.0	-	3	24	-
Others	19.6	11.8	6.0	10.7	34.5	23.5	55.5	16.0	59.8	96.9	14.7	35.2	-	4.3	0.4	1.0	5.0	0.5	77.1	0.0
Total	289.6	367.8	71.0	410.0	94.2	1794.5	421.0	450.1	282.8	549.9	320.7	458.0	11.0	214.7	29.4	358.4	202.0	395.5	269.1	383.0

Notes:

- (i) 1 = April 94 (Rabi) and 2 = Dec 94 (Kharif) 3 = May 95 (Rabi).
(ii) Kharif season is from mid June to mid October, rabi from mid October to mid February and summer is from mid February to mid June.
(iii) Others in Ahmedabad rural include variyali, vegetables and fodder. In Kutch rural it is Variyali, Isafgul, Raido fodder vegetables and Tal. In Sabarkantha rural it includes variyali, fodder, isafgul, raido and cotton seed. In Junagadh it includes vegetables, isafgul and fodder. In Sabarkantha tribal it includes tal and isafgul.
(iv) * indicates summer crop.

CONSUMPTION CROP TO HORTICULTURE: LAND ALIENATION

Nathabhai Naranbhai is a head of a 7 members family, in Bidada village near Mandavi (Kutch) and owns five bighas of land. He has been cultivating maize and pulses for the family consumption.

Just one and half years back, husband of eldest daughter left his wife and two children in the hospital, as she was suffering from T.B. When the girls family got this message they rushed to the hospital and found that she had just two rupees. They took charge of the situation and spent about Rs. 6000/- on her medical care. As her condition did not improve and they were loosing lot of money on treatment, they shifted her to Bidada Trust hospital, where Nathabhai's brother was working as a driver. They arranged for free treatment using the contact in the hospital. Today she is under treatment. During this period her children who are just four and two and half years old were taken by her in-laws.

While the daughter was in the hospital, the wife of Nathabhai has to undergo an operation for a tumour in the stomach. This was done in Civil Hospital Bhuj. There was no charge for the operation but despite that they had to spent around Rs. 3000/- for food and accommodation for 15 days. At this time, Nathabhai himself suffered from Pthyroid and has to undergo a long treatment. To meet all health expenses Nathabhai mortgaged his 5 acre of land for just Rs. 4000/- and also pawned gold and silver ornaments for Rs. 7500/.

He is not in a position to repay any loans. He was now working as a daily labourer with a big farmer. He is getting Rs. 40/- per day for the work. His son is also doing casual work. Nathabhai's employer is a business man from Mandavi, which is around 22 Kms. from Bidada. He has bought this land from a Patel farmer for Rs. 7 Lakhs. The Patel farmer was growing cotton crop on this land. When the water level went down and turned saline the farmer had no option but to sell the land. The present owner has been able to purchase this as present liberalisation of land laws allows people to buy land even if they stayed beyond five km. away from the land. Nathubhai wonders if he does not able to repay his loan he might have to get alienated from his land which is at present mortgaged.

(VRD)

There is sharp decline in wheat grown in this area. In Kutch Rural there is decline in cultivation of bajari and groundnut. There is an increase in cotton, castor, pulses and also a slight increase in area under Jawar cultivation in Kharif season.

In Kutch rural in the case of food crops we find that there is a decline in the area under bajari and increase in Jawar. There is also an increase in area under castor, pulses and cotton. Cotton is mainly grown in the villages where there is irrigation is available. In Rabi season we find a decline in wheat cultivation. The area under others category in both season has showed an increase. Others include raido, fodder and horticulture. Overall there is trend towards cash crops. Part of Kutch lack irrigation facilities. The local NGO, VRTI has been encouraging horticulture by assisting the farmers with drip irrigation system.

In Sabarkantha rural we find a decline in wheat and castor during the rabi season. This decline is compensated by the area under pulses and maize. A larger proportion of the agricultural land in this area is irrigated. Therefore they are able to take up rabi and summer crops also. During the kharif season farmers started growing cotton which is mainly cultivated for seeds. There is an increase in area under this kind of cotton between the two kharif seasons. This increase is at the expense of maize, castor and pulses. In this area there is also trend towards growing cash crops like variyali, raido and isafgul in a limited extent during the kharif season. This is described as a recent development.

Junagadh rural is still a mono crop area (groundnut). Farmers used to cultivate mainly groundnut during the kharif season. The area under groundnut has increased across the two kharif seasons studied. There is also an increase in wheat cultivation during the rabi season, especially due to improvements in irrigation, through private wells and pump sets attached to the wells. The soil is highly saline and this limits the choice of crops in this area.

In Sabarkantha tribal, the system of inter cropping is followed. In Kharif, farmers sow Pulses like urdh, tuvar along with maize. These are the major crops during this season. From the area under different crops, it can be seen that there is a perceptible shift in cropping pattern, where farmers are opting for cultivation of pulses in place of maize. Although the land holding size is only about 2.5 acres about 50% of the agricultural land is irrigated. Therefore some farmers cultivate during the rabi season as well.

We see a major change in the crops grown during rabi. In April 94 out of the total cultivated area, 196 acres was under wheat. In May 95 we find that only 32 acres of wheat was cultivated. New crops which have been introduced are castor, cotton and groundnut. Farmers have started growing new cash crops like variyali which was sown in 58 acres in May 95. This crop requires a lot of care being very delicate. This would require women to participate in growing this crop. A larger variety of crops are being tried out in tribal area and all of them are cash crops.

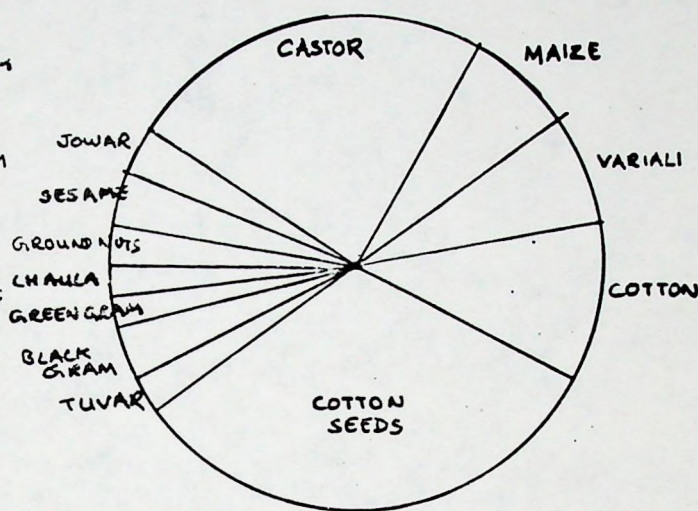
IDAR RURAL - Bhavanqad

July 31, 95

PIE CHARTS

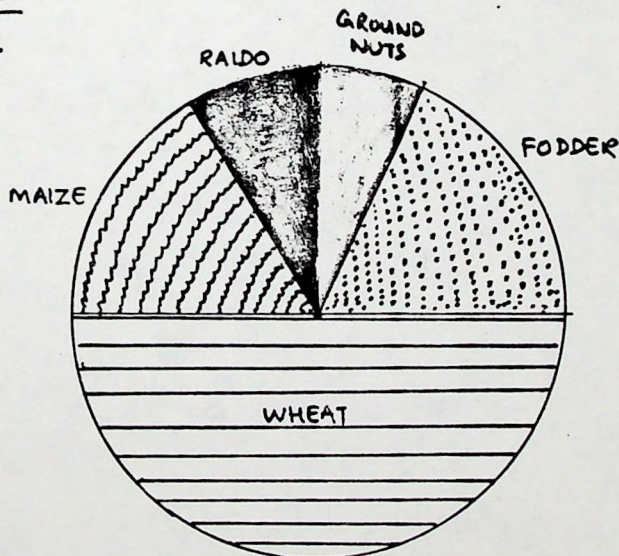
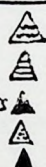
KHARIF CROPS

1. Maize
2. Tuvur
3. Black gram
4. Cotton
5. Variyali
6. Greengram
7. Chaula
8. Groundnut
9. Castor
10. Sesame
11. Cotton seeds
12. Jowar

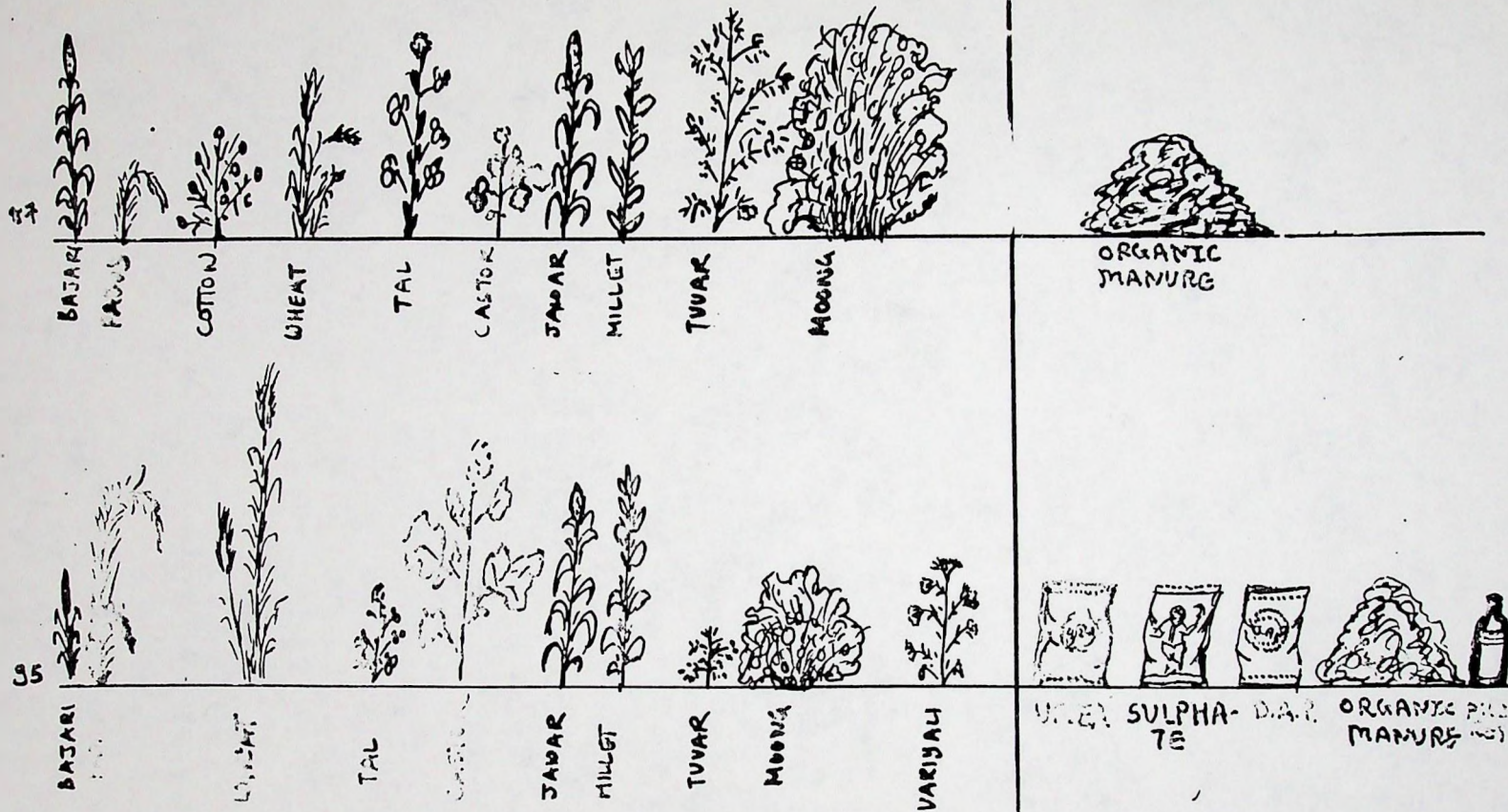


RABI CROPS

1. Maize
2. Wheat
3. Groundnuts
4. Fodder
5. Raizo

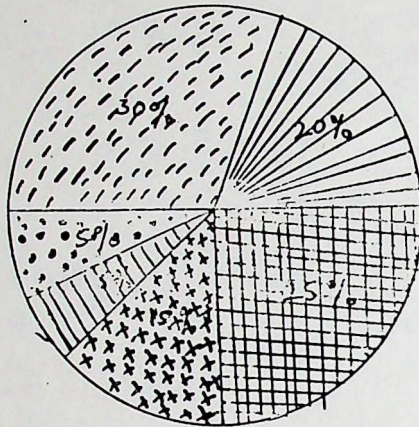


HISTORICAL TRANSACT AT KHODI - ATMEDABAD RURAL



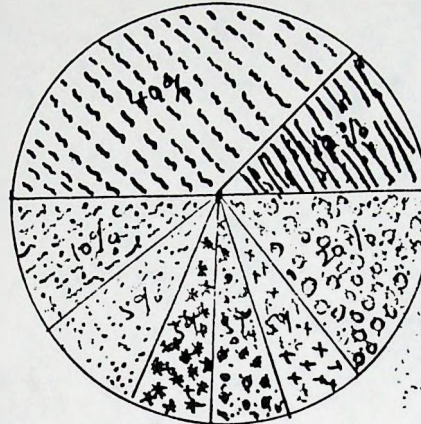
FOOD CONSUMPTION - PIE CHART - VILLAGE TALVANA - KUTCH WET.

KHARIF CROPS



- JAWAR
- GROUNDNUT
- BAJARI
- GUJAR
- TAL
- MOONG

RABI CROPS



- COTTON
- WHEAT
- CASTOR
- RAJOO
- CARROT
- FODDER
- JAWAR
- VAL

An attempt has been made to estimate the cost of cultivation of various crops. We have estimated using PRA and focus group interview techniques which has provided reliable information. Table 5.3 provides data on cost of cultivation of various crops and the value realised.

TABLE 5.3
COST OF PRODUCTION FOR MAJOR CROP (in Rs per acre)

Crops	Fertilisers and Pesticides	Labour	Seeds and Other inputs	Output per acre in kgs	Total Cost	Value realised	Value of Residue	Gain /loss
Bajari	646	371	149	360	1132	1080	200	-148
Paddy	834	343	1286	450	2463	1800	200	-663
Wheat	670	1150	2520	1200	4340	4320	300	280
Groundnut	140	724	639	140	1505	5760	-	4255
Variyali	1020	2210	2620	400	5850	6000	-	150
Castor	1150	1075	810	500	3035	4250	-	1115
Cotton	1036	1765	1220	600	4021	15000	300 (fodder)	10979
Maize	690	915	720	1000	2325	4500	250	2178

Notes :

- (i) Costs have been calculated using information collected during all village studies conducted during July-August 1995.
- (ii) In the case of labour we have imputed value for family labour. We have imputed value except for paddy sowing and transplanting. This work is done mostly by female and they did not tell us the wage rates for the activity and how long it took them to complete it.
- (iii) Other cost include cost of renting, tractors and bullock for ploughing diesel for irrigation and other machinery used.
- (iv) Total receipts has been calculated using market price of the output.

Food crops are grown for consumption by the family by small farmers. Assuming that the total output is marketed, we find that crops like bajari and paddy are not cost effective. In some cases if we add the value of the crop and all other forms of residue it would just cover the cost of cultivation. Farmers grow food crops because it provides food security and

fodder. Cash crops particularly cotton is more cost effective for farmers. Cotton is a traditional crop for most of the areas under study. After cotton, another traditional crop, ground nut provides sufficient surplus for farmers. This was grown mainly in Idar and Junagadh areas as Kharif crop.

Farmers in Kutch withdrew from cultivating cotton as there was a major disease three years back. They have started adopting this crop again. Variyali is labour intensive crop that has come into picture recently. This does not provide much surplus but farmers even in tribal area are taking up this crop on a limited scale. Most work on this crops done by women which implies additional pressure on women.

From the PRA and group discussions we found that, the introduction of cash crops has resulted in increased use of fertilizers and pesticides. The crops also needs frequent weeding and hoeing which are all activities done by women. This would put pressure on the women and they will have to work longer hours outside and lead to extension of their day itself.

In a situation where the poor people do not access to Public Distribution System (PDS) small farmers shifting to cash crops can have serious adverse impact. The food availability will decline and with no source of subsidized food to compensate for the shift to cash crops, the households will have to be satisfied with less food. This will have serious implication on health and nutrition- particularly of women and girl child.

The case presented under rural employment from Idar region clearly show the lack of access to basic food items.

II. TRENDS IN FOOD CONSUMPTION

In both urban and rural areas consumption of food is mainly through purchase from local shops. In rural areas are given wages in kind especially after the harvest.

Public Distribution system (PDS) has a list of essential commodities like wheat, rice, sugar, edible oil and kerosene. This system is supposed to enable the lower income groups to buy essential commodities at a price lower than the market. Special relief cards issued during drought and famines to enable the affected to get additional quota of essential commodities apart from the ration cards provided to the households. This system is prevalent in tribal areas and drought prone areas like Kutch. But poor people buy very small amount from PDS.

The basic information on the study villages show that some of the villages do not have a ration shop. The households have to go to the neighboring village (at an average distance of 2 kms) to get the provisions supplied by these shops. Some of the villages especially those in the tribal area, have only mobile ration shops. These shops are irregular and households do not get adequate information on their operation. During the monsoon this area gets flooded and transport difficulties would hinder the mobile ration shop's movement. There

are private shops at a shorter distance most often within the village. As and when the need arises the households purchase from the local shops. Some villagers keep some portion of the produce that they have harvested for self consumption. Agriculture labour in some rural areas are provided wages in kind, which ensures that some amount of grains are available at the household level.

III. SOURCES OF PURCHASE OF COMMODITIES

In Urban Areas

In the urban areas, households on an average have purchased about 7 kgs of rice from the ration shops and about 9 kgs from the local shops in the reference month during the last round of data collection i.e Dec.95 (Tables 10,11 in appendix). In the case of wheat, it was 12 kgs from the ration shop and about 40 kgs from the local shops. In the case of Ahmedabad slum population they mostly consume wheat from the local shops. The pottery worker areas consume apart from wheat, Bajari, Jawar to some extent. These inferior grains are purchased from the local shops. If we see the trend over the four round period, there has been a decline in overall food grain consumption among the Ahmedabad slum (pottery) area, where in Apr.94 a family used to purchase 106 kgs and presently in Dec.95, the consumption level has fallen to 70 Kgs. A less degree of decline in food grain consumption is seen among the Ahmedabad slum population (table 5.4).

TABLE 5.4

FOOD GRAIN CONSUMPTION AMONG THE SAMPLE POPULATION (Average per family, For one month period, in kgs.)

Groups	April 94	Dec 94	May 95	Dec 95
Ahmedabad Slum (Pottery)	105.9	92.6	108.9	70.1
Ahmedabad Slum	104.7	85.6	89.5	96.7
Ahmedabad Rural	400.1	197.1	287.0	201.9
Kutch Rural	947.86	195.41	188.79	86.83
Sabarkantha Rural	66.9	178.3	143.8	110.8
Junagadh Rural	35.3	138.7	155.9	88.8
Sabarkantha Tribal	117.2	192.4	166.9	141.2

Notes : (i) The reference month is the normal month previous to our survey.

Urban households purchase rice, wheat and kerosene from the ration shops. Rest of the commodities like, Pulses are entirely bought from the local shops. When edible oil is available through the ration shops, they buy which is usually available during festivals, otherwise they have to buy at the private shops.

Rural Areas

In the rural, the households of Ahmedabad buy on an average about 5 kgs of rice from the ration shops and about 10-15 kgs of rice from the local shop in Dec.95. They purchase more wheat from the local shops as compared to ration shops. For bajari, jawar and maize the households have to depend entirely on the local shops. They buy kerosene, oil and sugar from both the sources. The detailed total consumption of food grains shows that there is a decline in the overall consumption across the four rounds (Table 5.4). Tables 12- 16 presented at appendix gives details of items and sources of consumption goods purchased during the reference month in rural areas. In Ahmedabad rural some households receive on an average 31 Kg of rice and 37 kgs of bajri from the employer as part of the wages.

In Kutch rural there is a decline the consumption of food grains over the study period. In Dec 95 the households were not receiving any foodgrains as payment in kind from employees for work.

Junagadh rural the households receive wheat, bajari, jawar and pulses as wages. In Sabarkantha also labour get kind wages in the form of food grains. The households in these two areas are to a greater extent dependent on the farmers and land owners for employment. Although bajari is not available through the PDS its consumption has increased in all the areas over time. In these two areas the overall consumption of food grains has increased over the four rounds (table 5.4).

In Sabarkantha, the tribals depend mostly on the local shops for their consumption. This is because of the unreliable nature of food grain availability through ration shops. The mobile ration shops timing is very erratic and hence people are not able to access this service. In this area the houses are scattered (distance from one house to another is half a kilometer) access to a single outlet is difficult as the information about the arrival of the mobile shop would not reach all the houses during the period of its stay at the village.

Those who work as agriculture laborers, get wheat and maize from their employers as part of kind wage during the harvest. However this mode of accessing food grains has shown a decline between April 94 and May 95, which means that most of the employers are resorting to complete cash wage payment. At the aggregate level, the consumption levels have increased in this area, from 117 kgs per month during Apr.94 to 141 kg in Dec.95. It is to be noted that the consumption level in Dec.95 is less compared to the figures recorded for Dec. 94 and May.95 periods.

The shift to cash crops by these small farmers would result in food crises in the rural areas. Though this is not visible in the areas studied in a large extent, there is a shift among some sections of the farmers in a limited way to cash crops which could potentially endanger the food security. From the PRA data we can see that in rural areas, many farmers keep the entire amount of bajri and jawar produced for self consumption. In tribal areas maize and small portion of pulses are kept for self consumption. But it is revealed that these food grains are insufficient for the whole year and farmers had to depend on private and government shops for food grains during the year.

Given the poor accessibility to ration shops in terms of fixed amounts of grains per family and prices which are not very different from the local shops, there is higher dependency on local shops to purchase basic commodities.

CHAPTER VI

TRENDS IN ACCESS TO CREDIT SERVICES

I. ACCESS TO CREDIT IN URBAN AREAS

Credit plays a very vital part in stability of the livelihood of the poor. The PRAs transcriptions in the section on rural employment clearly indicates it. This section tries to capture the purpose , amount and source of credit.

In Dec.'95, in the urban areas, about 49-58 per cent of the households have reported availing credit. The trend in taking credit in the two urban areas provide divergent pattern. Among the pottery workers of Ahmedabad city, there is a decline in percentage of households availing credit, from a high of 84 per cent in Apr.94 to 58 per cent in Dec.95. In the case of Ahmedabad slum group, the trend witnessed was mixed in nature as seen from the table (6.1).

Most of the households end up taking credit from multiple sources, which are mainly informal and intra family in nature. Access to formal sector credit is nil among both the urban groups. The incidence of credit from informal sources has increased over the four rounds of period in both the urban areas, as seen from the table (17) presented in the append x.

In both the urban groups loans from intra family has decreased. This is linked to urban employment opportunities.

Coming to amount of credit availed, in both the groups, a majority of the households have taken loans of size below Rs.5000. At the sometime, the incidence of loans in the range Rs.5000 to Rs.10,000 is considerable in Ahmedabad slum area (Table 18 in the appendix).

The average loan size over the period in urban areas has shown a sharp increase in Ahmedabad slum area while it has increased marginally in Ahmedabad slum pottery area (Table 6.2).

TABLE 6.1
DETAILS OF LOAN AVAILED

Groups	No of Households taking credit (%)				No. of Loans taken			
	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec 94	May 95	Dec. 95
Ahmedabad Slum (Pottery)	84.1 <i>7 ↓ credit worthiness</i>	89.5	61.7	58.4 <i>13</i>	97	118	52	46
Ahmedabad Slum	46.4	36.6	57.8	48.8	97	64	106	83
Ahmedabad Rural	56.2	44.1	48.3	41.4	143	109	116	97
Kutch Rural	55.7	68.0	67.4	15.1	179	208	191	36
Sabarkantha Rural	39.7	67.4	70.2	25.5	131	244	236	181
Junagadh Rural	39.9	32.4	32.2	44.7	61	59	88	65
Sabarkantha Tribal	44.4	79.2	69.0	60.1 <i>218.0</i>	117	218	172	131

1368

- Notes : (i) No of Households taking loans gives the households who have taken atleast one loan as a proportion of total number of households surveyed at that time point.
- (ii) No of loans taken also include all multiple credit taken by the households.

continuing loans incl. outstanding loans
informal loans - moneylender, shops, with dependency
informal - ? ↓ capacity, mostly interest free
formal - ? no security
(banks - savings)

purpose for loan - kuba
Health - progressively ↑ - 10% - 18%
2. Household - 40% - 37% - 27%
3. Exp. Sp. acc. - split
64.a.

TABLE 6.2
AVERAGE SIZE OF THE LOAN

	April 94	December 94	May 95	December 95
Ahmedabad Slum (Pottery)	4171	3330	4456	4446
Ahmedabad Slum	777	8385	6820	7123
Ahmedabad Rural	2824	1894	3129	3063
Kutch Rural	6121	10832	12344	5261
Sabarkantha Rural	8074	5724	5596	3193
Junagadh Rural	2987	3286	2600	2640
Sabarkantha Tribal	930	510	172	543

The increase in credit amount in Ahmedabad slum area is due to an increase in health expenditure and for working capital in income generation activities particularly among the households who are displaced from employment in textile mills and other sectors. The incidence of loans taken for income generation in this case has increased from 9 per cent to 20 per cent between Apr.94 to Dec.95. Most of the loans taken are for household purposes and for festival and special occasions. The details of reasons for taking credit are presented in the table (19) in the appendix.

In Ahmedabad slum (pottery) there has been hardly any credit taken for income generation. Most of the credits are for households expenditure, social occasion and health purpose.

The households in both the urban areas pawned/sold assets for meeting various expenses. There is an decrease in pawning/selling of assets in Ahmedabad slum (pottery) whereas there is an increase among Ahmedabad slum households. It has increased by 100%. Assets mortgaged/sold are mostly consumer durables and items of jewellery and tools. In Dec. 95, about 40 per cent of assets pawned were for health and household expenditure purposes in Ahmedabad slum (pottery). While mortgaging is mainly for household and health purposes, there are incidents of households acquiring assets. Over the four round period, the incidence of households acquiring consumer durables has declined, which was of the order of 90 per cent in the earlier rounds. Households have increasingly acquiring assets related to their work purposes like tools.

II. ACCESS TO CREDIT IN RURAL AREAS

In all the rural areas, the number of loans taken by the households has declined between Apr.94 and Dec.95 except in Junagadh area in which there is an increase in incidence of credit (Table 6.1). The reason of such decline can be understood from the purpose for which loans are availed.

In all the areas, the average loan amounts are below Rs. 5000 per loan in all the areas. Over the four round period, a average loan size varies. In two areas it has remained at the same level, and in two areas it has shown a marginal decline (Table 6.2).

In Ahmedabad rural area, about 72% of the loans are below Rs 2000 and only about 4% of the loans were above Rs 10,000. In Junagadh rural a similar situation exists with no households taking any loan above Rs 10000. In Sabarkantha rural about 40% of loans are below Rs 2000, about 50% between Rs 2000-10,000 and rest above Rs 10,000. In Kutch rural the household avail loans of all ranges in somewhat equal proportion. About 10-15% of the loans are above Rs 15,000. In Sabarkantha tribal 99% of the loans are below Rs 5000. No households have taken loans above Rs 15,000 (Table 19 in appendix).

Looking at the purpose for which loans are taken it has been found that in all the areas put together loans for household and special occasion expenditure has declined over the period. On the other hand loans for income generation has shown an increase from 15% in April 94, 46% in Dec 94 to 31% in May 95. Loans for health has also increased no 21% in May 95.

TABLE 6.3

SOURCEWISE DISTRIBUTION OF THE CREDIT AMOUNT (%)

Sources of Loan		April 94		Dec 94		May 95		Dec 95	
		A	P	A	P	A	P	A	P
U R B A N	Informal	40.4	49.00	28.06	45.05	40.35	53.80	84.51	78.30
	Intra Family	30.38	38.00	35.15	53.85	53.89	44.94	15.36	20.00
	Formal	29.22	13.00	36.79	1.10	5.76	1.26	0.11	0.77
R U R A L	Informal	62.1	53.25	31.7	36.79	28.09	36.62	34.59	35.52
	Intra Family	29.75	42.31	67.22	48.06	47.99	56.98	47.80	57.73
	Formal	8.12	4.44	1.08	15.14	23.92	6.39	17.61	6.85

Notes

- (i) A = Amount, P = Persons
- (ii) Informal sector includes loans from landlords, employers, shopkeeper etc.
- (iii) Intra family includes loans from other families and relatives.
- (iv) Formal includes loans from banks, agriculture co.operatives and other cooperatives.
- (v) Figures are percentages to total.

In urban areas (Table 6.3) the households access to formal credit declined over a study period in terms of both amount availed and amount disbursed. In the rural areas although the amount of loan received formal sources increased the number of persons benefiting is declined.

In terms of sources of credit, limited extent of credit was available from formal sources (Table 17 in appendix). Most of the households depend on informal and intra family sources for credit. In Ahmedabad rural, there has been a steady increase in dependence on informal sources of credit. The same was the case with other areas like, Junagadh, Sabarkantha tribal areas. It has declined in Kutch area, where intra family dependence on credit has increased substantially. Intra family sources were sought in Sabarkantha rural area as well.

FAMILY COUNTS, NOT GOVERNMENT POLICIES! POOR SURVIVE ON THEIR OWN

Twenty Kilometres from the Tehsil headquarter, Idar in Sabarkantha district is located a village Chandap. Dalits and backward caste constitute 80% of the population. About 30 families in village were traditional leather workers. Most of these leather worker families have some agricultural land. Traditionally these families were living from scavenging and supplying leather goods for agricultural purpose. In return villagers used to give grains at the time of harvest. This Indian Jajamani system stopped a few years back. Today most of the families supply leather goods on demand. Eight years back a leather cooperative was formed with 400 members. They have their own tannery and marketing systems. This cooperative is defunct at present. The tannery has very old technology and is water intensive. At present the individual families have been tanning which is equivalent to just drying the hyde and sell it to middlemen who come to village. Eventhough the leather cost has increased many fold because of incentives provided to leather manufacturers in SSIs its benefits has not reached the village. While talking to them the research team discussed with the local voluntary agency to link up other primary leather producer groups so that instead of middlemen making profits communities can help each other for income generation.

Danabhai has five bigha's of land which has a well. Last year alongwith maize (consumption crop) he also sowed castor in one and a half bigha and expected to earn about Rs 4000. The crop failed because he could not water it adequately since the water level in the well went down. This year he again sowed castor in 2 1/2 bigha. He plans to use the income for health care and repair of the house.

One of his young sons aged 16 died this year. They took him to the district hospital in the last moment hiring a private taxi. But it was too late. The daughter was also having the same illness, but she survived. Danabhai's family believes that Mathaji (god) will take care of the sick. He himself is suffering from some stomach ailment. He finds the 'local doctor' (unregistered practioner) diagonisis and medicine more effective than the government doctor's medicine. He went to the hospital but after the first visit never went back. His wife is suffering from rheumatism and she has been shown to a private medical trust. She has not gone back after the first visit. This year they have spend about Rs 6000 on health care.

Danabhai feels his livelihood is supported by his own effort, support of the relative and villagers and grace of Mathaji. Though village support has been reduced, his sister's son has been a great help to him. He is a shool teacher.

This year he extended an interest free loan of Rs 3000 with which he purchased a buffalo. The milk sale has been an additional income to cover the health expenses. His elder son got a loan from the Cooperative Bank to buy a bullock cart. This brings him fifty rupees per day whenever (150 days in a year) he gets a cartage order.

Danabhai doesnot have any expectation from any government policy or programme. He looks at life as a gift of god.

(GVST)

Is There Anybody to Bail them Out: Where is the Safety Net?

Jayaben Ramabhai's family has 8 members and live in a village near Mangrol town. Jayaben has five daughters of which one is married and two sons. They have their own house and 5 bighas of land (which is jointly owned by six brothers). It was quite a happy family until a year back when disaster struck them. Ramabhai had an accident. Ramabhai was a mason, earning 100 rupees per day. While at work he fell down into a from the scaffolding. He suffered very serious injuries of leg, hand and head. Those who were around took him to the government hospital at Keshod. But doctor refused to treat him, because of his serious condition. He was referred to Dr. Mangadia's (private) hospital at Junagadh, where he was hospitalized for fourteen days. He was accompanied by his wife Jayaben. The farmer for whom he was working when the accident took place was also there for eight days and arranged for Rs. 5000 to 7000 for the medicines and hospital bills. They did not compromise on anything during the treatment particularly medicines. Relatives staying in Mangrol arranged for the food for the couple. Doctor said that he will be able to work within two months but after a year he is not able to work, he can just walk around.

They had taken a loan of Rs. 12000 from relatives without interest for their daughter's marriage. They were sure that they could repay that money, because he was earning. But due to this accident, they are not able to repay a single paise of the loan. They have taken around Rs 7000 from the farmers during Rambhai's illness. They also took around Rs 7000 for the house from relatives on interest of 2.5% per month. So they are under pressure to repay Rs. 26,000. The relatives known the situation of the family, they are not troubling them. Jayaben was accepting the truth that loan from the bank at very low interest is very good. But at the same time they don't understand our personal problems. If we are not able to repay the loan regularly, they may take our house or other assets. Most of our loan do not take.

On one side this family has to repay Rs 26,000 of loan on the other side the family has two daughters and the two sons who are studying. The only earning members are the mother and two young daughters. They are doing daily labour in which they are earning per day around 30 to 35 rupees together. Secondly they have joint farming which is totally depend upon the rain. They cultivate groundnuts.

According to her if rain is adequate, the yield is around 18 mann or 360 kgs, groundnut from the one bigha. The selling price of groundnut is Rs 5000 for 20 mann or 400 kgs. Pesticides, seeds and labour costs around 900 rupees. Ramabhai is thinking of shifting to a place where he can earn more money like stone quarrying.

When we were preparing this case, two persons of the family were suffering from fever. They are taking medicine from private doctor not from government hospital eventhough they have to borrow money to pay. Because they were saying that in the government hospital they are giving only some medicine from the hospital and the rest they have to buy from the medical shop which is one and the same.

(GKSK)

Coming to reasons for taking credit in rural areas, household purposes and special occasions have dominated the scene in all the areas over the four round period. But in Sabarkantha tribal and Sabarkantha rural areas, the share of credit for income generation purposes has shown a sharp increase in the last round, compared to earlier period. The share of credit for health purposes formed portion in the reasons for taking credit in rural areas in all the four rounds (table 19 in appendix).

In the rural areas of Ahmedabad, Sabarkantha and Kutch there was a overall decline in pawning/selling of assets. In the tribal area, there is an increase in number of assets sold. The type of assets pawned/sold has changed over the time. In April 94 the assets pawned/sold were consumer durables and tools. In Dec.95 it was consumer durables tools, livestock and others. In Sabarkantha tribal, almost all the assets pawned/sold are tools, livestock, consumer durables and other items. The purposes varied across the rounds but mainly for consumption and health purposes. Increasingly in Kutch area, many households started pawning assets for income generation purposes. The selling and pawning of assets like land and livestock is an indicator of distress.

Coming to assets purchased, many households in rural areas have purchased assets like livestock. Over the period, there has been a decline in acquiring assets like livestock and land and an increase in consumer durables in rural areas. This confirms the state of distress among rural poor.

CHAPTER VII

TRENDS IN ACCESS TO AND UTILIZATION OF HEALTH SERVICES

Access to social services, especially expenditure on health directly affects the household economy. In this section nature of access to health services and expenditure pattern has been captured.

I. Incidence of Illness

The information collected on the status of health in the study area is related to the period six months prior to the survey at each round.

In Ahmedabad slum (pottery) area, the number of persons reported illness ranged between 6-12 percent. (Table 7.1). Similar fluctuations in the number of persons falling ill are seen in Ahmedabad slum area (see appendix table 20 for prevalence of illness).

TABLE 7.1

INCIDENCE OF ILLNESS AMONG THE GROUPS

Groups	Persons Falling Sick(%)			
	April 94	Dec. 94	May 95	Dec 95
Ahmedabad Slum (Pottery)	8.7	11.6	5.7	9.4
Ahmedabad Slum	10.8	7.6	19.2	8.8
Ahmedabad Rural	14.9	11.3	8.8	4.9
Kutch Rural	18.0	17.2	18.5	10.4
Sabarkantha Rural	16.4	24.9	17.6	11.4
Junagadh Rural	8.6	9.6	12.9	9.1
Sabarkantha Tribal	18.6	18.0	19.5	26.3

Notes :

- (i) Person falling ill gives the number person in each area that fell ill to the total population of that area. \div Total Pk
- (ii) Figures relate to over the six months period prior to our survey.

In rural areas, Ahmedabad, Kutch and Sabarkantha have shown a decline in the incidence of sickness. In Junagadh it has remained between 9 -13 per cent. The increase in incidence of illness is seen in tribal area of Sabarkantha from 19 per cent in Apr '94 to 26 per cent by Dec.95.

Among the urban households cough, cold fever, and malaria was highly prevalent. In all the rounds about 60 -65% of illness reported among both males and females belonged to this category. Apart from these about 8% of the cases reported in April 94, 21% in Dec 94 and 15% in May 95 were respiratory problems. This can be related to the prevalence of occupational diseases like silicosis among the ceramic workers and byssinosis among the textile workers as most of the units do not follow any safety norms.

In Ahmedabad rural there is a high prevalence of skin diseases (scabies). Both males and females complained about aches and pains. It was about 8-10% of the illnesses reported. This can be related to the nature of their work. Heart related problems are more prevalent in Sabarkantha rural and Junagadh rural area. It can be linked to the custom of close marriages that these communities follow in these areas.

Tetanus cases were reported among Sabarkantha tribal households. The incidence of tetanus among new born and mothers has increased. This could be indicative of poor implementation of government ANC and PNC program in the tribal areas. Information collected during the PRA among women revealed this point. During our survey in all the rounds at least one case of tetanus among women has been reported.

Gynecological problem is higher among rural women as compared to urban women. Rural areas lack gynecological services. In many cases they have to travel long distances to private clinics to get treatment. This was revealed during our group discussions with the women, as part of the study. Women do not consider this is a disease and are even diffident to talk about it and therefore many times it is unreported.

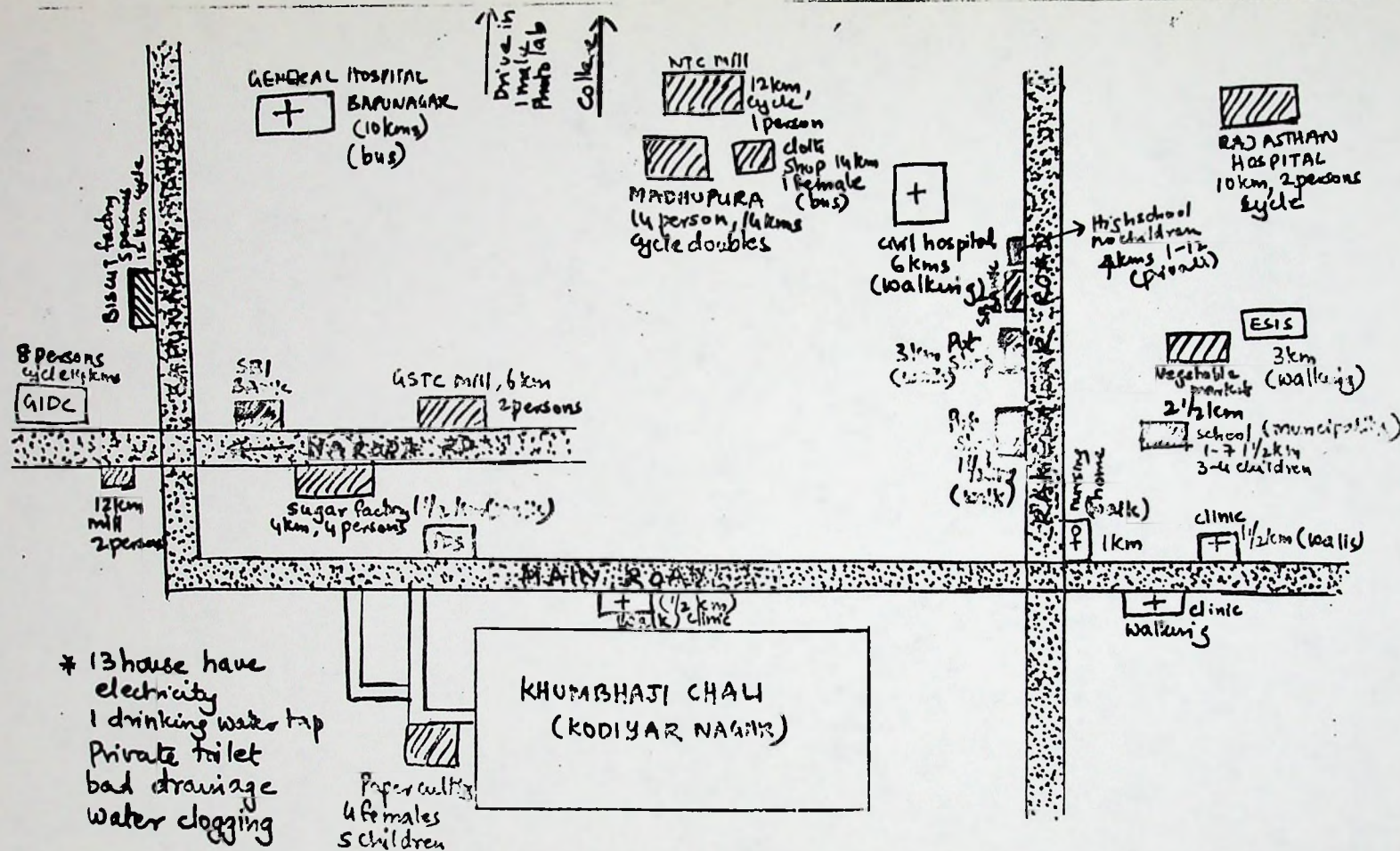
II. Health Care Facilities

In both urban and rural areas, there has been no discernible improvement in the health facilities provided by the government over the past two years. In urban areas, different categories of workers are entitled to and can access different kinds of services. Those employed in the organised sector can access the Employee State Insurance Scheme (ESIS). Similar provisions were not available for those who are employed in urban unorganised sector who have to depend on government clinics/hospitals and private hospitals.

In the rural areas, the health care facilities include the Primary Health Centers (PHCs) and the sub centers. All government health programs like immunization, family planning, pre natal care (PNC) and anti natal care (ANC) programmes are implemented through these centers. Most of the rural areas do not have access to a big hospital. To access this facility they have to come to the nearest urban centre.

In the rural areas the distance between PHC and villages is a major factor in its utilization. The service map for two villages in each study area has showed that the villages are at an average distance of 8 kms from the PHCs. Non availability of adequate transport make it difficult for the families to access the PHC when it is essential. In many cases the private doctors are closer and therefore the households find it convenient to get treated there. This is particularly so in the case of minor ailments. For major illness they go to the nearest government hospital.

In terms of treatment, most of the Ahmedabad slum (pottery) population visit government hospitals (Table 7.2).



SERVICE AND OPPORTUNITY MAP AHMEDABAD SLUM (KODIYAR NAGAR) (URBANS)
31st August 95

TABLE 7.2
SOURCES OF TREATMENT

Groups	Government				Private				NGO and Others			
	April 94	Dec. 94	May 95	Dec 95	April 94	Dec. 94	May 95	Dec 95	April 94	Dec. 94	May 95	Dec 95
1 Ahmedabad Slum (Pottery)	34.6	27.0	56.5	53.8	65.4	70.4	39.1	43.6	-	2.6	8.3	2.6
2 Ahmedabad Slum	33.6	20.7	22.8	18.3	51.1	71.2	71.4	78.6	15.3	8.1	5.8	3.1
3 Ahmedabad Rural	20.8	20.1	26.6	14.1	79.0	78.0	73.4	84.7	-	1.8	-	1.2
4 Kutch Rural	14.2	2.6	3.4	5.9	75.8	85.0	89.3	79.4	10.0	11.5	7.2	14.6
5 Sabarkantha Rural	7.2	33.9	3.9	7.1	89.4	63.8	96.1	92.9	3.4	2.6	-	-
6 Junagadh Rural	57.3	45.2	39.4	26.8	38.2	53.3	58.7	70.5	3.6	1.4	1.8	2.7
7 Sabarkantha Tribal	6.6	3.2	3.9	0.4	88.1	90.5	93.4	96.4	5.3	6.3	2.8	3.1

Notes :

- (i) These figures are percentages
- (ii) The figures give the number of person using a particular source of treatment as a proportion of total number of persons falling sick and going for treatment.
- (iii) Others include treatment by Unnani and other local system of medicine.
- (iv) Figures relate to six months prior to our survey. Figures are percentages.

1. "more" more names come on register of ES

In this area there was an increase in illness treated in the government hospitals from 35 per cent in Apr.94 to 54 per cent in Dec.95. This was followed by a sharp fall in the use of private clinics. This can be linked to the increase in the number of silicosis cases that have been identified with the help of local NGOs. Workers suffering from occupational diseases use the ESIS because only through this system, can they get free treatment and also compensation from their employers.

In Ahmedabad slum on the other hand, many households visit private clinics for treatment. They go to private doctors for minor ailments and to the ESIS or government hospital only for major illness. It is revealed during the study that many workers in this group are suffering from byssinosis. Many households express lack of confidence in the government facilities and thus opt for private services.

★ ★ THE TIMES OF INDIA, AHMEDABAD, SATURDAY, APRIL 9, 1994 5

Byssinotic mill-hand commits suicide

By A Staff Reporter

AHMEDABAD, April 8. THE apathy of the Employees State Insurance Scheme (ESIS) and red tape have led to one more mill worker, Mr Shyambabu Ramdayal, 45, to end his life by jumping in front of a running train while on his way to work at the Jahangir Mill.

Hundreds of textile workers like Shyambabu are suffering from the killer disease called byssinosis. According to the Mill Kamdar Swasthy Suraksha Mandal, those concerned with safety in mills — the Ahmedabad Textile Mill-owners Association, ESIS, and the labour commissioner are well aware of the nature of this disease. But no one is ready to take concrete action to identify and rehabilitate affected workers.

Shyambabu, who had worked for 26 years in a textile mill, is survived by his wife, three daughters and two sons. He had told his wife that the pain of the disease was becoming unbearable. Though he

had been complaining of chest pain and breathlessness for eight years, the ESIS had never bothered to diagnose the problem. In fact, when a textile worker complains of chest pain, the first test to be conducted is for byssinosis.

It was left to the Mill Kamdar Swasthy Suraksha Mandal, a workers' organisation that has taken up a byssinosis control programme, to conduct the tests. Last year it was found that Shyambabu was suffering from a high level of byssinosis. His case was referred to the Industrial Hygiene Laboratory, which also conducted the test at the Bapunagar general hospital, and confirmed the disease.

Despite repeated requests to the authorities concerned, Shyambabu was not allowed leave under occupational disease; nor was he shifted from the card room, which has the highest concentration of cotton dust, to another department.

He had therefore to frequently keep away from work, and to meet his domestic expenses, had to borrow heavily.

In the rural areas, because of low accessibility and poor quality of services the PHCs are under utilized. The data shows that in rural areas, there is a high level of dependency on private health services. In all the rural groups, except Junagadh rural, more than 80 per cent of the sick persons are treated in by the private doctors in Dec.95. In Junagadh area people used to access government services to the extent of 57 per cent of illnesses, in Apr.94. But the utilization rate has declined to 27 per cent in Dec.95 which is still high when compared to other rural areas which have between 1 to 14 per cent of usage of government health facilities.

The PHCs implement all the government programs. But they are inadequately provided with staff and equipment. In many cases even basic medicines are not available. Essential drugs like antibiotics and anti malarial take a long time to reach the PHC even after an order has been placed. Most PHCs have facility for testing for malaria. Any serious case is referred to the nearest government hospital. There is no facility for moving the sick persons and they have to depend on private transport. These factors have also encouraged the households to often use private clinics.

III. Health Expenditure

The table (7.3) below gives the average expenditure per sick person and average credit taken for health purposes. Table 21 in the appendix gives the proportion of expenditure met by mortgaging assets

The average expenditure on health showed a declining trend. However when the expenditure was disaggregated in to different ranges it shown that expenditure below the range of Rs.1000/- has increased in all the areas. This category falls under minor illness. the increase of doctor fee and cost of medicine is the main cause of this. The expenditure on the case Rs.1000 to 5000 has remained the same over the last 2 years. This ranges between Rs.2000 to 2500. At this range at times causes difficulty for the family to arrange for the resources. In the last category which is above 5000 are very few cases and expenditure ranges from Rs.7000 to 35000. In such cases the family takes care of the sick by pawning and selling all households assets (see table 7.4)

The high level of health expenditure has lead the households to borrow and mortgage/sell assets to meet these expenses. In Ahmedabad slum (pottery) the proportion of households availing of loans has increased in 1995 rounds compared to earlier period. This group showed a major shift in terms of source of treatment in Dec 95 as compared to earlier period. About 54 per cent of the cases are now been treated in government clinics as compared to 27% in December 94. In Ahmedabad slums there is a sharp decline in the number of households taking loans. There is also a decline in the proportion of households mortgaging/selling assets for health purposes.

There is an increase in loans taken for health in all the rural areas, except in tribal areas. In the tribal area the households taking loans have remained the same between the last two rounds. There has been an increase in many areas, mortgaging assets for meeting health expenditure (Table 21 in appendix).

Under the prevailing conditions any cut in government spending on health, will make it more difficult for the poor to access government health care services. In the rural areas the families are already heavily dependent on private sector and are also in debt for health purposes. Increase in health expenses would lead to further indebtedness. The case presented below provides a detail account of how poor people manage their medical care.

TABLE 7.3

EXPENDITURE AND CREDIT FOR HEALTH

Groups	Expenditure per sick person (Rs)				Share of loan for health(%)				Share of credit in Expenditure(%)			
	Apr 94	Dec 94	May 95	Dec 95	Apr 94	Dec 94	May 95	Dec 95	Apr 94	Dec 94	May 95	Dec 95
Ahmedabad Slum (Pottery)	1253	323	468	514	18.6	17.8	17.3	21.7	41.7	80.5	86.21	89.78
Ahmedabad Slums	1465	1285	703	795	28.9	20.3	15.1	14.5	61.8	65.6	57.20	24.97
Ahmedabad Rural	555	571	963	687	7.0	15.6	25.0	27.8	26.8	25.3	60.55	86.06
Kutch Rural	753	1391	1375	584	10.1	13.9	19.4	19.4	21.2	22.7	41.53	37.96
Sabarkantha Rural	1813	519	813	1054	21.9	15.6	31.4	41.1	27.5	59.2	51.71	31.85
Junagadh Rural	1187	418	596	524	11.5	16.9	15.9	18.5	10.2	16.9	75.73	44.98
Sabarkantha Tribal	440	227	234	171	10.5	10.1	15.7	10.7	11.5	24.4	24.43	14.82

Notes :

- (i) Expenditure per sick person has been computed with respect to number of persons falling sick in each area. Expenditure is for per sick person during a six month period.
- (ii) Share of loans for health is given as a proportion of total loans taken in each area.
- (iii) Share of credit in health expenditure is given as proportion of total health health in each area
- (iv) Figures relate to six months prior to our survey.

TABLE 7.4
RANGE EXPENDITURE ON HEALTH

	<1000				1001-5000				>5001			
	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May 95	Dec. 95
Ahmedab ad slum (Potter y)	373	274	284	472	2336	1900	2833	2214	10750	-	-	-
Ahmedab ad Slum	226	297	242	303	2597	2413	2475	2403	14571	8666	-	9000
Ahmedab ad Rural	172	290	248	310	1861	1678	2048	1846	11333	6000	10000	9500
Kutch Rural	220	303	359	206	2164	2355	1858	2283	10283	36600	13909	35000
Sabarka ntha Rural	423	272	292	464	2051	1885	1956	1896	11000	6000	7666	7000
Junagad n Rural	240	118	188	254	2262	1943	2196	1900	10002	10000	-	8500
Sabarka ntha Tribal	186	144	147	137	2076	1620	2475	1614	8500	-	-	-

HEALTH CARE SERVICES : MOUNTING COST, CAN POOR AFFORD IT ?

Anariben of Ganer village (in the tribal area of Poshina) lives with her husband, one son, daughter in law and six grand children. Both sons are married and the younger son lives separately. Rambhai the oldest son who lives with the parents is suffering from paralysis. It was painful for the old parents to see a healthy, young son suddenly developing paralysis of lower portion of the body. They took him to the Government hospital located in the village but it was closed due to non availability of doctor. The next nearest Government hospital was at Delwada which is 7 kms from Ganer but that was also closed due to the same reason. The patient had to be taken to Idar which is 100 kms from Ganer to a private hospital. He was admitted for 2 days but the doctor could not diagnose anything. He charged around Rs. 2000 for X-ray, consultation and for the bed. Then he was transferred to Ahmedabad civil (government) hospital and hospitalized for ten days where they spend around Rs. 8000 which included medicines, transportation, accommodation and food. There was no improvement in the patients condition so again they had to bring him back to the house.

They took him to village 'Mati' in Rajasthan. After that they took him to 'Poshina' (20 Kms.) in a stretcher to a 'Vaidhya' for 'Desi' or herbal medicine continuously for 15 days. They used to commute daily 40 Kms., walking part of the distance as there is no facility of any transportation not even a state transport bus. Here they gave only 25 rupees and one coconut to the Vaidhya. But there was no improvement so they terminated that treatment.

The line of treatment continued, they further took him to Udaipur, Dungapur, Chittodgarh and every hospital in big cities or small town near Poshina. Other family members never thought about the amount they have spend. All efforts was in vain and Rambhai is still in the same condition. There is no improvement and he has to be helped by someone to move from one place to the other.

During this whole process, they have almost utilized all saving, mortgaged their property and in addition they taken some credit also. They sold their 4 goats for Rs. 2800 sold out grains for Rs. 6000, two bullocks for Rs. 10,000 two buffaloes for Rs. 15,000 and again grains for Rs. 5000 which was kept for households. Above all this they mortgaged their ornaments for Rs. 11,000 and not able to repay, they lost all the ornaments. Rambhai's brother in laws are well to do so they gave credit of Rs. 16,000. A poor class family had to spend around Rs. 65000 to 70000 for the treatment of one individual.

Rambhai's wife is also attending Rambhai and is unable to work outside the house. Children are small and are studying in a school. Parents are old to work and they can only help in looking after the children. So there is no body who can support the family. So the brother, who lives next door to the family is taking care of the family.

The situation of employment in this village is also very critical. During monsoon they are working in their field and cultivating Corn, Urdh, Rice and Tuwar. They are working on others field for one month. While for remaining seven months they are migrating to Visanagar, Mehasana or Prati to work in big farms for cutting Bajara. They are getting Rs. 20 per day irrespective of gender. But in this type of employment, they are getting five days employment while three days they have to wait for the job. The brother wife and kid migrates for work. They take along with a small boy of about 14 years from the village to look after the kid while they work. The boy is paid part of their earnings of both cash and kind.

At present Rambhai's father-in-law has taken him to his place to take care of him. The mother of Rambhai was a very sad person, she was crying and was remembering the assets they have lost for the sons treatment. She was saying that they will have to sell off other remaining asset, our land, a pair of bullocks and goats if we have to repay all the loans.

(NPYM)

MOUNTING HEALTH SERVICES TURNS FARMER INTO PAUPER: WHERE IS THE SOCIAL SECURITY

Ambalal Margaji Bariya lives in a 'Vadod'-Khola village near Kanabha. They have five children, of which one daughter and two sons are married. They are staying separately. Now in Ambalal's family there are only four members, himself, his wife and two unmarried sons. Only one son has studied upto 5th standard, while all others are illiterate.

Previously he owned seven bighas of land. He has given two bigha land each to his two sons. He has only three Vigha land for farming. Ambalal has one bullock, one buffalo.

He took Rs.12000 loan for his daughter's marriage by mortgaging the land. He then repaid the whole amount by selling fifty babul trees from his field. Trouble started about five years back when Ambalalbhai suffered health problems continuously. They had to take heavy loans, some amount with interest while other without interest to meet health expenses. Since the last two years it has been diagnosed that Ambalalbhai is suffering from Tuberculosis (T.B). The treatment started in 1994 when they first visited a private doctor at Kathalal. The doctor did not diagnose the problems but hospitalized him for eight days. Doctor was not ready to relieve him but due to lack of money they left the hospital and took medicines for four days. Then after one month his health deteriorated. Again they took him to Nadiad hospital where doctor diagnosed it as T.B. The doctor at Nadiad referred him to Ahmedabad Civil hospital with reference letter and told them that he will send the case paper directly to Ahmedabad. However when he reached Ahmedabad, they did not find the case paper. His family took him to 'Shadara' hospital and he was hospitalized for four days. From there he took medicine for one month and again came back. He continued this treatment for three months but there was no improvement in his condition. Again they went to 'Bahiyar' to a private doctor. He visited this doctor nine times within a span of three months. But his condition did not change. Again they changed the doctor and went to 'Haldarvas' to Dr Padhiyar (private doctor) and also went to Kuha PHC to get free medicines. Since last four months he is taking medicines from Kuha and Haldarvas. He spent Rs 14,000 for the treatment, transportation, accommodation and food.

This was not the only health problem faced by Ambalal. Even while he was been treated for T.B, he got paralysis two years back. For this he directly went to Ahmedabad to a private doctor. There he was hospitalized for three days. The total expenditure for one day was around Rs.3,000, and in total he spend around Rs. 9,000 for three days. But he could not be cured, so the money they spend was vain. His left hand is still paralysed and he cannot use this hand. Now he is taking medicines from Haldarvas private hospital. They have to spend around Rs. 700 to 800 per month.

Six years back Ambalal's wife was operated for Histeactomy (removal of uterus) and hospitalized for 11 days. The total hospital bill was around Rs. 7000 excluding food and accommodation of relatives.

During all this crisis he mortgaged his one bigha of land for Rs.4000 for his treatment. He released this land by paying the money he mobilised by selling one bullock for Rs.3000. He also took credit of Rs.10,000 from his elder brother with two percent interest and from brother-in-law around Rs.8000 without interest. All this amount was used for treatment and household expenses.

Above all this he sold his wife's silver bangles for Rs.3500. At this point of time he has a loan of Rs.20,000 to various persons. Due to his ill health he cannot do any work. Only his wife and elder son (15 years) are working as casual labourers and earning about Rs.20 each per day during the season. They get employment just for ten to twelve days per month.

In three vigha of land he is cultivate wheat and bajara. If the crop is good they get around 80 to 90 mann (one mann is equal to 20 kgs) of wheat. Bajra they keep

for own consumption. In the village they have government borewell from which they can get water for irrigation. But due to the scarcity of electricity and borewell being few in number about one borewell irrigates about 70 to 80 bigha of land. They are not getting enough water as and when required, which is very harmful to their crop. So they are growing grass in the farm. They are selling the wheat to a merchant who comes to the village from Ahmedabad for Rs. 50 to 60 for 20 kgs.

(CESC)

THE DILEMA OF CHOOSING BETWEEN THE DEVIL AND THE DEEP SEA

Lilaben is a forty year old lady who lives in Chandap village in Idar Taluka with her husband and children. They were farmers. Three years back she underwent Tubectomy (family planning operation) in a government hospital. The government workers had promised her a plot of land in return for undergoing the operation. But this promise was not fulfilled and all she got was Rs 200 as per the government scheme. Ever since the operation she has been continuously having gynecological problems. For 15 days she suffered from Lucoria and for 15 days she was bleeding. In the last three years she has visited many government and private clinics. There is no improvement in her condition. Doctors in the government clinics says she is fine while the private doctor is of the opinion that she has to undergo Hysterectomy (surgery to remove the uterus). Lilaben is in a state of dilemma and whose advice she has to follow. The operation would cost the family Rs 8000 to 10,000. She suspect that the private doctor is motivated to just make money.

During the last one year she has lost weight. Her health has deteriorated considerably. Expenditure for her treatment has increased. Last month she borrowed Rs 3000 from her father and Rs 100 from her brother-in-law. Her family is in better economic condition and has been able to help her. But how long can they do this?

(GVST)

HEALTH CARE SERVICES; MOUNTING COSTS: CAN THE POOR AFFORD IT -II?

Badabhai is about 60 years old. He along with his wife and children live in Chochar village in Poshina tribal area. He has been unwell for the last five years and not able to work outside to earn his livelihood.

He is suffering from T.B. His eldest son took him for treatment to Poshina (taluka headquarters) to a private hospital but the medicine was not effective. Therefore they started treatment at Lakshmipura village which is 20 kms from Chochar. He is taking medicines worth Rs 100 per week. He claims that the medicine is having some positive effect on his health. So far he has spend Rs 4000 on the treatment.

When the research team was discussing he waiting for his son to come home in the evening. He was waiting for him because his medicines had got over the previous day and only if the son comes with money he can buy the medicines. This is not the first time that he was unable to buy medicines Twice in the course of the treatment it had happened that he had to miss two days of medicines because he had no money to buy them.

(NPYM)

Health Care Services: Mounting Costs and Shrinking Options !

Kalabhai Dudhabhai Gohil heads a twelve members family in Bhatgam village near Mangrol. His family includes his wife three sons, two daughters, two daughter in laws and five grand children. They have their own house, seven vigha of land and one motor rickshaw. All the children are grown up. No body is studying except grand children. One of their son is 10th pass while other is 9th pass.

Three years back the second son was found to have a problem in the heart. He had to be operated at Civil hospital Ahmedabad. Govt gave 75% of the cost of the valve which had to be replaced by surgery. This subsidy is available to poor people who are officially identified as poor. Despite this subsidy they has to around Rs 50,000 on food accommodation, transportation and remaining 25% of the cost of the valve. They raised around Rs 7000 while for the remaining they had to take loan from other relatives without interest. They were able to repay all the loan through sale of agriculture output and daily wages.

Then just a year after, they bought a motor rickshaw for the youngest son. The father gave 15,000 from his savings, arranged Rs.40,000 from relatives without interest and the remaining Rs 30,000 he borrowed from a shopkeeper at a fixed installments of Rs. 2000 per month. Every thing was moving smoothly. Unfortunately the youngest son met with an accident and was seriously injured. He suffered injuries on the hand and head, and was bleeding from his nose profusely. He was taken to the Mangrol hospital, but he was in a very serious condition so they transferred him to Junagadh (district headquarter) to a private hospita. It was Sunday, at Mangrol an ambulance was avaiable but there was no driver. So they had to transfer him to Junagadh by a private taxi which costed Rs.200. At Junagadh the doctor took his X-ray and other reports then referred him to Rajkot to another private hospital. The patient was hospitalized and treated for ten days.

At Rajkot they paid Rs.13,000 as hospital bill. Doctor gave medicines and injections for one month which costed the family Rs. 2,400/. Then after some time when medicine was over he developed some problem so they again took him back to the same private hospital at Rajkot, where the doctor was on a foreign tour. So he was taken to government Civil Hospital, at Ahmedabad. There they stayed for three days, where some further tests were conducted for which for 2,600/- rupees had to be paid. The panchayat gave a letter of recommendation and therefore they paid only Rs 1000 for that. They came back home and will be going to the Civil hospital after a week when the report are ready and the doctor will decide about the treatment for the hand which is weak and almost paralysed.

So at this point of writing this report Kalabhai has to return around Rs 70,000 to 75,000 of loan. All the amount which was taken by Kalabhai was without interest except the installment he has to pay for the rickshaw to the shop keeper. The oldest son is looking after the agriculture. Middle one is a heart patient, so he is unable to do hard work. Still he is involved some local level fish trade. This gives him work for only six months during the season. The youngest is unable to drive the rickshaw. So they have given the rickshaw to a driver to whom they are paying a salary of Rs 1500. So from the income of Rickshaw they are paying Rs. 2000 as installment and Rs.1500 to driver as salary. At times the income is less than Rs 3500, they have to give from there daily wages. Kalabhai is working with a tractor owner for land leveling and gets Rs 70 to 80 rupees per day by working for 13 hours of the day. i.e morning 7 a.m to night 8.p.m. Females of the house do not working outside the house. They have their own land. They cultivate groundnut, but it is totally dependent on rain. They have a well but it is dry. He said that they pay Rs 80 to male and Rs 50 female laboueres per day during full season as agriculture wage and Rs 40 for male and Rs 30 for female per day during off season.

(GKSK)

PART III : SUMMARY AND RECOMMENDATIONS

CHAPTER VIII

SUMMARY FINDINGS AND INTERPRETATION

From the four rounds of monitoring of living conditions of the poor under SAP regime through household survey, PRAs and case studies the following issues have emerged. These summary interpretation are based on the results presented in part II of the report, which were contextualised with the theoretical exposition on elements of SAP in Part I.

At the outset it is to be noted that the sample households for the study consisted of urban slum dwellers, rural population and tribals. As expected the living conditions and resource endowments would vary across these sections. So are the characteristics of these groups with respect to type of occupation, consumption and utilization and access to various services like education, health and public distribution system.

Increasing number of women are coming into work in urban areas during the past three years. But many of the are entering into urban informal sector which does not follow fair labour practices. In the pottery work women work but in the case of slum dwellers of Ahmedabad women do not work outside. Only about 40 per cent of our sample households presently work in textile mills. The rest are engaged in various kinds of occupations. But the revealing point here is the decline in real wages among textile workers and near stagnancy in real wages in the urban informal sector and among pottery workers. Construction has witnessed some rise in real wages, but the rise was not adequate going by the trends in other sectors. The reasons for this stagnancy in both textile and pottery industries are mainly, closing down or lay off of factories and low capacity utilization resulting in lower labour use. These two can be seen as direct fall out of SAP policies which have helped the owners in indiscriminately taking such actions. It is observed by many reports that, in pottery industry work is continuing just to ensure that the land and premises are not occupied by others. The data on the loss of job and reasons for the same, testify the fact that it is the urban traditional manufacturing sector workers who are the victims of SAP related industrial policy changes.

One important feature observed in the urban employment scenario, is total neglect of implementation of labour laws in the factories, like minimum wages, accident relief, provision of health, compensation etc. According to the participating NGOs, who are in constant touch with the labour department regarding the workers rights, there is an element of complacency among the labour department staff, who often observe that their role is going to be minimal in the coming years due to the liberalisation process. This is a matter of serious concern, as many NGOs have apprehended of this situation, when SAP was introduced in 1991. Role of the government in safeguarding the interests of the poor is relegated to secondary position after the liberalisation. The same is true with respect to availability of services like health and education in rural and urban areas, which we shall

This has affected employment situation in rural areas. An analysis of cropping pattern reveals that there is, in a limited extent, introduction of new crops in the rural areas, which could be due to the market potential of certain crops. We do not see any dramatic changes in cropping pattern, but a gradual shift towards more valuable crops compared to the earlier food crops. But this is not leaving farmers with better surpluses. The net profit from cultivating crops (food and non food) seems to be low and often negative compared to any other occupations, except perhaps, cotton and ground nut which are in any case high input cost crops, which are grown in Junagadh and Kutch areas. The reasons for this are many. Farmers argue that there has been an increase in cost of inputs due to rise in prices of fertilizers and pesticides over the past three years. Not only that, the wage rates have gone up for certain crop operations which has increase the cost of cultivation. Water availability is another factor for not opting for cash crops.

In sum, for many small and marginal farmers, cultivation is yet another occupation, with low returns, but they do continue it as it is the tradition of the family. The farm by-products would often compensate the low levels of production and returns. Most of the small farmers produce subsistence crops like, Bajri and Maize for self consumption which ensures food security.

Food consumption is one of the important aspect of livelihood systems. A decline is witnessed in the average monthly food grain consumption during the four rounds of the study. The decline in some areas is quite steep and in some areas it is somewhat less. Lack of purchasing power due to decline in employment opportunities and wages could be the main reasons for this decline. With the inflation rate measured by the whole sale price index, for the most part of the period under study, at over 10 per cent, there could be little surprise to witness the decline in aggregate consumption of food grains at the family level. It is not difficult to visualize at this juncture that, this situation puts women and girl children in more vulnerable position with respect to food intake.

Most of the rural and urban households purchase food grains and other commodities from local private shops and not from government run ration shops, which were supposed to provide food grains at a cheaper rate. The data shows that in many rural areas ration shops are not available and they encounter host of other problems related to these shops like, irregularity in supply, unreliable timings, corruption etc. The other reason for the decline in purchase from ration shops, at the aggregate level, could be due to the fact that there has been very little difference in terms of price, between ration shop food grains and open market food grains. The price rise of ration shop food grains, uniformly across all varieties of rice and wheat, has certainly put the rural poor consumer in a disadvantageous position. The decline the practice of wage payment in kind (grains) for agriculture labour, for harvesting operations, has further reduced the food security of these poorest sections of the laboring class.

This depressing situation with respect to employment, wage and agriculture has resulted in an increase in number of households taking loans for household purposes. Analysis of data

on credit needs and sources, revealed that there is an increasing dependency on informal sectors but a decrease in dependency on intra family sources for credit, which are often for household consumption purposes. There is very limited access to formal sector credit among the families surveyed which shows that these sectors were not touched by the formal banking operations. But where ever there is incidence of formal sector credit, especially in tribal area, which has special schemes for development, it was for income generation purposes. Surprisingly the urban population had no access to formal sector credit. In rural areas, there is an overall decline in number of loans taken over the past two year period, but the incidence of loans taken for health purposes and for household purposes has increased, which shows that households are not in a position to meet their consumption demand and are in vulnerable stage with respect to health.

Most of the ailments reported being minor, reflect the general poor state of living conditions of the poor communities. But incidence of TB, other occupational diseases reflect that there is very little concern with respect to occupational diseases. Expenditure on minor ailments has increased in all access. In some of the major ailments the expenditure goes up to 10 to 35 thousand. In such cases the family dependent on all assets to mobilize money for meeting the expenses. Poor people have very little access to government health care in rural areas. But due to a variety of reasons. The situation with respect to utilization of government health care in urban areas is relatively better, mainly due to the treatment available for workers of pottery and textile industries in government hospitals for their occupational diseases and in general provision of health care to the members of their families in government hospitals. But many urban households reported that they lack confidence in health care systems of the government and hence resort to private clinics. Over 90 per cent of tribals resort to private treatment. Non availability of facilities, lack of medicines, transport problems and etc prohibits rural people from accessing government health care. With the rise in cost of treatment and medicines, increasingly, households are incurring high cost to health purposes.

On the average, about one third of the expenditure on health was met by households resorting to credit which has seen an increasing trend over the four rounds period. Similarly, the incidence of households completely depending on credit for treatment has increased in all the areas. It is to be noted that the types of illnesses for which high expenditure is required has increased over the period, reflecting the fact the poor people are prone to lethal diseases.

The decline in health status of the people, with respect to their inability to meet the rising costs of treatment and their resorting to credit is an indirect outcome of the SAP policies. The direct linkage in terms of rise in drug prices and cost of treatment is documented in various reports and publications. But what is most disturbing is the inability of the households to meet the expenditure due to lack of employment and decline in wages. This would reduce the ability of the people to work as their health deteriorates unless they get treatment in time. This coupled with the fact that there is a overall decline in average consumption of food grains complete the depressing nature of living conditions of the poor under the SAP regime.

CHAPTER IX

POLICY RECOMMENDATIONS

Based on the empirical evidences, subsequent interpretations and deliberations with the NGOs on the strategies for rectifying the situation, the following policy recommendations are put together which would help in administering mid way corrections to the present policy regime. The present economic and political scenario provides an excellent opportunity for the policy makers to introduce human face to the SAP policies.

From the data, it can be concluded that urban workers are the most vulnerable sections, and are affected by the SAP policies during the two and half years.

- * With respect to employment, there is a need to address urban employment situation and work conditions. Ensuring implementation of labour laws and policy changes with respect to closure and retrenchment of workers needs to be addressed in the light of the hardships faced by the workers.
- * Government needs to address the issue of ensuring minimum wages and work conditions in the urban informal sector, construction and other services, where workers, mainly women are exploited the most.
- * Adequate protection measures are necessary with regard to reabsorption, re-training and rehabilitation of workers who were laid off due to closure of industrial units in urban areas.
- * In rural areas, there is a need to develop agriculture sector, in terms of government investments and credit support. Implementation of minimum wages is one important issue that needs attention.
- * Support to non agriculture activities would be an important task which would help improving income of landless and other self employed sections.
- * Changes in agriculture pattern and reduction in overall consumption of food grains is an issue that needs attention. Ensuring food grains at cheaper rates was to be one strategy, which would ensure food security. But the price rise in PDS shops has neutralized these gains. Agriculture labour and other laboring class needs protection from hunger, through a well targeted PDS.
- * The increase in cost of health care expenditure, has been forcing people to seek credit for health case. This issues needs immediate attention. Adequate provision of medical facilities in rural areas and credit support mechanisms for health purposes (eg. health insurance) are needed to support the poor. Perhaps a decentralized health insurance

can be widely promoted.

- * Occupational health is one area, which needs attention in urban areas, where workers are exposed to hazardous working conditions. Adequate safety mechanisms are necessary to ensure this.
- * Special attention need to be taken up to control communicable disease like T.B. as rural poor people suffer most and spend maximum on such disease.

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APPENDIX

TABLE 1

PATTERN OF EMPLOYMENT AMONG AHMEDABAD SLUM (POTTERY) HOUSEHOLDS

Sectors	Male				Female				Total			
	April 94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95
Manufacturing	45.77	48.36	47.00	44.95	40.26	42.21	37.79	39.89	86.03	90.57	84.79	84.84
Construction	0.54	4.10	6.45	5.55	2.54	2.87	4.15	6.06	3.08	6.97	10.60	11.61
Trade	0.43	-	-	0.51	-	-	-	0.0	0.43	-	-	0.51
Services	3.39	1.64	2.65	2.02	0.43	0.41	-	0.51	3.82	2.05	2.65	2.53
Others	0.86	0.41	2.30	0.51	-	-	0.46	0.0	0.68	0.41	2.76	0.51
Total	134 (56.78)	133 (54.51)	125 (57.60)	106 (53.54)	102 (43.22)	111 (45.49)	92 (42.40)	92 (46.46)	236 (100)	244 (100)	217 (100)	198 (100)

Notes:

- (i) Others in this group include those engaged in transportation and repair services.
- (ii) Services include services and personal services included in 90,91, 92, 93, 94, 96 groups in National Industrial classification 1970.
- (iii) Figures are percentages to total, Total = 100
- (iv) Figures includes all employed in a specific activity for more than 20 days in a month.
- (v) There was no one engaged in trade during Dec '94 and May '95.

TABLE 2

PATTERN OF EMPLOYMENT AMONG AHMEDABAD SLUM DWELLERS

Sectors	Male				Female				Total			
	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May. 95	Dec 95
Manufacturing	21.5	46.6	45.3	46.4	0.4	5.0	5.3	4.7	21.9	51.6	50.7	51.2
(a) Textile	16.2	22.9	18.3	22.4	0.4	0.7	1.7	1.4	16.6	23.6	20.0	23.7
(b) Others	5.3	23.6	27.0	24.4	0.0	4.3	3.6	3.4	5.3	27.9	30.7	27.8
Construction	6.0	10.0	9.0	12.9	-	3.6	3.33	2.4	6.0	13.6	12.3	15.2
Trade	10.6	13.6	14.0	13.2	0.4	2.2	3.00	0.7	11.0	15.8	17.0	13.9
Services	47.5	3.2	5.3	8.1	1.1	1.1	1.00	0.3	48.7	4.1	6.3	8.5
Others	10.9	13.3	12.7	9.1	1.1	1.4	1.00	2.0	12.2	14.7	13.7	11.2
Total	257 (97.0)	242 (86.7)	259 (86.3)	265 (89.8)	8 (3.0)	37 (13.3)	41 (13.7)	30 (10.2)	265 (100)	279 (100)	300 (100)	295 (100)

Notes :

- (i) In April 94 others include those employed in transportation banking and legal services hotel and restaurants, repair services and those who could not specify their activity.
- (ii) Services include all activities services and personal services which come under code 90, 91, 92, 93, 94 and 96 of National industrial classification 1970.
- (iii) Figures are percentages to total and total = 100
- (iv) Others include repair services and those engaged in transportation.
- (v) In April 1994 a large section reported service while they are working in manufacturing (It is an problem of understanding of concept service). This issue was classified in the subsequent rounds.

TABLE 3

PATTERN OF EMPLOYMENTEDABAD RURAL (%)

Sectors	Males				Females				Total			
	Apr 94	Dec 94	May 95	Dec 95	Apr 94	Dec 95	May 95	Dec 95	Apr 94	Dec 95	May 95	Dec 95
Farmers	27.42	20.15	21.99	35.21	1.12	0.37	0.65	2.69	28.54	20.52	22.63	37.88
Agricultural Labour	17.54	15.04	1.30	25.00	5.41	3.73	0.49	4.57	22.95	19.77	1.79	29.57
Livestock	6.18	5.22	3.09	3.49	22.95	31.53	39.58	0.27	29.13	36.75	42.67	3.76
Manufacturing (NHH)	6.34	8.95	6.19	12.10	0.37	0.37	0.00	0.54	6.71	9.33	6.19	12.64
Construction	2.05	5.78	18.08	4.03	0.19	0.37	2.44	1.07	2.24	6.15	20.52	5.10
Services	3.36	3.36	2.11	2.42	0.19	0.19	0.49	0.81	3.55	3.55	2.60	3.23
Others	2.43	1.68	3.42	7.53	0.37	0.75	0.16	0.27	2.80	3.43	3.58	7.80
Total	346 (64.31)	336 (62.69)	345 (56.19)	334 (89.78)	192 (35.69)	200 (37.31)	269 (43.81)	38 (10.22)	538 (100)	536 (100)	614 (100)	372 (100)

- Notes : (i) Others include those engaged in forestry, logging, trade and transport.
(ii) Service include all services which come under code 90-96 of NIC 70.
(iii) Non household manufacturing include work in food processing, textile, chemicals, ceramics and miscellaneous industry.
(iv) Male + Female = Total and Total = 100, (Figures are percentages to total)
(v) The figures include children below 14 years and persons above 59 who are employed.

TABLE 4
PATTERN OF EMPLOYMENT IN KUTCH RURAL

Sector	Male				Female				Total			
	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May 95	Dec. 95	April 94	Dec. 94	May 95	Dec. 95
Farmers	18.4	16.4	18.6	14.86	2.4	2.3	1.1	1.24	20.8	18.7	19.7	16.10
Agri Labourers	19.0	23	18.2	61.61	8.8	10.0	12.8	5.26	27.8	33.0	31.0	66.687
Live Stock	1.4	1.4	1.1	0.62	5.3	5.3	0.4	0.0	6.7	6.7	1.5	0.62
Household Manufacturing	1.2	1.2	2.4	0.93	2.0	2.1	1.9	0.93	3.2	3.3	4.3	1.84
Construction	9.8	8.2	7.0	1.24	5.5	4.3	3.2	0.0	15.3	12.5	10.2	1.24
Trade	3.9	4.1	3.8	4.33	0.6	0.6	0.00	0.0	4.5	4.7	3.8	4.33
Transport	2.0	1.9	2.1	0.62	0.0	0.0	0.00	0.0	2.0	1.9	2.1	0.62
Services	9.6	10.5	9.0	8.05	0.6	0.6	0.6	0.31	10.2	11.1	9.6	8.36
Others	8.8	7.6	16.6	-	0.2	0.2	1.1	-	9.0	7.8	17.7	-
Total	364 (74.4)	382 (74.6)	369 (78.8)	298 (92.26)	125 (25.6)	130 (25.4)	99 (21.2)	25 (7.71)	489 (100)	512 (100)	468 (100)	323 (100)

Notes :

- (i) Household Manufacturing include cotton spinning in the house and maltress making.
- (ii) Others include those engaged in work in hotel and restaurant and repair services and other services.
- (iii) Figure are percentages to total and total = 100

TABLE 5

PATTERN OF EMPLOYMENT IN SABARKANTHA RURAL (3)

Sectors	Male				Female				Total			
	Apri94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95
Farmers	23.9	28.2	25.3	29.1	4.2	14.2	10.0	4.3	28.1	42.4	35.3	33.4
Agricultural Labourers	33.5	18.6	17.7	16.8	25.6	16.5	13.9	17.6	59.1	35.1	31.6	34.4
Livestock	1.3	1.8	1.7	2.5	0.2	1.2	1.5	4.4	1.0	2.8	3.2	7.0
Stone Quarrying	0.4	0.6	0.6	0.0	0.4	0.2	0.2	0.0	0.9	0.8	0.8	0.0
Manufacturing	0.0	0.0	3.9	3.0	0.0	0.0	0.5	0.3	0.0	0.0	4.4	3.4
Construction	0.8	3.8	5.9	9.2	0.1	3.4	6.1	3.9	0.9	7.2	12.0	13.1
Services	4.9	3.3	3.3	3.6	0.4	0.9	0.9	0.6	5.4	3.0	4.2	4.3
Others	3.0	5.2	10.9	3.4	1.1	2.1	2.5	1.0	4.0	8.5	13.4	4.4
Total	454 (68.0)	519 (61.3)	546 (64.8)	583 (67.6)	214 (32.0)	327 (38.7)	296 (35.2)	279 (32.4)	668 (100)	846 (100)	842 (100)	862 (100)

- Notes : (i) Others in Sabarkantha rural includes those engaged in Household industry and transportation.
(ii) Household industry includes carpet making jewellery making and those involved in traditional crafts.
(iii) Services include services and personal services includes in code 90, 91, 92, 93, 94, 95 and 96 of National Industrial clarification 1970.
(vi) Manufacturing includes those working in food processing, textile, industry, chemical and jewellery making for male work in and embroidery and lac making for females.
(v) Male + Female = total and total = 100. Figures are percentage to total.

TABLE 6
PATTERN OF EMPLOYMENT IN JUNAGADH RURAL (%)

Sectors	Male				Female				Total			
	April 94	Dec.94	May 95	Dec 95	April 94	Dec. 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95
Farmers	3.61	2.72	3.85	2.70	2.89	1.13	2.94	2.70	6.50	3.85	6.79	5.40
Agri labour	40.24	26.02	18.55	31.70	31.08	24.89	20.36	27.76	71.32	50.90	38.91	59.46
Livestock	0.24	0.23	0.23	0.0	0.48	0.23	0.0	0.0	0.72	0.45	0.23	0.0
Fishery	0.24	0.90	0.0	1.72	0.00	0.00	0.0	0.0	0.24	0.90	0.0	1.72
Constructi on	8.68	18.78	24.66	14.74	0.96	9.73	15.84	5.65	9.64	28.51	40.50	20.39
Services	3.38	2.94	2.71	2.95	1.20	0.44	0.23	0.25	4.58	3.38	2.94	3.20
Others	4.09	8.15	6.10	7.86	2.88	3.84	4.52	2.22	6.97	12.00	10.63	9.83
Total	251 (60.48)	264 (59.73)	248 (56.11)	251 (61.67)	164 (39.52)	178 (40.27)	194 (43.89)	156 (38.33)	415 (100)	442 (100)	442 (100)	407 (100)

Notes :

- (i) In Junagadh Rural others in Sept. 93, April 94 and Dec. 94 include household industry, transport, trade and stone quarrying, stone quarrying accounted for about 2.5% employment in December 95. Manufacturing in Households include textile where it is monthly embroidery and lace making and jewellery making.
- (ii) Services and personal services includes activities which come under code 90, 91, 92, 93, 94 , 95 and 96 of National Industrial classification 1970.
- (iii) Male + Female = Total and Total = 100. Figures are percentages to total.

TABLE 7

PATTERN OF EMPLOYMENT IN SABARKANTHA TRIBAL (%)

Sectors	Male				Female				Total			
	April 94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95	April 94	Dec 94	May 95	Dec 95
Farmers	57.51	42.35	31.91	36.97	3.76	16.81	2.29	3.19	61.27	59.20	34.20	40.16
Agri Labourers	16.47	1.85	12.44	5.88	10.11	1.51	17.02	4.54	26.58	3.36	29.46	10.42
Livestock	1.73	8.24	8.84	14.12	2.02	14.62	14.24	17.99	3.75	22.86	23.08	32.11
Mining and quarrying	2.31	1.51	2.78	2.86	0.00	1.01	2.45	0.84	2.31	2.52	5.24	3.70
Construction	0.58	5.38	4.42	6.05	0.29	3.19	1.47	5.21	0.87	8.57	5.89	11.26
Services	1.73	1.51	0.65	1.34	0.87	0.17	0.16	0.67	2.60	1.68	0.81	2.01
Others	1.73	0.34	0.66	0.34	0.87	1.51	0.66	0.00	2.60	1.85	1.32	0.34
Total	284 (82.1)	364 (61.2)	377 (61.7)	402 (67.56)	62 (17.62)	231 (38.82)	234 (38.30)	193 (32.4 4)	346 (100.0 0)	595 (100.0 0)	611 (100.0 0)	595 (100.0)

Note :

- (i) Others include those engaged in forestry, plantation and trade and repair services.
- (ii) Services include all activities included under code 90-96 of NIC 70.
- (iii) Male + Female = Total and Total = 100. Figures are percentages to total.

TABLE 8
EXTENT OF CHILD LABOUR (%)

Groups	April 94			December 94			May 95			December 95		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Ahmedabad Slum (Pottery)	0.00	5.55	2.50	3.00	16.00	9.00	4.35	6.52	5.22	4.92	14.0	9.01
Ahmedabad Slum	1.14	0.00	0.57	2.00	0.00	1.00	1.92	1.80	1.86	1.92	3.51	2.75
Ahmedabad Rural	8.72	4.90	7.28	12.50	15.00	13.50	14.48	8.94	11.94	11.66	3.67	9.16
Kutch Rural	9.5	9.4	9.3	2.0	5.1	3.8	4.4	4.9	4.6	1.84	0.64	1.25
Sabarkantha Rural	3.30	6.90	3.53	7.00	16.00	11.00	10.29	12.88	11.54	12.85	10.39	11.71
Junagadh Rural	2.41	14.80	3.25	5.00	5.00	5.00	4.35	11.27	7.36	5.62	13.43	8.97
Sabarkantha Tribal	3.53	6.21	4.76	42.00	57.00	54.00	28.57	48.70	37.61	39.44	53.04	45.56

Notes :

- (i) Child labour gives the no. of children in the age group 6-14 years who are working as a proportion of total number of children in this age group. These figures are percentage.
- (ii) Extent child labour among male and female children has been calculated seperately.

TABLE 9

TRENDS IN IRRIGATED LAND

Groups	Irrigated Land (%)				Non Irrigated Land (%)			
	Apr 94	Dec 94	May 95	Dec 95	Apr 94	Dec 94	May 95	Dec 95
Ahmedabad Rural	52.5	50.4	51.1	40.7	47.5	49.6	48.9	59.3
Kutch Rural	23.3	22.8	26.7	22.4	76.7	77.2	73.3	78.2
Sabarkantha Rural	63.4	77.5	78.9	79.5	36.6	22.5	20.3	11.5
Junagadh Rural	6.0	23.0	11.8	35.3	94.0	77.0	88.2	64.7
Sabarkantha Tribal	44.0	50.8	52.5	51.1	56.0	49.2	47.5	49.9

Notes:

- (i) Irrigated + Nonirrigated = total agricultural land.
- (ii) Non irrigated land also includes land which have not been cultivated for a long time.

TABLE 10

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) AHMEDABAD SLUM (POTTERY WORKERS)

Item	April 94		December 94		May 95		December 95	
	PDS	Local Shop	PDS	Local Shop	PDS	Local Shop	PDS	Local Shop
Rice	10.80	11.10	8.76	10.93	7.17	9.1	6.48	9.26
Wheat	15.70	29.20	30.00	23.37	10.67	31.23	11.67	26.75
Jawar	-	10.00	-	-	-	30.00	-	-
Bajari	-	24.10	-	19.55	-	28.72	-	15.86
Maize	-	5.00	-	-	-	-	-	-
Pulses	-	4.80	-	4.14	-	3.78	-	3.55
Kerosene (in Liters)	8.60	6.30	10.10	9.52	13.33	10.16	10.91	9.69
Groundnut	-	5.10	3.00	4.34	-	4.03	-	4.93
Sugar	2.60	5.10	1.30	6.54	3.43	3.50	2.6	3.67

Table 11

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) AHMEDABAD SLUM

Item	April 94		December 94		May 95		December 95	
	PDS	Local Shop	PDS	Local Shop	PDS	Local Shop	PDS	Local Shop
Rice	5.76	14.16	8.38	11.40	6.61	11.80	10.50	12.61
Wheat	20.52	36.42	-	43.17	13.13	42.96	20.00	41.96
Jawar	1.98	4.38	-	-	-	-	-	-
Bajari	4.98	6.36	-	8.64	-	15.00	-	11.67
Maize	4.98	5.16	-	4.00	-	-	-	-
Pulses	6.12	6.66	-	5.23	-	4.60	-	4.36
Kerosene (in Liters)	17.82	13.80	19.19	12.08	19.57	12.28	19.87	11.68
Groundnut	4.62	5.94	2.80	4.83	1.20	4.71	1.8	4.48
Sugar	3.18	3.66	2.14	4.56	2.48	5.18	2.38	3.45

TABLE 12

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) AHMEDABAD RURAL

Item	April 94			December 94			May 95			December 95		
	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer
Rice	6.77	10.29	56.25	12.35	27.36	13.75	5.75	19.69	25.00	3.49	22.82	31.55
Wheat	15.32	25.45	72.50	17.00	15.23	-	12.41	26.73	30.00	11.78	39.17	12.50
Jawar	-	15.63	-	-	40.00	-	-	80.00	-	-	-	-
Bajari	-	26.91	171.00	16.67	38.10	10.00	15.00	37.44	15.00	-	43.02	37.63
Maize	-	-	-	2.27	4.33	-	-	20.00	-	-	-	-
Pulses	1.00	1.76	-	-	-	-	2.00	2.02	-	-	1.91	-
Kerosene (in Liters)	5.10	2.20	-	2.00	2.59	-	6.25	4.84	-	5.04	3.00	-
Groundnut	2.57	2.00	-	5.81	5.55	-	2.00	2.58	-	-	2.69	-
Sugar	1.85	4.85	-	1.00	2.67	-	2.18	4.61	-	2.06	4.97	-

TABLE 13

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) KUTCH - RURAL

Item	April 94			December 94			May 95			December 95		
	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer
Rice	25.81	53.39	100	7.52	14.46	-	2.65	13.75	-	3.13	9.77	-
Wheat	55.27	144.50	107.76	13.39	28.42	35.00	12.40	27.22	22.50	11.98	34.58	-
Jawar	-	62.50	65.00	-	30.00	-	-	8.50	10.00	-	-	-
Bajari	-	176.63	117.02	-	37.87	31.75	-	27.94	42.50	-	27.37	-
Maize	-	40.00	-	-	-	-	-	13.33	8.00	-	-	-
Pulses	-	31.81	-	5.00	7.22	8.25	-	9.75	10.00	-	6.37	-
Kerosene (in Liters)	32.03	-	-	6.75	-	-	7.00	15.00	-	6.01	5.0	-
Groundnut	6.86	20.19	-	0.97	4.01	-	1.08	3.55	-	1.70	5.85	-
Sugar	14.81	32.97	-	2.56	10.68	4.00	2.97	7.84	-	2.28	4.28	-

TABLE 14

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) SABARKANTHA RURAL

Item	April 94			December 94			May 95			December 95		
	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer
Rice	1.07	1.29	0.33	3.25	4.72	-	3.59	3.51	-	4.77	4.43	3.0
Wheat	9.00	18.13	10.55	12.51	30.84	30.04	10.28	27.00	29.23	9.97	11.73	22.0
Jawar	-	-	-	-	6.75	-	-	5.00	-	-	5.00	4.8
Bajari	5.14	3.38	-	5.00	13.56	10.63	-	9.74	10.00	-	5.72	7.6
Maize	2.18	10.55	3.33	8.75	29.46	22.80	-	22.56	22.94	-	9.38	21.0
Pulses	1.57	1.16	0.92	2.75	2.54	6.50	5.00	2.07	-	2.00	2.26	2.6
Kerosene (in Liters)	1.75	3.08	0.42	4.94	5.19	-	5.1	5.59	-	5.82	5.18	8.3
Groundnut	0.28	0.88	0.33	1.78	2.11	2.00	1.49	2.17	-	2.00	2.12	3.2
Sugar	0.78	0.96	0.50	2.27	2.83	11.00	2.23	2.81	-	2.56	2.42	2.0

TABLE 15

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) JUNAGADH RURAL

Item	April 94			December 94			May 95			December 95		
	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer
Rice	2.37	1.69	-	2.91	3.59	-	2.83	2.20	-	3.13	2.44	-
Wheat	9.55	9.59	-	12.57	26.61	15.00	13.00	19.69	23.27	11.75	17.36	-
Jawar	-	-	-	-	40.00	-	-	-	49.00	-	-	32.55
Bajari	-	11.30	-	-	38.09	-	-	24.09	20.00	-	21.56	-
Moize	-	0.83	-	-	-	-	-	1.79	-	-	-	-
Pulses	-	0.58	0.52	-	4.44	-	8.85	6.18	-	-	2.19	-
Kerosene (in Liters)	3.87	1.53	-	6.90	7.18	-	-	-	-	8.87	5.73	-
Groundnut	1.02	1.75	-	1.36	3.93	-	1.09	3.51	-	1.97	2.53	-
Sugar	2.29	1.59	-	2.66	4.03	-	2.58	2.77	-	2.53	2.65	-

TABLE 16

COMMODITIES CONSUMED FOR HOUSEHOLDS PER MONTH (in kgs.) SABARKANTHA - TRIABL

Item	April 94			December 94			May 95			December 95		
	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer	PDS	Local Shop	Employer
Rice	2.56	1.55	-	5.13	4.23	-	13.64	9.28	-	5.59	3.00	-
Wheat	9.00	10.73	8.89	36.73	39.63	20.00	38.33	32.23	12.00	32.46	25.77	-
Jawar	10.00	16.94	-	-	26.67	-	40.00	-	-	-	-	-
Bajari	-	19.17	10.00	-	-	-	-	-	-	-	-	-
Maize	3.33	9.63	10.00	-	39.97	20.00	-	21.46	-	40.00	34.39	-
Pulses	-	1.67	-	-	3.00	-	-	-	-	3.00	-	-
Kerosene (in Liters)	1.71	1.79	-	3.31	2.59	-	3.32	2.53	-	4.03	2.5	-
Groundnut	1.92	1.23	-	1.31	1.24	-	1.43	1.46	-	2.00	1.44	-
Sugar	1.81	1.67	-	2.01	2.21	-	2.46	2.23	-	2.38	1.37	-

TABLE 17
SOURCES OF CREDIT

Groups	April 94				December 94				May 95				Dece. 95			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Ahmedabad Slum (Pottery)	45.6	54.4	-	-	61.9	38.1	-	-	65.4	32.7	1.9	-	89.1	10.9	-	-
Ahmedabad Slum	40.9	28.4	28.4	2.3	14.0	82.8	1.6	1.6	48.1	50.9	-	0.9	73.5	25.3	-	1.2
Ahmedabad Rural	25.9	66.4	2.1	5.6	33.9	58.7	4.6	2.8	50.0	45.7	1.7	2.6	53.6	40.2	5.2	1
Kutch Rural	59.2	34.5	5.7	0.6	35.1	43.8	19.7	1.4	29.8	61.78	7.85	0.52	22.2	66.7	11.1	-
abarkantha Rural	83.2	9.9	5.3	1.5	39.3	34.4	26.2	-	38.1	50.4	11.4	-	55.8	34.8	9.4	-
Junagadh Rural	41.0	45.9	6.5	6.6	33.9	45.8	16.9	3.4	52.3	43.2	4.5	-	70.8	29.2	-	-
Sabarkantha Tribal	35.9	60.7	-	3.4	35.3	61.0	2.8	0.9	32.0	68.0	-	-	67.2	26.7	6.1	-

Notes :

- (i) 1=Informal, 2=Intra Family, 3=Formal, 4=Others.
- (ii) Figures are percentages.
- (iii) The figures give the share of each source of credit in the total number of loans taken by each group of households.

TABLE 18
VALUE RANGE OF BORROWING

Groups	April 94					December 94					May 95					December 95				
	<200 0	2001 -500 0	5001 -100 00	1000 1- 1500 0	>150 01	<200 0	2001 -500 0	5001 -100 00	1000 1- 1500 0	>150 00	<200 0	2001 -500 0	5001 -100 00	1000 1- 1500 0	>150 00	<200 0	2001 -500 0	5001 -100 00	1000 1- 1500 0	>15 001
Ahmedabad Slum (Pottery)	46.4	35.0	13.1	2.1	3.1	59.3	25.4	11.9	1.7	1.7	50.0	30.8	9.6	3.8	5.8	60.9	36.9	13.0	6.5	-
Ahmedabad Slum	43.3	18.6	23.7	6.2	8.2	26.6	29.7	18.7	9.4	15.7	29.2	35.8	22.6	5.7	6.6	44.6	27.7	13.2	4.8	9.6
Ahmedabad Rural	67.1	21.0	8.4	0.7	2.8	72.5	22.9	4.6	-	-	72.4	16.4	6.9	2.6	1.7	60.8	23.7	14.4	-	1.0
Kutch Rural	49.2	21.2	16.8	3.9	8.9	26.5	23.6	15.9	7.7	16.4	23.6	35.6	4.6	3.1	13.1	30.6	44.4	16.7	2.8	5.5
Sabarkantha Rural	38.2	20.6	19.1	4.6	17.6	35.2	34.8	22.4	2.5	4.1	41.5	25.0	4.2	3.8	5.5	66.8	18.2	10.5	2.8	1.6
Junagadh Rural	60.7	27.9	9.8	1.6	-	55.9	35.6	1.7	3.4	3.4	68.2	26.1	5.7	-	-	64.6	27.7	7.7	-	-
Sabarkantha Tribal	88.0	10.2	0.9	0.9	-	98.2	0.9	0.9	-	-	94.2	5.2	0.6	0.6	-	96.2	3.0	0.8	-	-

Note :

(1) Figure are percentages to total borrowing in each area.

TABLE 19

REASONS FOR TAKING LOAN

Group	April 94					December 94					May 95									
	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
Ahmedabad Slum (Pottery)	49.5	28.9	1.0	18.6	2.1	49.2	28.0	1.7	17.8	3.4	48.1	34.6	-	17.3	-	58.7	19.6	-	21.7	-
Ahmedabad Slum	35.1	26.8	9.3	28.9	-	9.4	23.4	28.4	20.3	18.8	22.6	49.1	10.4	15.1	2.8	30.1	34.9	20.5	14.5	-
Ahmedabad Rural	60.1	12.6	18.9	7.0	1.4	48.6	8.3	22.9	15.6	4.6	32.8	19.8	21.6	25.0	0.9	38.1	15.5	13.4	27.8	5.1
Kutch Rural	66.3	9.6	12.4	10.1	1.7	37.1	5.3	37.0	13.9	6.7	32.5	16.2	28.8	19.4	3.1	38.9	25.0	16.7	19.4	-
Sabarkantha Rural	21.9	32.5	21.1	21.9	2.4	11.9	15.6	46.7	15.6	10.2	13.6	31.4	22.9	31.4	0.7	17.1	7.7	33.7	41.4	-
Junagadh Rural	55.7	19.7	9.8	11.5	3.3	16.9	18.6	11.9	16.9	35.6	36.4	31.8	13.6	15.9	2.3	64.6	7.7	9.2	18.5	-
Sabarkantha Tribal	42.7	15.4 0	29.1	10.3	2.6	25.2	3.7	56.7	10.1	4.6	14.7	40.7	27.3	15.7	1.7	26.7	4.6	56.5	-	-

- Notes: (i) 1 = Household expenditure, 2 = Expenditure on Special occasions, 3 = Income Generation, 4 = Health, 5 = Others (other include repayment of debt, and house purchase).
- (ii) Figures give loans taken for each purpose as a proportion of total number of loans taken. The figures are percentage.
- (iii) Reference Period for the first round is one year and six months for the other rounds.

TABLE 20

ILLNESS PREVALENT AMONG THE GROUPS

Type of Illness	April 94						December 94						May 95						December 95					
	Urban		Rural		Tribal		Urban		Rural		Tribal		Urban		Rural		Tribal		Urban		Rural		Tribal	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Fever, Cold, Cough & Malaria	42.2	46.1	44.3	42.9	72.5	69.0	57.2	66.7	56.3	52.1	74.6	80.0	39.6	43.2	40.0	32.2	66.1	6.9	46.1	37.0	41.8	46.2	84.0	80.0
Respiratory	8.1	2.6	6.7	2.5	3.7	-	21.4	12.7	12.6	8.7	1.6	1.9	15.4	8.8	14.4	11.5	9.3	2.1	13.5	14.8	14.1	23.1	2.0	2.4
Stomach Related	18.5	11.3	19.5	17.2	11.0	12.4	7.6	8.7	8.3	7.6	15.9	15.5	10.2	11.8	27.6	6.9	11.9	14.3	22.5	13.6	18.2	9.5	8.0	10.4
Reproduction	0.7	2.6	1.4	10.6	0.92	3.9	0.7	3.9	0.43	7.2	-	-	-	2.3	0.8	12.6	-	-	-	9.9	-	4.5	-	1.6
Skin	4.4	0.86	5.3	2.7	6.4	4.6	3.4	-	5.2	3.7	4.8	1.9	1.9	2.8	8.2	9.1	5.3	4.1	1.1	1.2	2.5	0.8	1.0	1.6
Ache and Pain	5.9	4.3	6.0	7.9	0.9	3.9	0.7	4.8	4.1	5.0	0.8	-	8.3	7.8	3.2	8.0	0.8	2.1	4.5	11.1	6.5	4.9	-	-
Heart related	9.6	6.1	6.5	6.9	1.8	1.5	3.4	1.6	1.7	2.6	-	-	3.3	2.5	-	4.6	-	-	1.1	4.9	2.9	2.0	-	-
Others	10.4	26.1	10.1	9.3	2.7	4.6	8.1	1.6	11.3	13.1	2.4	0.6	19.0	19.8	6.4	12.6	4.2	4.3	11.2	7.4	10.1	11.9	5.0	3.0
Total	13.5	11.5	41.5	40.7	10.9	12.9	14.5	12.6	46.0	45.9	12.6	15.5	36.3	43.3	12.5	87.0	11.8	14.0	89.8	81.1	19.9	24.3	100	125

Notes :

- (i) Others include problems related to ENT, Kidney, Livery, Cancer, Tetanus, Accident and Surgery and physical disabilities. In urban areas it is mainly surgery. In rural and tribal area it mainly includes problem related to Liver, Kidney, ENT and Disabilities.
- (ii) Figures are percentages. The figure gives each types of illness as a proportion of total illness reported.
- (iii) Figures relate to six months prior to our survey.

TABLE 21

ASSETS MORTGAGED FOR HEALTH

Groups	Households Mortgaging assets (%)			
	Aprl 94	Dec. 94	May 95	Dec. 95
Ahmedabad Slum (Pottery)	25.7	25.7	13.8	40.0
Ahmedabad Slums	15.4	19.1	7.8	14.3
Ahmedabad Rural	21.6	23.1	15.0	16.7
Kutch Rural	17.1	17.5	11.9	40.0
Sabarkantha Rural	14.3	23.4	13.6	27.3
Junagadh Rural	15.8	40.0	20.0	31.6
Sabarkantha Tribal	10.7	14.1	19.3	6.6

Notes :

- (i) Mortgaged /Pawning of assets for health is given as proportion of total mortgaging/pawning in each area.
- (ii) Figures relate to six months prior to our survey.

TABLE - 22

RANGE OF EXPENDITURE FOR HEALTH

	<1000				1001-5000				>5001			
	April '94	Dec. '94	May '95	Dec. '95	April '94	Dec. '94	May '95	Dec. '95	April '94	Dec. '94	May '95	Dec. '95
Ahmedabad Slum (Pottery)	27250 (73)	40670 (148)	2275 (8)	7550 (16)	70100 (30)	19000 (10)	8500 (3)	15500 (7)	43000 (4)	-	-	-
Ahmedabad Slum	21433 (95)	21400 (72)	35330 (146)	32425 (107)	83100 (32)	74800 (31)	99000 (40)	69700 (29)	102000 (7)	52000 (6)	-	9000 (1)
Ahmedabad Rural	27433 (159)	38560 (133)	18370 (74)	24800 (80)	48400 (26)	50350 (30)	67600 (33)	24000 (13)	34000 (3)	12000 (2)	20000 (2)	19000 (2)
Kutch Rural	50563 (230)	61452 (203)	62493 (174)	19210 (93)	103900 (48)	110710 (47)	154250 (83)	13700 (6)	61700 (6)	183000 (5)	153000 (11)	35000 (1)
Sabarkantha Rural	44795 (106)	88160 (324)	66580 (228)	43650 (94)	192800 (94)	115000 (61)	168200 (86)	111900 (59)	154000 (14)	18000 (3)	23000 (3)	7000 (1)
Junagadh Rural	15850 (66)	15397 (130)	15625 (83)	25690 (101)	95000 (42)	27200 (14)	50500 (23)	19000 (10)	20004 (2)	20000 (2)	-	17000 (2)
Sabarkantha Triabai	38853 (209)	38633 (268)	36570 (249)	30155 (220)	51900 (25)	27550 (17)	99000 (40)	11300 (7)	17000 (2)	-	-	-