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Editor's Note

ARTICLES

OJOKHETA, K.O. Oladeji, S.B. Omokhabi, Abiola Adiat	Developing Alternative Methodological Framework for Facilitating Adult Learning: the Outcome of an Experiment	5
V. Mohankumar	Re-skilling of Less Literate Persons- Need of the Hour	21
Kala Vivekanandan	Develop and Evaluate Effectiveness of Self Instructional Module on Early Marriage and its Impact on Health in Terms of Knowledge and Attitude of Adolescent Girls of Selected Urban Slum of Delhi	29
T.S. Nair	Kerala State Achieved Total Primary Education	53
R. Venkata Ravi S. Vellimalayan	Partnership for Service Delivery in Rural India- Micro level Study	70
P. Viswanadha Gupta	Context Consciousness in Health Care: A Study of Pune Urban Slums	87
B.L. Raina	Implementation of Sarva Shiksha Abhiyan in District Samba: A Study	104
<i>Contributors</i>		120

IIALE is Study Centre for IGNOU Programme

International Institute of Adult and Lifelong Education (IIALE) is study centre for Indira Gandhi National Open University (IGNOU) (Centre Code: 29049P) which will function from 17-B, I P Estate, New Delhi – 110 002. The Centre will start function soon and the courses to be offered are:

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Editor's Note

The birthday of Mahatma Gandhi (October 2nd) and Pt. Jawaharlal Nehru (November 14th) are celebrated in this quarter (October-December). One gave this country to us by following peaceful means and another laid a strong foundation for modern India with his foresightedness. Fortunately, the constitution makers had strong belief in democracy to rule the country with the elected Prime Minister and Council of Ministers answerable to parliament under the watchful eyes of the President. In the same way the states have elected assemblies with the Chief Ministers at the helm of affairs under the watchful eyes of the Governors. The parliamentary democracy facilitates elected representatives to bring issues and needs of the common folk to the notice of the government for rectification and improvement. Both the parliament and state assemblies are the places for discussion and debate to arrive proper conclusion which will lead to the betterment of the citizens and country as a whole. Hence, for conduct of quality discussions and debates on the floor is the responsibility of both the ruling party and opposition. A strong ruling party gives stability to the government and a strong opposition enables the government to take proper decisions. Hence, it is not a thumbs-up for ruling party or opposition but supplementary and complimentary to each other.

Unfortunately, in the recent past one can see a lot of friction between the ruling party and opposition, particularly in the state assemblies. Neither the ruling party is ready to hear the genuine arguments and issues brought to the notice of the government in the assembly nor do the opposition parties cooperate with the government to approve urgent legislative business with the result personal acquisitions, acrimony, hooliganism take place ending with walkout or suspension. In many state assemblies disturbance has become a-day-today affair and mostly legislative business is done by the government with empty opposition benches. The worst thing happens is boycotting or disturbing the address of the Governors which is an annual affair that details the achievements and policies of the government concerned.

Parliament also has become a victim of disturbance, fortunately not to the extent of the state assemblies. But both the ruling party and opposition have shown maturity of give and take in passing the GST Bill which was

pending in the parliament for long because of the difference of opinion between the government and the opposition. Many suggestions given by the opposition parties have been accommodated and the country had the benefit of uniform taxation in which single tax to replace multiple levies of centre and states, mitigation of cascading of taxes, uniformity of tax rates and structures, easy and reduced cost of compliance for taxpayers, seamless transfer of input tax credit and improved competitiveness and greater transparency in tax administration.

The Hon'ble President of India who is a veteran parliamentarian and administrator expressed his concern a few times about the disturbance happening in parliament and appealed to both ruling and opposition to iron out their differences by useful and productive debates. He must be the happiest person when the parliament passed GST bill which one can notice in his address to the nation on the eve of India's 70th Independence Day, 2016. He said that, "in the just concluded session of parliament, the passage of the Constitution Amendment Bill for the introduction GST amidst non-partisan and quality parliamentary deliberations is reason enough to celebrate our democratic maturity". Really, a celebration time and all appreciation should go to both the ruling and opposition parties. The country expects such cooperation in other matters of national importance and welfare of the people in the months and years to come.

Dr. V. Mohankumar

Developing Alternative Methodological Framework for Facilitating Adult Learning: the Outcome of an Experiment

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Introduction

Adult learners are peculiar set of learners. They encounter many difficulties in their learning as a result of diverse responsibilities associated with adult life. Thorpe (1987) submitted that “studying in adult life is always a difficult process with pains and disappointment”. She also argued that:

“the task of reading often raises the humdrum problem of becoming bored very quickly and inspires the intensely felt attraction towards making a cup of tea, tidying the shelves, watching a television programme or whatever after only a couple of paragraphs of reading. Hence, a lot may be at stake for adult students whose studies in effect set them apart from the interest and aspirations of friends or withdraw from their family”.

In his explanation of the problems faced by adult learners in their study, Parker (2003) contended that:

“Isolation, anxiety, and a failure to control the pace of work successfully are particular problems with adult learners (who may not have undertaken a substantial piece of learning for some limes). They tend to have lost (or sometimes never have acquired) the skills of studying. They may, therefore, spend hours reading every word of a book which only needs to be scanned. They may attempt laborious verbatim recording where sketchy notes would be more appropriate”.

The learning difficulty experienced by adult learners, most times, creates anxiety on them to succeed. Thorpe (1987) put it succinctly: “An adult learner who is desperately anxious to succeed can be extremely deflated by early study problems or poor performance and can drop out as a result. This

anxiousness sometimes leads to nervousness probably due to lack of sensitive reading”.

This is why the facilitation of learning with adult learners is an important, exhilarating, and profound activity (Brookfield, 2001). The major reasons most adults participate in any learning programme is to create a-change in their skills, behaviour, knowledge level or their attitude about things (Russell, 2006).

Adult learners' physiological composition coupled with their advancement in age makes it imperative for anyone facilitating learning with them to accord them special attention. It was in this context that Malcolm Knowles (1980) popularized a theory on adult learning called 'Andragogy'. This theory emanated from an earlier theory 'Androgogy' which was developed by Alexander Knapp and Eugen Rosenstock-Hussey. Knowles argued that adult learners need a learning framework completely different from the traditional pedagogical school-based culture. According to him, Andragogy refers to “the art and science of helping adults to learn”.

Knowles contented that Andragogy was premised on the following characteristics:

- **The need to know-** Adult learners want to know why they need to learn something. They want to understand the value and relevance of such learning. They also desire that such learning meet their needs and help them to achieve their goals.
- **Learners' self-concept-** Adult learners want to be respected and be seen as capable learners. They must be encouraged to set their learning goals. They are usually independent, self-motivated, and self-directed in their learning. They also like to find their way, want to manage their own learning, and make their own decisions.
- **Role of the learners experience-**Adult learners are a valuable resource because they bring the richness and diversity of their lives to their learning. They must be given the opportunity to use their existing knowledge and experience which they can apply to new learning experiences. They use their reflective and reasoning skills to solve learning problems.
- **Readiness to learn-**Adults are ready to learn when they identify something they want to know or become proficient at, or when they experience something that connects with their life situations. They become ready to learn things in order to cope effectively with real-life

situations. They are goal focused, want timely learning, seek meaningful learning experiences, and need clear learning goals.

- **Orientations to learning**-Adult learners want to be engaged in life-centred or problem-centred learning experiences. They want to learn what will help them perform tasks or deal with problems they see in their lives. They are practical oriented, that is they want their learning to apply to their lives, jobs, among others. They want to be involved in planning their learning. They want to focus on the aspects that are most useful to them.

Based on these characteristics, Oladeji and Ojokheta, (2014) developed a framework for understanding adult learners. According to them, an adult learner is:

- Someone who identifies a knowledge gap in his or her existence and wishes to fill the gap by enrolling in a learning programme.
- Someone who takes a second chance opportunity to learn.
- Someone who desires to update his or her existing level of knowledge.
- Someone who desires to keep abreast of happenings in his or her immediate environment and beyond.
- Someone who aspires for continued learning for self actualization.
- Someone who seeks a change in attitude and behaviour by enrolling in a learning programme.
- Someone who does not want to be left behind or become irrelevant in the ever changing and fast paced world.
- Someone whose urge and love for learning is insatiable.
- Someone who believes that learning is life-long in nature, that learning does not have a beginning or an end.
- Someone who believes in the development of the intellectual power of the mind.
- Someone who strives for unconditional self development

From this description, it can be seen that perception of adult learners, in the contemporary world, is very wide and limitless. Irrespective of one's age, profession, and educational status, one can become an adult learner at any point in time since the world of today is driven by knowledge which makes learning becomes lifelong in nature.

Brookfield (2001) asserted that adult learning is a 'highly complex psychosocial drama in which the personalities of the individuals involved,

the contextual setting for the educational transaction, and the prevailing political climate crucially affect the nature and form of learning'. He concluded that 'yet among the theorists and practitioners of adult learning, this complexity is frequently ignored'. Similarly, Wang, Victor and Farmer, Lesley (2008) argued that adult teaching methods mostly feature a teacher-centered, information-based, and test-driven instructional format. Ojokheta (2013) argued that learning facilitated with adult learners based on pedagogical framework is bound to fail due to the unsuitability of this framework for adult learners.

Against the backdrop of the fact that adult learners have many responsibilities that must be balanced with the demands of learning, facilitators must, therefore, have in-depth knowledge of how best to facilitate learning with them. However, most facilitators do not take this into consideration in Nigeria. They focus their facilitation processes on pedagogical framework where the 'instructor' is considered as having the monopoly of knowledge; someone who knows everything whom the learners always rely on in the acquisition of knowledge.

In many instances, scholars have stressed that facilitators in adult learning should serve as a helper in the learning process. They are the interfacing agent between the learning components and the adult. The role of the facilitator is very crucial to the achievement outcome of the adult. Suffice to say that no matter the level of motivation of adult learners in any learning programme, their achievement outcome will strongly be determined by the techniques adopted by the facilitators to facilitate learning. According to Taylor (2000), discomfort (at the learning environment) is a natural and necessary part of the learning process; however, learners can work through the discomfort with the support of the facilitators.

In this sense, Benne (1957) argued that 'the role of the facilitators is to establish the appropriate methodology for learning, which to him is the experimental method. He, therefore, located the facilitators authority in 'the widening of a community of shared and evaluated experiences' It is in this context that this study experimented with a methodological framework that took into consideration the following principles:

- Everyone teaches and learns – knowledge is shared.
- The experience of the participants is the starting point.
- There is a joint creation of knowledge.

- There is no expert, but rather mutual respect for the knowledge and experience that all participants bring to the process.

The adoption of this methodology was based on the submission of Torres and Rosa-Maria (2000) when they asserted that “as our world moves rapidly into the information age, and as the demand for new learning increases, and knowledge about how people learn best continues to develop, referring back to how things have always been is not all that helpful”. The methodology was also informed by the views of Taylor, Marienau and Fiddler (2000) that “knowledge is derived from an individual’s interaction with social processes and contexts and should be seen as a creative construction in which the individual learner is an actor or active participant or subject rather than a passive object”.

The Objectives of the Study

This study was guided by four objectives:

1. To find-out if “DISSAAP” could actually be utilized to facilitate adult learning.
2. To ascertain from the learners the advantages derivable in the application of DISSAAP methodology.
3. To find-out if DISSAAP can improve learning performance of adult learners
4. To ascertain if ‘DISSAAP’ can be considered an effective methodological approach for facilitating adult learning.

Research Questions

Two research questions were raised to guide the study. They were:

1. What advantages are derivable in the application of DISSAAP methodology?
2. Can DISSAAP improve learning performance of adult learners?

Theoretical Framework

The theoretical framework of this study is anchored on two models of adult learning- andragogy and libertarian, dialogic, and problem-posing educational model postulated by Paulo Freire in 1970. The universally

recognized model of adult learning-Andragogy-has been criticized on many ground by scholars. For example, Gou and Jamal, (2011), highlighted the shortcomings of andragogy as being limited on how to teach an individual learner. He argued that andragogy is narrowly preoccupied with methodology which views an individual learner independently from the society. Newman (2011) also argued that andragogy does not propagate social change but moulds a person to conform to the contemporary situation.

This connotes that learners participating in adult learning class that adopts andragogy as its model of facilitation will accept any situation within which they find themselves even if it is not favourable and will not initiate the process of bringing change.

Despite these criticisms of andragogy, the theoretical framework of this study is still premised on andragogy. This is because the cardinal philosophy of this model emphasizes that the core activity of learning is thrown to the adult learner. He is the core of the teaching and learning process, presumably the initiator and the chief executor. Therefore, the role and importance of the teacher are played down: the teacher is no longer the authoritarian 'Mr. Know-all' who towers above the learners. He is no longer the sole dispenser of knowledge to learners.

This study made extensive use of this philosophy. The responsibility of learning was placed on them. The facilitator became democratic rather than autocratic by sharing knowledge with the learners rather than imparting knowledge to them. This learning process was fashioned based on the belief that the facilitator must 'talk with the learners' rather than 'talk to the learners'. The learners were treated as equal partners in the process of knowledge acquisition.

Similarly, this study laid its framework on Freire's model. Freire argued that a learning arrangement where knowledge is viewed or seen as a gift bestowed on the learners offends the freedom and autonomy of the learners. According to him, this type of learning arrangement domesticates learners because it emphasizes the transfer of existing knowledge to passive objects; submerges their consciousness and produces alienated consciousness since the learners are not involved in a real act of knowing, but given ready-made view of social reality.

Methodology

The study was not designed and carried out in the strict specifications of quantitative experimental design even though the title of the study reads 'The outcome of an experiment'. Therefore, the design adopted was exploratory research. The population of the study comprised 21 final year adult learning students participating in the Distance Learning Programme of University of Ibadan-the first University established in Nigeria in 1948.

The course experimented with was Adult Education course titled "Introduction to Distance Education" where the concept of motivation was taught as a component of the course content. During the facilitation process, DISSAAP was applied. DISSAAP is an acronym where **D** stands for Discussion of learning content, **I** for identification of Deductions, **S** for Summation of recurring major deductions, **S** for synthesis of deductions, **A** for Agreement of synthesis, **A** for Adoption of the synthesis, and **P** for Presentation. The study was carried out in 2014/2015 academic contact session with the learners.

Step-by-Step application of DISSAAP

Step 1: Learners readiness-Learners were briefly introduced and given details of the exercise. They were asked to view knowledge as a process they have to engage in themselves rather than being given a ready-made view of the topic for discussion by the team of researchers.

Step 2: They were introduced to DISSAAP as alternative methodology to be used to facilitate learning in the class and the acronym explained to them.

Step 3: The topic 'Motivation' was introduced to the class and the procedure for discussing it was explained to them. The learners were asked to discuss what motivation means to them in the first procedure. They were asked to discuss the various examples of motivation supported with illustrations and explanations in the second procedure. The third procedures involved the learners discussing the advantages of motivation, while the fourth procedure involved the learners discussing the types of motivation they would preferred in their learning.

Step 4: Learners were allowed to engage in the discussion of the topic.

Step 5: The major deductions from the discussion of the learners were identified by the co-researchers.

Step 6: The recurring deductions were summed up.

Step 7: The deductions were synthesized in order of importance.

Step 8: The deductions were read to the learners for possible additions or subtractions so as to achieve agreement of synthesis.

Step 9: The synthesis of the deductions was adopted with little modifications.

Step 10: The synthesis was finally presented to the class which constituted the piece of knowledge arrived at by the learners.

Data Analysis

Data obtained in the study were analyzed using the qualitative approach of phenomenological analysis. Similarly, the quantitative statistical approach of mean and standard deviation was used to ascertain if DISSAAP can contribute to improved learning performance of the learners.

Results and Discussion

The synthesis of the deductions made during discussion of the topic by the learners is presented here using the phenomenological analytic approach. During the discussion, the following deductions on the meaning of motivation were identified, summed up, and synthesized:

Dimension of Learners Discussion: Definition of Motivation

- i. Motivation as incentives people received to encourage them to exhibit desired behaviour.
- ii. Motivation is reward received if someone gives positive response or reply to a question.
- iii. Motivation is whatever that is done to get people to do things.
- iv. Motivation is the drive someone received to propel him or her to continue to do things.
- v. Motivation is the stimulated desire that energizes someone to continually show interest and commitment to what he or she is doing.

The synthesis of these deductions was presented to the class and members were asked to rate which of these deductions best summarized the most appropriate perception of motivation. The result is presented in table one below:

Table - 1
Learners Perception of the most Appropriate Definition of Motivation

S.No.	Synthesized Deductions	Learners response	Simple percentage of responses
1.	Motivation as incentives people received to encourage them to exhibit desired behaviour.	5	23.8
2.	Motivation is reward received if someone gives positive response or reply to a question.	3	14.4
3.	Motivation is whatever that is done to get people to do things.	4	19.0
4.	Motivation is the drive someone received to propel him or her to continue to do things.	2	9.5
5.	Motivation is the stimulated desire that energizes someone to continually show interest and commitment to what he or she is doing.	7	33.3

Eventhough, all the deductions are correct of what motivation means, however, the analysis of table one shows that the fifth deduction represents the most appropriate perception of motivation by the respondents followed by the first deductions.

Dimension of Learners Discussion: Types of Motivation

The following deductions, during step on of DISSAAP, on the types of motivation were identified, summed up, and synthesized. Learners categorized motivation into two types: intrinsic and extrinsic. To them, intrinsic motivation refers to the factors derive from within the individual learners which encourage them to engage in learning and it includes:

- i. The desire to fill a knowledge gap.
- ii. The desire to achieve optimal performance in learning
- iii. The desire to acquire additional knowledge
- iv. The desire to update one's knowledge
- v. The desire to have competitive advantage over other peers in knowledge possession

Extrinsic motivation to them refers to the techniques employ by facilitators to encourage learners' active participation in the learning process and it includes: cash or monetary reward, award of marks reward, graded round of applause reward (for example. 1 set, 2 set, 3 set, and continuous round of applause), verbal positive comments (for example. beautiful, lovely, marvelous, wonderful, immaculate response and so on), salutary reward, standing ovation reward, praise-singing reward, and bell-ringing reward.

Dimension of Learners Discussion: Importance of Motivation

The following deductions, during step one of DISSAAP, on the importance of motivation were identified, summed up, and synthesized as follows:

- i. Motivation in learning helps to stimulate interest of learners in learning.
- ii. Motivation makes learning become permanent as it facilitates easy recall of points and ideas during examinations.
- iii. Motivation encourages active participation of learners in learning.
- iv. Motivation makes learning interesting as dull moments are prevented.
- v. Motivation enhances retention of learners in a learning programme.
- vi. Motivation makes learners to engage in deeper thinking before making responses.
- vii. Motivation makes learners get prepared by reading ahead before a learning exercise

Dimension of Learners Discussion: Extrinsic motivational reward types preferred by the respondents

Learners were asked which of the extrinsic motivational rewards will they preferred the facilitator to apply in their learning. The respondents' responses are presented in table two below:

Table - 2
Extrinsic motivational reward types preferred by the respondents

S.No.	Extrinsic motivational reward types	Learners response	Simple percentage of responses
1.	Cash or monetary reward	0	0.0
2.	Award of marks reward	7	33.3
3.	Graded round of applause reward	2	9.5
4.	Verbal positive comments	4	19.0

5.	Salutary reward	1	4.8
6.	Standing ovation reward	1	4.8
7.	Praise-singing reward	5	23.8
8.	Bell-ringing reward	1	4.8

From this table, it can be seen that the respondents preferred facilitators to reward positive response from the learners with award of marks (07 or). This was followed by verbal positive comments (04 or) and praise-singing reward (03 or). The implication of this finding is that adult learners will prefer award of marks, verbal comments, and praise-singing as the most effective rewards to stimulate and sustain their continuous interest in any learning arrangement.

At the end of the discussion, the identification of deductions, Summation of recurring major deductions, and synthesis of deductions, the team of facilitators compiled and read the summary of the learners' discussion for agreement and adoption of the synthesis. The summary reads thus.

Motivation is the stimulated desire that energizes someone to continually show interest and commitment to what he or she is doing. It can also refer to incentives people received to encourage them to exhibit desired behaviour. Motivation can be classified into two types: intrinsic and extrinsic. Intrinsic motivation refers to the factors derive from within the individual learners which encourage them to engage in learning; it includes: the desire to fill a knowledge gap, the desire to achieve optimal performance in learning, and the desire to acquire additional knowledge among others.

Motivation helps to stimulate learners' interest in learning, encourages active participation of learners in learning, and enhances retention of learners in a learning programme among others. Learners' motivation to learn can be enhanced through award of marks, verbal comments, and praise-singing.

The summary was, thereafter presented to the learners and was unanimously approved by them without any modification.

Analysis of Question One

Research question one was raised to find out from the learners the advantages derivable in the application of DISSAAP methodology. Learners

were asked to rate their responses according to the variables listed below. The learners' responses are shown in table three.

Table - 3
Showing learners' responses to research question one

S.No.	Advantages of DISSAAP	Yes response	No response	Percentage Response
1.	Develops reasoning and critical thinking ability	21	0	100
2.	Allows learners to exercise control over their learning	21	0	100
3.	Promotes dialogue and reflection	21	0	100
4.	Democratizes knowledge generation	21	0	100
5.	Discourages the elitist tradition of teacher-dominated knowledge generation	21	0	100
6.	Promotes intensive tutor-learner interaction	21	0	100
7.	Gives a 'voice' to the learners.	21	0	100

From this table, it can be seen that all the respondents were unanimous in rating DISSAAP positively. To them, this methodology helps in developing reasoning and critical thinking ability in the learners, allows them to exercise control over their learning, promotes dialogue and reflection, democratizes knowledge generation as all the learners are involved, discourages the elitist tradition of teacher-dominated knowledge generation, promotes intensive tutor-learner interaction, and gives a 'voice' to the learners. Therefore, the responses of the learners have shown that DISSAAP can actually be applied and utilized as an alternative and effective methodological approach for facilitating adult learning.

Analysis of Research question Two

In order to ascertain if DISSAAP can enhance improved learning performance among the learners, five questions were set during the examination of the course Adult Education 410. It is instructive to state that apart from the concept of motivation which was self-taught by the learners themselves, the other four questions were taught through the lecture method where the learners were given ready-made view of the examiner on the topics. The performance score of the learners on each of the questions is presented in table four.

The five questions examined in the examination were:

Q1: Examine, with detailed examples, the characteristics of Distance Learning Students?

Q2: Discuss vividly the guidance and counselling needs of Distance Learning Students?

Q3: What characteristics do you think a distance learning facilitator should possess and put into practice during the facilitation process?

Q4: Discuss, with relevant examples, the meaning and types of motivation in a learning programme. What importance do you think motivation would play in a distance learning programme?

Q5: Examine three theories that you think can guide the practice of Distance Education?

Table - 4
Showing the performance score of the learners on each of the questions

Question	Examination Questions	1-5 Marks	6-10 Marks	11-15 Marks	16-20 Marks	21-25 Marks
Q1.	Examine, with detailed examples, the characteristics of Distance Learning Students.	1	3	1	-	-
Q2.	Discuss vividly the guidance and counselling needs of Distance Learning Students.	-	4	2	-	-
Q3.	What characteristics do you think a distance learning facilitator should possess and put into practice during the facilitation process?	-	1	1	-	-
Q4.	Discuss, with relevant examples, the meaning and types of motivation in a learning programme. What importance do you think motivation would play in a distance learning programme?	-	-	1	4	1
Q5.	Examine three theories that you think can guide the practice of Distance Education.	-	1	1	-	-

Analysis of the performance score of the respondents shown in table four revealed that 5 learners answered question one and 1 respondent scored between 1-5, 3 respondents scored between 6 and 10 marks while 1 respondent scored between 11 and 15 marks. 6 learners answered question two, 4 of them scored between 6 and 10 marks while 2 scored between 10 and 15 marks. Two learners answered question three and scored between 6 and 10 marks and 11-15 respectively. 6 learners answered question four, one student scored between 11 and 15 marks, 4 of them scored between 16 and 20 marks, while the other one respondent scored 20 and 25. Two students answered question five and scored between 6 and ten marks and 11 and 15 marks. The analysis showed that the respondents performed better on the question which was used for this experiment. If other questions had been taught using the DISSAAP methodology, probably the learners would have performed better. This result revealed that DISSAAP can tremendously enhance learners' performance during an examination.

Conclusion and Recommendations

This study has shown that an alternative methodology for facilitating adult learning is possible. In this context, DISSAAP methodology has proved to be an effective methodology which can be applied to facilitate adult learning judging from the outcome of this experiment. DISSAAP is, therefore, recommended to be adopted by facilitators as an appropriate methodology which can be used in any learning activity where the adults are the primary beneficiaries. However, it must be stressed that adult learners' facilitators, during the facilitation process, need to demonstrate certain traits and conducts associated with effective facilitation. They must also possess the skills of effective organization and coordination of ideas, as well as that of attentiveness and human relations for effective inter-group relationship. It is equally important to stress that DISSAAP methodology is not limited, in terms of application, to a small class as used in this study. It can also be applied to a large class if the facilitator possesses the skills identified above.

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Re-skilling of Less Literate Persons – Need of the Hour

V.Mohankumar

Introduction

A country's progress is not measured by construction of tall buildings, laying of long roads, establishment of big industries but by the quality of Human Development which indicates the progress made in the areas of educational improvement, better health facilities, good sanitation, clear environment, adequate employment/self-employment opportunities, sustainable income, population stabilization, security and stability and overall well-being of each individual. Many of these indicators are measured and the countries are rated in the report of Human Development Index by United Nations Development Programme (UNDP). Though, India is developing fast in many of the areas, as per Global 2015 Human Development Report it has been placed at 130 out of 188 countries under the group "Medium Human Development", other groups being Very High Human Development, High Human Development and Low Human Development. Hence, India is still to go a long way to strengthen the Human Development Index and take a place of pride in the very high human development group. At the same time among the eight SAARC countries Sri Lanka and Maldives are having High Human Development and hence, they are placed at 73 and 104. Bhutan and Bangladesh are with India in the Medium Human Development at 132 and 142. However, Nepal, Pakistan and Afghanistan are in the Low Human Development group at 146, 147 and 171.

Though indicators for human development are many, this paper deals with two important aspects – Education for building knowledge and Skilling for employment and sustainable income. It is a fact that education is an important indicator of development as it is not only an investment for future but also leads to greater awareness and a contributor for the economic growth. Education also is an instrument of change. It is a fountain of human capital for better quality of life. It is the wealth of nation in respect to economic, political and social transformation. The ancient India had the best of education system with residential schools (Gurukul) and universities. The education imparted then gave a lot of importance to moral values, culture, spiritual and

self-esteem. It also encouraged a lot the individual development. The lessons transacted were in rich Indian languages for better understanding of the verses and the students learnt the lessons by joining together in the repetitive method which fastened the everlasting memorizing capacity. Individual students also got adequate opportunities to prove their worthiness. That was the precise reason even the students from foreign countries came to India to acquire the knowledge. The colonial rulers were sure that they may not be able to conquer India unless its spiritual and cultural base is shattered into pieces. This is adequately reflected in the speech of Lord Macaulay in British Parliament in the year 1835. He said that ***“I have traveled across the length and breadth of India and I have not seen one person who is a beggar, who is a thief. Such wealth I have seen in this country, such high moral values, people of such caliber, that I do not think we would ever conquer this country, unless we break the very backbone of this nation, which is her spiritual and cultural heritage, and, therefore, I propose that we replace her old and ancient education system, her culture, for if the Indians think that all that is foreign and English is good and greater than their own, they will lose their self-esteem, their native self-culture and they will become what we want them, a truly dominated nation.”*** Finally, they could achieve what they wanted. English was introduced slowly which replaced the rich Indian languages and unfortunately the youth in India fall prey to it with the result English has become a language of prestige and mostly catered to the needs of the rich and elite leaving a vast majority of people preventing them pursuing education in the formal system. The result was that when India became independent the literacy rate of the country was as low as 18.33% with female literacy abysmally low at 8.86%. The low literacy was also compounded by other problems like poverty, unemployment, epidemic and low agriculture productivity. Hence, the political rulers and administrators of independent India wanted the development of the country on fast track mode through planned economy and hence, Five Year Plans came in.

Public funding on education

Like any other country in the world India also has taken action to revitalize the education system immediately after independence by increased financial outlay. According to Planning Commission document and MHRD the expenditure on education in the first Five Year Plan was Rs.1960 crore which increased to Rs.4673 crore in Second Five Year Plan, Rs.8577 crore in Third Five Year plan, Rs.15,779 crore in Fourth Five Year Plan, Rs.39,426

crore in Fifth Five Year Plan, Rs.1,09,292 crore in Sixth Five Year Plan, Rs.2,18,730 crore in Seventh Five Year Plan, Rs.5,27,012 crore in Eighth Five Year Plan, Rs. 7,05,818 crore in Ninth Five Year Plan, Rs.12,49,322 crore in Tenth Five Year Plan and in the Eleventh Five Year Plan it was Rs.28,62,029 crore.

Table – 1
Outlay and expenditure on education in Centre, States and UTs
in Five Year Plans

Plan Period	Outlay			Expenditure		
	Centre	State/UT's	Total	Centre	State/UT's	Total
First Five Year Plan (1951-1955)	1241.00	828.00	2069.00*	706.00	1245.00	1950.00
Second Five Year Plan (1956-1961)	2559.12	2240.88	4800.00	2535.00	2115.00	4673.00
Third Five Year Plan (1961-1965)	3600.00	3900.00	7500.00	4212.00	4227.00	8577.00
Fourth Five Year Plan (1969-1974)	8870.00	7081.47	15951.47	7826.00	7675.00	15779.00
Fifth Five Year Plan (1974-1979)	19954.10	18893.14	38853.24@	18755.00	20015.00	39426.00
Sixth Five Year Plan (1980-1985)	47250.00	50250.00	97500.00	57825.00	49485.00	109292.00
Seventh Five Year Plan (1985-1990)	95534.00	84466.00	180000.00	127520.00	87492.00	218730.00
Eight Five Year Plan (1992-1997)**	247865.00	186235.00	434100.00	328906.00	188449.00	527012.00
Ninth Five Year Plan (1997-2002)	489361.00	368639.00	858000.00	406887.00	239131.00	705818.00
Tenth Five Year Plan (2002-2007)	833183.00	632456.00	1525639.00	636317.00	613005.00	1249322.00
Eleventh Five Year Plan (2007-2012)	2155572.00	1488147.00	3644719.00	1167884.05	1694145.00	2862029.00
Twelfth Five Year Plan (2012-2017)	4333739.00	3716384.96	8050123.96	NA	NA	NA

Source: Planning Commission & <https://data.gov.in/resources/five-year-plans-plan-outlay-and-expenditure-centre-states-and-union-territories/download>

Notes: * 1952 Original plan provision, @ Excludes Rs. 450 crores for Hill and Tribal Areas Outlays are at prices at base year of plan, ** Eighth Plan expenditure is based on 1992-93 (Actuals), 1993-94 (Actuals), 1994-95 RE, 1995-96 RE and 1996-97 BE

The plan outlay (Centre, States/UTs) on education for the Twelfth Five Year Plan (2012-2017) is Rs.80,50,123.96 crore out of which the outlay for Centre is Rs.43,33,739.00 crore and State/UTs Rs.37,16,384.96 crore.

The increased outlay and expenditure on education in plan periods expedited vast expansion of number of schools, technical institutions and institutions of higher learning. New schemes and programmes enabled more number of students enrolled in educational institutions and better retention. However, the amount spent on education is not found to have given the desired result in return as the percentage of literacy did not increase *commensurate* the amount spent.

As per 1951 Census the literacy rate of the country was 18.33% which started slowly increasing in the subsequent Census - 28.30% in 1961, 34.45% in 1971, 43.57% in 1981, 52.21% in 1991, 64.83% in 2001 and 73% in 2011. However, gender gap remained to be a matter of concern. Fortunately, from 1981 Census onwards the gender gap started narrowing from 26.62% to 16.30%. To reduce the gap further the goals set in Eleventh Five Year Plan included achieving 80% literacy rate and reduction of gender gap in literacy to 10%.

Table – 2

Year	Literacy rate (%)			Gender gap in literacy rate (%)
	Overall	Male	Female	
1951	18.33	27.16	8.86	18.30
1961	28.30	40.40	15.35	25.05
1971	34.45	45.96	21.97	23.99
1981	43.57	56.38	29.76	26.62
1991	52.21	64.14	39.29	24.85
2001	64.83	75.26	53.67	21.59
2011	73.00	80.90	64.60	16.30

Source: Census 2011

Note: (1) 1951, 1961 & 1971 Census literacy figures reflect 5+ age group (2) 1981 to 2011 Census literacy figures reflect 7+ age group (3) 1981 Census excludes Assam & 1991 Census excludes Jammu & Kashmir

Another issue which is a matter of concern is the number of illiterates. India is a country having the largest number of illiterates. Infact, the educational planners/administrators while expanding the formal education system did not forget to target the adult illiterates to bring them to mainstream by imparting literacy. A number of literacy programmes have been planned and implemented both at micro and macro levels. The initial programmes were micro in nature concentrating on small area approach. The first macro level programme was National Adult Education Programme launched in 1978. This programme was implemented on project approach and involved large number of NGOs. The second macro level programme was National Literacy Mission launched in 1985 in which district was the unit of implementation and District Collector/District Magistrate was the nodal person. The third macro level programme is Saakshar Bharat launched in 2009 in which the Gram Panchayat is the basic unit of implementation and the elected members of Panchayati Raj are given the responsibility to make their area fully literate. While Saakshar Bharat is still under implementation, the other two earlier programmes could not succeed well or sustain the initial success made for want of proper follow-up. All these efforts have started giving some fruits with the result for the first time as per Census 1991 the total number of illiterates in the country was less than the total number of literates. This trend continued in 2001 and 2011 Census also, may be due to strengthening of elementary education and intensive implementation of literacy programmes in campaign mode under National Literacy Mission. The following table gives the number of literates and illiterates in the decennial census:

Table – 3
Number of Literates and Illiterates from 1951-2011

Year	No. of literates (in millions)	No. of illiterates (in millions)
1951	55.30	246.60
1961	105.52	267.32
1971	161.41	307.19
1981	235.73	305.32
1991	359.32	328.83
2001	560.75	304.15
2011	763.64	282.70

Source: Census 2011

However, as per Census 2011 the total population in the age group 15+ was 838.41 million out of which 257.58 million alone was illiterates. The number of illiterates in the age group 15-34 years was 79.10 million out of which 51.40 million was female and 27.70 million male. This age group is considered to be productive and reproductive age group and hence, needs more attention in the area of skill development as they are the bread winners for their families.

Skilling - need of the hour

India is fortunate enough to have the largest youth population in the world while most other countries, including industrialized and developed like Japan are graying countries with large number of aged population. Hence, as soon as the new government took the mantle of power at the centre in May 2014 it started focusing on youths as the potential builders of modern India.

The major objective of the government is to convert India's youth professionally skilled so that it can become the major supplier of trained manpower to other world countries. Hence, all out effort is taken to propagate the need of skill training to youths to increase their productivity and participate as major stakeholders of economic development. The youths are also motivated to become entrepreneurs and employment providers instead of employment seekers. Though, vocational education and skill training are not new to India but a great fillip has been given by creating a separate Ministry for Skill Development and Entrepreneurship and brought all the Industrial Training Institutes (ITIs) under its administrative control. ITIs are institutions to train students in various vocational trades who are subsequently engaged in blue collar jobs in the industrial establishment. Recently in view of 'Make in India' and 'Skilling India' programmes ITIs once again started blooming with expansion after a brief lull in between. At the same time the truth is that a major portion of the youths are either illiterate or neo-literate or having rudimentary level of education with no formal training in the vocational skills with the result they are either unemployed or under employed and not able to engage themselves as productive workers with economic stability. Most of the non-literate youths are in jobs with small skills for which they are trained on the job in the informal sector that has neither structured curriculum nor trained teachers/instructors nor do they get certificates from any recognized institution. As they form a big segment, they cannot be left behind unattended. It is important that they are trained

either for skill introduction or skill upgradation and make them to be an integral part of inclusive growth.

Skill introduction is for those who do not have any skill at all in their hands. By giving an opportunity to choose a skill(s) of their choice and undergo training they can become skilled labourers. The skill upgradation has two aspects. One aspect is for those who have some skills on their hands but require more inputs (advancement) in the same skills so that they are able to perform their job better than at present (for e.g. a Potter using traditional wheel to make mud pots is trained to use the wheel having ball bearing which makes more number of rounds and reduces the efforts of the Potter to roll the wheel very often). Another aspect of skill upgradation is a person who has some skill is given training in different other skill(s) so that the new skill(s) acquired helps that person to move vertically in job (for e.g. a Cycle Rikshaw Puller is trained for Auto Driving or an ordinary Mason (Mistry) is trained to become Head Mason (Raj Mistry) or an Electrician is given training in Plumbing which give more income than the present one).

While nobody denies the importance of training youth who are illiterate or neo-literate to bring them to mainstream of development and economic empowerment, the vast number is a matter of concern and the task may take long time. The training facilities/infrastructure available at present may not be able to cope with the demand and at the same time not possible to create additional infrastructure to that extent may require large financial outlay/investments. Hence, it may be appropriate to use the training facilities available in all the departments for this purpose, may be in the free time available including holidays. Industries/factories can be requested to create in-house facilities for training the required manpower for jobs suitable to illiterate/neo-literate segments. A detailed planning is required in consultation with all the stakeholders.

Conclusion

Though structured training is important for less literate youths to make them trained manpower and compete effectively in the employment market both within the country and abroad, there is a need to prepare vocational course curriculum suited to such youth population with more importance to practical aspects and theory limited to only the basic information which is required for the vocational trade and makes the trained persons efficient in their jobs. In case, any person is having the necessary skill but no certificate

from the competent authority due to which he/she could not compete in the employment market should be recognized through prior learning process. Such persons should be graded according to their skills and provided opportunities for further training so that they acquire more skills which are suitable for wage employment/self-employment. The market training institutions which are found to be worth recognizing can be identified and made to follow structured course curriculum with assessment and certification by recognized bodies.

Develop and Evaluate Effectiveness of Self Instructional Module on Early Marriage and its Impact on Health in Terms of Knowledge and Attitude of Adolescent Girls of Selected Urban Slum of Delhi

Kala Vivekanandan

Introduction

Marriage is a social institution that unites people in a special form of mutual dependence for the purpose of founding and maintaining a family. As a social practice entered into through a public act, religious or traditional ceremony, it reflects the purposes, character, and customs of the society in which it is found. Many societies have norms that limit the age of young girls to enter into marriage, but in some cases the age limit does not take into consideration their physiological readiness for childbearing. Marriage often takes place at ages much earlier than the legally ratified minimum age. Early marriage is the marriage of children and adolescents below the age of 18. The practice of early marriage is most common in sub-Saharan Africa and South Asia. In specific parts of West Africa, East Africa and South Asia, marriage before puberty is not unusual. In North Africa, the Middle East, and other parts of Asia marriage shortly after puberty is common among those living traditional lifestyles. Marriages of female adolescents between sixteen and eighteen years of age are also common in parts of Latin America and Eastern Europe. Among those marrying early, some are forced into this union, others are simply too young to make an informed decision. Because the child does not have the opportunity to exercise her right to choose, early marriages are also referred to as forced marriages. In its most extreme form, forced marriages are the result of abductions.

Marriage before the age of 18 is a reality for many young women. In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actuality, child marriage is a violation of human rights, compromising the

This article is based on the study conducted in part fulfillment of the requirements for M.Sc (Nursing) from the University of Meerut.

development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty.

Oxford University Press, (2005) in an article about child marriage reported that two significant cases in the nineteenth century brought the issue of child marriage into limelight India. The Rukhmabai case in Maharashtra and Phulmonee case in Bengal as they are popularly known raised significant questions about the age and issue of consent in Hindu marriage. Both these cases paved the ground for not only raising the age of marriage of girls but more importantly confront issues of choice and consent of women in marriage. These cases in the 19th century were precursors to later discussions and legal interventions on child marriages in 20th Century in India.

UNICEF (2005) reported that Child marriage is one of the burning problems of Indian society. In India, despite amended laws advocating 18 as the legal minimum age at marriage for females, a substantial proportion i.e. every third adolescent girl in the age group of 15-19 year is married and every second married adolescent girl has given birth to a child.

According to the Registrar General of India (RGI) Report (2001) Rajasthan has the highest (40.8) percentage of females ever married among 15-19 year old girls as compared to India (24.9 %) followed by Bihar (39.6 %), Madhya Pradesh (34.1%), Jharkhand (32.9%) and Andhra Pradesh (32.3%). Among the various districts of Rajasthan, Bhilwara is at the top with 61.9%.

National Population Policy, National Youth Policy and the most recently, the Prohibition of Child Marriage Act (2000, 2003, 2006)- have advocated special programmatic attention to help young women delay marriage and to enforcing existing laws against child marriage. In addition, several initiatives have been launched to prevent early marriage. Despite these efforts, substantial proportions of young women continue to marry during adolescence.

Factors that influence child marriage rates include: the state of the country's civil registration system, which provides proof of age for children; the existence of an adequate legislative framework with an accompanying

enforcement mechanism to address cases of child marriage; and the existence of customary or religious laws that condone the practice.

There are numerous problems a couple can face when marriage happens at an early age for them. Early marriage which is also referred to as child marriage is common all over the globe and has inflicted dangerous and devastating effects on young children who are compelled to tie the knot in most cases. Child marriage is also indicative of the levels of development of a region or country and is generally conducted between very young girls and older men.

Though the respective governments and society is doing much to abolish early or child marriage through campaigns, laws, policies and individual support of people, it is still a far reaching dream for young girls who are still repeatedly forced into such liaisons.

So it is important that the adolescent girls should be made aware of early marriage and its consequences on health as they are the future mothers

Need of the Study

An early marriage kills the feeling of youth. When teenagers get married at an early age, their young youthfulness is disturbed. They cannot enjoy their freedom as they are tied down to marriage and new responsibilities. Early pregnancy can affect the life of a teenage girl. A 19-year-old girl cannot undergo the pressure of bearing a child. It not only effects her physical health, but emotional too. When it comes to looking after a child, it is difficult too as she herself is a child and will not know much about parental guidance. The feeling of adjustment is difficult when young teens have an early marriage. They do not seem to adjust to their partner easily, therefore it results in divorce so teenagers, should be well aware of these problems before they walk down to say, 'I do'.

Child marriage is both a response to deprivation and a harmful practice that keeps families ensnared in poverty. Married children are generally isolated – removed from their immediate families, taken out of school and denied interaction with their peers and communities. For girls, early pregnancy leads to higher risks, including death during delivery, jeopardizing the health of these young mothers and their babies. Teenage girls are more susceptible than mature women to sexually transmitted diseases.

Marriage before age 18 is so prevalent in many struggling countries, the practice becomes an obstacle to nearly every development goal – eradicating poverty and hunger (MDG 1); achieving universal primary education (MDG 2); promoting gender equality (MDG 3); protecting children's lives (4); and improving health (5, 6).

A community health nurse contributes to great extent in guiding the youth in her community. Today's adolescent girls are becoming the mothers in the future. Therefore it is the need for healthcare providers to concentrate on their health. The need of the hour is to prevent problems at an early age so that it promotes positive health practices at very young age.

To enlighten people about the dangers in contracting such marriages where people involved are not matured to carry out family responsibilities but were still pushed into marriages due to one reason or the other, Moreover the researcher's own experience in community health field also helped to recognize the effectiveness of Self Instructional Module (SIM) on "Early marriage and its impact on health in terms of knowledge and attitude of the adolescent girls.

Objectives of the Study

1. To develop a self instructional module on early marriage and its impact on health for adolescent girls.
2. To assess the knowledge of adolescent girls before and after the administration of self instructional module on early marriage and its impact on health.
3. To assess the attitude of adolescent girls before and after the administration of self instructional module on early marriage and its impact on health.
4. To find the relationship between knowledge and attitude of adolescent girls on early marriage and its impact on health.
5. To determine the acceptability and utility of self instructional module by the adolescent girls of urban slum.

Methodology

The research methodology includes the strategies to be used to collect and analyze the data to accomplish the research objective. It has crucial implications for the validity and credibility of the study findings. The

methodology of research indicates the general pattern for organizing the procedure of gathering valid and reliable data for an investigation. The present chapter deals with a brief description of methodology adopted for the study. The contents included in this chapter are research approach, research design, variables under study, the setting, population, the sample and sampling technique, development and description of tools, data collection procedure, description of the treatment, pilot study and the plan for the data analysis for the present study.

The researcher in the present study aimed at developing and evaluating self instructional module on early marriage and its impact on health in terms of knowledge and attitude of adolescent girls of urban slum of Delhi. Also researcher was interested in determining the utility and acceptability of the self instructional module with the help of an opinionnaire.

Variables under Study

In the present study the independent variable is the self-instructional module and the dependent variable is knowledge, attitude and utility and acceptability of self instructional module.

Sample, Sampling Technique and Sample Size

The sample of the study was adolescent girls in the age group 14-21 years staying in Trilokpuri urban slum. The criteria of the sample was Adolescent Girls (14-21) unmarried with education (8th and above), Girls willing to participate in the study, Girls available during data collection and Girls who can read, write and understand Hindi or English.

Sample selection was done by using Purposive Sampling technique.

The size of the sample was 30 Adolescent girls in the age group 14-21 years.

Data Collection - Tools and Techniques

The most important and crucial aspect of any investigation is the collection of appropriate information, which provides necessary data for the study.

Structured Knowledge questionnaire – on early marriage and its impact

on health was prepared to assess the knowledge of Adolescent Girls (age group 14-21yrs) of selected urban slum of Delhi.

Attitude scale – on early marriage and its impact on health, a five point likert type of attitude scale was constructed to assess the attitude of Adolescent Girls (age group 14-21yrs) of selected urban slum of Delhi.

Opinionnaire - of Adolescent Girls (age group 14-21yrs) about acceptability and utility of SIM on early marriage and its impact on health.

Development of Knowledge Questionnaire

A blueprint was prepared to construct the structured knowledge questionnaire as shown in Table-1. The tool was prepared based on an extensive review of research and non-research literature peer group discussions, taking the opinion of experts.

Table - 1
Blue print on content and objective-wise distribution of knowledge questionnaire items on Early Marriage and its impact on health

S. No	Content	Domains of objective				Percentage
		Knowledge	Under-standing	Application	Total No. of items	
1.	Early marriage	1	1	-	2	6.66
2.	Adolescents & Factors affecting girls health	5	2	1	8	26.67
3.	Determinants of early marriage	2	3	1	6	20
4.	Impact of early marriage on health	5	2	1	8	26.67
5.	Solution to prevent early marriage	2	3	1	6	20
Total Percentage		50	36.66	13.34	30	100

Development of Attitude Scale

As there was no attitude scale available to determine the effectiveness of self instructional module on early marriage and its impact on health of

Adolescent Girls (age group 14-21 yrs) of urban slum, so a five point likert type of attitude scale was constructed .

An attitude scale was developed to assess the attitude on early marriage and its impact on health of Adolescent Girls by doing extensive review of research and non-research literature, peer group discussions, and expert's opinion. The attitude scale consisted of items concerning attitude related issues. Twenty statements were developed for the respondents to respond on a five point likert scale i.e. whether they strongly agree, agree, undecided, disagree and strongly disagree with the statements. Each statement in the attitude scale represented a specific aspect of favour of or against. Each respondent was required to give his/her opinion for each of the statement. The responses were quantified by giving weight age. Total score on items of attitude ranged from 20 – 100.

Development of Opinionnaire

A structured opinionnaire were prepared to determine the opinion about acceptability and utility of self instructional module by the Adolescent Girls. The opinionnaires consisted of 10 items each with three alternative responses to each items "to great extent", "to some extent", and "not at all". A score of 3, 2, 1, was assigned to alternative responses respectively. The maximum score was 30 and the minimum score was 10.

Development of Self Instructional Module (SIM)

The list of criteria was prepared after reviewing the existing literature on early marriage and its impact on health. The criteria provided the basis for development of content and the material. Criteria Rating Scale consisted of different areas like appropriateness of title, objectives and content, and a three response column for rating against each criterion .i.e. fully met, mostly met and to some extent was also designed along with remark column.

Module prepared on early marriage and its effect on health based on review of research and non-research literature, discussion with peer group and experts opinion. The material was developed in simple English language and translated into Hindi by language expert in order to facilitate independent/ self-learning. The steps taken in developing the SIM were:

1. Development of criteria rating scale.

2. Preparation of Module
3. Content validity of Module
4. Translation of module into Hindi version
5. Try out and final draft of module

Content outline of the Self Instructional Module includes:

- Early marriage
- Adolescence and Factors affecting girls health
- Determinants of early marriage
- Impact of early marriage on health
- Solutions to prevent early marriage

Establishing Reliability

The questionnaire having 30 items and the attitude scales having 20 items were administered to adolescent girls. The reliability of tools was established by using KR 20 formula and Chronbach alpha.

- Reliability of knowledge questionnaire (KR20) = 0 .82
- Reliability of attitude scale (chronbach alpha) = 0 .81
- Reliability of opinionnaire (chronbach alpha) = 0.91

Pilot Study

After obtaining the formal approval a pilot study was carried out by using purposive sample technique. Ten adolescent girls who met the criteria were selected from urban slum of Delhi (Shakurpur). Self introduction and introduction to the nature of the study were given to obtain free and frank responses. The investigator established a rapport before proceeding for data collection from the subjects. After selecting the subjects, verbal consents was taken from all and assured them about the confidentiality of their responses. Data on demographic characteristic was collected. Pre-test administered on day one and self instructional module given on the same day. The post-test was taken on the 8th day and opinionnaire about acceptance and utility of self instructional module was sought on the same day. The data analyzed using descriptive and inferential statistics and the findings of pilot study revealed that it was feasible to conduct the final study.

Thereafter, formal permission sought from the concerned authority to

conduct final study. By using Purposive sample technique on 30 adolescent girls who met the criteria in the urban slum of Delhi (Trilokpuri). Self introduction and introduction to the nature of the study were given to obtain free and frank responses. The investigator established a rapport before proceeding for data collection from the subjects. After selecting the subjects, verbal consents was taken from all and assured them about the confidentiality of their responses. Data on demographic characteristic was collected. Pre-test administered on day one and self instructional module given on the same day. The post-test was taken on the 8th day and opinionnaire about acceptance and utility of self instructional module was sought on the same day. No problem faced on during the data collection.

Analysis and Interpretation of Data

The purpose of analysis is to reduce the data to an intelligence and interpretable form, so that the relation of research problem can be studied and tested. Analysis is the categorizing ordering manipulating and summarizing of data to obtain answers to research questions. Interpretation refers to the process of making sense of the results and of examining the implications of the findings within a broader context. Analysis and interpretation of data were based on the objectives of the study and hypothesis to be tested both descriptive and inferential statistics have been used.

Table - 2
Frequency and percentage distribution of adolescent girls by their sample characteristics

Subject		Frequency	Percentage
Age	14 to 17 yrs	5	17
	18 to 21 yrs	25	83
Religion	Hindu	27	90
	Christian	2	7
	Muslim	1	3
Place of origin	Delhi	21	70
	Haryana	2	7
	Uttar pradesh	4	13
	Tamil nadu	1	3
	Andhra pradesh	2	7
Type of family	Joint	16	53
	Nuclear	14	47
Education	High school	27	90
	Graduate	3	10
Education of mother	Illiterate	13	43
	Primary school	6	20
	Middle school	6	20
	High school	5	17

Education of father	Illiterate	4	13
	Primary school	5	17
	Middle school	9	30
	High school	10	33
	Graduate	7% 2	7
Occupation of mother	Un employed/ House wife	21	70
	Self employee	4	13
	Private employees	2	7
	Govt employees	3	10
Occupation of father	Un employed	-	-
	Self employee	14	47
	Private employees	6	20
	Govt employees	10	33
Family income per month	Above 8001	6	20
	6001 - 8000	9	30
	4001 - 6000	6	20
	2001 - 4000	9	30
Source of information	TV	27	90
	Members-family/relatives	2	7
	Friends	1	3

The data in Table-2 represents the sample characteristics of adolescent girls of urban slum as per the following:

Out of 30 adolescent girls 25 were in the age group 18-21 years (83%) and the remaining 5 belonged to 14-17 years (17%). 27 girls were Hindus (90%) and out of the remaining 3, two belonged to Christian (7%) and one Muslim (3%). The place of origin of 21 girls was Delhi (70%), two from Haryana (7%), four from Uttar Pradesh (13%), one from Tamil Nadu (3%) and two from Andhra Pradesh (7%).

It was found that 16 girls belong to joint family (53%) and 14 from nuclear family (47%). With regard to educational qualification 27 girls have studied upto high school (90%) and 3 were graduates (10%). With regard to the educational status of mothers of the adolescent girls 13 were illiterate (43%), 6 studied upto primary level (20%), another 6 upto middle level (20%) and 5 upto high school (17%). Regarding the qualification of fathers four were illiterate (13%), 5 studied upto primary level (17%), 9 upto middle level (30%), 10 upto high school level (33%) and two upto graduate level (7%).

With regard to the occupational states of mothers 21 were unemployed/ house wife (70%), 4 self-employed (13%), two working in private firms (7%) and 3 working in government (10%). The analysis also reveals that the fathers of 14 girls were self-employed (47%), 6 employed in private firms (20%) and 10 government employees (33%).

As per the data the monthly family income of 9 girls was between Rs.2001-4000 (30%), 6 in the group of Rs.4001-6000 (20%), 9 in the group of Rs.6001-8000 (30%) and 6 had more than Rs.8001 (20%).

Television found to be a major source of information to 27 girls (90%) which was followed by the members of the family and relatives for two girls (7%) and friends for one girl (3%).

Self Instructional Module (SIM) in terms of Knowledge of Adolescent Girls of Urban Slum

The findings are related to evaluation of the effectiveness of SIM in terms of knowledge of adolescent girls of urban slum regarding early marriage and its impact on health. The pre-test and post-test knowledge scores obtained through a structured knowledge questionnaire are described and analyzed using both descriptive and inferential statistics. Mean, Median and Standard deviation are highlighted in Table-3

Table - 3
Mean, Median and Standard Deviation of Pre-test and Post-test knowledge score of adolescent girls on Early marriage and its impact on health

	Mean	Median	SD
Pre-test	13.9	14	3.15
Post-test	24.56	24	1.45

The mean post-test knowledge score (24.56) of adolescent girls was higher than their mean pre-test score (13.9), there is reduction in the SD from pre-test to (3.15) to post-test (1.45). The mean and median are closer to each other in both pre-test and post-test.

Table - 4
Area wise Mean, Mean percentage and Mean percentage gain of
Pre-test and Post-test knowledge score of adolescent girls on
Early marriage and its impact on health

Areas	Max scores	Pre-test		Post-test		Mean % gain
		Mean score	Mean% score	Mean score	Mean% score	
Early marriage	2	1.23	61.5	1.9	95	33.5
Adolescents & Factors affecting girls health	8	3.6	45	6.1	76.25	31.25
Determinants of early marriage	6	2.23	37.16	4.6	76.66	39.5
Impact of early marriage on health	8	4.06	50.75	6.7	83.75	33
Solutions to prevent early marriage	6	2.76	46	5.1	85	39

The data presented in Table—4 indicates that the lowest pre-test Mean percentage score was 37.16% in the area of Determinants of early marriage. It represents that maximum knowledge deficit existed in this area, followed by 45% in the area of adolescents and factors affecting girls health, 46% in the area of solutions to prevent early marriage, 50.75% in the area of Impact of early marriage on health and 61.5% in the area of early marriage.

The data in Table—4 further indicates that the post-test Mean percentage knowledge scores in all content areas were higher than the pre-test Mean area i.e 76.66% in the area of Determinants of early marriage, 76.25% in the area of adolescents and factors affecting girls health, 85% in the area solutions to prevent early marriage, 83.75% in the area of Impact of early marriage on health and 95% in the area of early marriage.

The actual gain score and modified gain score for each learning areas was also calculated. Modified gain score indicate gain in knowledge relative to the possible gain.

To calculate modified gain score actual gain is divided by possible gain. The difference between post-test score and pre-test score indicates the

actual gain and the difference between the maximum possible score and pre test score measures the possible gain. Modified gain score was compound, to adjust the achievement variable for a ceiling effect which would predict that areas having a low pre-test score would demonstrate a greater amount of gains than areas having high pre test score. This would not have been possible if only the straight gain score was computed, as the pre test score may artificially restrict the actual gain score. The modified gain scores in five learning areas of adolescent girls structured knowledge questionnaire on early marriage and its impact on health are presented in Table-5.

Table - 5
Area wise Mean, Actual gain & Modified gain scores, and Mean percentage gain of Pre –test and Post-test knowledge score Adolescent girls on early marriage and its impact on health

Areas	Maximum possible scores	Mean scores		Actual gain score	Possible gain scores	Modified gain scores
		Pre-test	Post-test			
Early marriage	2	1.23	1.9	0.67	0.77	0.87
Adolescents& Factors affecting girls health	8	3.6	6.1	2.5	4.4	0.56
Determinants of early marriage	6	2.23	4.6	2.37	3.77	0.62
Impact of early marriage on health	8	4.06	6.7	2.64	3.94	0.67
Solutions to prevent early marriage	6	2.76	5.1	2.34	3.24	0.72

The data presented in Table-5 reveals that the maximum gain has been in the area of concept of Early marriage (0.87), Solutions to prevent early marriage(0.72) Impact of early marriage on health(0.67) ,Determinants of early marriage (0.62) and Adolescents and factors affecting girls health (0.56) respectively.

Thus there is gain in knowledge in all learning areas, thereby indicating the effectiveness of SIM on early marriage and its impact on health was an effective method for enhancing knowledge of adolescent girls.

Self Instructional Module (SIM) in terms of attitude of Adolescent Girls of Urban Slum

The pre-test and post-test attitude scores obtained through a structured attitude scale are described and analyzed using both descriptive and inferential statistics. Mean Median and Standard deviation (SD) are highlighted in Table-6.

Table - 6
Mean, Median and Standard deviation of Pre-test and Post-test attitude Score of Adolescent girls on Early marriage and its impact on health

Knowledge test	Mean	Median	SD
Pre-test	64.03	64	6.84
Post-test	83.5	83	2.66

Data presented in Table-6 depicts the mean, median and standard deviation of adolescent girls before and after the administration of SIM. The mean post-test attitude score (83.5) of adolescent girls was higher than their mean pre-test score (64.03) there is reduction in the SD from pre-test to (6.84) to post-test (2.66). The mean and median are closer to each other in both pre-test and post-test.

Thus it can be inferred that SIM on early marriage and its impact on health was an effective method for enhancing unfavorable attitude towards early marriage and its impact on health of adolescent girls

Relationship between Post-Test Knowledge and Attitude Score of Adolescent Girls of Urban Slum

Table - 7
Coefficient of Correlation between post test knowledge and
Post-test attitude scores of Adolescent girls on early marriage and
its impact on health

Group	Mean knowledge score	Mean attitude score	r
Adolescent girls	24.56	83.5	0.97 (df-28)

The findings given in Table-7 shows the coefficient of correlation between post test knowledge and post test attitude scores of adolescent girls was 0.97 which indicates a significant relationship between post test knowledge and post test attitude scores at 0.05 level of significance. The findings suggest that there is significant relationship between post test knowledge and post test attitude scores of adolescent girls on early marriage and its impact on health. It can be inferred that SIM on early marriage and its impact on health was an effective method for enhancing knowledge as well as unfavorable attitude towards early marriage and its impact on health of adolescent girls.

Acceptability and Utility of SIM by Adolescent Girls

The data was collected through a structured opinionnaire having ten criteria statements. Adolescent girls were asked to give three alternative statements "To great extent," "To some extent," and "Not at all" and the score 3,2,1 were allotted respectively. The total score of each individual was calculated and the mean and SD were computed. Table-8 shows the mean and SD of the score on opinionnaire of the adolescent girls regarding acceptability and utility of the SIM.

Table - 8
Mean and Standard deviation of Acceptability and Utility scores
of Adolescent girls about Self Instructional Module on Early
marriage and its impact on health

Group	Range of scores	Mean	SD
Adolescent girls	27-30	28.5	0.92

The data represented in Table-8 shows that mean score on acceptability and utility of the SIM for adolescent girls. The mean score of adolescent girls i.e 28.5 are closer to maximum score of 30. This indicates high level of acceptance of the SIM by adolescent girls more over SD were 0.92 depicting that there was not much of variation of opinion among adolescent girls about acceptability and utility of the SIM.

Table -9
Frequency and percentage distribution of responses of
Adolescent girls about Self Instructional Module on Early marriage
and its impact on health

S. No	STATEMENTS	To great extent		To some extent		Not at all
		f	%	f	%	
1	I believe that I can learn from these guidelines.	23	76.6	7	23.3	-
2	I find that guidelines provide information which is beneficial for me.	27	90	3	10	-
3	I feel the information provided is adequate and helpful.	28	93.3	2	6.66	-
4	I find the guidelines are easy to understand	25	83.3	5	16.6	-
5	I find the language of guidelines is simple	26	86.6	4	13.3	-
6	I find the guidelines are interesting to read	25	83.3	5	16.6	-
7	I feel that the illustrations are adequate and pictures are meaningful.	26	86.6	4	13.3	-
8	I feel guidelines are helpful for getting awareness about early marriage and its effect on health and to solve the problem.	29	96.6	1	3.3	-
9	I feel that the guidelines provide me with the information that will help me to plan my family in future	27	90	3	10	-
10	I feel that it can be used without anybody's help	23	76.6	7	23.3	-

The data in Table-9 shows that there is high level of acceptance of SIM by adolescent girls. There is 96.6% agreement on item 8 “to the great extent” by adolescent girls and 93.3% agreement on item 3 and 90% agreement on item 2 and 9 respectively by the adolescent girls, where as there is 86.6% on item 5 and 7 by adolescent girls” to the great extent”. None of them responded “to not at all”

The overall findings on acceptability and utility of the SIM indicates that SIM on early marriage and its impact on health had high acceptability and utility as a method of teaching by adolescent girls

Findings

1. Most of the adolescent girls (83.3%). were in the age group of 18-21 years and majority of them (90%) were Hindus.
2. Regarding place of origin majority of adolescent girls (70%) belong to Delhi.
3. Majority of adolescent girls (53%) belong to joint family and (47%) from nuclear family.
4. Maximum number of the adolescent girls, (90%) of them had education up to High school and (10%) were graduates
5. Educational status of the parents indicates that 43% of mothers were illiterates, 20% each primary and middle level and 17% high school level. However, 30% of fathers have passed middle school level, 33% high school level, 7% graduates and 17% primary level. Only 13% were illiterate.
6. Regarding occupation of parents, majorities (70%) of mothers of adolescent girls were unemployed and majority (47%) of fathers was self-employed.
7. Total income per month indicates that 30% each belong to Rs.2001-4000 and Rs.6001-8000 and 20% each belong to Rs.4001-6000 and above Rs.8001.

8. As regards source of information majority of adolescent girls (90%) got through Television followed by 7% thorough family members and relatives and 3% through friends.
9. The mean post-test knowledge score (24.56) of adolescent girls were significantly higher than their mean pre-test score (13.9).
10. The lowest pre-test Mean percentage score was 37.16% in the area of Determinants of early marriage. It represents that maximum knowledge deficit existed in this area, followed by 45% in the area of Adolescents& Factors affecting girls health ,46% in the area Solutions to prevent early marriage , 50.75% in the area of Impact of early marriage on health and 61.5% in the area of concept of Early marriage.
11. The post-test Mean percentage knowledge scores in all content areas were higher than the pre-test Mean area i.e 76.66% in the area of Determinants of early marriage, 76.25% in the area of Adolescents and factors affecting girls health, 85% in the area Solutions to prevent early marriage, 83.75% in the area of Impact of early marriage on health and 95% in the area of concept of Early marriage
12. Area wise Mean , Actual gain and Modified gain scores, and Mean percentage gain of Pre –test and Post-test knowledge score of adolescent girls on Early marriage and its impact on health indicates that, that the maximum gain has been in the area of concept of Early marriage (0.87), Solutions to prevent early marriage(0.72) Impact of early marriage on health(0.67) ,Determinants of early marriage (0.62) and Adolescents& Factors affecting girls health (0.56) respectively.
13. The mean post-test attitude score (83.5) of adolescent girls were significantly higher than their mean pre-test score (64.03)
14. A significant positive correlation .97 was found between post test knowledge and post test attitude scores of adolescent girls after the administration of SIM.
15. SIM was found to be by highly acceptable and useful by adolescent girls

To conclude self instructional module on early marriage and its impact on health were found to be an effective method for enhancing knowledge as well as unfavorable attitude towards early marriage and its impact on health as there is a significant gain in knowledge and attitude scores of the adolescent girls.

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Kerala State Achieved Total Primary Education

T. S. Nair

The impressive march of Kerala on the education and various other socio-economic fronts has been due to what Nobel laureate Amartya Sen has called "the constructive and combative roots of its historical background". The constructive roots are Kerala's indigenous intellectual history and the impact of its global exposure. The latter has resulted in a tolerant pluralism in the State, brought about by opening its doors to other peoples and cultures, because the host society remains alive to learning from other traditions, and other ways of living.

-Mohammad Hamid Ansari

Hon'ble Vice President of India

*in his speech on January 13, 2016 while
declaring Kerala as the first State in India
to achieve Total Primary Education.*

Background

Education is a powerful tool for social change. It acts as an instrument for generating socio-economic growth and makes the people to become critical and active participants in the process of liberating themselves from ignorance, misery, degradation, injustice, exploitation, inequalities and economic and social evils. Adult and Continuing education stresses the unity of the concept of education, both child and adult. It provides an opportunity to people at grassroots level to strengthen their literacy skills and to take-up other activities, such as to continue their education, increase their income and improve the quality of their lives. The objective of Equivalency Programme is to provide an alternative education programme equivalent to the exiting formal system of education, be it related to general or vocational education.

Equivalency Programme and Kerala

Kerala is the most literate state in India. The literacy rate as per 2011

This article is based on of the external evaluation conducted by State Resource Centre, Kerala on the Total Primary Education Project 'Athulyam'.

Census final figures was 94%, out of which male was 96.11% and female 92.07%. It is the first state to introduce Continuing Education Programme (CEP) in all the 14 districts in the year 1998 itself. The Continuing Education Centers (CECs) visualized were with the wholehearted support of Local Self Government Institutions. Equivalency Programmes also organized in the state for level (standard) 4, 7 and 10.

Total Primary Education Programme: Athulyam: Stage-I (2011-13)

During the year 2010, over whelmed with the spirit of the replicable models of Continuing Education the Government of Kerala initiated another movement called ATHULYAM: stage-1 (Total Primary Education Programme: Stage-1), with the aim to make Kerala the first Total Primary Education State in India. The programme was initiated as a public campaign under the auspices of Gram Panchayats. Organizing committees were constituted, survey was conducted, Instructors were identified and trained based on the module, arranged convenient class rooms in appropriate places for each 15 learners and conducted the classes focused on the 'bridge course' and subsequently pursued by the text books of Athulyam followed by locally made text books that deals with the history and developmental activities of the local area. Learning materials were collected through resource mobilization and distributed to the learners. Co-curricular activities such as study tours, cultural events, vocational trainings etc., were also conducted. The programme came out successfully in 127 Grama Panchayaths, 8 Corporation wards, and 6 Municipality wards. Thus Athulyam programame became one of the most popular and effective literacy movements in the history of Kerala.

Athulyam: Stage-II (2014-15)

Athulyam - Stage-II is a unique opportunity in the area of non-formal education which focuses on the learners who are kept away from the formal education system due to various reasons. The second stage focuses to cover all the left over Panchayats under the scheme, with the cooperation of all concerned and to declare Kerala as the 'first total primary education state' in the country.

The beneficiaries of the programme are the people within the age group of 15 to 50 who have not yet achieved primary education. The subjects of study include Malayalam, English, Mathematics, and Environment Science. The first step of the programme is to identify the people who are not familiar

with alphabets and to teach them alphabets. Then, to congregate the learners at different level 'bridge course' has to be implemented. This has to be followed by the teaching of equivalency lessons. It is specified that the lessons should be taught at least 100 hours with in a period of four months.

Objectives of Athulyam Programme

The objectives of Athulyam programme are the following:

- Transform Kerala into a state having total primary education by the year 2015.
- Achieve cent percent equivalency at 7th standard level by the year 2017.
- Attain cent percent equivalency at 10th standard level by the year 2020.
- Make higher secondary level equivalency complete by the year 2015.
- Extend education to all and improve quality of education.
- Accomplish holistic development through equivalency programmes.
- Improve the employment opportunities and quality of life.
- Create revitalization in social, cultural and economic fields.
- Accelerate women empowerment programmes.
- Improve health, hygiene and environmental awareness.

Beneficiaries

The beneficiaries of the Athulyam project were, Illiterates, Neo-literates, Drop outs from schools, Differentially able people, Less educated SC/ST people, Fisher folk in the coastal area, All people who could not pass 4th standard, People dwelling in the areas classified as linguistic minority area, Participants of employment generation programme and Participants of Kudumbasree self help groups.

The Major Activities and programmes conducted / organized of Athulyam were Formation of Organizing Committee, Preparation of the project and approval, Training of the Preraks, Training of KRP, Workshop for gathering information, Gathering of Information/Survey of the learners, Advertisement activities, Finalization of classes and its location, Identifying the Instructors, Training of the instructors-First stage, Meeting of the learners/ inauguration, Starting the class, Distribution of Study Materials, Training of the Instructors-Second Stage, Class visit, Medical Camp/Distribution of

reading glass, Vocational training, Preparation of local text books, Cultural festival, Study tours, Evaluation of the classes, Model examination, Examination, Valuation, Declaration of result/Distribution of certificates, Evaluation of the Project.

Major achievements

- Imparts primary education to all people between 15-50 years of age.
- An opening to differential peoples learning approach
- Improves the level of social life of the people.
- Self-awareness and self-esteem of the learners will increase
- Become a new model for voluntary work
- Peoples participation increases in developmental activities.

Declaration of Totally Primary Educated State

On completion of the above formalities and all activities in the successful way the state government is expected to declare Kerala as 'Totally Primary Educated State'.

Methodology of Evaluation

The present evaluation has adapted the norms of National Literacy Mission, Government of India NLM, but has also gone in to the quality of programme delivery. The components covered under this evaluation are quality and the achievement of the programme. State Resource Centre Kerala is assigned to conduct the external evaluation since National Literacy Mission Government of India insists on its validity. SRC emphasizes on the components covered under the quality of delivery of the programmes:

- Implementation process.
- Sustainability and community involvement.
- Preraks efficiency and quality of the programme.
- Training programmes conducted and its performance.
- Planning and convergence with other ongoing programmes done by DLM.
- Quality of Teaching / Learning materials used
- Involvement of PRIs and the quality of services rendered.

Need and Significance of the Study

The Equivalency Programme has been implemented in Kerala with the ultimate goal of creating a Learning Society. It is a multi level programme that can enable neo-literates to move upwards in a step by step manner. The programme is being conducted by following a curriculum for three levels 4th level, 5th level and 10th level pattern. A multitude of delivery techniques are practiced. The principle applied in Equivalency programme is the effective utilization of available and competent personnel as teachers/ tutors/ Facilitators/ Instructors. In this context, it is significant to conduct the study Impact of Equivalency Programme for generating interest among beneficiaries towards Continuing/Life Long Education.

Objectives of the Evaluation

The major objectives of the evaluation are:

- To assess the nature, quality and kind of programmes with reference to human resource development, financial resources, and utilization, planning the programmes and implementation and monitoring and evaluation.
- To study the achievement level of literacy/ education and skill acquired by the beneficiaries through the programme.
- To study the methods and strategies, the organizational network, and available physical infrastructure facilities and usage of teaching /learning materials.
- To examine the manner in which training programmes were conducted and the overall profile of beneficiaries and functionaries.
- To study the collaboration and involvement and role of various stakeholders of the programme.
- To assess the present level of beneficiaries attainment in the part of education at par with formal system.
- To assess generated interest among beneficiaries of TPEP towards lifelong education.
- To identify the difficulties encountered and possibilities of continuing education programme.

Design of the study

Both conventional and participatory methods were employed for the evaluation. The study is descriptive and analytical in nature. Formative survey was adopted. The techniques used for data collection are Questionnaire, observation, interviews, interaction with functionaries and learners, discussion with community leaders and study of records, reports etc.

Tools

Structured Interview Schedules were used for collecting data from the different groups and stake holders. Reports published by DLM and SLMA were also verified. The educational level of the learners were assessed with a tool to measure the reading, writing and arithmetic level. Unstructured interviews were also conducted for the learners by the evaluation team. The major tools used were Evaluation Schedule for learners, Questionnaire for Preraks, Questionnaire for Instructors of the campaign, Questionnaire for District Coordinators/ Assistant Coordinators, Interview Schedule for LSGI Representatives, Questionnaire for Resource Persons, Observation schedule to observe infrastructure facilities available in the CEC/NCEC and to understand the involvement of community people and Tool for Focus Group Discussion.

Sample size and Sampling procedure

The campaign was completed in all the 14 districts of the state and in which four districts were taken as sample, viz. Wayanad, Palakkad, Ernakulam and Thiruvananthapuram. Thirty Two NCECs and CECs were selected for the study. The centers were selected on the basis of a stratified random sample.

Data have been collected from the following groups:

- Learners who have completed the 4th level equivalency.
- Instructors of the programme.
- Preraks of NCECs and CECs.
- Panchayat/ Municipal Presidents/ Members
- Resource Persons/ Experts in Adult Education.
- District Coordinators / Assistant Coordinators

The data was collected systematically using appropriate tools for different data and also administered literacy test. The test was supervised and valued properly by the evaluation team directly with the help of Key Resource Persons and Preraks.

Major Findings

Internal evaluation of the Athulyam Project was conducted by the District Literacy Missions in the month of June 2015. Question papers for each subject were prepared by KSLMA. Each subject carries 75 marks. Written examination was conducted in Malayalam, Social Science and Mathematics. Written as well as oral examination was conducted for English. The total number of learners who passed in the internal examination was 19957. In Wayanad district 97.42 percentages of the learners was passed. In Palakkad district a total of 99.79 percentage was passed. In Ernakulam the total percentage of pass was 99.81. The percentage of learners who pass in the internal examination was 99.98. KSLMA have conducted the final evaluation/ examination. The declaration of results has organized at Panchayat level.

The external evaluation was conducted for 316 learners from the four districts. There are 86 learners from Wayanad, 83 from Palakkad, 84 from Ernakulam and 63 from Thiruvananthapuram district. Among them only 5 learners (1.58%) were men and the rest 311 were women. It is found that the number of male learners in all district were very meager. It is a clear indication of the higher awareness level of the women and their necessity of education than men. Answer paper of each learner is valued systematically and marks were entered in separate sheets. In Wayanad district the total number of learners who attended the external evaluation was 86 in which 82 passed in Malayalam, 86 passed in Social Science, and Mathematics and 85 passed in English. The district average is 98.55 percent. In Palakkad district the total number learners who attended in the external evaluation was 83. The number of learners who passed was 81, 82, 82, and 81 in Malayalam, Social Science, Mathematics and English respectively. Thus the district average of success was 98.25 percent.

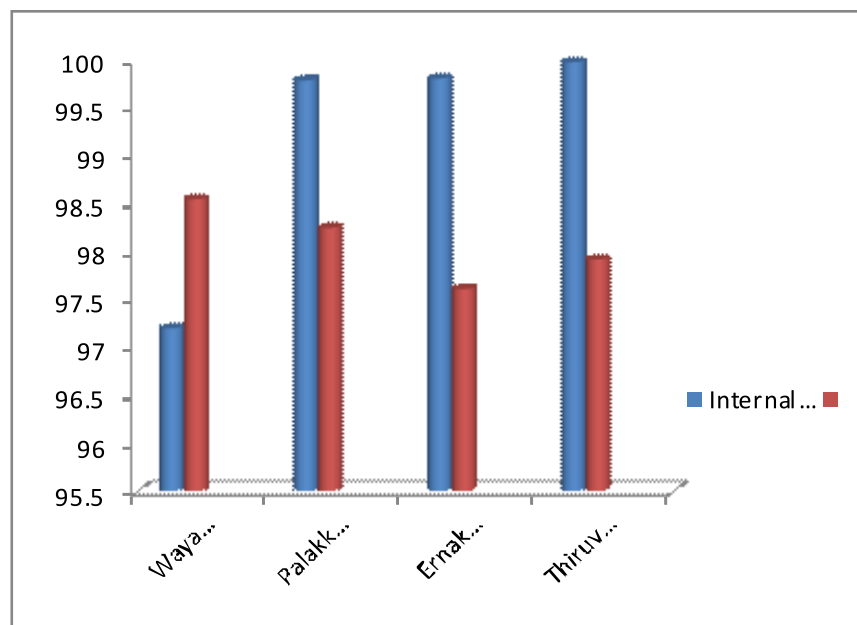
The total number of learners who attended the external examination in Ernakulam district was 84, out of which 83 passed in Malayalam, Social Science and Mathematics. . But 81 persons passed in English and the district average of success is 97.63 percent. The district average of

Thiruvananthapuram district is 97.26 percent. 63 persons appeared in the examination. The subject wise success shows that 62 persons passed in Malayalam and social science 61 passed in Mathematics and 60 passed in English.

Comparison between Internal and External Evaluation

While we compare the internal and external evaluation, it is seen that the success level of the learners in both the evaluation is almost the same.

Graph
Comparison of Results between Internal and External Evaluation



In Wayanad district the percentage of success in the internal evaluation was 98.55 and external evaluation 97.42. Increase in the external evaluation is 1.13 percent. The percentage of success in Palakkad district in internal evaluation is 99.72 and external evaluation is 98.25. Thus 1.47 percent decrease is found in the external evaluation. In Ernakulam district the percentage of success in internal evaluation is 99.98 and 97.63 in external evaluation. The decrease level in external evaluation is 2.26. In

Thiruvananthapuram district the internal and external evaluation result are 99.48 and 97.26 respectively. Here, the decrease level is 2.22 percent. In short, from the study there is clear indication that the Athulyam project was conducted well and the percentage of success in all districts under study are above 97 percent. Thus Primary Education has been totally achieved by the districts. Since the achievement of the sample four districts had achieved total primary education the state can also be declared a State which has achieved Total Primary Education.

Major Functionaries

One hundred **preraks** were taken as sample for the study. Gender-wise distribution of the preraks shows that women preraks outnumber the men preraks. It is seen that 95 percent of the preraks were women. Age wise distribution of the preraks indicates that 48 percent of them are in the age group of 36-45 years and 31 percent belongs to 46-55 years. Preraks could also be seen in all major religious categories. However, Hindus dominated followed by Christians. Caste wise distribution of the preraks indicates that a vast majority of the preraks belongs to forward caste. It is seen that proper reservation system was not followed in the selection. Income-wise distribution of the preraks indicates that 71 percent were in the monthly income below Rs.3000/-. The insufficient honorarium causes the smooth functioning of the project. The minimum educational qualification for a prerak is SSLC (Secondary School Leaving Certificate) and that of the nodal prerak is graduation. However, majority of the preraks have higher qualification than the prescribed norms. Besides general qualifications, some of them have technical and professional qualifications. Assistant Preraks were also appointed to each centre to assist the preraks. The posts of preraks and assistant preraks were vacant due to delay in recruitment in time. Majority of the CECs do not have Assistant Preraks.

Instructors were appointed temporarily in LSGI wards where classes are arranged. Some of them worked fully honorary and all of them extended their services without honorarium after the project period. Though the Instructors are getting meager honorarium and no allowance, they have extended dedicated services for the programme because of their commitment to the community. The instructors involvement in the programme is found highly dedicated and appreciable. The profile of 60 instructors was analyzed for the study. Regarding age wise distribution, 50 percent of them were in the 36-45 age group and 35 percent of them were

above 35 years. 82 percent of them were married. The educational background of the instructors shows that 57 percent have Pre- Degree or Higher Secondary Education and only one person have post graduation. It is also noted that 70 percent of them had below 5 years experience. While analyzing the income level it is seen that 73 percent of them were in the below rupees 2000/- per month income group. This shows that all of them were unemployed.

The success of any programme depends mainly on the sincerity and commitment of the functionaries. **Key Resource Persons** were selected for each GPs/Blocks/Municipality. As part of the external evaluation 24 Key Resource Persons (KRPs) were invited from the four districts for a focus group discussion. Views and suggestions from an external functionary are important. From the analysis, it is seen that out of 24 KRPs 16 (66.67 %) are male. The educational qualification shows that 50 percent of them below PDC or Higher Secondary Education. 8 persons were graduates and 4 were Post Graduates. It is also noted that majority of them had additional qualification including were having g PhD. Though there is a provision for monthly honorarium for a limited period, majority of them worked honorary. Majority of them are retired persons with and rich experience in literacy and CE activities. Each Panchayat/block/Municipality appointed one coordinator each for the programme fully on honorary basis and they supervised the programme. Most of them are retired teachers/ government servants with rich experience in literacy and continuing education activities. .

Participation and support from the **representatives of the PRIs** could be seen in all places irrespective of politics. Involvement from Governmental and Non Governmental agencies and line departments were lacking in the programme. Financial problems adversely affected the smooth functioning of the project. Some of the PRIs have not included budget provision for the campaign and neglected the programme though the district panchayats insisted on it.

Learners are the main beneficiary group of the project. The programme was addressed to the backward and marginalized sections of the community. Both illiterates and neo-literates were addressed in the programme. Opportunities are given to the unreached sections of the community, such as mentally challenged to obtain the equivalency certificates through this programme. The programme is not restricted to the age group of 18-50. Learners from different age group have also benefitted from the

programme. Socio economic profile of the learners is also very important to chalk out follow up programmes for them.

One hundred learners were personally interviewed by the evaluation team using a structured interview schedule. While analyzing the interview schedule it is found that 85 percent of the learners were male and 84 percent come from rural background. Majority of them belongs to the age group of 36-45 years followed by 46-55 years. The occupation of the majority of learners is coolie followed by house wives. Regarding income level 44 percent of them belongs to the category below Rs. 2000/-. This shows that majority of the learners are from a very poor background. Majority of the learners were of the opinion that the Equivalency Programme is very useful in many ways. Some of the learners could not get the pass certificate due to non availability of birth certificates.

Class timings are not suitable to the learners due to their responsibilities at home and occupation. Majority of the learners are coolies and manual laborers, they were not able to participate in the classes regularly. Thus majority of the instructors went to the houses of the learners and completed the task. It was found that documentation of the classes was not done properly. However attempts were made to document important activities by the Preraks. Some of the learners could not get the pass certificate due to non availability of birth certificates. Most the classes were organized in CECs. All CECs have its own buildings. However, some of the classes were organized in public buildings such as panchayat buildings, School buildings, and tribal settlements, Arts and Sports Clubs, Libraries and even in learners' houses. Electricity was not available found in several centers.

Effective organization of activities by the CEC, by and large, depends upon the information and facilities available at the centre. The evaluation team visited all the CECs /NCECs for the study are located at puce structure. The size of the buildings is quite large in most of the centers. There was no problem of accommodation in most of the cases. Most of the CECs /NCECs are located at PRI cultural centers, Youth clubs libraries and other public buildings of PRI. Minimum furniture was available in all the centers. Most of the furniture was given by PRIs and SLMA. Arrangements of the class rooms are also not satisfactory still the instructors managed by conducting the classes in their own houses and the learner's houses.

Every CEC must have adequate number of teaching, learning materials to cater to the needs of the beneficiaries. In the analysis Teaching /Learning Materials other than text books are not widely used in most of the classes. It is observed that the number of library books in the centers by and large was very little. Some of the books were made available by SLMA and SRC ten years back. Due to non availability of relevant library books the learners could not use the library properly. News papers and magazines were seen only in few centers. It is learnt that SLMA is not releasing any grant for procuring books, newspapers and other periodicals. Teaching /Learning Materials other than text books were not widely used in most of the classes. In some centers text books were received very late. However, the preraks managed to overcome the problem.

Training of Preraks/Nodal Preraks/Assistant Preraks has been organized in the initial period of the project. Later the number and duration has been limited when the Athulyam project has been organized by the District Literacy Mission. Preraks and instructors were given special training by DIET and DLM for the project. But continuous and follow up training could not be given.

Environment creation was insufficient. Media has given sufficient priority to the programme in some areas. This was reflected among the general public. Enthusiasm, encouragement and voluntarism among the public is lacking compared to Total Literacy Campaign of the state in 1990-91.

Monitoring of the programmes has done by external agencies like DIET, and DLMs. Improved methods of monitoring could not be practiced. Documentation of the classes was not done properly.

Involvement of LSGIs

The local bodies have spent money from their budget for the programme. State Government has issued separate order for the implementation of the project. Each Panchayat/ Municipality appointed one coordinator each for the programme fully on honorary basis and they supervised the programme. Most of them were retired teachers and government servants. The involvement of the PRIs is commendable. Participation and support from the representatives of the PRIs could be seen in all places irrespective of politics. Involvement from Governmental and Non Governmental agencies and line departments were lacking to the programme. Financial problem

adversely affected the smooth functioning of the project. Some of the PRIs did not include budget provision for the campaign and neglected it though the district panchayat insisted on it. The support of the local self government institutions are found very effective. It is observed that the centers having cooperation and support of LSGIs worked very effectively.

NGOs

Self-Help Groups (Kudumbasree) units have actively participated in the successful implementation of the programme. There was very little involvement of NGOs is seen very less. Initiatives might have been taken to involve youth organizations, Women's associations, trade Unions, Libraries etc.

Management System

The programme is being implemented through Panchayati Raj Institutions. District Panchayats/Block Panchayats and Gram Panchayats also came forward to undertake the project by putting budget provision. All the Municipalities and Corporations have also come in the fray. Political support of the programme is highly appreciable. Some of the instructors extended their service by taking special classes at the learner's houses since the learners are not able to attend the classes regularly. Drop-out rates recorded is very meager. Convergence from other government departments was not up to the desired level. It is also seen that the self confidence and motivation to study in higher levels improved in majority of the learners. The programme has also empowered the learners especially women.

Major Recommendations

- The Athulyam Project was done successfully completed and the state can be declared as Totally Primary Educated. The model emerged from the campaign, should be extended to other states of India to achieve total primary education campaign.
- There is a need to ensure that the learners are provided all facilities to achieve the desired level of knowledge, skill and competencies and that these competencies are tested properly by the equivalency examination board. It will be desirable to extend the facility of Total

Elementary Education to the school drop-outs and school non entrants as a follow up of the Athulyam project. The KSLMA should take urgent steps to issue pass certificates including date of birth for further study. Provisions will be given to the learners to join next levels of equivalency and also for continuing education and to improve the quality of life of the beneficiaries.

- State government should release financial assistance in addition to PRI fund. Resources of KSLMA, SRC, JSS and other Departments will be explored for the campaign. Government should consider how to give certificates to the learners who could not submit birth certificate. Coordination of all government institutions should be ensured in future programmes. Experience and expertise of non Governmental Organization should also be explored for similar programmes. Assistance to the similar programme in addition to the PRI fund. Government should give permission to utilize their plan fund for the programme in future. Proper steps should be taken by the government to change the attitude of the people towards the programmes. The honorarium of Preraks needs to be increased. More training is needed for Preraks to engage classes. Functionaries at all levels should be recognized by issuing certificate and weightage to other projects run by panchayats. Some of the posts of Preraks and Assistant Preraks are remaining vacant even though selection of Preraks is made by the Gram Panchayat Municipal Committees. KSLMA should give permission to fill up all posts for the smooth functioning of the project. The vacant posts of Assistant Coordinators should be filled immediately.
- Involvement of State Resource Centre from the initial stage itself should be made mandatory in future programmes. The state and District Literacy Missions should be strengthened by providing sufficient salaries and service rules. Kerala State Literacy Mission Authority should give more support for the programmes.
- Permanent buildings and infrastructure should be provided to all CECs for articulating this type of campaigns. It would improve the functioning of the CECs. Supplementary reading materials should be procured from SRC for strengthening CECs. The District authorities should take immediate steps to start vocational courses and training to the learners. Follow up programmes should be planned

for successful learners. Teaching learning materials need to be supplied in time. Provisions should also be found out for vocational and skill development training programme with the TPEP.

- Instructors should be given strict direction to follow documentation procedure from the beginning of the programmes in future. Recognition and incentives should also be given to learners and resource persons to motivate them for further learning.
- It would be desirable that all CECs and NCES are provided facility of Computer literacy which has become popular among the young educated sections of the society. The study centers need to be provided with required facilities such as Computers, furniture, proper classrooms and toilets.
- Monitoring of the programmes shall be done by external agencies like DIET, and SRCs. Improved methods of monitoring could not be practiced. Concurrent evaluation will be appreciated.
- Documentation of the classes was not done properly. Effective documentation strategy should be framed before starting this type of projects.
- The Non formal Education system should sustain in the state. A Directorate of Non Formal Education should be stated by the state government to streamline all programmes and to coordinate agencies in the field. Financial assistants from central government should be procured for overcome financial crisis.

Conclusion

The Athulyam Project has been implemented very systematically. The Panchayati Raj Institutions and its elected representatives of the district have wholeheartedly supported the successful completion of the programme. The immediate need of the learners is to get recognition for the equivalency programme. As an evaluating agency SRC has given high priority to emphasize the importance of Continuing and Lifelong Education in the state. The Athulyam programme was a model programme and the suggestions and findings of the proposed study may help the State and Central Government to launch this type of campaigns in other parts of India.

It is clear that, through this campaign remarkable changes are already made in the socio-economic- and educational aspects of the beneficiaries' life. Above all, this will be a land mark in the history of Adult, Continuing and Lifelong Education of India and will be a mile stone in the history of literacy of Kerala.

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Partnership for Service Delivery in Rural India - Micro-level study

**R. Venkata Ravi
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Introduction

Multiple organizations are working for the development at grassroots level as a result of the democratic and administrative decentralization process, by opening up opportunities for engaging civil society organizations to enhance the legitimacy of a democratic process. As a consequence, the civil society organizations are increasingly recognized as the most appropriate actors when dealing with public policy and development programmes. It is because addressing certain issues or problems, may be beyond the easy reach of state bureaucracy, and, on other hand, relatively of little interest evinced by the private sector. Civil society organizations, increasingly better organized and informed, are also aware of their potential role in the policy process. They understand the importance of building more effective relationships with government in order to create and implement development policies and programmes that are more responsive, sustainable and cost-effective in the rural areas¹.

The process of decentralization is mainly for devolving of functions and authority that give opportunities for the people to play their role, which can ensure their initiatives and involvement in the development activities at grassroots level. In Indian context, constitutionally endowed Local Self Government, known as Panchayat Raj Institutions (hereinafter, Panchayat) is best suited to operate at the community level. As stated by Dreze-Sen, Panchayat is one of the most important instruments of enabling people's participation and the other instruments include voluntary agencies, self- help groups, watershed committees and similar organizations at grassroots level. Both the 73rd and 74th Amendments have laid the ground for fundamental changes in how people can participate in expansion of social opportunity².

NGOs operate at the grassroots level as catalyst for social mobilization and also bringing changes that are much needed for rural transformation.

Over a period of last five decades, the NGOs in India have gradually shifted their focus in their operations and have become one of the major stakeholders at the grassroots level in the context of rural development. The changing roles of NGO could be traced from charity in 1960s, to handle welfare and relief activities during 1970s, to initiate development process in 1980s, 1990s onwards also got engaged in the Advocacy role³. In the era of decentralization and empowerment, formulation of public policy seems increasingly undertaken by NGOs and, thus, they are becoming one of the significant players in the Governance⁴.

Social mobilization process has to result in organizing the people, keeping in mind various socio-economic dimensions and needs at the grassroots level. Once people are organized, capacity building of such organizations becomes necessary to change from the culture of dependency to a culture of self-reliance. In the decentralization efforts, Institutional strengthening of Panchayat is also a crucial strategy at the micro-level, in addition to the promotion of Community Based Organizations (CBOs)⁵ and their capacity building for sustainable rural development. The NGOs are also involved in organizing community into various organizations at grassroots level, that include - women, farmers, youth and also users of various "Resources and Services", like land, water, health, education. The NGOs' role in organizing the people is aimed at enabling them to come together to work for effective use of locally available resources to provide services to meet the local need and priorities. The NGOs mobilize local resources⁶ and also raise sizable external⁷ resources for the welfare and development action at grassroots level.

Both government and non-governmental organizations have introduced a system where people are involved in decision making process to have community control over use of Resources and delivery of services. It has been done as part of decentralization process with the aim of transferring responsibilities and sharing of power. It has resulted in the emergence of village level organizations and user groups to manage various resources at local level. The CBOs, like User Committees and Self- Help Groups (SHG), have influence on local self-governance, as they exist parallel with the constitutionally established Panchayat Raj Institutions. On other hand, the Community Based Organizations have become new channel for enlisting people's participation and also to manage the resources and services in the rural areas⁸⁸

Benjamin Powis, (2003), Grass Roots Politics and Second Wave of Decentralization in

. Sprouting of this kind of grassroots organizations has created a new situation in the process of decentralization in rural areas. The emergence of these organizations has created scope for horizontal linkages that includes collaborations and cooperation among different organizations working at village level. Multiple organizations working at local level have chance of confrontation with each other while managing the development process in rural areas cannot be ruled-out.

Concept of Partnership

Partnership facilitates for combining efforts and enables partners to have a greater impact on policy and practice than they would have been on their own. This is because partners from different backgrounds can contribute complementary skills and resources to the solution for difficult problems that no organization could effectively address on its own⁹. The partnership enables to have better content of the programme through enrichment and sharing of knowledge among the partners. The word “partnership” is a term that means different things to different people.

Mostly, a partnership may be defined simply as a collaborative endeavour between two or more organizations that pool resources in the interest of common¹⁰ objectives. Key reasons for entering into partnership are looking for inputs and search for change. Partnerships, by their very nature, represent a sustained commitment to move forward together to reach a common objective. The sustained commitment in a partnership context vary depending on the complexity of the issue, the players involved, the political and cultural backdrop, and the resources available to support the partnership. Thus, all those involved are, while working towards a goal, have to share the power among them to decide and work on what has been decided. The term “partnership” does not imply an equal distribution of power, resources, skills and responsibilities.

In fact, partnerships may encompass a broad array of arrangements, from informal associations or networks to formal legal agreements. Partnerships are about power, both individual and collective. Although power is always present, it is rarely equal. A successful partnership values and openly acknowledges different types of power that each individual or

organization brings into the work environment¹¹. While working in partnership situation among a set of organizations, understanding is essential to sustain collective efforts to carry forward the development.

The partnership can be defined in the development field with many meanings covering alliances relationship. It is understood as the growing conviction that solving a society's problems requires a combined effort of diverse institutions, including aligning and combining their core competencies and converging their functions. The term "partnership" refers to bringing together parties with very different objectives, resources and incentives around shared goals and equitable allocation of authority, efforts and resources¹².

Partnerships between organizations are critical to sustain rural development initiatives. But it can be difficult to assess the progress and effectiveness of partnership. Unlike business contractual relationships that often involve an exchange of goods and services, some elements of a partnership are intangible, which makes trust and transparency even more important. In the context of the good governance working together is very much essential component. Therefore, it is very significant to understand the various elements of the partnership. It would facilitate to identify the factors that matter in the partnership amongst the grassroots organizations working for rural development. The following section deals with elements or principles of the partnership.

Best Practices at Grassroots' Level

Partnership among Grassroots organization for rural development is significant in the context of sustainable development. The collaborative efforts are made by various organizations to address the felt-needs and priorities of the rural community. The study has attempted to collect information on partnership scenario in which the GP, NGO and CBOs are working together and whether that model is replicable elsewhere; information on such best practices are discussed in this paper.

Putting the Gram Panchayat first

Modern Architects for Rural India (MARI) is a grassroots NGO started in 1988 by a team of social work professionals. MARI is working for the uplift of vulnerable sections of the society in the Warangal district of Andhra Pradesh,

India. MARI has taken an approach of creating and enabling involvement of the community to take control of their resources and initiate process of development. While working towards empowerment of rural and tribal communities, emphasis was laid on “education”. MARI is focusing on the issues related to Primary Education, Women Empowerment, Panchayat Raj Development, Watershed Development, Organic Farming, Sustainable Agriculture, Livelihood Promotion, Health (including hygiene and sanitation), and Strengthening of CBOs. MARI has qualified and experienced staff; and its Management is run by experts and retired professionals from Government agencies and Banks. MARI is also actively participating in networking for policy change amongst NGOs within Telangana region and also at the state, national and international level. Most of the senior Executives who are involved in daily affairs of MARI are with rich background of previous working experience in NGOs.

Civil society organization MARI has made many efforts in its area of operation to bring together various CBOs to work with GPs. In fact, under “Panchayat Raj Development” initiative all the CBOs and GPs are working closely with each other. All issues at the village level are brought to the notice of GP by the concerned user group or by the people. Interestingly, all active participants from the community are members of a CBO or in the Committees established by the GP / MARI in the village to manage their resource / service.

In Anantharam village, the GP has constituted a Village Development Committee (VDC) in which all CBOs and User Committees are Members. In each of the User Committees the Ward Members are working as representative of the GP. This system helps both GP and CBOs to function in a coordinated manner to address the concerned issues. This arrangement itself is a best practice for effective partnership among grassroots organizations. However, it is observed that one of the major issues in the village is collaboratively addressed by these three organizations – NGOs, GPs and CBOs.

Drinking water is one of the major concerns of the villagers though the availability is found to be adequate. The issue is that of quality of water available is not suitable for drinking purpose. The issue was discussed in one of the meeting of the Gram Sabha and subsequently in the GP. The Committee on drinking water and sanitation has discussed initially within the committees to enlist all possible / feasible alternatives. Subsequently,

the matter was taken up in one of the GP meetings in which it was decided to have a water purification plant in the village. The matter was taken up for discussion in a joint meeting of the GP, MARI and Drinking Water Committees. All these organizations have decided to work together to address the issue.

MARI has made its stand clear to people that “it is a major problem of the village and if village community is ready to contribute in all aspects, including ideas and labour facilities, MARI would also contribute to have Water Purification Plant (WPP) in the village”. As the villagers agreed with this, they jointly worked out strategies to address the issue. They are as given below:

- Plant to be located in the building owned by GP.
- Plant will be managed by the drinking water committee.
- The user charges are collected for supplying purified water.
- MARI brought external resources and provided resources to establish the plant.
- Water is supplied with a condition that the families have to use toilet.

The Drinking Water Committees is responsible for the entire management of the plant and supply of purified drinking water within the village. The Committee also collects user charge which is agreed to by the community as Rs. 3/- per 20 litres. Daily 20 litres of purified water is provided to each family in the village. The plant has been in use for the last 4 years. The Committees has a reserve of Rs. 40,000 in its account apart from incurring expenditure to maintain the plant. With increasing demand for purified water, many nearby villagers have started visiting the Anantharam village. The elements of best practice noticed in this village are:

- Willingness of the people to address the problem as it is most crucial issue.
- Women took leading role as they are directly involved in managing to fetch potable water every day.
- Partners have contributed according to the need and capacity.
- GP has provided not only building, but an exclusive bore well as well was established to supply water continuously to the plant.
- Linking the drinking water supply with use of toilet made the people to cooperate for the sanitation.

When a pressing problem is taken up by the community, level of participation is found to be more. Likewise, willingness of the people to contribute in terms of local resources, the NGO could bring in required resource. The GP has a local government participated in the “people’s initiatives” by sharing vital resources that includes building and finance.

Women show the way for partnership

Mahila Margadharsi (MM) is woman headed organization working for rural development in Srikakulam district, Andhra Pradesh in India, since 1998. The organization is making efforts in the district on issues relating to women and their empowerment. It has made interventions in the areas of health, education, skill development, sustainable agriculture, Panchayat Raj development in its operation area. It is making sustainable efforts by organizing people at grassroots level. As part of its partnership strategy for development, the organization has formed Committee on Domestic Violence (CDV) and taken initiative to deal all violence against women at village level. This initiative was made in 10 villages. MM has been one of the partners of Andhra Pradesh Government and Centre for World Solidarity for the purpose of capacity building of the Panchayat Raj institutions.

Mahila Margadarshi (MM) has been working for rural development, particularly for women empowerment as one of the major issues. MM has been working with GPs empower women in political participation. MM has been dealing with issues related to rural infrastructure in its area of operation. Pidi Mandasa is one of the villages in which MM has been working on all major issues, including “Panchayat Raj Development” and “Women Empowerment”. The villagers are facing a problem of drinking water supply.

The village has bore wells with adequate water and storage facility with overhead tank. The quality of water is good. However, supply of water is found to be major issue for the GP. The delivery points (taps) are kept near the tank which is located close to the school. The households have been collecting water from their single point located near the tank during 6 A.M. to 8 A.M. in the morning and 5 P.M. to 7 P.M. in the evening. The four taps available are not sufficient to deliver at a time to all households. As a result, sometimes many have to return home without water. This has led to conflict in the village.

The Gram Panchayat (shortly known as GP) today got a Woman leader (head of the Panchayat) who was earlier leader of the SHG. She was trained by MM during the programme of Panchayat Raj development support by the Government of India and also CWS. The water distribution issue came for discussion in Gram Sabha. Further action on the issue was differed on account of dearth of financial resources. However, it was decided by the Gram Panchayat to have delivery pipeline within village during the subsequent meeting. As a joint-initiative of the Gram Panchayat and MM, a meeting was held with CBO leaders that included SHGs, VO, and WUAs to discuss the steps to mobilize the resources for installation of delivery pipeline. Initially, the discussions ended with the constitution of Drinking Water and Sanitation Committees (WATSAN) in the village. After a gap of few months of inaction with initiatives of GP, a meeting was arranged by MM with SHGs, VO, and WATSAN to resolve the drinking water supply issues. The participants in the meeting included MM, GP and invited leaders of SHG, VO and WATSAN. The meeting came out with an action plan with the following strategies.

- Water delivery system would be managed by the GP with the assistance of WATSAN.
- WATSAN would collect contribution of money, material and labour for the project.
- WATSAN – responsible for fixing and collection of user charges for water supply.
- No household connection will be provided till water supply improves in village
- The members of SHGs, VO and WATSAN have provided manual labour.
- The households contributed money according to their capacity ranging from a minimum of Rs. 100 to 200 per household.
- GP brought in major resource from its basket.

MM has provided additional resource required from its project. During 2008, the project was completed and at the time of study the supply was managed by WATSAN and GP jointly. The elements of best practices observed in this case are:

1. Women leadership of GP and also CBOs took firm steps as the issue directly affected women.

2. Mobilization of local resources made possible through joint action among the GP, NGO and CBOs.
3. If facilities are provided by the GP, people are ready to pay for the services.
4. The burden of resource mobilization was with GP.
5. NGO has provided technical help to plan and implement the project as such expertise was not available with GP.

It is understood that when a common interest is addressed, particularly with regard to the basic facilities, people are willing to participate and also contribute in possible ways. The model is replicable with alterations according to the local realities.

Spring of Partnership

Visakha Jilla Nava Nirmana Samithi (VJNS) was established in 1972 in Visakhapatnam district of Andhra Pradesh in India. The VJNSN has its roots in Gandhian ideology. It is working towards "Grama Swaraj" as its primary goal of development. The organization's main strategy is to organize the rural poor to move towards sustainable development, with knowledge and skill enhancement. To reduce the gap between developmental agencies (government or non-government) and focused groups in the rural and tribal areas, the VJNS has effectively organized the people's organization. During its four decades of rural development work, the organization gave importance to organize "village council" much before the concept of Gram Sabha gained significant level of recognition. Thrust areas of VJNS include Rural and Tribal Development, Organising Socially, Drinking Water and Sanitation, Women and Child, PR, Skill Development and Micro credit.

VJNS is working in the tribal belt of Visakhapatnam district, India. During 1990s, as all wells have dried up in one of the Gram Panchayat people have faced severe shortage of water. Since the nature of terrain is hilly, the possibility of sinking bore well was found to be less. The water is required not only for domestic purpose, but also for post-harvest processing of turmeric. The village has a Village Development Council (VDC) promoted by the VJNS even before PESA Act was implemented to establish the GP in these tribal villages. Interestingly the leaders who were part of the VDC have taken interest in GP and got elected as Sarpanch in 2001. The Chairman of the VDC got elected to GP and few others as Ward Members.

In this background, in the year 2002, an initiative was made by the VDC, GP and VJNS to resolve the issues of water supply in that village. In this line, the local community leaders, VDC and GP have identified a spring well in a nearby hillock. There were several rounds of discussions to formulate and choose a technology to tap the potential of spring well. As a result, it was decided to use the gravitational method to bring water from spring well to the village, because it would be sustainable, as it requires no electricity for bringing the water down from hillock. A partnership arrangement was worked out by the GP, VDC and VJNS to implement a suitable strategy for sustainable use of spring water for the benefit of all in the village. The design includes following major items.

1. Financial resource for initial investment by the NGO with a project from CARE INDIA.
2. The GP and VDC were made responsible for the maintenance of the water distribution system.
3. A nominal user charges of Rs. 20/- per household was fixed after due consultation with community.
4. The VDC has taken the responsibility of collecting and managing the user charges and pooled funds.
5. GP agreed to lay pipelines in the village for distribution of water from collection tank.

At the time of study the water supply system was working and distribution was effective. The main features of best practices observed in this case are:

- The common interest made the stakeholders to come together.
- The leadership of VDC and GP had some direction in their vision.
- Consensus orientation emerged from the VDC due to the GP leadership.
- The role and financial responsibility were discussed and agreed upon by the partners.
- Appropriate technology was chosen that helped to sustain the water supply system.
- Recurring expenditure was very minimal. As a result the pooled funds were used to increase the storage capacity with an additional tank.

The case is an illustration of partnership for the provision of one of the basic needs of the community. Following this, VJNS and VDCs have started

harnessing the local resources for effective management of water in the tribal area.

Thirsty for Partnership

Jana Jagruthi – Tuni (JJ-Tuni) is an organization working since 1991 in Tuni area of East Godavari and Visakhapatnam Districts (Tribal Areas) in Andhra Pradesh of India. It was established by a Lawyer to empower the youth and women in the rural and tribal villages. All its efforts are rooted through youth associations or SHGs. JJ – Tuni is working for legal education, legal aid, land issues, and domestic violence against women. The organization is also increasing the capacity of the youth in construction technology through training programmes. Thrust areas of JJ-Tuni are Legal Education, Legal Aid, Environment, Skill Development, Land Rights, Youth and awareness creation for Panchayat Raj development. The JJ-Tuni has been one of the partners of Andhra Pradesh Government for the purpose of organizing training to the Panchayat Raj functionaries.

Jana Jagruthi (Tuni) is located in East Godavari district and has been working in 55 villages in East Godavari district and also in 24 border villages of Visakhapatnam district. These villages are mostly tribal habitations or most disadvantageous villages located in remote areas. Donkada is one of the villages where JJ is working since long period. The village has been experiencing problem of drinking water supply. Though water is available in sufficient quantity, it is not suitable for drinking. During regular visits, the issue was taken up for discussion by the villagers with JJ. Initially, the Elders Committee (one of the CBO promoted by the JJ since its inception) and JJ had consultation over the issue and decided to take up the matter for larger consultation with the villagers. The Elders Committee and JJ have worked out a framework for consultation that includes resource mobilization and approaching outside agencies for donations. According to the GP, JJ and Elders Committee had a discussion in which following strategies are formulated:

- Set up a mineral water plant in the village
- GP to provide land for building and bore well.
- Approach Ramakrishna Seva Samithi and Visakha Dairy for possible assistance by them.

The GP has called for Gram Sabha meeting and initiated the process.

Further, in rural meeting decision was taken to get land for the purpose. Required financial resources were managed locally by convincing the people to pay the house tax and pooling the available resources levied on the shop owners. Ultimately, GP could manage land for the project in the village.

The Elders Committee approached Ramakrishna Seva Samithi and Visakha Dairy Cooperative Society (known as Visakha Dairy) on this matter and could get an assurance for financial assistance and support. The JJ and GP along with CBO formally requested the Samithi and Visakha Dairy for assistance. Accordingly, a multi-stakeholder plan was drawn to solve the drinking water problem. As a result of the combined efforts, the villagers have mineral water plant or water purification plant with an installed capacity of 10,000 litres per day. At the time of study, the villagers were using 70 % of the installed capacity. The highlight of this case study is that everyone has come together for a common cause.

1. The GP and JJ have played lead role and organized an exclusive Drinking Water Committees (DWC) to manage the plant. However, it is not one of the functional committees of the GP.
2. The DWC is made up of members from the local community and also representative of the Ramakrishna Seva Samithi and Visakha Dairy.
3. JJ has provided all technical support as one of its staff members is from this village.
4. The case indicates that a felt-need has compelled the villages to come together to take appropriate action.
5. The rapport of the elders with some of the welfare and service organizations helped in getting critical resources.

Above all, the village community (Gram Sabha) overwhelmingly accepted the proposal made by the GP and JJ. Accordingly, the plant managed by DWC supplies 30 litres of purified water per household every day. The households agreed to pay Rs. 100/- every month as user charges. The case is an illustration of convergence strategies for social service, development work, corporate social responsibility and gram Panchayat.

Lessons to Learn

Niligiri Foundation (NF) is a grassroots organization working since 1987, mainly in rural areas of Guntur District of Andhra Pradesh in India, focusing on

water resources development and its effective management. NF as a development organization is concentrating on restoration of traditional water storage bodies with the involvement of farmers. The initiatives emphasized participation of stakeholders that visualize effective process for bringing together and promote partnership for sustainable use of natural resources available in the area. Thrust areas are NRM, Organic Farming, Watershed Development, Rural Development, Organising Farmers, and Skill Development.

The Nilgiri Foundation has been working for the development of farm sector in rural areas of Guntur district. The Foundation is also working for all-round development of the villages in its service area. The CBOs, GPs and Nilgiri Foundation (NF) are working in collaboration on many issues in the villages that include augmentation of irrigation facilities, and development of infrastructure for primary school. The present case is an illustration of best practice by the partners to solve the problems in the primary school which was lacking even basic facilities. The primary school which lacked basic facilities has affected the functioning of the school and primary education in the village.

The GP has taken note of the prevailing situation and discussed about it with Nilgiri Foundation to find out a permanent solution. The Parents, NF and elders in the village have had a joint meeting to find out sources to furnish the school. In the discussions, an idea emerged to approach the Canara Bank Staff Association (CBSA) in Guntur Town. This idea was given by some ward members of GP; and those elderly persons have felt that the Canara Bank Staff Association could help the villagers to improve the facilities in the school. Already the village community has long cherished relationship with the Bank through the Primary Agriculture Cooperative of that village. Therefore, they had strong hope of getting some help from CBSA. Formally, the GP leadership has met CBSA along with NF. The major issues which were taken up by this group of organizations include the following:

1. Bench and desk for students in primary school
2. Drinking water
3. Sanitation facilities

Because of these problems, the girl students have been affected very much and the issue was taken up by the women members of GP in many meetings. The village leaders have requested for help from CBSA and it has

agreed to provide such a help to the village community. Initially, provisions were made for drinking water and sanitation facility and in the subsequent year furniture have also been provided.

The matter was discussed with NF when a program for renovation of irrigation tank was discussed in the village. The partnership was among the GP, Rythu Mitra Sanghs, and NF at village level and also paved way for the entry of Corporate House, *Coca Cola*, that provided financial assistance for renovation of irrigation tank in the village. The community has taken up the issue of scarcity of irrigation water with GP and later with NF. NF has suggested that effective water management is possible only by taking up the less water intensive crops and use of organic manure. Besides, it was made clear to the villagers that the existing tank need to be renovated and bring the nearby canal water through pipe lines to recharge the tank.

To begin with, the GP and village community refused the idea. But sustained efforts of NF have resulted in a partnership programme with Coca Cola. Under the Corporate Social Responsibility (CSR), the Company has provided funds to renovate the tank and lay pipe line to bring water from canal. In this joint action plan, GP provided all facilities to take up the work that includes official resolution and logistic support. The Rythu Mitra Sangham (RMS) has provided tractors to move the silt from the tank to the needy farm lands. The NF has coordinated with the company to implement the program. With flow of funds and required facilities paved way for successful completion of tank renovation work.

Basic lesson that we learn from this case is that GP, RMS, NF along with village elders have had discussion on the problems and agreed to contribute according to their ability. The significant observation made by villagers is that all the partners have mutually trusted each other in the process of solving problem of the community. Moreover, no political colour was attached to approach the issues and strategies adopted by the GP leadership in the whole programme.

Engineering for Partnership

Gram Siri (GS) is a development organization working in Guntur district since 1981 in the rural areas of Andhra Pradesh in India. The organization is working for the integrated development of rural community by taking an approach towards effective utilization of all types of resources in the villages.

GS is working for the last three decades in Bapatla region of Guntur district. Originally, GS was established to provide flood relief in this area. GS was established with the support of Gandhi Peace Centre based on Gandhian approach for rural development. After completion of relief work, GS has started focusing on other sectoral needs and development in rural areas. The thrust areas are Cyclone Relief, Rehabilitation and Reconstruction, Organising Rural Poor, Micro Finance, Promotion of Appropriate Technology, Development of Farming community, Development of Socially excluded, and Panchayat Development. GS has established branches, later they have become as separate organizations in south coastal Andhra Pradesh and Rayalaseema regions and run by its staff members; most of them were working with GS either as professional staff or at grassroots level. It demonstrates the strength of the organization and its approach for grassroots development.

Gram Siri (GS) has planned for school development in partnership with VEC, GP and at large with Gram Sabha in Thummalapalli village. GS has formed the Village Development Committee to take advantage of the local wisdom for problem solving. The Village Development Committee [VDC] was constituted with representatives from Panchayat, Village Education Committee [VEC], Self Help Groups [SHG] and Elders. This was done during 1980s when the Gram Sabha initiated flood relief and rehabilitation work in Bapatla area of Guntur district. The VDC has been planning and implementing the programme in coordination with Gram Sabha and Gram Panchayat.

The village primary school was upgraded as upper primary school. Under the programme of *Education for All*, teaching assistants were appointed in the school. As limited funds are available in the school for paying to such teachers, the Gram Sabha, Gram Panchayat and VEC decided to additionally pay some amount to each of the teachers working in the school. The proposal aimed at contribution of villagers, in terms of money.

Accordingly, the villagers agreed to pay as per their capacity to the VEC. In addition to Government's payment of Rs. 1000/- per teacher per month, VEC is paying. 600/- per teacher every month from the Village Education Fund collected from parents of the children studying in the school. While making joint decision on this issue in 2001, the Gram Sabha has proposed to help some of the poor families to augment the income, by providing facilities to improve their farming activities.

The area is close to coastal area and has disadvantage in digging deep bore wells as the water is not suitable for crop production. The VDC, GS and GP have jointly worked out to construct the surface well which is capable of recycling the water used in crop production. The wells are constructed with the financial support of CIDA. Mostly small and marginal farmers have benefited by these wells and they have been enabled to take two crops in a year. This case shows that GS could rope in GP, VEC and SHG along with VDC to solve some of the common problems. The highlights of the case are:

- Initiative by NGO supported by the others in the village.
- VDC is capable of bringing together all resources at village level.
- VDC is also providing technical support in planning and implementation.
- GP has revealed that in the resource dearth situation, it could take advantage of the strengths of partnership.

Conclusion

The cases discussed in this chapter show that there are instances for grassroots partnership among the Gram Panchayat, CBOs and NGOs in all parts of the state. It is notable that in most of the cases, the partnership has emerged to solve one of the major issues/felt needs of the village community. It is also observed that the NGOs have taken initiatives to bring together all stakeholders with the support of the GPs. There are no cases where the GP have taken a proactive role to bring together all concerned. Similarly, the CBOs have been motivated to work towards solving some major issues in the village by the NGOs.

It can be inferred that successful completion and sustainably managing some of the programmes under partnership arrangement is due to the understanding between NGO and GP; on other hand, the interest of entire village community is at stake. It is pertinent to note that the GPs, NGOs and CBOs have demonstrated that they could not only come in contact with each other, but also became capable to sustain their partnership.

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Committee, Community Forest Management (CFM), Mothers Committee, Village

Education Committees, Village Drinking Water and Sanitation Committee and any other similar at village level.

⁶ Local resources include people contribution in terms of cash, materials and labour; and resources flowing under the various schemes of the Central and State Government welfare and development programmes. It also covers funds provided by the National Level Development Donors.

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Context Consciousness in Health Care: A Study of Pune Urban Slums

P. Viswanadha Gupta

Introduction

In modern health care delivery system, health education occupies a very important place. Health Education is now a common word used all over the world. During the early periods of human civilisation, man was concerned only with his immediate needs. When he was hungry, he searched for food. When he was thirsty, he searched for water. When he was sick, he searched for a relief. So, it came to pass that for a long time, the Art of Healing remained paramount for him. But as human civilisation advanced, man realised that for maintenance of health, medical care alone was not sufficient. He realised that, cleanliness and environmental sanitation were also important. So, along with medical care, environmental sanitation also found a place in man's health care. Following the religious, political and industrial revolutions in the west, there was a rapid expansion of Modern Science. Different branches of science were developed and they all made newer discoveries about the nature of things and added to the knowledge of man. Many discoveries were made in the field of medicine also. One of the most important discoveries was about the cause of communicable diseases. It was established beyond doubt that they were caused by microscopic living organisms, commonly termed as 'germs'. Following this discovery, man was able to develop vaccines and sera which could successfully prevent many of these diseases. There are many things that are dangerous to health. Diseases, physical hazards, manmade environments like unguarded cooking fires, overcrowding, stressful work etc., all can pose health problems. There is another important factor which, to a very large extent decides why people stay healthy or on the contrary became ill. This is due to their own actions or behaviour. Health education, while imparting information is particularly interested in the actions of the people i.e., their behaviour. Let us examine a simple example. Diarrhoea is a common disease. Our own actions like, not washing hands before taking food, using unclean vessels, defecating in the open etc., can produce diarrhoea. Our actions like washing hands before meals, drinking good water, washing fruits before they are eaten etc., can

prevent diarrhoea. Similarly in many situations, our actions or behaviour, decides our state of health.

Health education can be defined as that part of health care, which is concerned with promoting health behaviour. It is a process that informs, motivates and helps people to adapt and maintain healthy practices and life styles, advocates environmental changes as needed to facilitate this goal and conducts professional training and research to the same end. Health education encourages behaviour that promotes health, prevents illness, cures diseases and facilitates rehabilitation. The needs and interests of individuals, families, groups, organisations and communities form the core of Health Education Programme.

It is rightly said, that the roots of Health Education are two in number. First one is the basic sciences which deal with Health Knowledge. It is essential, that people are oriented in the various components of health namely, human biology, nutrition, hygiene consisting of personal and environmental hygiene, family health care, control of communicable and non-communicable diseases, mental health, prevention of accidents and use of the Health Services. The second is the behavioural sciences like Sociology, Psychology and Social Anthropology. Health Education brings together, the art and science of Medicine, and the Principles and practice of General Education. Education is primarily a matter of Communication. So, Health Education uses the various channels of communication, like audio-visual aids, group discussions, individual counselling etc. The objective is to create awareness in the people, then to generate interest in them and ultimately motivate them to adopt the health practices in their own lives.

Formal and non-formal education programmes are implemented by government and non-government agencies and a good number of illiterates are benefitted through their efforts. Apart from literacy skills emphasis is laid on functional aspects relating to vocational / occupation and awareness aspects dealing with health, development programmes and national concerns (alleviation of poverty, national integration, environmental conservation, population control, women's emancipation, etc.) in these centres. Post-literacy and continuing education centres are organised immediately after the literacy phase in order to strength and further the basic literacy aspects of people and improve their quality of life by organising several programmes. Different reading materials, publicity materials, posters, meetings, lectures, camps etc., are organised from time to time in the

continuing education centres and health is one of the major areas where attention is given through the above activities. These programmes basically aim at creating awareness among the people and others on health issues like communicable diseases, non-communicable diseases, nutrition, mother and child care, etc., while organising the programmes for community participation and local agencies is duly emphasised. Emphasis is laid on participation of people in the health activities apart from other slums dwellers. Health Personnel organise the camps in a co-ordinated manner. At this juncture, it is necessary to study the awareness of peoples on different aspects health like communicable diseases, non-communicable diseases in order to identify the gaps and to organise the health activities in a more co-ordinated and systematic manner. The researcher finds the following questions to be answered through the study. What is the level of awareness of urban slum dwellers on different areas of health? What about the influence of personal and demographic factors on the awareness of urban slum dwellers in different areas of health? What about the role of attitude towards health, availability of health facilities and services on the awareness of slum dwellers in different health aspects? The present study aims to enquire these aspects with a view to suggest remedial measures.

Statement of the Study

Context Consciousness of Health Care: A Study of Pune Urban Slums

Objectives

The following are the objectives of the study:

1. To know the health awareness of urban slum dwellers.
2. To know the utilisation of the health facilities available in the study areas.
3. To study the influence of gender variables on health awareness and utilisation of health facilities.
4. To suggest the remedial for improve the health awareness and care.

Tools Used

The tools developed by the investigator were used for the purpose of the study i.e. Interview schedule on health awareness of people; Attitude scale to assess the attitude of urban slum dwellers towards health and Interview schedule on health facilities and services.

Methodology

Locale and Sample of the Study

Pune city of Maharashtra selected for the purpose of study and 25 women and 25 men interviewed and collected the data from three slums are to be selected at random; elicit unbiased responses from the sample. Responses from ten community representatives and five community members from the selected slums also recorded.

Collection of Data

The researcher visited the selected sample respondents for the study and establishes good rapport with slum dwellers and community representatives. The schedules administered to the sample population, community representatives and others individually. The community opinion schedule on the performance of health workers in discharging their roles also administered to the community members individually.

Analysis of Data

The data collected were analysed by using relevant statistical techniques like percentages, 't' test and 'F' test. The simple correlation 'R' was calculated by carrying out step-wise multiple regression analysis to find out whether it was possible to predict the contribution of different independent variables on the dependent variable i.e., health awareness of people.

Interpretation of the Data

In the study, an attempt has been made to know the sample distribution of respondents as per their socio-economic variables (vide Table 1). It can be observed from the table that (a) there is an equal number representation of men and women members in the sample, (b) 56.00 per cent of the sample belonged to 15-35 years age group and the remaining 44.00 per cent are represented by 31 years and above age group. (c) The caste-wise distribution of the sample indicates that 12.00 per cent are responsible by others castes, 36.00 per cent backward castes and the remaining 52.00 per cent of the sample are represented by scheduled castes and scheduled tribes. It shows that majority of slum dwellers are belongs to SC / ST communities. (d) Religion wise distributions of the sample showed that 16.00 per cent belonged

were Hindus, 20.00 per cent were Muslims and the remaining 64.00 per cent were either Christians or Buddha. (e) Majority 41 (82.00 %) of the sample were married and remaining 9 (18.00 %) sample members were unmarried.

Table – 1
Profile of the Sample

Variable	Group	N	Percentage
a. Gender	Male	25	50.00
	Female	25	50.00
b. Age	15-30 years	28	56.00
	31 years and above	22	44.00
c. Caste	Other Castes	6	12.00
	OBCs	18	36.00
	SC & ST	26	52.00
d. Religion	Hindu	8	16.00
	Muslims	10	20.00
	Christians / Buddha	32	64.00
e. Marital Status	Married	41	82.00
	Unmarried	9	18.00
f. Income	Below Rs. 20,000/- per year	32	64.00
	Above Rs. 20,000/- per year	18	36.00
g. Type of family	Nuclear	39	78.00
	Joint	11	22.00
h. Participation in health camps	Yes	45	90.00
	No	5	10.00

(f) The sample of the study belonged to two income groups. The data revealed that 64.00 per cent of the sample were having an annual income of below Rs. 20,000/- and the remaining 18 (36.00 %) had an annual income Rs. 20,000/- and above. (g) More than three fourth of the sample (78.00 per cent) belonged to nuclear families and the remaining 22.00 per cent of the sample belonged to joint families. (h) Different government and non-government organizations, health agencies are organizing health camps at the grass root level for the benefit of the public. About 90.00 per cent have taken part in the health camps and it was observed that once in a quarter or twice a year they have observed the organization of health camps.

Knowledge and Awareness on Immunisation

Table – 2
Influence of Gender on Awareness on Immunisation

Sl. No.	Group	Number	Mean	SD	t- Value
1.	Male	50	0.903	0.295	4.46*
2.	Female	50	0.536	0.499	

Gender is often considered as a variable to know whether men do better in a given task. Women due to their association with children, elders and other family members are likely to have more acquaintance with health aspects rather than men about communicable diseases. Keeping this in view, an attempt has been made to know the influence of gender on awareness on immunisation, the details of which are as shown in Table-2.

Table-2 reveals that men have obtained a mean awareness score of 0.903. The sample representing women group have secured a mean awareness score of 0.536 with a standard deviation of 0.499 on immunisation. 't' test was employed to find out the significance of difference among the means and the calculated 't' value of 4.46 is found to be statistically significant at 0.01 level.

Knowledge and Awareness on Diseases

Table–3
Influence of Gender on Awareness on Diseases

Sl. No.	Group	Number	Mean	SD	t- Value
1.	Male	50	0.920	0.271	2.04*
2.	Female	50	0.776	0.417	

Above Table 3 reveals that the male sample of respondents have obtained a mean awareness score of 0.92 with a standard deviation of 0.271 whereas the women sample have secured a mean awareness score of 0.776 with a standard deviation of 0.417 on awareness on diseases. The 't' value of 2.04 obtained to test the significance of difference between the means is found to be statistically significant at 0.01 level.

Knowledge and Awareness on Communicable Diseases

Table-4
Influence of Gender on Awareness on Communicable Diseases

Sl. No.	Group	Number	Mean	SD	t- Value
1.	Male	50	0.920	0.271837	1.71**
2	Female	50	0.729	0.737406	

Above Table-4 reveals that the male sample respondents have obtained a better awareness score on communicable diseases in compare to female respondents. The respective scores are male 0.92, and female 0.729. 't' test was employed to find out the significance of difference between the means, and the calculated 't' value of 1.71 is found to statistically significant at 0.05 level.

Knowledge and Awareness on Health Related Problems

Table-5
Influence of Gender on Awareness on Health Related Problems

Sl. No.	Group	Number	Mean	SD	t- Value
1.	Male	50	0.920	0.271837	1.71**
2.	Female	50	0.729	0.737406	

Table-5 reveals that the male sample respondents have secured a mean awareness score of 0.988 with a standard deviation of 0.109 whereas the female respondents have secured a mean awareness score of 0.908 with a standard deviation of 0.289 on health related problems. 't' test was employed to find out the significance of difference between the mean scores and the 't' value obtained (1.82) is found to be statistically significant at 0.05 level.

Knowledge on Immunization

Knowledge on immunization of the urban slum dwellers as report by the sample respondents are shown in the table-6.

The immunization of the children against six serious but preventable disease viz. Tuberculosis, diphtheria, poliomyelitis and measles are the main component of the child welfare. Table – 6 reveals that the knowledge of the sample respondents towards the vaccination of the children. According to the study 95 percent of the sample respondents are having knowledge on vaccination of their children. Government and Non-Government organizations has rapidly publicize towards vaccination of the all children, even though 5 per cent of the sample respondents does not have any knowledge towards vaccination. More than one fifth of sample respondents do not have knowledge on BCG, DTP and Tetanus vaccination. 68 (25 men and 43 women) per cent of sample respondents does not have any knowledge of Vitamin A liquid.

Table-6
Knowledge on Immunization

Sl. No	Vaccination	Number of Respondents			
		Men	%	Women	%
1	Polio				
	Yes	50	100	45	90.00
	No	0	00.00	5	10.00
2	B.C.G.				
	Yes	49	98.00	29	58.00
	No	1	02.00	21	42.00
3	D.P.T.				
	Yes	49	98.00	28	56.00
	No	1	02.00	22	44.00
4	Tetanus				
	Yes	49	98.00	29	58.00
	No	1	02.00	21	42.00
5	Diphtheria				
	Yes	49	98.00	21	42.00
	No	1	02.00	29	58.00
6	Vitamin A Liq.				
	Yes	25	50.00	7	14.00
	No	25	50.00	43	86.00

Knowledge on Diseases

Knowledge on diseases of the urban slum dwellers as report by the sample respondents are shown in the table-7

Malaria, leprosy, tuberculosis, eye diseases, viral fevers are some of

regular diseases in the slum areas. An attempt was made whether the slum dwellers have the awareness and knowledge on diseases or not. Cent percent of the men and more than 90 percent of the women reported that they have knowledge and awareness on the diseases. Only three women sample respondents reported that they have no idea about Malaria and Eye diseases. 19 sample respondents (3 men and 16 women) are informed that they have no knowledge on Tuberculosis, which is generally called as TB. 48 sample respondents (17 men and 31 women) said that they no idea about the viral fever. Some of the sample respondents thought that Malaria and Viral Fever both are equal due to lack of knowledge on these diseases.

Table-7
Knowledge on Diseases

Sl. No	Name of Diseases	Number of Respondents			
		Men	%	Women	%
1	Malaria				
	Yes	50	100	47	94.00
	No	0	00.00	3	06.00
2	Leprosy				
	Yes	50	100	43	46.00
	No	0	00.00	7	14.00
3	Tuberculosis				
	Yes	47	94.00	34	68.00
	No	3	06.00	16	32.00
4	Eye diseases				
	Yes	50	100	47	94.00
	No	0	00.00	3	06.00
5	Viral Fever				
	Yes	33	66.00	19	38.00
	No	17	34.00	31	62.00

Knowledge on Communicable Diseases

Knowledge and awareness on communicable diseases of the urban slum dwellers as report by the sample respondents are shown in the Table-8.

Small pox, measles, cholera, typhoid and Malaria are some of communicable diseases in the slums. An attempt was made whether the sample respondents have the awareness and knowledge on communicable diseases or not. Cent percent of the men and 90 percent of the women respondents reported that they have knowledge and awareness on the communicable diseases. Five women respondents reported that they don't

have any knowledge on small pox, cholera and typhoid. Three women sample respondents noticed that they don't have any knowledge on malaria. The welfare organization can conduct the not only the health camps but also awareness regarding the prevention of the diseases. The researcher suggests to the health officials of the urban slum dwellers to improve the knowledge of the diseases through wall posters, palm plates and advertisements.

Table-8
Knowledge on Communicable Diseases

Sl. No	Name of Communicable Diseases	Number of Respondents			
		Men	%	Women	%
1	Small pox				
	Yes	50	100	45	90.00
	No	0	00.00	5	10.00
2	Measles				
	Yes	50	100	50	100
	No	0	00.00	0	00.00
3	Cholera				
	Yes	50	100	45	90.00
	No	0	00.00	5	10.00
4	Typhoid				
	Yes	50	100	45	90.00
	No	0	00.00	5	10.00
5	Malaria				
	Yes	50	100	47	94.00
	No	0	00.00	3	06.00

Knowledge on Health Related diseases

Knowledge and awareness on health related problems of the urban slum dwellers as report by the sample respondents are shown in the Table-9.

Table-9
Knowledge on Health Related Problems

Sl. No	Name of Problem	Number of Respondents			
		Men	%	Women	%
1	Body Pains				
	Yes	50	100	50	100
	No	0	00.00	0	00.00
2	Joint Pains				
	Yes	50	100	49	98.00
	No	0	00.00	1	02.00
3	Anaemia				
	Yes	50	100	39	78.00
	No	0	00.00	11	22.00
4	Blood Pressure				
	Yes	50	100	50	100
	No	0	00.00	0	00.00
5	Diabetics				
	Yes	47	94.00	38	76.00
	No	3	06.00	12	24.00

Body pains, joint pains, anemia, blood pressure and diabetics are some of health related common problems in the society. An attempt was made whether the sample respondents have the awareness and knowledge on health related problems or not. Cent percent of the men and more than 95 percent of the women sample respondents reported that they have knowledge and awareness on the general health problems. 15 sample respondents (3 men and 12 women) reported that they do not have any knowledge on the diabetics.

Utilisation of the facilities for Immunization

Table-10
Influence of Gender on utilisation of immunisation facilities

Sl. No.	Group	Number	Mean	SD	t- Value
1.	Men	50	0.852	0.355	1.40@
2.	Women	50	0.74	0.439	

It can be observed from Table-10 that the male sample of respondents have obtained a mean utilisation score of 0.852 with a standard deviation of 0.355 whereas the women sample have secured a mean utilisation score of 0.74 with a standard deviation of 0.439 on utilisation of the vaccination facilities. The 't' value of 1.40 obtained to test the significance of difference between the means is found to be statistically not significant.

Utilisation of the facilities for Diseases

Table-11
Influence of Gender on utilisation of facilities for diseases

Sl. No	Group	Number	Mean	SD	t- Value
1.	Men	50	0.02	0.140	0.058@
2.	Women	50	0.04	0.196	

It can be observed from Table-11 that the male sample of respondents have obtained a mean utilisation of the facilities for diseases score of 0.02 with a standard deviation of 0.140 whereas the women sample have secured a mean utilisation of the facilities for diseases score of 0.04 with a standard deviation of 0.196 on utilisation of the facilities for diseases. The 't' value of 0.058 obtained to test the significance of difference between the means is found to be statistically not significant.

Utilisation of the facilities for Communicable Diseases

Above Table 12 reveals that the male sample respondents have obtained a better utilisation score on communicable diseases in compare to female respondents. The respective scores are male 0.956, and female 0.896. The 't' test was employed to find out the significance of difference between the means, and the calculated 't' value of 1.98 is found to statistically significant at 0.01 levels.

Table–12
Influence of Gender on utilisation of facilities for communicable diseases

Sl. No	Group	Number	Mean	SD	t- Value
1.	Men	50	0.956	0.205	1.98*
2.	Women	50	0.896	0.305	

Utilisation of the Facilities for Health Related Problems

Table–13
Influence of Gender on utilisation of facilities for health related problems

Sl. No	Group	Number	Mean	SD	t- Value
1.	Men	50	0.916	0.277	1.11@
2.	Women	50	0.844	0.363	

Above Table-13 reveals that the male sample respondents have secured a mean utilisation of facilities for health related problems is 0.916 with a standard deviation of 0.277 whereas the female respondents have secured a mean utilisation of facilities for health related problems is 0.844 with a standard deviation of 0.363. 't' test was employed to find out the significance of difference between the mean scores and the 't' value obtained (1.11) is found to be statistically not significant even at 0.05 level.

Utilisation of Immunisation Facility

Utilisations of the immunization facility of the urban slum dwellers as report by the sample respondents are shown in the Table–14.

As far as the vaccinations for prevention is concerned cent percent of men and above ninety five percent of women are utilize the vaccination

facilities and also got vaccinated to their children. From the above table reveals that 16 respondents (6 men and 10 women) reported that they didn't provide the diphtheria vaccination to their children. It is found that 78 sample respondents (30 men and 48 women) reported that they have not given the vitamin A liquid to their children.

Table-14
Utilization of Immunization Facility

Sl. No	Utilisation	Number of Respondents			
		Men	%	Women	%
1	Polio				
	Yes	50	100.00	45	90.00
	No	0	00.00	5	10.00
2	B.C.G.				
	Yes	49	98.00	48	96.00
	No	1	02.00	2	04.00
3	D.P.T.				
	Yes	50	100.00	49	98.00
	No	0	00.00	1	02.00
4	Tetanus				
	Yes	50	100.00	50	100.00
	No	0	00.00	0	00.00
4	Diphtheria				
	Yes	44	88.00	40	80.00
	No	6	12.00	10	20.00
5	Vitamin A Liq.				
	Yes	20	40.00	2	04.00
	No	30	60.00	48	96.00

Utilisation of facilities for Diseases

Utilisations of the facilities for diseases of the urban slum dwellers as report by the sample respondents are shown in the Table-15.

Table-15
Utilization of Facility for diseases

Sl. No	Utilisation	Number of Respondents			
		Men	%	Women	%
1	Malaria				
	Yes	47	94.00	42	84.00
	No	3	06.00	8	16.00
2	Leprosy				
	Yes	0	00.00	0	00.00
	No	50	100.00	50	100.00
3	Tuberculosis				
	Yes	0	00.00	0	00.00
	No	50	100.00	50	100.00
4	Eye diseases				
	Yes	2	04.00	4	08.00
	No	48	96.00	46	92.00
5	Viral Fever				
	Yes	0	00.00	0	00.00
	No	50	100.00	50	100.00

Table-15 shows that the cent percent of men and above eighty per cent of women are utilize the facilities for diseases provided by the government. In case of leprosy and tuberculosis it is found that no respondents said that they have not utilized the service, because these diseases are not having. According to the study, there are invisible diseases are leprosy and tuberculosis. 89 sample respondents (47 men and 42 women) reported that they have utilized the government facility for malaria. Cent percent of the sample respondents are not utilizing the government hospital facility due to psychological fear.

Utilisations of the facilities for communicable diseases of the urban slum dwellers as report by the sample respondents are shown in the T

Table-16
Utilization of Facility for Communicable Diseases

Sl. No	Utilisation	Number of Respondents			
		Men	%	Women	%
1	Small pox				
	Yes	49	98.00	41	82.00
	No	1	02.00	9	18.00
2	Measles				
	Yes	47	94.00	47	94.00
	No	3	06.00	3	06.00
3	Cholera				
	Yes	49	98.00	49	98.00
	No	1	02.00	1	02.00
4	Typhoid				
	Yes	47	94.00	44	88.00
	No	3	06.00	6	12.00
5	Malaria				
	Yes	47	94.00	43	86.00
	No	3	06.00	7	14.00

Table-16 shows that the nearly cent percent of men and above eighty percent of women are utilize the facilities for communicable diseases provided by the government. 6 sample respondents (3 respondents each) reported that they are not using the government facility for the measles diseases. Two sample respondents informed that they are not using the government facility for the cholera diseases.

Utilize the Facilities for Health Related Problems

Utilization of the facilities for health related problems of the urban slum dwellers as report by the sample respondents are shown in the Table -17.

The Table-17 shows that the ninety percent of men and thirty percent of women are utilize the facilities for health related problems provided by the government. About 24 sample respondents (9 men and 15 women) are reported that, they are not using the government facility for the blood pressure, because the government hospitals' personnel hesitate to this work.

Table-17
Utilization of Facility for Health Related Problems

S.I. No	Utilization	Number of Respondents			
		Men	%	Women	%
1	Body Pains				
	Yes	45	90.00	15	30.00
	No	5	10.00	35	70.00
2	Joint Pains				
	Yes	48	96.00	43	86.00
	No	2	04.00	7	14.00
3	Anaemia				
	Yes	45	90.00	35	70.00
	No	5	10.00	15	30.00
4	Blood Pressure				
	Yes	41	82.00	35	70.00
	No	9	18.00	15	30.00
5	Diabetics				
	Yes	50	100	48	96.00
	No	0	00.00	2	04.00

Conclusions and Suggestions

1. In the present study, it was found that the awareness of urban slum dwellers in health awareness was just above average (around fifty per cent). It is suggested that health awareness programmes should be taken up by the government and non-government agencies to improve the health awareness.
2. It was found in the study that health awareness among women group is low with compare to men group. Hence, attention should be paid on women group to improve their health awareness.
3. It was found through the study that availability of health facilities and services has significantly contributed to the health awareness of urban slum dwellers. Hence, steps should be taken to improve the status and quality of the activities of urban health centres and non-government agencies offering health awareness to the slum dwellers.
4. Availability of doctors, multi-purpose workers, health guides and ANMs are inadequate. The government should take steps to fill in the vacancies so that the availability of full health staff in the centres will yield better results in promoting health care awareness among the masses.

5. At present, there is no proper utilization of health magazines, broadsheet and mass media like radio, television and newspapers in promoting health care awareness. Steps should be taken by the UCD (urban community development) administration in order to effectively utilize them for promoting health awareness among the masses.
6. There should be proper co-ordination between government, non-government and local agencies in promoting health care awareness and in organizing different health activities at the grass root level so that duplication of the efforts can be avoided.

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Implementation of Sarva Shiksha Abhiyan in District Samba: A Study

B.L. Raina

Introduction

Education is considered as the bedrock of all socio-economic development of the country. The elementary education is the foundation of the entire superstructure of the nation which we intend to build. In India, the elementary education is the starting point as well as a stepping stone of further education. In India, the standard entry age of children in elementary education is 6 and it covers the age level from 6-14 years and forms the First stage of schooling. Elementary education is most important for physical, social, mental and aesthetic development of the children. Elementary education should be made available to all for overall welfare. The concept of Universalisation of elementary education was introduced in India with access of education available to all children in the age-group 6 to 14 years of age. The opportunities for this education may be provided through formal or non formal means of education. It signifies that 'education is for all' not for a selected few. This concept accepts that education is the birth right of every child. The Ninth Five Year Plan envisaged Universalisation of Elementary Education to mean Universal access, Universal retention and Universal achievement. As a result of the efforts made by the Central and State governments, 94 percent of rural population have country's primary schools within one km distance. At the upper primary stage, 84 percent of the rural populations have schools within a distance of three km. In the Independent India, just after the commencement of the constitution, Universalisation was to be achieved in 1960. Later on the target was shifted to 2010, and we are still nowhere near the goal of Universalisation of Elementary Education (UEE). India has completed 60 years of independence but the goal of Universalisation of Elementary Education in its totality is still an elusive goal and much is yet to be done in this respect. NPE-1986 and Programme of Action Plan (POA-1992) again put the UEE on priority. The educational interventions like Operation Black Board (OBB), District Primary Education Programme (DPEP), Shiksha Karmi Project (SKP-1987), Lok Jumbish (LJ),

Education for All (EFA) etc. were planned and implemented. But the goal of Universalisation of Elementary Education is yet to be achieved.

The government of India launched a scheme; known as Sarva Shiksha Abhiyan (SSA) in the year 2001-2002 in partnership with the State Governments and local self-governments. It is a comprehensive and integrated flagship programme of government of India to attain universal elementary education covering the entire country in a mission mode. As a holistic and convergent approach, SSA covers all the States and Districts of our country, where the main attempt is to provide an opportunity to all the children in the age group of 6-14 irrespective of caste, creed, sex and religion by 2010, for improving their capabilities through the provision of community-owned quality education. The basic motto of SSA is to reduce dropout, capture all the students of the target group with the aim of providing improved scholastic and co-scholastic environment. SSA also aims at setting the umbrella for children for turning them in to respectable citizens capable of constructive contribution towards a better society in the field of science, technology, literature, administration and so on. It has also some efforts to decentralize the whole process of curriculum development from grass root level to the district and the State level. Child centered and activity-based learning has been attempted. Learning by doing, learning by observation, work experience, art, music, sports and value education has been made as integral parts of the learning process. Appropriate changes have been made in the evaluation system, where the performance of children has constantly monitored in consultation with parents. The following are the main objectives of the scheme: (i) Enrolment of all children in school, Education Guarantee Centre, Alternate Schools, Back-to-school camp by 2003; (ii) All children complete five years of primary schooling by 2007 ; (iii) All children complete eight years of elementary schooling by 2010;(iv) Focus on elementary education of satisfactory quality with emphasis on education for life; (v) Bridge all gender and social category gaps at primary stage by 2007 and at elementary education level by 2010; (vi) Universal retention by 2010. Besides this, the Government of India launched many other incentive schemes to retain the children in the schools which are Free text books, Free uniforms, stationary and school bags, Mid-day meal and Attendance scholarship for girls.

Review of Related Literature

In the present study the review of the researches carried out in the

implementation of Sarva Shiksha Abhiyan from 2004 onwards are presented as under:

Acharya, Prasanta Kumar and Behera, Manoranjan (2004), reviewed "Functioning of Sarva Shiksha Abhiyan Programme in Orissa (quarterly monitoring report)". Sarva Shiksha Abhiyan (SSA) is the first national programme launched in 2001, with an objective to achieve the goal of universal primary education by 2007 and universal elementary education by 2010. It also envisages bringing back all these who were never enrolled and school drop-outs by 2003, and providing support to pre-school learning in ICDS and non-ICDS areas. The present report had been prepared to analyse the progress of SSA activities till November 2003 at district and national level. Data was collected from 2 sample districts of which one was a DPEP (District Primary Education Programme) in Mayurganj district and the other was a non-DPEP district Nayagarh. From socio-economic point of view Mayurganj was backward as compared to Nayagarh. It was found that by the end of November 2003, the progress on civil works had been very slow especially due to late release of funds, inadequate monitoring and lack of district level convergence of SSA with other allied development schemes. But remarkable progress was made by Orissa Primary Education Programme Authority (OPEPA) in organizing teachers training programmes both at state and district level. Nearly 70% EGS (Education Guarantee Scheme) centers had been made operational by OPEPA which was a remarkable achievement. But progress in the opening of Alternate and Innovative Education Centers (AIE) was very unsatisfactory. Some anomalies were found in the distribution of text books at block and school level because defective data was provided by OPEPA to Text Book Production and Marketing (TBPM) Authority. By November 2003, curriculum for Classes I-VII had been revised by OPEPA and distributed to some teachers, but no plans had been made to include specific vocational topics to increase the attendance of 91 children.

Acharya, Prasanta Kumar and Behera, Manoranjan (2004), conducted a study on "Functioning of Sarva Shiksha Abhiyan Programme in Orissa (quarterly monitoring report)". Sarva Shiksha Abhiyan (SSA) is the first national programme launched in 2001, with an objective to achieve the goal of universal primary education by 2007 and universal elementary education by 2010. It also envisages bringing back all those who were never enrolled and school drop-outs by 2003, and providing support to pre-school learning in ICDS and non-ICDS areas. The present report had been prepared to

analyse the progress of SSA activities till November 2003 at district and national level. The Data was collected from 2 sample districts of which one was a DPEP (District Primary Education Programme) in Mayurganj district and the other was a non-DPEP district Nayagarh. From socio-economic point of view Mayurganj was backward as compared to Nayagarh. It was found that by the end of November 2003, the progress on civil works had been very slow especially due to late release of funds, inadequate monitoring and lack of district level convergence of SSA with other allied development schemes. But remarkable progress was made by Orissa Primary Education Programme Authority (OPEPA) in organizing teachers training programmes both at state and district level. Nearly 70% EGS (Education Guarantee Scheme) centers had been made operational by OPEPA which was a remarkable achievement. But progress in the opening of Alternate and Innovative Education Centers (AIE) was very unsatisfactory. Some anomalies were found in the distribution of text books at block and school level because defective data was provided by OPEPA to Text Book Production and Marketing (TBPM) Authority. By November 2003, curriculum for Classes I-VII had been revised by OPEPA and distributed to some teachers, but no plans had been made to include specific vocational topics to increase the attendance of 91 children.

Survey of SSA in 05 Zones of district Srinagar (2004 universalisation).

The study was designed to collect and analyze the data regarding Sarva Shiksha Abhiyan (SSA) in five Zones of district Srinagar. The study was conducted in the Department of Education under the supervision of Dr. Tasleema Jan and the major findings reported were:

- The total number of schools that have been opened in 05 zones was 85 and 85 teachers have been engaged in these schools.
- 8 buildings were constructed in these schools and other schools were found in rented buildings.
- The monthly honorarium of teachers was 1500 rupees.
- The scheme has partially succeeded in providing universalization of quality, elementary education.
- The survey was found that K.G. classes had been introduced in all the government schools of 5 zones because of Sarva Shiksha Abhiyan (SSA). It becomes evident from the above given studies that very few studies have been conducted on SSA both at National as well as State level. No visible progress in research and evaluation has been observed in the State as a whole. However, few research

studies were in progress outside the Jammu and Kashmir State on overall achievement and other related issues of SSA. Only one study has been conducted on SSA in district Srinagar by State Resource Centre (2007).

- **Chand, Vijiya, Sherry, Amin Choudhury and Geeta (2006)**, studied innovations under the Sarva Shiksha Abhiyan. The Sarva Shiksha Abhiyan (SSA) is the flagship elementary education programme of the Government of India has been in operation since 2002. The innovative Interventions were identified in 13 states of the Nation. These innovations played an important role in reducing the number of out-of-school children. It was also observed that in 2006, about 3 million children with disability have been identified and 1.83 million were enrolled. The linking of civil works to an educational purpose like teaching rainwater harvesting was also another innovation to be encouraged. Strategies should be made to focus on a problem area identified by national guidelines, monitoring and assessment systems to be established where, ever possible, to facilitate modifications to the interventions and to bring in innovations.

Sharma, Suresh. (2009). focused his study on Literacy and school attendance in India. The study reported, “Operation Blackboard” and “Sarva Siksha Abhiyan” are state sponsored movements that aimed at universal enrolment to provide the basics. The study finds that the largest marginal effects are association with household living standards, access to electricity and expenditure on elementary schooling. The National Family Health Survey (NFHS) was used to provide an opportunity to cross-check the results of one study against the other. Another most commonly reported reason for dropout is that it “costs too much” for both boys and girls, followed by “required for outside work for payment in cash or kind” for boys and “required for household work” for girls, repeated failure for both the genders, “required for work on family farm/ family business” for boys, and finally “required for household work” for 10% boys and 15% girls. It is noteworthy that growth in female Literacy rate has been higher than that of male literacy rate, narrowing the gap between both during the 1980s and 1990s. The author also explained about Para teachers.

Jasrotia (2010), the study was designed to collect and analyze the data regarding Sarva siksha Abhiyan (SSA) in five Zones of district Kathua. The study was conducted in the P.G department of education in the MIER College of education by Savita Jasrotia. The study reveals that SSA programme in

the district Kathua was functioning smoothly. No problems have been observed in the field. The provision of mid- day Meal scheme under SSA has enhanced the enrolment of students at primary and upper primary level in district Kathua. No problems were faced by Staff and Officers working in the SSA programme in the Kathua district. Education Officers and teachers were satisfied with the scheme. The enrolment of boys and girls has enhanced enrolment at primary and upper primary level. Computer facilities and library facilities need to be made available in every school. Games and sports should be held regularly in every school. More than 80% of the selected upper primary schools were having their own accommodation under SSA. All the selected upper primary schools in five blocks of Kathua district were government schools and are under SSA programme. All the upper primary schools under SSA programme were aided by government. As the functioning of upper primary schools under SSA programmes was concerned. All upper primary schools were found to profess English and Hindi as a medium of instruction. While observing the upper primary schools teaching, it has been found that approximately 100% of the upper primary schools have English and Hindi as a medium of instruction. The teacher involved in upper primary schools under SSA programmes have a wide range of professional qualifications that is trained graduate and trained post graduate teachers with qualification of B.Ed and M.Ed. Most of the upper primary schools under SSA programme function for six hrs a day. As far as, the regularity is concerned. 60% of the students of the upper primary school under SSA programme were regular. Due to Mid day Meal scheme of the State government (SSA) the attendance of students has increased. As far as, teachers intervention under SSA programme was concerned it has enhanced the attendance to the level of 60%. Ninety percent of the students get drinking water facilities at school under SSA programme. 80% of the schools under SSA programme have got toilet facilities. The teachers were provided 10 days training in the capacity building courses during summer vacations. A few other researches are also reported by Ed.CIL, Noida during 2010 to 2014, which are mostly of evaluative nature.

Need and Significance of the Study

Elementary education is backbone of the whole educational system of a nation. The child of today is the builder of tomorrow. A well designed and effective implemented elementary education programme is necessary for the harmonious development of the child, which in-turn contributes to economical, social and cultural development of the Nation. A lot of problems

were faced by various implementing agencies in the universalisation of elementary education in India. Since independence various efforts have been made by the government for free and compulsory education to the children in the age group of 6-14 years. For this purpose large number of schools was opened by the government and various incentive drives have been made to ensure enrolment of the children in primary schools. But the question still remains that out of 200 million children in the age group of 6-14 years, 59 million children are not attending the school, out of which 35 million were girls and 24 million were boys. So keeping the universalisation of elementary education and governmental resolve in view, it is imperative to study the various problems faced by the implementation agencies in Sarva Shiksha Abhiyan (SSA) scheme. To provide coverage to out of schools boys and girls at the elementary stage of schooling, SSA is the governmental resolve to ensure the same. Keeping in view the above facts there is a need for present study particularly to understand, to investigate and to see how far the government has succeeded in implementation process of SSA programme in district Samba. The purpose of the present study is also to see and observe the conditions in schools that have been opened under SSA in all zones of district Samba. The present study is also an attempt to collect and analyze the data collected from these zones and to understand the achievements made by this scheme in district Samba in particular and the state in general.

Objectives of the Study

- 1) To study the increase and decrease in enrolment of students in sample schools.
- 2) To study pupil-teacher ratio in sample schools.
- 3) To study infrastructure physical facilities in the sample schools.

Research Questions Posed

1. Why access to education is less than National figures in district Samba?
2. What are the problems in the implementation of SSA programme in district Samba?
3. Why nominal increase in enrolment is observed in the sample schools in the district Samba?

Delimitation of the Study

The present study is delimited to 5 Educational Zones namely Samba, Ghagwal, Vijaypur, Ramgarh and Parmundal.

Sample of the study

District Samba formed the sample of the study. It has 5 educational zones; all the 5 zones were selected for the study. From each educational zone three primary schools were selected randomly i.e. (3x5=15 schools), furthermore all the teachers of the 15 Schools i.e. 50 teachers from five Zones of district Samba were selected purposively, 10 students from each Zone i.e. (10x15=150 students) and 5 officers associated with the implementation of the programme were taken as a sample for the study.

Method

Descriptive survey method was used for the present study.

Tools Used

The data for present study was collected with the help of following self constructed tools:

1. Checklist of primary schools under SSA.
2. Information Blank of primary schools under SSA.
3. Interview schedule for Zonal Educational officers.
4. Questionnaire for teachers.
5. Questionnaire for students.

Results of the Study

Findings based on research objectives posed and followed by data analysis. The actual analysis of data is presented in meaningful tables as under:

Table -1
Zone-wise Percentage Increase and Decrease in Enrolment in
Sample Schools of District Samba.

S.No	Educational Zones	Total Enrolment		Increase/ Decrease in Enrolment	Percentage Increase/ Decrease
		2012- 2013	2013-2014		
1	Ghagwal	56	59	3	5.4
2	Purmandal	60	62	2	3.3
3	Ramgarh	48	53	5	10.4
4	Samba	68	55	-12	-17.6
5	Vijaypur	70	51	-19	-27.1
		302	280	-21	-25.6

The Table-1 reveals increase/decrease in enrolment in sample schools of all the five zones of district samba from session 2012-13 to 2013-14. In Educational Zone Gagwal the total enrolment in 2012-13 was 56 students and it has increased to 59 in 2013-14 with an increase of 5.4%. The total enrolment in Purmandal Zone was 60 students in 2012-13 and it enhanced to 62 students in 2013-14, with an increase of 3.3%. In Ramgarh Zone the total enrolment was 48 students in 2012-13 which enhanced to 53 students, with an increase of 5%. In Samba Zone total enrolment was 68 students in 2012-13 which decreased to 55 students in 2013-14 with a decrease of 17.6%. In Vijaypur Zone total enrolment was 70 students in 2012-13 and it decreased to 51 in 2013-14, with a decrease of 27.1%. Whereas the total enrolment in all five zones of district Samba was 302 students in primary section in 2012-13 and 280 students in primary section in 2013-14 with a decrease in enrolment to 25.6%. This decrease can be noticed in Vijaypur and Samba zones mainly where a few private institutions have been established during the same period.

Table - 2
Pupil-Teacher ratio in Sample schools

S.No.	Educational Zones	2012-2013				2013-2014		
		Number of Schools	Total Enrolment	Number of Teachers	Pupil-teachers Ratio	Total Enrolment	Total numbers of Teachers	Pupil-teachers Ratio
1	Ghagwal	3	56	9	6:1	59	9	7:1
2	Purmandal	3	60	8	8:1	62	8	8:1
3	Ramgarh	3	48	9	5:1	53	9	6:1

4	Samba	3	68	11	6:1	55	11	5:1
5	Vijaypur	3	70	13	5:1	51	13	4:1
	Total	15	302	50	6:1	280	50	6:1

The Table-2 reveals that the highest pupil-teacher ratio of sample schools of five zones of district Samba for the year 2012-13 and 2013-14. In the year 2012-13, the enrolment in 3 sample schools of Gagwal was 56, with the total number of teachers in these schools was 9. Hence Pupil-teacher's ratio was 6:1. In educational Zone Purmandal the total enrolment in sample school was 60, with the total number of teachers 8. So, the pupil-teacher ratio was 8:1. In the educational zone Ramgarh total enrolment of sample school was 48, with total number of teachers 9. So, the pupil-teacher ratio was 5:1. In educational zone Samba, the total enrolment in sample schools was 68; with total number of teachers 11. So, Pupil-teacher ratio was 6:1. In educational zone Vijaypur, the total enrolment of sample schools was 70; with total number of teachers 13. So pupil-teacher ratio was 5:1, the total enrolment of all schools of 5 zones of District Samba was 302 and total number of teachers 50. Hence the overall pupil-teacher ratio in the year 2012-13 was 6:1.

In the year 2013-14, the enrolment in 3 sample schools of zone Gagwal was 59 and total number of teachers was 9. So the pupil-teacher ratio is 7:1. In educational zone Purmandal the total enrolment in 3 sample schools was 62, with the number of teachers 8. So, the pupil-teacher ratio was 8:1. In educational zone Ramgarh, the total enrolment in sample schools was 53 and the number of teachers was 9. So, the pupil-teacher ratio was 6:1. In Educational zone Samba the total enrolment in sample schools was 55, with the number of teacher was 11. So the pupil-teacher ratio was 5:1. In educational Zone Vijaypur the total enrolment in sample school was 51, with the number of teachers 13. So, the pupil-teacher ratio was 4:1. The total enrolment of all sample schools in five Zones of District Samba was 280 and number of teachers 50. Hence, the overall pupil-teacher ratio in the year 2013-14 was 6:1. It is found that a uniform rate of pupil-teacher ratio in both the years though a nominal increase in the enrolment is observed over the years. The number of teachers has remained uniform during the years

Findings and Implications

Research Objective - 1: To study the increase/decrease in enrolment of students in sample schools in five Zones of district Samba

The data indicates that the total enrolment in all the five zones in year 2012-13 was 302 which came down to 280 in 2013-14. This has resulted in overall decrease of 25.6% in enrolment. However, the educational zone of Ramgarh excelled with the highest increase in enrolment (10.4%) followed by Gagwal (5.4%) and Purmandal (3.3%).

Research Objective – 2: To study pupil-teacher ratio of sample schools in district Samba

Results show that in the year 2012-13, highest pupil-teacher ratio was seen in educational zone Purmandal 8:1 followed by educational zones of Gagwal and Samba having the ratio 6:1 and Ramgarh and Vijaypur with the ratio of 5:1.

In the year 2013-14, the highest pupil-teacher ratio was seen in Purmandal Zone was 8:1 followed by Gagwal (7:1), Ramgarh (6:1), Samba (5:1) and Vijaypur (4:1). During the study it was learnt that the criteria of pupil-teacher ratio under SSA was 40:1 and the same was followed in most of the schools. The overall pupil-teacher ratio in the year 2012-13 and 2013-14 was 6:1 in district sample which was more favourable as compared to the criteria of SSA scheme. Hence, the existent pupil-teacher ratio is found to be ideal in all the schools under SSA scheme.

Research Objective-3: To study infrastructure facilities in the schools in the district Samba

The data revealed that in most of the schools infrastructure facilities including classrooms have been added in the five zones of the district. It was also observed that in most of the schools toilets were newly constructed and drinking water facilities were also added in three zones of the district. In some zones facilities were planned to be improved in the near future.

Educational Implications

Education at the primary level is of utmost importance and is very essential for proper growth and development of human beings. Government of India initiated the programme Sarva Shiksha Abhiyan which aims at providing useful and relevant elementary education for all children in 6 to 14 age group by the year 2012, with special emphasis on girl's education.

The study revealed that despite some loopholes in the programme, it has been very effective in bringing out of school children in the mainstream and reducing dropouts to improve the awareness and efficacy of the programme, appointing well qualified teachers with regular refresher courses and involving NGOs with better funding for timely dispersal of the funds for their smooth functioning. The study also revealed that for enhancing enrolment and regular attendance in schools, free text books are provided to all children of primary and upper- primary schools. However, special efforts should be made to ensure that the text books are distributed in the beginning of the academic session itself.

As per the study almost all school teachers take 2 to 3 classes in a single classroom daily. It hampers the teaching learning process of various classes and students. In single teacher schools additional teachers need to be appointed to carry out teaching-learning process in an effective way. Most of the teachers found to be having heavy load of teaching and hence, they need to be made free from other duties like census, surveys, electoral roll preparation, election and collection of information from ZEO and CEO offices.

It would be worthwhile to mention that the Policy planners, management and Principals/Headmistress of the primary and upper-primary schools should provide regular feedback to teachers and conduct orientation courses/ programmes/workshops for them by associating senior/experienced teachers particularly in classroom teaching and students behaviour so that they are made more efficient and effective to teach the students at primary stage of schooling.

The decrease in enrolment is because of increase in number of private schools in the area, lack of adequate infrastructure and poor quality of education. To improve the quality of school education, arrangements should be made for developing the educational technologies like computers, OHP,

Smart classes in the elementary schools. It can be helpful in making schemes activity based learning centres. The schools can be of immense value in the overall development of personality of the children in today's world where multimedia education is proving highly effective and interesting.

The SSA programme should open new schools in those habitations which do not have school facilities and also strengthen the existing school infrastructure through provision of additional classrooms, toilets, drinking water, maintenance grant and school improvement grants. SSA needs to improve further quality of elementary education including life skills. SSA should focus special attention on girl's education and children with special needs. SSA should also provide Technical, computer education to bridge the digital divide in the urban/rural areas.

SSA scheme need to continue for more time so that elementary education in India becomes more attractive for the children to attend schools and reduce the failure/dropout for which trained and committed teachers have to play the pivotal role.

Suggestions

1. Accommodation problem in schools should be solved and additional blocks/classrooms constructed with good lighting and ventilation
2. To improve the quality of education arrangements need to be made by the government for library, computer facilities and trained computer teachers.
3. Free text books need to be provided at the beginning of academic sessions to enable the students to refer the same.
4. Talented and hard working teachers should be encouraged and rewarded.
5. In the present single teacher schools more number of teachers need to be appointed to carry out teaching-learning process in an effective way.
6. Provide micro-nutrients and medical check-up of students by doctors.
7. Regular survey need to be conducted in communities to identify and control the dropouts so that such students are brought back to classes.
8. Boundary wall and separate toilet(s) for girls need to be constructed in every school.

9. All teachers need to be trained through refresher courses, subject training courses, orientation courses and workshops.
10. Child centered and activity based teaching need to be encouraged in schools.
11. Teachers should be trained for development of low cost teaching-learning material (TLM).
12. In single teacher schools additional teachers need to be appointed to carry out teaching-learning process in an effective way.
13. Teachers should be made free from other duties/activities like census, surveys, electoral roll preparation, election and collection of information from ZEO and CEO offices including collection of Mid-day meal ration.
14. Government should constitute separate authority/department to take the responsibility of providing food to children in schools under Mid-day meal scheme so that teachers devote their entire time for imparting quality education.
15. To provide hygienic drinking water to children, water purifier should be installed in all schools.

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