CHAPTER-3

RESEARCH DESIGN
To meet research objectives, a research design is required. Research methodology helps in designing the research through choice of methods relevant and applicable to solve respective research problem. Of several types, the exploratory research design offers in-depth search of an existing problem by giving new directions for further research.

Exploring communication interface in and for development arises out of a novel approach first mentioned in AURCP experiment (1998-2000) and its later sustainability studies’ (2002, 2004-05, 2011) results. However AURCP did not look further into this aspect. Other efforts of first decade of twenty first century in piloting for sustainable development such as CDD by World Bank, Isang Bagsak by International Development Research centre and several universities in Asia and Africa had increasing evidence of critical role of communication but offers no framework to plan communication for development that not only serves the present but the communities in their trans-generational existence. On the other hand communication itself in its diverse types and formats attests its transgenerationality.

The exploratory research design is justified to find out the nature, naturality and technologicality as well as social embeddedness of communication in communities vis-à-vis its various functionalities in development.

3.1 **Nature and methods of present research:**

The present research has been an exploratory study to bring out inter-functionality between development and communication in the three villages of North Bengal. The research design engages different methods in achieving the objectives. These methods have been undertaken to collect data of both quantitative and qualitative nature about two phenomenon development and communication in the context of transgenerational progress in the villages. These include data on communication experience, people’s participation and
intervention in the development process, government initiatives’ penetration in sample village cluster, and people’s own initiatives through generations for sustenance and becoming, and the socio-cultural expressions of people’s ways of life and dwelling. The mixed approach (both quantitative and qualitative method) has been adopted in the study. The methods used for data collection are as follows.

**3.1.1 First Information Survey (FIS) type of Census engaging close ended questionnaire for trans-generational and contemporary resource and livelihood activities:**

FIS is a questionnaire tool to collect primary data. Census survey is a process of enumerating the research universe in question. It helps in evaluating each detail of the population under study.

**Purpose:**

Such survey through information questionnaire tool offers in-depth evaluation of heterogeneous units.

**Purpose in the present research:**

The model FIS questionnaire is adopted from the Assam University Rural Communication Project (1998-2001) which explored communication utilization status in three villages at different development stages there. AURCP developed FIS questionnaire to gather data from DCFW perspective for closure of information regarding the community. AURCP did not adapt Census questionnaire of Government of India as it did not include such information which gives insight about transgenerational continuity of resource management, functional practices of work-living-leisure, communication resources and storage-retrieval of all these in community’s IKS.
After pre-testing of that questionnaire in 5% households in the sample cluster, necessary changes have been done and few new questions are included to adjust for research setting difference. It generated both quantitative and qualitative data on the villages.

**Merits:**

The FIS type of census being rigorous in nature helped in collecting data in detail. Probing questions covering each aspect of village life were exhaustive in collecting both quantitative and qualitative data of villages. Such survey in natural situations explored villagers and their activities much easily and also generated open-ended questions to know more about their praxis.

**Demerits:**

Villagers were found co-operative in telling their conditions but sometimes found hesitant to answer thinking this survey as nothing but a government trick to know their resources (like own or agricultural land). Some respondents were found to hide information too but after cross-verification of fact with other villagers, re-survey was done on them. In these cases, both survey and interview were deep-probing to know fact. It also helped in knowing people’s mindset prevailing in villages. Villagers felt threatened at times and confirmed with researcher their fear of seizure of assets on disclosure of information. On dispelling such fear, most of them dispensed with information. Besides, they were also found at fix about ‘why’ and ‘what’ of this new survey after few government level surveys yielded no benefit for them. Researcher had to face rigorous demands for government aids in several respects like roads, water, sanitation and health services. It was difficult to make villagers understand the reason and relevance of this survey. However, continuous visits to the villages
made the researcher accepted gradually and build relation with them which helped in eliciting response to the questionnaire.

3.1.2 **Interview engaging close and open-ended question schedule:**

Research interview is “a two-person conversation, initiated by the interviewer for the specific purpose of obtaining research-relevant information and focused by him on the content specified by the research objectives of description and explanation” *(Gardner 1968: 527 in Ahuja 2009)*. Individual interview involves one respondent but group interview may involve number of respondents at a time.

**Purpose:**

Research interviews help in describing and exploring research problem. This method helps in getting insights of reality through the respondents.

**Purpose in the present research:**

Individual interview of family head and members has been done with close ended schedule in case of survey. Open ended schedule in individual interview is used to know mainly their activities and worldview. Indirectly interviews helped the researcher to know the communicative ability of villagers of three different villages.

**Merits:**

Interview method helped in interacting with villagers separately and eliciting data as per schedule. Interview in the informal setting kept villagers comfortable in responding to the questions. Both types of close and open ended question schedule helped in recording data of each family. Villagers were found
inquisitive in knowing the questions. Participatory approach of the researcher being new made villagers interested in telling their stories to her.

**Demerits:**

Villagers were impatient some times in answering questions. Unwillingness in answering was also there. Many villagers used to gather together while interviewing any family and they equally answered on behalf of the respective family. This created noise at work. The researcher had to convince villagers for several times that such process will be done in each household as they primarily thought missing of interview would not elicit any government aid.

Being interested, villagers used to overcrowd the group interview sets that led to problems in recording data. Sudden enquiries and reactive comments of villagers also disturbed the process sometimes.

### 3.1.3 Focus group discussion (FGD):

“A group of individuals selected and assembled by researchers to discuss and comment on, from personal experience, the topic that is the subject of the research” *(Powell et al 1996: 499 in Gibbs 1997)*

**Purpose:**

This method helps in getting specific information through discussion of groups on a specific issue given by the researcher. It helps in getting insights of the topics by giving more freedom to the respondents.
**Purpose in the present research:**

The method is applied in knowing issues about the socio-religious systems, resource utilization methods, collective action of villagers, mediated message usage and communication praxis at different levels.

Villagers were highly interested in answering about systems they follow at socio-economic and religious levels. They were also reactive about government functionality. Groups combining men, women and youth elicited data collectively. However, each group of men, women and youth was actively participant and responsive while interviewed separately. Each group helped in recording data on problems and scopes separately in natural settings.

**Merits:**

Such discussions for quite a number of times with various groups of men, women, youth and mixed groups helped in eliciting information about their livelihoods and the existing social systems in which they live. Existing communication practice at several levels with mass media exposure has been recorded successfully with this method. Villagers were much interested in discussing issues.

**Demerits:**

Overlapping of information was strong. Participation was high so control in group making was difficult.
3.1.4 **Non-participant observation:**

In non-participant situation researcher observes the subject passively.

**Purpose:**

This helps in recording data in detail. Observation allows recording of subtle details on attitudes, behavior of respondents which are difficult to get through other methods.

**Purpose in the present research:**

Non-participant observation has been applied in knowing cultivation method, post production process, mode of using produce in infrastructure making and religious praxis of the study villages on standard of life. This has helped in knowing their attitudes towards issues and experiences at socio-cultural levels.

**Merits:**

It was useful in recording data in detail in natural settings. It helped in knowing the adopted processes of the villages. Communication with the villagers became easy that helped in recording information through discussions. This also helped in framing probing open ended questions in knowing more about them.

**Demerits:**

In order to observe, the researcher had to struggle in the beginning to overcome formal and uncomfortable condition of the villagers.
3.1.5 **Analyses of government documents:**

**Purpose:**

Being secondary data in nature such documents help in knowing existing status of subject. It also helps in identifying set system, availability and gap of such system too.

**Purpose in the present research:**

It is adopted in knowing house numbers, caste, ration card status in determining poverty status, border pass in accessing agro lands, Kisan Credit Cards (KCC) of farmers and voter identity cards of the villagers. Such method has helped in determining status of villages. Besides, in determining study villages at different status, government reports and records have been analyzed at sub-divisional, block and Gram Panchayat (GP) levels.

**Merits:**

Such documents have helped in exploring status well.

**Demerits:**

It was time consuming and difficult to collect documents from the government offices at every respective level.

3.1.6 **Cross-checking of information by triangulation:**

“Triangulation refers to the use of more than one approach to the investigation of a research question in order to enhance confidence in the ensuing findings” *(Bryman 2003)*.
**Purpose:**

Such method helps in verification of data.

**Purpose in the present research:**

Government data or information, as per objective number 3 on performances of various development schemes, is verified with the villagers and vice-versa through interviews and focus group discussions to determine the facts and prevailing gaps.

**Merits:**

Triangulation helped in recording problems and possibilities existing in the villages. It helped in recording reactions on several issues on both sides of villagers and government functionaries.

**Demerits:**

It was time consuming. Sometimes overlapping of information was a problem.

**3.2 Hypothesis:**

In determining relationship of phenomena hypothesis can be considered as “a proposition or a set of proposition set forth as an explanation for the occurrence of some specified group of phenomena either asserted merely as a provisional conjecture to guide some investigation or accepted as highly probable in the light of established facts” *(Kothari 2009)*

**Purpose:**

Hypothesis helps in testing or formulating theories. It helps in understanding of phenomena. *(Ahuja 2009)*
Hypothesis to be tested in this research:

Higher Development is directly dependent on better utilization of Communication spectrum of the place.

3.3 Operational framework of the present research:

To determine variation of the three villages at three different stages of development, it was needed to identify socio-economic status and living standard of the communities undertaken. Following this, research objective number one explores relative socio-economic condition through several indicators. Research objective number two determines way of living and practices for that. Both objectives are to identify their knowledge and reflected practices in their present situation. To analyze their involvement in external factors like government or any private intervention, research objective number three explores participation in both ways, i.e., determining peoples’ and institutional involvement in development.

These objectives together would determine their asset generation from people’s own initiative and from governmental initiative. Together findings from these objectives would also determine sustainability of their livelihood over generations and asset renewability practices. It is to identify their natural and social asset development and choice of living through utilizing those. Besides economic practices, the objectives explore their community living in trans-generational way in which exchange between families and groups help them live relatively unscathed from the vagaries of market and nature. Thus, the term development is applied here to four aspects of their being-

a. Natural and social assets and modes of purposive utilization
b. Variations in economic practices
c. Social living and participation level and
d. Response to institutional intervention.

Thus development is seen here not only through economic condition but ability of utilizing available resources for sustaining their lives in their becoming. This trans-generational context includes the broader social matrix in which these communities are thriving.

As this research explains possibility of a relationship between variation in communication and different development stages in the context of trans-generational sustainability of communities in their environment, operationalising the research through field work and subsequent field data analysis demands setting operational framework for each of the objectives.

Fourth objective pertains to exploring communication resources. Fifth objective pertains to finding out mass, interpersonal and group media scenario. As these villages were initially turned into human settlements hundred years back and are mostly agricultural since then, these are trans-generational settlements. Therefore communication and media of communication are justified to be viewed from a trans-generational viewpoint.

The term communication is therefore applied to three aspects of interpersonal and social relationship- a. the process and purpose of interaction between and among members of these three villages; b. events in those villages (family level, social, religious, cultural, political and economic) in which messages of continuous and non-continuous nature do rounds; c. purposive acts of expression for bringing human beings at same level of understanding and perception about various phenomena for behavior change.

Resource characteristics of communication would be utilized as a trope in comprehending human beings vis-à-vis their activities and behavior change over time for progress. Traits of resource are- a) being source or supply for producing
benefits; b) benefits of such utilization may include increased wealth, meeting needs, system functioning and well being; c) materials, energy, services, staff, knowledge or other assets that are transformed to produce benefits; d) it is limited but can be available for utilization. It has potential for depletion on consumption.

Spectrum of communication is a construct proposed by Loho Choudhury for considering entire range of communication types and their natural mode or media (human and technical) in any given universe. Otherwise inclusion or exclusion of one or other type of communication or its media may fail the purpose of the research.

The term media, in this frame of communication is applied to the range from human media (in which human beings, singly or in group perform in presence of others) to technology and machine-mediated forms of communication. Technology and machine mediated forms range from interpersonal to mass media.

3.4 **Research Universe:**

The study is done in 3 villages of Bazarugachh, Tewarigachh and Khalpara of purba-Bansgaon mouza of Chathat-Bansgaon GP under the largest block Phansidewa of Siliguri Sub-division of Darjeeling district of North Bengal.

3.5 **Justification of block/GP/mouza and hamlet selection:**

Under sub-division, block comes first following which comes GP, mouza and hamlets within this. For selecting each level with most backward status and villages at different development stages, detailed study of government records establishing such levels have been done. These have helped in identifying areas
at required levels to meet the objectives of the research study. Following this, to justify the selection of these places the study is as follows:

3.5.1 **Block selection justification:**

As per administrative division, Darjeeling district has 12 blocks under 4 Sub-divisions. Darjeeling Sadar Sub-division comprises of Darjeeling municipality and Darjiling pulbazar block, Rangli Rangliot block and Jorebunglow-Sukhiapokhri block; Kalimpong Sub-division comprises of Kalimpong municipality and Kalimpong-I, Kalimpong-II and Gorubathan blocks; Kurseong Sub-division comprises of Kurseong and Mirik municipality and both Kurseong and Mirik as blocks as well; Siliguri Sub-division with Siliguri municipal corporation has Naxalbari, Matigara, Kharibari and Phansidewa blocks. Except Siliguri, rest is all hill Sub-divisions. In order to study diversities of human activities this plains area of Siliguri Sub-division has been selected as the broad research area.

The Naxalbari block has Mirik Development Block in the north side. Khoribari & Phansidewa Development Block in the south. Matigara Development Block in the east and Nepal in the west. Matigara block has Kurseong Sub-Division in the north. Pansidewa Block in the south. Siliguri Municipal Corporation and Jalpaiguri District in the east and Naxalbari Block in the west. Kharibari block has Naxalbari in the north, Bihar in the south, Nepal in the east and Phansidewa Block in the west. Only Phansidewa block among all other has three types of border of international, state and district. Indo-Bangladesh Boarder is in the eastern side of the block. Southern part is surrounded by Uttar Dinajpur district, Western side is found surrounded by Bihar state and Northern part is surrounded by Matigara Block.
To compare the demography, Naxalbari block is found to be of 182.46 sq. km area. Matigara block is of 241.78 sq.km area. Kharibari block is of 238.80 sq.km area and Phansidewa block is of 308.65 sq. km Naxalbari block is found to consist of 6 GPs. Matigara block 5 GPs. Kharibari block 4 GPs and Phansidewa block 7 GPs. Naxalbari block is found to have 97, Matigara block 76, Kharibari block 68 and Phansidewa block 113 mouzas.

The data has been represented graphically in chart1 as -:

![Chart 1: Demographic Constitution](chart1)

- **Naxalbari**: Area - 182.46, Gram panchayats - 6, Mouzas/Villages - 97, Hamlets - 86
- **Matigara**: Area - 241.78, Gram panchayats - 5, Mouzas/Villages - 76, Hamlets - 84
- **Kharibari**: Area - 238.8, Gram panchayats - 4, Mouzas/Villages - 97, Hamlets - 183
- **Phansidewa**: Area - 308.65, Gram panchayats - 7, Mouzas/Villages - 113, Hamlets - 113

**Chart 1: Demographic Constitution**

Source: Block Level Documents

Therefore it is evident that block Phansidewa has maximum land area with highest number of GPs and mouzas or villages too.

For population (as per census 2011), Naxalbari block is found have 157931 (male- 80009, female- 77922). Matigara block 1,92,593 population (male- 97,507, female- 95,085 and other -01). Kharibari block 109198 population (male- 55686, female- 53512) and Phansidewa block total 204510 (male- 103707, female- 100803). However, as per census 2001, Naxalbari block is found have 144915 (male- 75831, female- 69084). Matigara block 1,19,408 population...
(male- 61,227, female- 58,181). Kharibari block 88,225, population (male- 45, 501, female- 42, 724) and Phansidewa block total 171508 (male- 87,945, female- 83,563). For total number of below poverty line (BPL) families, Naxalbari block has 5454 families. Matigara block has 11256 families. Kharibari block has 9064 families and Phansidewa block has total 17350 BPL families. Literacy rate as per census 2001 is as found for Naxalbari block 67.86%. Matigara block is at 54.14% Kharibari block at 46.4% and Phansidewa block is found at 56.59%.

The data has been represented graphically in chart 2 as :-

<table>
<thead>
<tr>
<th>Block</th>
<th>Population 2001 census</th>
<th>Population 2011 census</th>
<th>BPL families</th>
<th>Literacy rate as per census 2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Naxalbari</td>
<td>157931</td>
<td>144915</td>
<td>5454</td>
<td>67.86%</td>
</tr>
<tr>
<td>Matigara</td>
<td>192593</td>
<td>119408</td>
<td>11256</td>
<td>54.14%</td>
</tr>
<tr>
<td>Kharibari</td>
<td>109198</td>
<td>88,225</td>
<td>9064</td>
<td>46.40%</td>
</tr>
<tr>
<td>Phansidewa</td>
<td>204510</td>
<td>171508</td>
<td>17350</td>
<td>56.59%</td>
</tr>
</tbody>
</table>

**Chart 2: Population Demography**

Source: Block Level Documents

It is evident that block Phansidewa has the highest population in both the census of 2001 and 2011. In case of below poverty line (BPL) families also, block Phansidewa is found highest. In case of literacy rate block Naxalbari is found highest at 67.86% and block Phansidewa is at the 2nd higher position at 56.59%.

For infrastructure, it is found that Naxalbari block has 71 primary schools. Matigara block has 50 primary schools. Kharibari block has 81 and Phansidewa block has total 117 primary schools. Naxalbari block has 2 high schools. Matigara block has 3 high schools. Kharibari block has 2 and Phansidewa block
has total 1 high schools. Block Phansidewa is found to have 3 madrasah up to class 10. Naxalbari block has 10 higher secondary schools. Matigara block has 7 higher secondary schools. Kharibari block has 6 and Phansidewa block has total 12 higher secondary schools. Naxalbari block has 59 Shishu Shiksha Kendra (SSK). Matigara block has 70 SSK. Kharibari block has 61 and Phansidewa block has total 92 SSK. Naxalbari block has 2 Madhyamik Shiksha Kendra (MSK). Matigara block has 2 MSK. Kharibari block has 2 and Phansidewa block has total 4 MSK. Naxalbari block has 2 colleges. Matigara block has 8 colleges. Kharibari block has 0 and Phansidewa block has 0 colleges. Naxalbari block has 0 university campus. Matigara block has 1. Kharibari block has 0 and Phansidewa block has 1 university campus (Rabindra Bharati University). Overall block Phansidewa is found to have highest educational institutes up to higher secondary schools however higher educational facilities are found nil here.

For health institutions available in the blocks, it is found that Naxalbari block has 1 Block Primary Health Centre (BPHC). Matigara block has 1 BPHC. Kharibari block has 0 but has 1 rural hospital and Phansidewa block has 1 BPHC. Naxalbari block has 2 Primary Health Centre (PHC). Matigara block has 1 PHC. Kharibari block has 1 and Phansidewa block has 1 PHC. Naxalbari block has 15 health sub centres. Matigara block has 15 health sub centres. Kharibari block has 11 and Phansidewa block has 22 health sub centres. For Integrated Child Development Services (ICDS) centres, Naxalbari block has 387 centres. Matigara block has 315 centres. Kharibari block has 277 and Phansidewa block has 559 centres. Block Phansidewa is found to have maximum health sub centres and ICDS centres than other blocks. Naxalbari block is found to have 3 weekly markets. Matigara block is found to have 4 weekly and 1 regular market. Kharibari block is found to have 5 weekly and 1
regular market and Phansidewa block is found to have 5 weekly and 1 regular market.

For Integrated Tribal Development Program (ITDP) mouzas, Naxalbari block is found to have 23, Matigara block 40, Kharibari block 0 and Phansidewa block being highest with total 41 such mouzas. As per the ‘List of backward villages under Siliguri Mahakuma Parishad’ and as per the list of ‘Poorest of the poor villages-identified by P&RD’ (Panchayat and Rural Development), it is found that the block Phansidewa has total 30 backward villages being highest among all 4 blocks as block Naxalbari has 16, Matigara has only 9 and Kharibari has total 25 under the sub division of Siliguri. The data has been represented graphically in chart 3 as:-

![Chart 3: Backwardness of Blocks](image)

Thus block Phansidewa is found to have maximum backward villages with highest number of ITDP mouzas.

Therefore block Phansidewa being largest, highest populated with maximum number of villages but being most backward is taken for the research study. The block has institutional facilities though but considering it’s maximum number of...
mouzas or villages to scope higher diversity of selection of GPs and hamlets thus eventually along most backward status, the block has been selected for the research study.

A map can be shown to identify the blocks under Siliguri sub-division:

Map 1: Sub-divisional Map of Siliguri

Source: Siliguri Sub-divisional Land and Land Reform Office, Siliguri
3.5.2 Gram Panchayat selection justification:

In order to select a GP for the research study several analyses have been undertaken. These are as followed:-

It is found that the selected community development block Phansidewa consists of 7 GPs. Each of these consists of certain number of villages or mouzas. These can be specified as, i) Phansidewa Bansgaon Kismat GP with 10 villages of 3507.43 hectares area, ii) Ghoshpukur GP with 25 villages of 5194.95 hectares area iii) Jalash Nijamtara GP with 17 villages of 3713.83 hectares area, iv) Hetmuri Singhijhora GP with 47 villages of 5502.93 hectares area v) Bidhannagar-I GP with 5 villages of 4430.95 hectares area vi) Bidhannagar-II GP with 3 villages of 3874.9 hectares area and vii) Chatat Bansgaon Kismat GP with 8 villages of 4990.22 hectares area, i.e., total 113 existing villages or mouzas with total 31215.21 hectares of area of the block.

The data has been represented graphically in chart 4 as:-

![Chart 4: Total Number of Villages](chart4.png)

Source: Phansidewa Block Office
It is evident that Hetmuri Singhijhora GP has highest number of villages among others followed by Ghoshpukur GP in second position. Bidhannagar-II GP is found lowest here.

For area of GPs:-

![Chart 5: Total Area in Hectares](image)

Source: Phansidewa Block Office

In this case, Hetmuri Singhijhora GP occupies largest area of the block followed by Ghoshpukur GP in second position. It is found that though Chathat Bansgaon Kismat GP has fewer villages (8 being 5th higher in position) but occupied much area which is uninhabited. Major portion of this area here is used for cultivation purpose mainly. However, this trend can be observed in other GPs too. Lowest in area occupancy is Phansidewa Bansgaon Kismat GP.

As per basic infrastructure, for primary schools, Phansidewa Bansgaon Kismat GP has 15, Ghoshpukur GP has 18, Jalash Nijamtara GP has 22, Hetmuri Singhijhora GP has 17, Bidhannagar-I GP has 11, Bidhannagar-II GP has 17 and Chathat Bansgaon Kismat GP has 15 schools. For high schools, Phansidewa Bansgaon
Kismat GP has 2, Ghoshpukur GP has 1, Jalash Nijamtara GP has 2, Hetmuri Singhijhora GP has 1, Bidhannagar-I GP has 1, Bidhannagar-II GP has 0 and Chattat Bansgaon Kismat GP has 1 schools. For higher secondary schools, Phansidewa Bansgaon Kismat GP has 3, Ghoshpukur GP has 3, Jalash Nijamtara GP has 1, Hetmuri Singhijhora GP has 0, Bidhannagar-I GP has 3, Bidhannagar-II GP has 1 and Chattat Bansgaon Kismat GP has 2 schools. For any other schools/educational institutes, Phansidewa Bansgaon Kismat GP has 59, Ghoshpukur GP has 11, Jalash Nijamtara GP has 1, Hetmuri Singhijhora GP has 105, Bidhannagar-I GP has 22, Bidhannagar-II GP has 86 and Chattat Bansgaon Kismat GP has 0 such schools or institutions. For colleges, All 6 GPs are at 0 except Jalash Nijamtara GP. For library, Hetmuri Singhijhora GP has 2, 5 GPs have 1 library each and Bidhannagar-II GP is at 0. For adult education centre, only Hetmuri Singhijhora GP has 14centres but rest of 6 GPs are at 0. For non formal education centres, only Hetmuri Singhijhora GP has 10 centres but rest of all 6 GPs are found at 0. For post office, Phansidewa Bansgaon Kismat GP has 3, Ghoshpukur GP has 2, Jalash Nijamtara GP has 1, Hetmuri Singhijhora GP has 2, Bidhannagar-I GP has 3, Bidhannagar-II GP has 3 and Chattat Bansgaon Kismat GP has 2 such facilitity. For co-operatives, Bidhannagar-I and Bidhannagar-II GPs have 1 such centre each but rest of 5 GPs are at 0. The data has been represented graphically in chart 6 as:-
Chart 6: Educational Infrastructure

Source: Phansidewa Block Office

It is found that, Jalash Nijamtara GP has highest number of primary schools. Ghoshpukur GP is second higher in position. Bidhannagar-I GP is found lowest. In case of high schools, Jalash Nijamtara and Phansidewa Bansgaon Kismat GP are found highest, Bidhannagar-II GP is found nil. Rest 4 GPs are found at same second higher position. 3 GPs are found at highest position in case of higher secondary schools. Hetmuri Singhijhora GP is found nil. Chatbat Bansgaon Kismat GP is found at the second higher position here. For any other institution, Hetmuri Singhijhora GP is found highest and Chatbat Bansgaon Kismat GP is found nil. In case of colleges, only Jalash Nijamtara GP is found to have a campus but rest is found nil. Hetmuri Singhijhora GP is found highest number of libraries. Bidhannagar-II GP is found nil. 5 GPs are found at same second higher position. For adult education and non-formal education centres, only Hetmuri Singhijhora GP is found to have centres and rest is nil. 3 GPs are found at same highest position. Jalash Nijamtara GP is found lowest. However, 3 GPs are found at same
second highest position. Only 2 GPs are found to have co-operatives and rest is at 0.

For commercial bank branches, Phansidewa Bansgaon Kismat GP has 1, Ghoshpukur GP has 0, Jalash Nijamtara GP has 1, Hetmuri Singhijhora GP has 1, Bidhannagar-I GP has 2, Bidhannagar-II GP has 0 and Chathat Bansgaon Kismat GP has 0 service. For rural bank branches, Phansidewa Bansgaon Kismat GP has 0, Ghoshpukur GP has 1, Jalash Nijamtara GP has 0, Hetmuri Singhijhora GP has 1, Bidhannagar-I GP has 1, Bidhannagar-II GP has 0 and Chathat Bansgaon Kismat GP has 1 service. For ketches road (in kms), Phansidewa Bansgaon Kismat GP has 23, Ghoshpukur GP has 88.6, Jalash Nijamtara GP has 135, Hetmuri Singhijhora GP has 15, Bidhannagar-I GP has 18, Bidhannagar-II GP has 23 and Chathat Bansgaon Kismat GP has 47 such road service. For brick pitched road (in kms), Ghoshpukur GP has 11.9 and Bidhannagar-I GP 28 such road service. Rest 5 is at 0. For Pucca roads (in kms), Phansidewa Bansgaon Kismat GP has 47, Ghoshpukur GP has 16, Jalash Nijamtara GP has 35, Hetmuri Singhijhora GP has 66, Bidhannagar-I GP has 41, Bidhannagar-II GP has 42 and Chathat Bansgaon Kismat GP has 25 such road service. For other roads (in kms), Phansidewa Bansgaon Kismat GP has 13.266, Ghoshpukur GP has 0, Jalash Nijamtara GP has 25, Hetmuri Singhijhora GP has 20, Bidhannagar-I GP has 2, Bidhannagar-II GP has 31.2 and Chathat Bansgaon Kismat GP has 0 such facility. For motorable (in kms) road connectivity, Phansidewa Bansgaon Kismat GP has 60.266, Ghoshpukur GP has 0, Jalash Nijamtara GP has 0, Hetmuri Singhijhora GP has 76, Bidhannagar-I GP has 65, Bidhannagar-II GP has 88 and Chathat Bansgaon Kismat GP has 21 such facility. For non-motorable (in kms) road connectivity, Phansidewa Bansgaon Kismat GP has 23, Ghoshpukur GP has 0, Jalash Nijamtara GP has 0, Hetmuri Singhijhora GP has 25, Bidhannagar-I GP has 24, Bidhannagar-II GP has 8 and Chathat Bansgaon Kismat GP has 51 such connectivity.
The data has been represented graphically in chart 7 as:-

![Chart 7: Physical Infrastructure and Road Connectivity](image)

Source: Phansidewa Block Office

It is found in this case that, Bidhannagar-II GP has maximum number of commercial bank branches. 3 GPs are found nil. However, rest 3 GPs are at the second higher position. For rural bank branches, 4 GPs are found to have such facility. Rest is found nil. In ketches road (in kms), Jalash Nijamtara GP is found highest. Hetmuri Singhijhora GP is found lowest in this. Ghoshpukur GP is found at the second position. Chathat GP is 3rd highest in position. For brick pitched road (in kms) Bidhannagar-I GP is found highest. 5 GPs are found nil. However, Ghoshpukur GP is found at the second higher position in this. For Pucca roads (in kms), Hetmuri Singhijhora GP is found highest in position. Ghoshpukur GP is found lowest. Phansidewa Bansgaon Kismat GP is found at the second higher position in this. In other roads (in kms), Bidhannagar-II GP is found highest here. 2 GPs are found nil. However, Jalash Nijamtara GP is found second highest in position. For motorable (in kms) road connectivity, Bidhannagar-II GP is found highest. 2 GPs are found nil. Hetmuri Singhijhora GP is found second highest in
position here. In non-motorable (in kms) road connectivity, Chathat Bansgaon Kismat GP is found highest. 2 GPs are found nil. Nevertheless, Hetmuri Singhijhora GP is found at the second higher position in this regard.

As per census 2011 provisional population data, it is found that out of total 42077 families, 204510 total population, 103707 male and 100803 female, 64801 Schedule Cast (SC), 70681 Schedule Tribe (ST), 56901 Other Backward Class (OBC) and 12127 other population, the i) Phansidewa Bansgaon Kismat GP has total 4555 families, 20818 population comprising 10659 male and 10159 female, 8743 SC (42%), 1665 ST (8%), 7910 OBC (38%) and 2500 other population (12.01%). ii) Ghoshpukur GP has total 6473 families, 31695 population comprising 15914 male and 15781 female, 8874 SC (28%), 19334 ST (61%), 2219 OBC (7%) and 1268 other population (4%). iii) Jalash Nijamtara GP has total 6547 families, 31261 population of which 16270 male and 14991 female, 18444 SC (59%), 1876 ST (6%), 9222 OBC (29.50%) and 1719 other population (5.50%). iv) Hetmuri Singhijhora GP with total 7261 families has 34507 population comprising 17092 male and 17415 female, 7246 SC (21%), 22084 ST (64%), 3451 OBC (10%) and 1726 other population (5.00%). v) Bidhannagar-I GP has total 5985 families, 30072 population of which 15245 male and 14827 female, 8119 SC (27%), 11127 OBC (37%) and 2707 other population (9%). vi) Bidhannagar-II GP with total 5513 families has 27061 population comprising 13609 male and 13452 female, 7347 SC (29%), 13530 ST (50%), 4059 OBC (15%) and 1625 other population (6%) and vii) Chathat Bansgaon Kismat GP has total 5743 families, 29096 population comprising 14918 male and 14178 female population, 5528 SC (19%), 4073 ST (14%), 18913 OBC (65%) and 582 other population (2.00%).

The data has been represented graphically in chart 8 as:-
Therefore, it can be analyzed that Hetmuri Singhijhora GP has maximum number of families. Phansidewa Bansgaon Kismat GP is found lowest. Jalash Nijamtara GP is found in second higher position in this. Consequently, Hetmuri Singhijhora GP is found to have maximum population followed by Ghoshpukur GP second in position. Phansidewa Bansgaon Kismat GP is found lowest here. Male population is found highest in Hetmuri Singhijhora GP followed by Jalash Nijamtara GP second in position. Phansidewa Bansgaon Kismat GP is found lowest in this. In female population, Hetmuri Singhijhora GP is found highest followed by Ghoshpukur GP second in position. Phansidewa Bansgaon Kismat GP is found lowest in this concern. Jalash Nijamtara GP is found to have maximum number of SC population followed by Ghoshpukur GP second in position. Chathat Bansgaon Kismat GP is found lowest in this. In ST population, Hetmuri Singhijhora GP is found highest followed by Ghoshpukur GP second in position. Phansidewa Bansgaon Kismat GP is found lowest in this. For OBC Chathat Bansgaon Kismat
GP is found highest followed by Bidhannagar-I GP. Ghoshpukur GP is found lowest in this. In other population, Bidhannagar-I GP is found highest followed by Phansidewa Bansgaon Kismat GP second in position. Chathat Bansgaon Kismat GP is found lowest in this case here.

As per Rural Household Survey (RHS) of 2005 and last revised data of the RHS of 2008-2009, out of total 34367 total households, 10804 Below Poverty Line (BPL) families and 31.44% of BPL as per 2005 record and 42449 revised households, 17350 revised BPL families and 40.87% revised of it of 2008-09 record, it is found that i) out of 4077 total households of Phansidewa Bansgaon Kismat GP, 1217 (29.85%) is below poverty line. In the revised data of total households of 5346, 2288 (42.80%) is below poverty line. ii) Of total 5234 households of Ghoshpukur GP, 1166 (22.28%) is below poverty line. In the revised data of total households of 6381, 2137 (33.49%) is below poverty line. iii) Out of total 5503 households of Jalash Nijamtara GP, 1858 (33.76) is below poverty line. In the revised data of total households of 6783, 2901 (42.77%) is below poverty line. iv) Of total 5701 households of Hetmuri Singhijhora GP, 1774 (31.12%) is below poverty line. As per the revised data of total households of 6577, 2574 (39.14%) is below poverty line. v) Out of total 4413 households of Bidhannagar-I GP, 1366 (30.95%) is below poverty line. In the revised data of total households of 5499, 2274 (41.35%) is below poverty line. vi) In Bidhannagar-II GP, out of total 4627 households, only 993 (21.46%) is below poverty line. However, as per the revised record, out of total 6156 households, 1908 (30.99%) is below poverty line. vii) Out of total 4812 households of the Chathat Bansgaon Kismat GP, 2430 (50.50%) is below poverty line. In the revised data of total households of 5707, 3268 (57.26%) is below poverty line. Thus Chathat Bansgaon Kismat GP is found to have comparatively higher below poverty line population.
The data has been represented graphically in chart 9 as:-

![Chart 9: RHS Data of both 2005 and 2008-09 (Revised)](chart.png)

Source: Phansidewa Block Office

It can be analyzed that for 2005 RHS, Hetmuri Singhijhora GP is found to have maximum number of households followed by Jalash Nijamtara GP second in position. Phansidewa Bansgaon Kismat GP is found lowest in this. In BPL families, though Chathat Bansgaon Kismat GP being fourth highest in households is found to be highest being 50.50% of its total households followed by Jalash Nijamtara GP second in position. Bidhannagar-II GP is found lowest in this. In case of revised RHS of 2008-09, Jalash Nijamtara GP is found to have highest number of households followed by Hetmuri Singhijhora GP second in position. Phansidewa Bansgaon Kismat GP is found lowest in this. In this case also, Chathat Bansgaon Kismat GP being fifth highest in households is found highest in BPL being 57.26% of its total households followed by Phansidewa Bansgaon Kismat GP second higher. Bidhannagar-II GP is found lowest in this concern. In both cases, Chathat Bansgaon Kismat GP is found to have highest BPL families.
As per the ‘List of backward villages under Siliguri Mahakuma Parishad’, as per the list of ‘Poorest of the poor villages-identified by P&RD’ (Panchayat and Rural Development) and as per the ‘List of Backward village under Phansidewa development block’, it is found that the block Phansidewa has total 30 backward villages which is highest among all 4 blocks (Matigara, Naxalbari, Kharibari and Phansidewa) under the sub division of Siliguri. Each GP of the block Phansidewa is found to possess certain number of identified backward villages that gives variations with respect to the total number of villages of any given GP. For i) Phansidewa Bansgaon Kismat GP, out of its total 10 villages only 2 are being identified backward and poor, therefore the GP has 20% backward villages. ii) Ghoshpukur GP is found to have total 25 villages out of which 5 are being identified backward and poor, thus the GP has 20% backward villages as well. iii) Jalash Nijamtara GP has total 17 villages but it has no identified backward or poor village in concern under it. iv) Hetmuri Singhijhora GP with total 47 villages is found to possess 15 identified backward and poor villages under it, therefore the GP has 32% backward villages. v) Bidhannagar-I GP has total 5 villages out of which 1 is identified backward and poor, thus the GP has 20% backward villages. vi) Bidhannagar-II GP with total 3 villages has 1 identified backward and poor village which is 33.3% of the GP. vii) Chathat Bansgaon Kismat GP is found to have total 8 villages out of which 6 are being identified backward and poor which is 75% of the total GP. Therefore Chathat Bansgaon Kismat GP has the maximum number of identified backward and poor villages in concern.

The data has been represented graphically in chart 10 as:-
Chart 10: Backwardness of GPs

Source: Phansidewa Block Office

Above data reflects that Chathat Bansgaon Kismat GP is found to have highest poor and backwardness at 75% of its total GP. Bidhannagar-II GP is found in second position. 3 GPs are found in same lowest position.

As per the ‘Report on own fund of GP for the year 2012-13 under Phansidewa development block’, the financial status of GPs show the tax amount, income and expenditure trend separately. It is found that all 7 GPs are at varied financial status for the financial year 2012-2013.

For income- Phansidewa Bansgaon Kismat GP has 722393.00 total income for the year. Of own fund, total tax amount collected including arrear is 380056.00. Total non-tax amount is 339700.00. Therefore the total own fund amount of the GP is 719756.00.

For expenditure- the GP has incurred 595104.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 432801.00
amount out of which 47700.00 amount is spent for education; 34450.00 amount spent for health; 0.00 for infrastructure development and 31000.00 amount spent for other development. The GP is found to spend more on education for the year.

For income-Ghoshpukur GP has 14087037.50 total income for the year. Of own fund, total tax amount collected including arrear is 398258.00. Total non-tax amount is 397967.00. Therefore the total own fund amount of the GP is 796225.00. For expenditure- the GP has done 14143347.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 909761.00 amount out of which 57531.00 amount is spent for education; 48568.00 amount spent for health; 114129.00 for infrastructure development and 224853.00 amount spent for other development. The GP is found to spend more on other development.

For income- Jalash Nijamtara GP has 1573568.00 total income for the year. Of own fund, total tax amount collected including arrear is 992499.00. Total non-tax amount is 581069.00. Therefore the total own fund amount of the GP is 1573568.00. For expenditure- the GP has done 1637428.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 1637428.00 amount out of which 60241.00 amount is spent for education; 75921.00 amount spent for health; 525720.00 for infrastructure development and 338308.00 amount spent for other development. The GP is found to spend more on infrastructure development.

For income- Hetmuri Singhijhora GP has 14423863.00 total income for the year. Of own fund, total tax amount collected including arrear is 213879.00. Total non-tax amount is 208035.00. Therefore the total own fund amount of the
GP is 421914.00. For expenditure- the GP has incurred 14182955.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 399912.00 amount out of which 0.00 amount is spent for education; 28130.00 amount spent for health; 158912.00 for infrastructure development and 48930.00 amount spent for other development. The GP is found to spend more on infrastructure development.

For income- Bidhannagar-I GP has 10885070.50 total income for the year. Of own fund, total tax amount collected including arrear is 429470.00. Total non-tax amount is 746999.00. Therefore the total own fund amount of the GP is 1176469.00. For expenditure- the GP has done 10341738.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 1014137.00 amount out of which 36295.00 amount is spent for education; 29202.00 amount spent for health; 63414.00 for infrastructure development and 288326.00 amount spent for other development. The GP is found to spend more on other development.

For income- Bidhannagar-II GP has 541768.00 total income for the year. Of own fund, total tax amount collected including arrear is 264621.00. Total non-tax amount is 277147.00. Therefore the total own fund amount of the GP is 541768.00. For expenditure- the GP has incurred 559848.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 559848.00 amount out of which 22540.00 amount is spent for education; 55650.00 amount spent for health; 0.00 for infrastructure development and 342418.00 amount spent for other development. The GP is found to spend more on other development.

For income- Chhatat Bansgaon Kismat GP has 374265.00 total income for the year. Of own fund, total tax amount collected including arrear is 126897.00.
Total non-tax amount is 209150.00. Therefore the total own fund amount of the GP is 336047.00.

For expenditure- the GP has 321505.00 total expenditure for the year. Expenditure trend from the own fund shows that the GP spent total 321505.00 amount out of which 1000.00 amount is spent for education; 5200.00 amount spent for health; 42000.00 for infrastructure development and 166054.00 amount spent for other development. The GP is found to spend more on other development.

The data has been represented graphically in chart 11 as:-

**Chart 11: Status of Own Fund**

Source: Phansidewa Block Office
It is clearly evident that in total income, Hetmuri Singhijhora GP is highest followed by Ghoshpukur GP second in position. Chathat Bansgaon Kismat GP is found lowest in income. In total tax, Jalash Nijamtara GP is found highest followed by Bidhannagar-I GP. Chathat Bansgaon Kismat GP is found lowest in tax too. In total non-tax amount, Bidhannagar-I GP is highest followed by Jalash Nijamtara GP. In this Hetmuri Singhijhora GP is found lowest. Therefore, for total own fund Jalash Nijamtara GP is found highest followed by Bidhannagar-I GP. Chathat Bansgaon Kismat GP is found lowest in totality here. In total expenditure, Hetmuri Singhijhora GP is found highest followed by Ghoshpukur GP. Chathat Bansgaon Kismat GP is found lowest in overall expenditure. In own fund expenditure, Jalash Nijamtara GP is found highest followed by Bidhannagar-I GP. Chathat Bansgaon Kismat GP is found again lowest in own fund expenses too. Therefore Chathat Bansgaon Kismat GP is found comparatively lowest in all income and expenditures. The expense trend is found varied across the GPs. Few GPs have not spent in some heads at times. Chathat Bansgaon Kismat GP is found to have lower trend of expenditures in all 3 heads of education, health and infrastructure development. The trend is found lowest in case of health especially. For other development, the GP is found to spend some amount.

It is found that out of total 89265.47 hectares of geographical area, Phansidewa block covering 47358.21 hectares of land is the largest geographical area among all blocks under Siliguri sub-division. Out of this specific geographical area of the Phansidewa block, total cultivable land area is 27074.998 hectares of area and total 20283.212 hectares of area is under non agricultural use of the block. Paddy (boro, aus, amon), wheat, jute, various vegetables, tea and pineapple cultivation (in horticulture) are being major produce in the area. However culturable waste land is also used for irregular cultivation though. Habitation area is comparatively
found quite less than overall productive land area here. Agriculture being a major of cultivation and occupation of the area, the all 7 GPs are found to be varied in this economic practice. Villagers are found to access 6 hats or weekly markets to market their produce or to buy any as their weekly ration. The Leusipukuri weekly market is found for twice a week on Mondays and Fridays. The Chathat weekly market is on Thursdays and Sundays. The Tarbandha market is found to settle only on Wednesdays. The Ambari weekly market is on Tuesdays and Fridays. The Goaltuli market is found on Saturdays and Tuesdays. The big market of Phansidewa is found regular which can be accessed anytime for any support including renting of a tractor.

For i) Phansidewa Bansgaon Kismat GP it is found that out of total 3294.90 hectares of geographical area only 2635.92 hectares are cultivable land area. For ii) Ghoshpukur GP it is found that out of total 5194.95 hectares of geographical area 2291.55 hectares are cultivable land area. 554.41 hectares area is for tea garden. iii) For Jalash Nijamtara GP it is found that out of total 3633.85 hectares of geographical area 3208.45 hectares are cultivable land area. iv) For Hetmuri Singhijhora GP it is found that out of total 5502.93 hectares of geographical area 3519.04 hectares are cultivable land area. 1452.81 hectares area is for tea garden. v) For Bidhannagar-I GP it is found that out of total 8932.90 hectares of geographical area 1058.49 hectares are cultivable land area. 3514.12 hectares area is for tea garden and 1321.63 hectares area is for horticulture (pineapple). vi) For Bidhannagar-II GP it is found that out of total 15808.5 hectares of geographical area 14003 hectares are cultivable land area. vii) For Chathat Bansgaon Kismat GP it is found that out of total 4990.18 hectares of geographical area only 358.548 hectares are cultivable land area. Among this cultivable area 50% land area is for tea gardens and pineapple cultivation.

Following the cultivation practice, it is also found that out of total 38694 cultivators of all blocks, Phansidewa block has the highest number of cultivators
at 20871. Out of total 12102 agriculture laborers the block is highest at 7475. The block also has highest KCC holders at 3429 and highest JLG holders at 641 whereas sponsored JLG is 1022.

As per total numbers of farmers and laborers of each GP, it is found that Phansidewa Banegaon Kismat GP has 2450 farmers and 625 laborers. Ghoshpukur GP has 4000 farmers and 1000 laborers. Jalash Nijamtara GP has 2800 farmers and 850 laborers. Hetmuri Singjihora GP has 3050 farmers and 1150 laborers. Bidhannagar-I GP has 3000 farmers and 1100 laborers. Bidhannagar-II GP has 2571 farmers and 750 laborers. Chhatat Banegaon Kismat GP has 3000 farmers and 2000 laborers.

The data has been represented graphically in chart 12 as:-

Chart 12: Land and Agriculture Status

Source: Phansidewa Block Office
It can be analyzed that, Bidhannagar-II GP has maximum total area followed by Bidhannagar-I GP in second higher position. Phansidewa Bansgaon Kismat GP is at the lowest position. For cultivable land area, Bidhannagar-II GP has highest land facility followed by Hetmuri Singhijhora GP. Chathat Bansgaon Kismat GP is found to have lowest cultivable land area. For farmers, Ghoshpukur GP has maximum number followed by Hetmuri Singhijhora GP. Phansidewa Bansgaon Kismat GP is found lowest in this. For laborers, Chathat Bansgaon Kismat GP has highest numbers who work on others’ land. They are found mostly tea garden laborers. Hetmuri Singhijhora GP comes in second higher position. Phansidewa Bansgaon Kismat GP is found lowest in this case.

Fishery being another significant economic practice of the block is also found varied across the GPs. The block has total 219 fishing villages and total 483 fisherman families. Out of total 1264 fisher persons of the block 696 are male and 568 are female. Of total 140.41 hectare area of water bodies of the block i) Phansidewa Bansgaon Kismat GP occupies 11.30 hectare water area and 72 ponds. It has 189 fisherman families. ii) Ghoshpukur GP has 16.82 hectare water area and 75 ponds. This GP has 46 fisherman families. iii) Jalash Nijamtara GP has 15.17 hectare water area and 76 ponds. It has 82 fisherman families. iv) Hetmuri Singhijhora GP has 15.89 hectare water area and 70 ponds. It is found to have only 5 fisherman families. v) Bidhannagar-I GP has 23.07 hectare water area and 103 ponds. The GP has 38 fisherman families. vi) Bidhannagar-II GP has 18.82 hectare water area and 81 ponds. It has 40 fisherman families. vii) Chathat Bansgaon Kismat GP has 38.34 hectare water area and 194 ponds. This GP has 83 fisherman families. Each fisherman is found to earn rupees 1000 to 1500 weekly. There are both temporary and regular fish markets in the block.
The data has been represented graphically in chart 13 as:-

![Chart 13: Fishery](chart13.png)

Source: Fishery office, Siliguri Sub-division

Therefore it can be analyzed that, Chathat Bansgaon Kismat GP has highest water area followed by Bidhannagar-I GP. Phansidewa Bansgaon Kismat GP is found lowest in this. Chathat Bansgaon Kismat GP has maximum number of ponds followed by Bidhannagar-I GP. Hetmuri Singhijhora GP is lowest in this. In fisherman families, Phansidewa Bansgaon Kismat GP has highest number of it followed by Chathat Bansgaon Kismat GP. Hetmuri Singhijhora GP is found lowest in this.

For health status of the financial year of 2012-13, it is found that the Phansidewa BPHC that covers 2,06,287 population of all 7 GPs has total 5 doctors and total 7 General Nurse and Midwifery (GNM). Services provided here are allopathic, Ayurvedic, homoeopathic, Out Patient Department (OPD), indoor and 24 hours of 7 days institutional deliveries. It is found that for infrastructures, dispensaries and centres are quite less in numbers and unevenly distributed over all 7 GPs of.
the Phansidewa block. Most of the GPs (comparatively Chatth, Jalas and Hetmuri more) are found at 0 services in these respects.

It is found that for total number of Ayurvedic dispensaries- Phansidewa Bansgaon Kismat GP has 1 centre that covers .005% of total 20818 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 1 dispensary that covers .004% of total 27061 population (2011 provisional population census) of the respective GP. However rest 5 GPs are at 0 services.

For total number of Homoeopathic dispensaries- Phansidewa Bansgaon Kismat GP has 1 centre that covers equally .005% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 1 centre that covers .003% of total 31695 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 1 dispensary that covers .003% of total 30072 population (2011 provisional population census) of the respective GP. It is also found that rest 4 GPs are at 0 services.

For total number of Pathologies - Phansidewa Bansgaon Kismat GP has 1 centre that covers also the same .005% of total 20818 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 1 dispensary that covers .004% of total 27061 population (2011 provisional population census) of the respective GP. But rest 5 GPs are found at 0 services.

There is no Critical care unit in any GP here. However, no Physically and Mentally Challenged care unit is found either in any GP.

For total number of Ambulance services available- Phansidewa Bansgaon Kismat GP has 2 ambulances that cover .010% of total 20818 population (2011
provisional population census) of the respective GP. Bidhannagar-II GP has 2 ambulance services that cover .007% of total 27061 population (2011 provisional population census) of the respective GP. Rest 5 GPs have no services at all.

For total number of Health sub-centres available- Phansidewa Bansgaon Kismat GP has 1 centre that covers .005% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 5 centres that cover .016% of total 31695 population (2011 provisional population census) of the respective GP. Jalash Nijamtara GP has 3 centres that cover .010% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 5 centres that cover .014% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 2 centres that cover .007% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 3 sub-centres that cover .011% of total 27061 population (2011 provisional population census) of the respective GP. Chhatat Bansgaon Kismat GP has 3 centres that cover .010% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of PHC available- only Bidhannagar-II GP has 1 centre that covers .004% of total 27061 population (2011 provisional population census) of the respective GP. However rest all 6 GPs are at 0 services of this kind.

For total number of ICDS Centres available- Phansidewa Bansgaon Kismat GP has 49 centres that cover .235% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 91 centres that cover .287% of total 31695 population (2011 provisional population census) of
the respective GP. Jalash Nijamtara GP has 84 centres that cover .269% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 89 centres that cover .258% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 71 centres that cover .236% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 74 centres that cover .273% of total 27061 population (2011 provisional population census) of the respective GP. Chhatat Bansgaon Kismat GP has 69 centres that cover .237% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of medical staff allotted in various centres of all GPs of the block are also found not enough and unevenly distributed in these respects. For Doctors available at PHC - under the block only Bidhannagar-II GP has this centre with 4 doctors that cover .015% of total 27061 population (2011 provisional population census) of the respective GP. Rest all 6 GPs are at 0 services.

For total number of GNM available at PHC – the only centre at Bidhannagar-II GP has 4 nurses here that cover .015% of total 27061 population (2011 provisional population census) of the respective GP. But rest all 6 GPs have no such service.

For total number of 1st Auxiliary Nurse and Midwife (ANM) available- Phansidewa Bansgaon Kismat GP has 1 nurse who covers .005% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 5 nurses who cover .016% of total 31695 population (2011 provisional population census) of the respective GP. Jalash Nijamtara
GP has 4 nurses who cover .013% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 7 nurses who cover .020% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 3 nurses who cover .010% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 5 nurses who cover .018% of total 27061 population (2011 provisional population census) of the respective GP. Chathat Bansgaon Kismat GP has 3 nurses who cover .010% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of 2\textsuperscript{nd} ANM available- Phansidewa Bansgaon Kismat GP has 1 nurse who covers .005% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 5 nurses who cover .016% of total 31695 population (2011 provisional population census) of the respective GP. Jalash Nijamtara GP has 2 nurses who cover .006% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 3 nurses who cover .009% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 1 nurse who covers .003% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 1 nurse who covers .004% of total 27061 population (2011 provisional population census) of the respective GP. Chathat Bansgaon Kismat GP has 3 nurses who cover .010% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of Health Assistant (Male) (H.A (M)) staff available- Phansidewa Bansgaon Kismat GP has 2 staff that covers .010% of total 20818 population (2011 provisional population census) of the respective GP. Chathat
Bansgaon Kismat GP has 2 staff that covers .007% of total 29096 population (2011 provisional population census) of the respective GP. However rest all 5 GPs are at 0 services.

For total number of Accredited Social Health Activist (ASHA) workers available- Phansidewa Bansgaon Kismat GP has 11 workers who cover .053% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 25 workers who cover .079% of total 31695 population (2011 provisional population census) of the respective GP. Jalash Nijamtara GP has 16 workers who cover .051% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 18 workers who cover .052% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 13 workers who covers .043% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 19 workers who cover .070% of total 27061 population (2011 provisional population census) of the respective GP. Chathat Bansgaon Kismat GP has 13 workers who cover .045% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of Community Health Guide (CHG) available- Phansidewa Bansgaon Kismat GP has 4 workers who cover .019% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 5 workers who cover .016% of total 31695 population (2011 provisional population census) of the respective GP. Jalash Nijamtara GP has 8 workers who cover .026% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 4 workers who cover .012% of total 34507 population (2011 provisional population census) of the respective GP.
population census) of the respective GP. Bidhannagar-I GP has 7 workers who covers .023% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 1 worker who covers .004% of total 27061 population (2011 provisional population census) of the respective GP. Chathat Bansgaon Kismat GP has 8 workers who cover .027% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of Trained Dai available- Phansidewa Bansgaon Kismat GP has 5 workers who cover .024% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 6 workers who cover .019% of total 31695 population (2011 provisional population census) of the respective GP. Jalash Nijamtara GP has 3 workers who cover .010% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 5 workers who cover .014% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 1 worker who covers .003% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 4 workers who cover .015% of total 27061 population (2011 provisional population census) of the respective GP. Chathat Bansgaon Kismat GP has 3 workers who cover .010% of total 29096 population (2011 provisional population census) of the respective GP.

For total number of Integrated Child Development Services (ICDS) workers and helpers available- Phansidewa Bansgaon Kismat GP has 49 ICDS workers and 49 helpers who cover separately .235% of total 20818 population (2011 provisional population census) of the respective GP. Ghoshpukur GP has 91 ICDS workers and 91 helpers who cover separately .287% of total 31695 population (2011 provisional population census) of the respective GP. Jalash
Nijamtara GP has 84 ICDS workers and 84 helpers who cover separately .269% of total 31261 population (2011 provisional population census) of the respective GP. Hetmuri Singhijhora GP has 89 ICDS workers and 89 helpers who cover separately .258% of total 34507 population (2011 provisional population census) of the respective GP. Bidhannagar-I GP has 71 ICDS workers and 71 helpers who cover separately .236% of total 30072 population (2011 provisional population census) of the respective GP. Bidhannagar-II GP has 74 ICDS workers and 74 helpers who cover separately .273% of total 27061 population (2011 provisional population census) of the respective GP. Chhatat Bansgaon Kismat GP has 69 ICDS workers and 69 helpers who cover separately .237% of total 29096 population (2011 provisional population census) of the respective GP.

The data has been represented graphically in chart 14 as:-
Chart 14: Health Infrastructure Status

Source: Phansidewa Block Office

It is found that in case of ayurvedic dispensaries only Phansidewa Bansgaon Kismat and Bidhannagar-II GP are found to have 1 centre each and rest is nil. For Homoeopathic dispensaries, Phansidewa Bansgaon Kismat, Ghoshpukur and Bidhannagar-I GP have 1 centre each and rest is nil. For pathologies, only Phansidewa Bansgaon Kismat and Bidhannagar-II GP are found to have 1 centre each and rest is nil. In ambulance service, only Phansidewa Bansgaon Kismat and Bidhannagar-II GP are found to have 2 ambulances each and rest is nil. For health sub centres, both Ghoshpukur and Hetmuri Singhijhora GP have equal highest centres followed by 3 GPs in same second position. Phansidewa Bansgaon Kismat is found lowest in this. In PHCs, only Bidhannagar-II GP has a centre and rest is nil. For ICDS centres, Ghoshpukur GP is found highest followed by Hetmuri Singhijhora GP. Phansidewa Bansgaon Kismat GP is found lowest in this. The positions are found same in case of ICDS workers as well. For GNM nurse, only Bidhannagar-II GP has nurses and rest is found nil. Hetmuri Singhijhora GP has highest number of 1st ANM nurse followed by 2 GPs with same composition. Phansidewa Bansgaon Kismat GP is found lowest in this. For 2nd ANM nurse, Ghoshpukur GP is found highest followed by 2 GPs equally. 3 GPs are found lowest in this equally. Only Phansidewa Bansgaon Kismat and Chathat Bansgaon Kismat GP have 2 H.A (M) each and rest is nil. For ASHA workers, Ghoshpukur GP is found highest followed by Bidhannagar-II GP. Phansidewa Bansgaon Kismat GP is lowest in this. For CHG workers, Jalash Nijamtara and Chathat Bansgaon Kismat GP are found highest followed by Bidhannagar-I GP. Bidhannagar-II GP is found lowest in this. For trained Dai, Ghoshpukur GP is found highest followed by 2 GPs of equal value. Bidhannagar-I GP is found lowest in this category.
Therefore as per the above analyses it is found that out of all 7 GPs of the community development block Phansidewa, Chathat Bansgaon Kismat GP though with huge area coverage is comparatively backward as it has highest backward and poor mouzas or villages with maximum number of BPL families and lowest economic status. Even with huge area and water bodies the resources are not yet used up to the demand of people here. Other services are also yet to reach a level too. The GP is found to have highest number of OBC population. Following all these indicators, being most backward the Chathat Bansgaon Kismat GP has been selected as the universe for the research study of the block Phansidewa. As per the map, it is found situated at the extreme border side of Bangladesh which gives a different dimension and perspectives to study the lives of the area here.

A map can be shown to identify the GPs:-
3.5.3 Village Selection:

As Chathat Bansgaon Kismat GP has been selected for the proposed research area therefore 3 hamlets at different stages of development under a specific village or mouza are also to be selected under the selected GP as well. Different stages of development signify 3 hamlets at different levels of growth following several indicators especially economic status.

Under the community development block Phansidewa, the GP is found to have total 5743 families, 29096 population comprising 14918 male and 14178 female population (2011 provisional census data), 5528 SC (19%), 4073 ST (14%), 18913 OBC (65%) and 582 other population (2.00%). The GP is found to hold total 7 general meetings of which the average attendance in the meeting is 69.04%, women attendance is found at 57.77%. Discussions are found to cover issues of drinking water, education, health, roads, women and child development, SC and ST development and various project evaluations. Out of total 1350 tube well of the GP, 1155 (85.5%) are functional for the habitants. Total 975 families (20%) of the GP get the facility of pure drinking water. Total 2530 families (40%) of the GP have the facility of sanitation now. The GP is found to hold 12 health meetings on every 4th Saturdays of every month in the year 2012-13. It is found that out of total 309 births in the year, 46 are non-institutional deliveries. 85% of infants (0-1 year) got immunized for 6 diseases and 65% of pregnant women received tetanus immunization for 2 times. However, total 15% of infants are found suffering from severe malnutrition of the GP (as per ICDS grade IV and III). Under the Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) the families are given work for 12.43 days in average,
20% of which is found female workers here. Total 12 self help group meetings are being held on 2nd Saturdays of every month. Each sangsad of the GP is found to have sub-cluster of respective self help groups here. The GP has total 11 SSK and 3 health sub centres, each of it has own building, drinking water and sanitation facilities. Out of total 87 ICDS or Anganwadi centres (AWC) only 3 centres (3%) are equipped with own building, drinking water and sanitation facilities. However, no family is recorded as houseless and the GP is found to prepare its disaster management plan beforehand as well. The GP has recorded increase in tax of 49.48% in 1 year and has spent 43.51% for socio-economic growth from own fund. The GP has claimed to develop assets for generating earning and has initiated Gram Panchayat Management System (GPMS). The GP has its own office equipped with 5 all functional computers and internet facility.

The Chathat Bansgaon Kismat GP has total 8 mouzas or villages under it. Out of total 5743 number of families, i) Village Bansgaon has 1152 total families and 5958 total population out of which 3062 is male and 2896 is female. The total area of the village is 1141.22 hectares. ii) Village Bansgaon Chakla has 761 total families and 3873 total population out of which 1985 is male and 1888 is female. The total area is 1173.6 hectares. iii) Village Purba Bansgaon Chakla has 328 total families and 1756 total population out of which 868 is male and 888 is female. The total area is 138.4 hectares. iv) Village Paschim Bansgaon has 272 total families and 1313 total population out of which 689 is male and 624 is female. The total area is 538.24 hectares. v) Village Bansgaon Mangach has 150 total families and 724 total population out of which 386 is male and 338 is female. The total area is 362.6 hectares. vi) Village Madhya Bansgaon has 1843 total families and 9133 total population out of which 4702 is male and 4431 is female. The total area is 728.84 hectares. vii) Village Chikanmati has 475 total families and 2480 total population out of which 1280 is male and 1200 is female. The total area is 276 hectares and viii) Village Purba Bansgaon has 762 total
families and 3859 total population out of which 1946 is male and 1913 is female. The total area of the village is 631.32 hectares.

The data has been represented graphically in chart 15 as:-

![Chart 15: Demography of Chathat Bansgaon Kismat GP](image)

Source: Phansidewa Block Office

This can be analyzed that village Madhya Bansgaon has highest number of families followed by village Bansgaon. Village Bansgaon Mangach is found lowest in this. In total population village Madhya Bansgaon has maximum number followed by village Bansgaon. Village Bansgaon Mangach is found lowest here. In the area, village Bansgaon Chakla is found highest followed by village Bansgaon. Village Purba Bansgaon Chakla is found lowest in this. Number of families and population is found equal here.

There are total 14 sansads under the GP system. Different hamlets and mouzas come under each different sansad though repetitions of mouzas can be noticed but with separate hamlets under its constitution. As per the ‘Mouza wise village
list’ of the Chathat Bansgaon Kismat GP, it is found that i) Village Bansgaon with 110 J.L. number has total 13 hamlets. ii) Village Bansgaon Chakla with 112 J.L. number has total 2 hamlets. iii) Village Purba Bansgaon Chakla with 111 J.L. number has total 14 hamlets. iv) Village Paschim Bansgaon with 109 J.L. number has total 5 hamlets. v) Village Bansgaon Mangach with 97 J.L. number has total 4 hamlets. vi) Village Madhya Bansgaon with 98 J.L. number has total 17 hamlets. vii) Village Chikanmati with 107 J.L. number has total 6 hamlets and viii) Village Purba Bansgaon with 113 J.L. number has total 6 hamlets as well.

As per the ‘GP: Chathat-Bansgaon (Backward Villages)’ list, for i) Mouza or village Bansgaon, 9 are being identified backward out of total 13 hamlets which is 69.2% backwardness of the total mouza. For iii) mouza Purba Bansgaon Chakla, 7 are being identified backward out of total 14 hamlets which is 50% backwardness of the total mouza. For iv) mouza Paschim Bansgaon, 3 are being identified backward out of total 5 hamlets which is 60% backwardness of the total mouza. For v) mouza Bansgaon Mangach, 4 are being identified backward out of total 4 hamlets which is 100% backwardness of the total mouza. For vi) mouza Madhya Bansgaon, 14 are being identified backward out of total 17 hamlets which is 82.3% backwardness of the total mouza. For vii) mouza Chikanmati, 3 are being identified backward out of total 6 hamlets which is 50% backwardness of the total mouza. For viii) mouza Purba Bansgaon, 6 are being identified backward out of total 6 hamlets which is 100% backwardness of the total mouza. Only mouza Bansgaon Chakla is exempted from the backward status of the whole Chathat Bansgaon Kismat GP so far.

The data has been represented graphically in chart 16 as:-
Above data shows that with respect to total hamlets and identified backward hamlets under the mouzas, Bansgaon Mangach and Purba Bansgaon mouzas are fully (100%) backward followed by Madhya Bansgaon mouza. However, Mouza Bansgaon Chakla is found nil in this category.

Therefore, it is found that both Bansgaon Mangach and Purba Bansgaon mouzas are 100% identified backward areas to be considered as most underdeveloped areas for the concerned research study. Nevertheless, instead considering 3 out of only 4 hamlets under Bansgaon Mangach but 3 out of total 6 hamlets under Purba Bansgaon mouza following the higher possibility to study more variety as per the number of hamlets, population and area, therefore Purba Bansgaon mouza has been selected as the research area.
Selected Purba Bansgaon mouza is found to consist of 6 hamlets covering 631.32 hectares of area that altogether form total 762 families, 3859 population of which 1946 is male and 1913 female. All 6 hamlets of Khalpara, Tewarigachh, Bazarugachh, Churnidangi, Dangapara and Murikhawa of the mouza are found at different economic status as per the tax (house and land) and revenue from trade certificate (non tax) collected as of financial year 2012-13. Therefore, it is found that total rupees 1060 is collected from hamlet Khalpara, rupees 2490 total is collected from Tewarigachh, rupees 4275 total is collected from Bazarugachh, rupees 1580 total is collected from Churnidangi, rupees 6250 total is collected from Dangapara and rupees 12925 total is collected from Murikhawa.

The data has been represented graphically in chart 17:-

![Chart 17: Revenue Status of Financial Year 2012-13](image)

**Chart 17: Revenue Status of Financial Year 2012-13**

Source: Phansidewa Block Office

Above data shows that hamlet Murikhawa has generated maximum number of revenue followed by hamlet Dangapara. Hamlet Khalpara is found lowest overall in
this respect. Keeping Khalpara lowest, the immediate 2 respectively developed hamlets are hamlet Tewarigachh in mid economy and hamlet Bazarugachh in higher economy scale.

The hamlets are found scattered over the given geographical region here. Though being situated at the ‘0’ point of the India-Bangladesh international border but differences in distance of the hamlets from border can also be observed. Distances among hamlets are also found different from each other. It is found that hamlets Khalpara, Tewarigachh and Bazarugachh are interconnected and comparatively closer to each other. These 3 hamlets seem to form like a triangle and can be reached easily from one another. On the other hand Bazarugachh and Churnidangi are closer to each other but Dangapara is far which would have made study inconvenient. Among all the hamlets, Murikhawa, Tewarigachh and Khalpara are comparatively nearest to the border. Murikhawa hamlet is found farthest from all other respective hamlets that made it difficult to be reached. Following this aspect also, Tewarigachh and Khalpara are being preferred for the research to study diversities in several respects. As per governmental data, 3 hamlets (Bazarugachh, Tewarigachh and Khalpara) are found at 3 different levels of growth. Therefore, Khalpara, Tewarigachh and Bazarugachh have been selected as the research study area. Following another selection criterion of common service facilities, these villages are found to be under same health sub-centre at a distance of around 5.5 km in average, common market and high school. Both the market and the high school are of same distance of 8.5 km in average from the villages as the school is near the market.

So these villages are having common government services, despite which their development remain different. As the research would study development communication interface for different development stages, their selection is appropriate.
A table on development stages can be shown as:-

<table>
<thead>
<tr>
<th>Items</th>
<th>Bazarugachh</th>
<th>Tewarigachh</th>
<th>Khalpara</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue (both tax and non-tax)</td>
<td>4275</td>
<td>2490</td>
<td>1060</td>
</tr>
<tr>
<td>Distance in km from health sub-centre</td>
<td>6</td>
<td>5.5</td>
<td>5</td>
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<tr>
<td>Distance in km from common market</td>
<td>9</td>
<td>8.5</td>
<td>8</td>
</tr>
<tr>
<td>Distance in km from high school</td>
<td>9</td>
<td>8.5</td>
<td>8</td>
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</tbody>
</table>

Table 1: Status of Three Study Villages

A map to identify these hamlets has been given in the next page:
### 3.6 Objective wise Indicators and Attributes:

<table>
<thead>
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<th>Objective Number</th>
<th>Objective Statement</th>
<th>Indicators/Attributes</th>
</tr>
</thead>
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<tr>
<td>1</td>
<td>socio-economic conditions</td>
<td>i. Poverty</td>
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<tr>
<td></td>
<td></td>
<td>ii. Caste and ethnic identity</td>
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<td></td>
<td></td>
<td>iii. Religious identity</td>
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<td></td>
<td>iv. Population: average family size</td>
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<td></td>
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<td>v. Population: age division</td>
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<td></td>
<td></td>
<td>vii. Diversity of work</td>
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<td>viii. Cultural Marks</td>
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<td>ix. Sports</td>
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<td>x. Self Help Group</td>
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<td>xi. computer literacy</td>
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<td></td>
<td></td>
<td>xii. Dwelling land area</td>
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<td>xiii. Dwelling Unit Pattern</td>
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<td>xiv. Farming land area</td>
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<td>xv. Farming Land ownership</td>
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<td>xvi.</td>
<td>Water body resources</td>
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<td>xvii.</td>
<td>Expenses for Market</td>
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<td>Production for market</td>
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<td>Temporary migration</td>
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<th>Standard of life</th>
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<td>iii.</td>
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<td>ix.</td>
<td>Indigenous and innovation-adopted practices</td>
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<td>x.</td>
<td>Use of agro produces</td>
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<td>Indigenous Knowledge and innovation-adopted in processing produces</td>
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<td>xiii.</td>
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<td>xvi.</td>
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<td>xvii.</td>
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<td>xviii.</td>
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<td>Condition of Youth</td>
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<td><strong>Communication resources</strong></td>
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<td></td>
<td>ii. Behaviour change communication by-</td>
</tr>
</tbody>
</table>
- AWW
- ASHA and ANM
- SHG facilitator
- Teacher
- Folk talents

B. Tangible media supply for producing benefits (sales, procurement, learning etc.):
- Mobile phone
- Book
- Teaching Aids
- Pre-school material
- Campaign material on health, sanitation etc.

C. Communication utilization for social system functioning and well being (Peace, social harmony, asset sharing, increasing wealth etc.):
- Traditional collective interaction platform
in community
- Bonding platforms
- Process of solving inter-family feuds
- Inter-relative and inter-village asset sharing
- Modes of ensuring peace and security through consensus and decision compliance
- Ways of agriculture-related cooperation

D. Communication transforming services, material, staff, information or other assets to produce benefits
- Inter-family communication preparing economic sharing
- Communication for improving health,
psychological, educational status by availing government facilities
-Events for awareness to adaptation of better living practices

<table>
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<th>presence and functionality of interpersonal and group media</th>
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<td>Objective</td>
<td>Method</td>
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 ii. Government document checking  
 iii. Observation | i. FIS questionnaire  
 ii. Observation schedule |
| 2. Standard of life | i. Interview  
 ii. Observation  
 iii. FGD | i. Interview schedule  
 ii. Observation schedule |

### 3.7 Objective wise method and instrument used:

- **Ownership, access and Use of TV**
- **Ownership and Use of mobile phone**
- **Ownership, access and use of computer & internet**
- **Presence of and experiencing outdoor media**
| 3. Various development schemes | i. Village Census  
ii. Interview of govt. staff and elected members of panchayat  
iii. Observation  
iv. FGD with villagers | i. FIS Questionnaire  
ii. Interview schedule  
iii. Observation schedule  
iv. FGD schedule |
|-------------------------------|-------------------------------------------------|---------------------------------|
| 4. Communication resources | i. Village census  
ii. Observation of events and sessions  
iii. FGD on transformative function of information-knowledge and events | i. FIS Questionnaire  
ii. Observation schedule  
iii. FGD schedule |
| 5. Presence and functionality of interpersonal and group media | i. FGD  
ii. Observation | i. FGD schedule  
ii. Observation schedule |
| 6. Mass and Net-based media | i. Village Census  
ii. FGD | i. FIS  
ii. FGD schedule |
3.6 **Limitations:**

Collection of secondary data in terms of government reports and records was a difficult task at every administrative level (sub-division, block and GP). Accessing government reports and other documents (such as registers) took excessive time (around 2 years) as – health and education department of Siliguri Mahakuma Parishad, District Rural Development Cell (DRDC), Phansidewa block office, Chathat Bansgaon Kismat GP government offices had to be visited repeatedly. Absence of staff, lackadaisical approach of many, citing secrecy clauses without any reason were the obstacles the researcher had to overcome. However there were many good officials who helped to overcome such obstacles. Besides, unavailability of required data especially at GP level was another challenge to come over. The researcher herself had to find out the official registers with the help of attendant there to find records. Study villages being situated at international border side of India-Bangladesh, the Border Security Force (BSF) has been found inquisitive about outsiders around. So the researcher equally had to maintain restrictions of time in the evening. She met and convinced the security officers about her purpose in the villages. Language of the villagers was another problem so the researcher took help of interpreters sometimes from villages too.

As the study has been completed in a cluster of three villages at different stages of development, its conclusion holds true for these villages. Generalizing the result requires comparing it with result of same type of researches. So this study may be read considering this as a limitation.