

**SOCIAL ACCOUNTABILITY PILOTS IN KERALA
REPORT CARDS OF GRAMA PANCHAYTS**

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Section I

1 INTRODUCTION

Developing a good local governance system is one of the strategies of India for sustainable human development. It is generally believed that interventions, particularly for poverty alleviation, are more effective when they are initiated through local governments. The Government of India's commitment to decentralisation became more explicit with the 73rd (for rural area) and 74th (for urban area) Amendments to the Constitution of India in 1992, making local government institutions constitutionally mandatory. The state governments, therefore, are to take steps to the creation of the Panchayats and Municipalities and to endow them with "*such powers and authority as may be necessary to enable them to function as institutions of self government*". Thus, Panchayats in rural areas, and Nagarapalikas (Municipalities), in urban areas, came into existence with an elected body to govern it. Constitutions stipulates that elections are to be conducted every five years, Grama Sabha/Ward Sabha has to be constituted for wide peoples participation, one-third of seats are to be reserved for women, and proportional reservation of seats for Scheduled Castes/Scheduled Tribes.

Kerala made great leap in this regard with elected local bodies at the Village (Grama), Block, District levels in the rural Kerala and at the Municipal/Corporation levels in the urban Kerala in position in 1995. Kerala state went one step further, compared to other states in India, by combining the process of democratic decentralisation and governance with decentralised planning for development. It is believed that if decentralised governance is to contribute to economic growth at the local level, it is imperative that decentralised planning for development is also attempted at the local governments' level. Kerala Government, therefore, took a very unprecedented and unusual step of allocating 35 per cent to 40 per cent of the Ninth State Five Year Plan fund at a shot to the local governments for local level participatory planning for economic development and social justice. Kerala considered the participatory local level planning as a major step in the process of decentralised governance.

1.1 Grama Panchayats in Kerala

Unlike in the other states in India, the Village Panchayats in Kerala are larger in terms of geographical area and population. More than 95 per cent of the Village Panchayats have an area of more than 10 s.q.k.m., and a population of above 10000. Two-thirds of the Panchayats have a population of more than 20000. More than 90 per cent of them have a density of population of more than 500 per s.q, k.m. Moreover, the habitat in the state has a unique nature that it is widely dispersed, unlike in the other states, where the village

population is concentrated in a specific place, leaving vast stretches as uninhabited hinterland. This scattered nature of homesteads and dispersed population settlements make all civic service deliveries and their maintenance difficult and costlier, compared to those in other States.

The Village (Grama) Panchayats, being large in size in terms of area and population, the 'Grama Sabha' in Kerala is not one for the Village as a whole. The Panchayats are divided into smaller area, called 'Ward' and the voters in a Ward form the 'Grama Sabha' of that Ward. Thus, in Kerala each Ward in the Panchayat has a 'Grama Sabha', having a number of important statutory powers in the matter of local development.

1.2 Systems for Accountability

In Kerala, there exist provisions for social accountability. Apart from the conventional audit by Local Fund and Accountant General of India, Performance Audit system has been introduced for handholding the panchayats for improving their performance. In order to trace the corruption an *Ombudsman* system has been introduced. *Grama Sabha*, has the right to know the details of the budget, implementation of various projects, and of the activities of panchayat. Right to information is included in the legislation and every document of the panchayat is considered to be a public document. The general public can have copies of official documents on demand by making a formal request and by paying the cost of reproduction.

But, there has not been any systematic attempt to collect the opinion of the people on the services they receive from the local governments. There are agitations by people on total failure of certain services; for example, on failure of water supply, on failure of removing solid waste, etc. It is in this context that the importance of the Citizens Report Card (CRC) emerges.

1.3 Citizens Report Card

The Citizen Report Card (CRC) is a simple but powerful tool to provide public agencies with systematic feedback from users of public services. CRCs elicit feedback through sample surveys on aspects of service quality that users know best, and enable public agencies to identify strengths and weaknesses in their work.

Citizen Report Cards entail a random sample survey of the users of different public services (utilities), and the aggregation of the users' experiences as a basis for rating the services. CRCs also help to convert individual problems facing the various programmes into common sector issues. It facilitates prioritization of reforms and corrective actions by drawing attention to the worst problems highlighted. CRCs also facilitate cross fertilization of ideas and approaches by identifying good practices. Citizen Report Cards provide a benchmark on quality of public services as experienced by the users of these services. Hence, they go beyond the specific problems that individual

citizens may face, and place each issue in the perspective of other elements of service design and delivery, as well as a comparison with other services, so that a strategic set of actions can be initiated.

Citizen Report Cards capture citizens' feedback in simple and unambiguous terms by indicating their level of satisfaction or dissatisfaction. Apart from giving summative feedback on services, CRCs also capture the user feedback on specific aspects of the service. For example, the most basic but clear feedback that a citizen may give about the quality of drinking water is total dissatisfaction. To appreciate this feedback, we must relate it to the ratings given to other dimensions by the same person. For example, adequacy of water supply may be rated worse than quality. When we look at these two pieces of information, we can conclude that quality of water supply may be a cause of dissatisfaction, but the priority for corrective action may be on providing adequate water supply. Hence **measures of citizens' satisfaction** across different dimensions of public services constitute the core of Citizen Report Card studies.

Citizen Report Cards do not stop with mere measures of satisfaction - they go on to enquire into specific aspects of interaction between the service agency and the citizen, and seek to identify issues that emerge in connection with the same. In more simple terms, it suggests that dissatisfaction has causes, which may be related to the quality of service enjoyed by the citizen (like reliability of water supply, or availability of learning materials in a public school), the type of difficulty encountered while dealing with the agency to solve service problems (like complaints of water supply breakdown), and hidden costs in making use of the public service (special tuition fees to teachers or investments in filters to purify "drinking water"). Therefore we can see that Citizen Report Card studies go into different **aspects of performance in interfacing with citizens**, to provide indicators of problem areas in public services.

Citizen Report Card studies are not merely a means of collecting feedback on existing situations from citizens. They are also a means for testing out different options that citizens wish to exercise, individually or collectively, to tackle current problems. For example, whether citizens were willing to pay more or be part of citizens' bodies made responsible for managing public water sources. Hence, Report Cards are also means for **exploring citizens' alternatives** for improvements in public services. An important aspect of Citizen Report Cards is the credibility they have earned. The conclusions in a Citizen Report Card are not opinions of a few persons who think in a particular manner, nor the complaints of a few aggrieved citizens. The methodology involves systematic sampling across all subsections or segments of citizens - including those who are satisfied as well as the aggrieved - and presents a picture that includes all opinions. This is possible because the methodology makes use of advanced techniques of social science research, for selecting samples, designing questionnaires, conducting interviews, and interpreting results. As a result, the report cards provide **reliable and comprehensive** representation of citizens' feedback.

1.4 Objectives of the Study

The overall objective of the present study is to develop/experiment a methodology for examining the performance of local governments (panchayats) based on feedback from citizens/beneficiaries. The specific objective is to prepare Citizens Report Card (CRC) in four Grama Panchayats. The major services considered in this study are education, health, integrated child development (ICDS), panchayat office, sanitation and governance. These are the areas wherein grama panchayats in Kerala directly interact with people.

1.5 Methodology

A participatory methodology is adopted in the preparation of the report cards. Initially, a two-day workshop was conducted during 13-14 February 2006 for general academic discussion and for studying, in detail, the various aspects relating to CRC including the process of preparation of it. Faculty members of KILA and few guest faculty members participated the workshop. Dr. Gopakumar Thampi made the key presentation. The discussion came to the conclusion that Report Card Methodology can be utilised for collecting opinions of the beneficiaries of services of local governments in Kerala. The discussion also led to the identification of focus areas of the study, Education, Health, Integrated Child Development Service (ICDS), services from Panchayat Office, Sanitation and Governance. It was also tentatively decided to select four grama panchayats [the lowest tier of local governments in rural areas] for the study. Considering various aspects, including geographical and developmental, the following four Grama Panchayats had been tentatively identified for the study:

1. Avoly
2. Kadaplamattom
3. Keezhuparumba
4. Kolazhy

Regarding the sampling it was decided to collect responses from at least 300 beneficiaries from each subject area of every panchayat. In the case of non-availability of 300 samples census method would be following covering all the beneficiaries of the service under consideration. A draft questionnaire and a handbook for data collection were prepared.

Then a one-day workshop was conducted on 18th March 2006 for orienting the Panchayats about CRC and for getting their opinion regarding the study. The participants were elected representatives, including chairpersons of the Panchayats, faculty members of KILA, and coordinators for the field study. The elected representatives expressed their willingness to undertake the study. It was decided that each Panchayat will nominate five field investigators and one coordinator for identification of sample units and collection of data.

During 10-12 April 2006 investigators training workshop was held. In the workshop the draft questionnaire was shared, obtained their opinion, and made necessary changes in it (for details, see **Annexure-I**). The participants did an exercise of filling up the questionnaire. Then they were taken to Mundathikode Panchayat for field testing the questionnaire. Each participant collected information from two households. In the final session the difficulties and doubts were discussed and settled.

A handbook for the investigators was prepared and distributed to them (for details, see **Annexure-II**).

The sample units were identified by means of random sampling. At first the list of beneficiaries of the service under consideration was prepared. From the list, the required numbers were selected. In the case of non-availability of sufficient sampling units, census method was applied taking all available units. Table 1 gives the details of responses on each sector and the total number of families covered in each panchayat. It may be noted that from each family details on as many sector as possible has been collected. As a result of this total number of respondents from six sectors will be greater than the total number of families in a panchayat.

Table 1: SAMPLE UNITS			
PANCHAYAT	SECTOR	NUMBER OF RESPONSES	NUMBER OF FAMILIES
AVOLY	Education	25	739
	Health	307	
	ICDS	312	
	Panchayat Office	303	
	Sanitation	326	
	Governance	447	
KADAPLAMATTOM	Education	104	642
	Health	307	
	ICDS	275	
	Panchayat Office	312	
	Sanitation	322	
	Governance	577	
KEEZHUPARAMBA	Education	295	622
	Health	307	
	ICDS	303	
	Panchayat Office	297	
	Sanitation	303	
	Governance	303	
KOLAZHY	Education	44	521
	Health	295	
	ICDS	265	
	Panchayat Office	276	
	Sanitation	355	
	Governance	417	
TOTAL NUMBER OF HOUSEHOLDS			2524
<i>Note: From the same household details of as many services as possible has been collected.</i>			

This report on the study is presented in six sections. Section I is introduction. Section II lists out the legally mandatory functions assigned to Panchayats with respect to the five selected service delivery areas, Education, Health ICDS, Panchayat Office, Sanitation and Governance. Section III attempts a brief discussion on the actual role played by the Panchayats at present on these areas. Section IV is devoted for presenting briefly the survey results, in a comparative framework. In section V the CRC of panchayats are presented and in section VI some concluding observations are made.

Section II

2 MANDATORY ROLES OF PANCHAYATS IN SELECTED AREAS OF OUR STUDY

2.1 Education

- 1 Management of Government Pre-Primary Schools and Primary Schools;
- 2 Implementation of Literacy Programmes; and
- 3 Promotion of activities of Libraries and Reading rooms.

2.2 Health

- 1 Vector control;
- 2 Regulation of slaughtering animals and sales of meat, fish and perishable food items;
- 3 Management of Environmental Hygiene;
- 4 Regulation of eating establishments;
- 5 Prevention of food adulteration;
- 6 Immunisation;
- 7 Carrying into effect national and state level strategies and programmes for disease prevention and control;
- 8 Awareness building on control of social evils like consumption of alcohol consumption of narcotics, dowry and abuse of women and children;
- 9 Management of Dispensaries and Primary Health Centres (PHCs) and sub-centres in all system of medicine;
- 10 Management of child welfare centres and maternity homes;
- 11 Implementation of immunisation and other preventive measures; and
- 12 Implementation of family welfare activities.

2.3 ICDS

- 1 Supplementary nutrition programme for the children in the age group of 0-6 years;
- 2 Pre-school education for the children in the age group of 3-6 years;

- 3 Medical check-up for children, pregnant women and feeding mothers and supply of iron and folic acid tablets;
- 4 Supplementary nutrition for pregnant women, feeding mothers and adolescent girls;
- 5 Referral services – timely identification of ailments due to deficiency of nutrition and refer the case to the health centre; and
- 6 Implementation of Balika Samridhi Yojana (Centrally Sponsored Scheme for the betterment of girls).

2.4 Panchayat Office

1. Registration of Birth and Death and issuing of certificates;
2. Licenses and permits for trade;
3. Regulation of building and issuing of ownership certificate;
4. Collection of various taxes from the public;
5. Distribution of pensions;
6. Development Functions; and
7. Grama Sabha and Selection of Beneficiary.

2.5 Sanitation

- 1 Collection and disposal of solid waste and control of liquid waste disposal;
- 2 Water drainage schemes;
- 3 Management of markets;
- 4 Providing toilet facilities in public places; and
- 5 Implementation of sanitation programmes.

2.6 Governance

1. Grama Sabha as Integral part of Local Governance
2. Participation of People in Governance
3. Selection of Beneficiary for individual benefits

Section III

3 BRIEF DISCUSSION ON ROLE OF LOCAL GOVERNMENTS

3.1 Education

There is clear and unambiguous devolution of functions among the three tiers of Panchayats in the area of education. While the Grama Panchayats are given the management and of all primary schools and schools below it, the District Panchayats are empowered to look after high schools, higher secondary schools, technical schools, vocational training centres and

polytechnics as well as District Institute of Education and Training (DIET). In addition, the District Panchayats are mandated to manage post-metric hostels and co-ordinate centrally and state sponsored education programmes. In fact, the overlapping of functions allotted to these three tiers is least in education and health.

The control of primary schools in general, inspecting and assessing teaching and non-teaching staff, implementing programmes to prevent drop-outs of students, getting vacant posts filled by the education department, construction of buildings and maintenance etc., are mandatory duties of the Grama Panchayat. Further, providing furniture and equipments in the schools, helping the mid-day meals programme, management of pre-primary schools and industrial training centres, distribution of scholarships and grants to the students, implementation of informal education, old age education and other literacy programmes, effective working of school complex etc., are among the functions of Village Panchayats. The District Panchayats have similar functions with respect to the educational institutions allotted to them. As far as the Block Panchayats are concerned their role is limited to Industrial Training Institute and pre-metric hostels for SC/ST. However, some of the Block Panchayats also implement schemes for school infrastructure development and quality improvement.

Most of the functions allotted to the three tiers of the Panchayats are being executed by the respective local governments, subject to the availability of fund. But very little is being done on matters like inspection and assessment work of teachers and other staff, getting of vacancies of teachers filled in time, filling up, ensuring punctuality of teaching and non-teaching staff, improving quality of education, etc., by the Grama Panchayat or the District Panchayat, as the case may be. This is mainly because the dual control existing in the system, control by the Panchayat and by the departmental officers, particularly in academic matters like curriculum, syllabi, teaching methods, examination, quality improvement and so on.

3.2 Health

Urban-Rural difference in health status is much less in Kerala, compared to that in other states in India, because of the widespread availability of health facilities, provided through public and private institutions in rural areas. With a good network of Primary Health Centres (PHCs) and Sub-Centres, the rural areas of Kerala are provided with a high degree of health care and a good part of this health system in the public sector is now functioning under the local governments, whether it is allopathic, ayurvedic or homeopathic. The management of PHCs and their sub-centres, the Dispensaries and the Child Welfare Centres and Maternity Homes rests with the Village Panchayats. The Doctors and other paramedical staff in these institutions are under the control of the Village Panchayat, though they still belong to the general service of the State Health Department and draw the salary from the Department. The Panchayats at the three levels are empowered to employ staff on temporary basis against vacancies, if PSC or Employment Exchange

persons are not available, make purchases of consumables, equipments, furniture etc., subject to State Stores Purchase Rules. Medicals and medical supplies are expected to be provided by the Health Department. The Panchayats are also empowered to undertake construction works, repair and maintenance of buildings of these institutions and for the purchase of medicines, as and when required. These are being done by the Panchayats, subject to the availability of fund.

3.3 ICDS

Integrated Child Development Service (ICDS) is a national level programme. The objective of this programme is to provide services to the children in an integrated manner. The services are provided through Anganawadies. There is an Anganawadi for every thousand population. Important activities include nutrition programme and pre-school education for children, supplementary nutrition for pregnant women, feeding mothers and adolescent girls, referral services and implementation of Balika Samridhi (programme for betterment of girls). In Kerala the Anganawadies are very active and render regular support to the children and mothers. The teacher act as a social activist and sensitise the people about child care, and sanitation.

3.4 Panchayat Office

Panchayats in Kerala have both regulatory and development functions. From the office of the Grama Panchayats statutory functions like registering of birth and deaths and issuing of certificates are done. The panchayat has regulatory powers over trade and trade licenses for shops are given. Regulation of building construction also rests with panchayats. The panchayat distribute pension and other benefits. In this context, public are approaching the panchayat office and this section is devoted to the responses of people on it.

3.5 Sanitation

Kerala is known for its cleanness and hygiene, compared to other states in India. Sanitation has been a thrust area in the local level planning by the Village Panchayats. Of the five mandatory roles given to the Village Panchayats, the one on which very little attention is made by the Village Panchayats is the collection and disposal of solid waste and control of liquid waste disposal. This has not been seriously handled so far, may be because this has not been felt as a serious issue in the villages. There are, of course, waste clearance from the market places by the Village Panchayats. Similarly, water drainage problems have not got serious attention of many of the Village Panchayats so far, again probably because

the need for it has not been felt seriously, except in a small number of Village Panchayats.

As far as the role in providing toilet facilities in public places is concerned, the Village Panchayats, by and large, have provided toilet facilities in public buildings, including hospitals, Anganwadies and schools and in market places as well as in Bus stations. Also, the Village Panchayats have been providing subsidies for the construction of individual latrines for families below poverty line. Though there is no mandatory role assigned to Block Panchayats, the centrally sponsored Total Sanitation Campaign (TSC) with a component of Information, Education and Campaign (IEC) Human Resource Development and Capacity Building is being implemented by the Rural Development Department through the Block Panchayat. The District Panchayats have the mandatory role of co-ordinating centrally and state sponsored sanitation programmes at the district level.

Having gone through the mandatory responsibilities of different tiers of Panchayat and the actual field situation in this regard briefly, we shall now, in the next section, analyse and discuss the data collected through the sample opinion survey.

Section IV

4 THE RESULTS AND DISCUSSION IN A COMPARATIVE FRMAEWORK

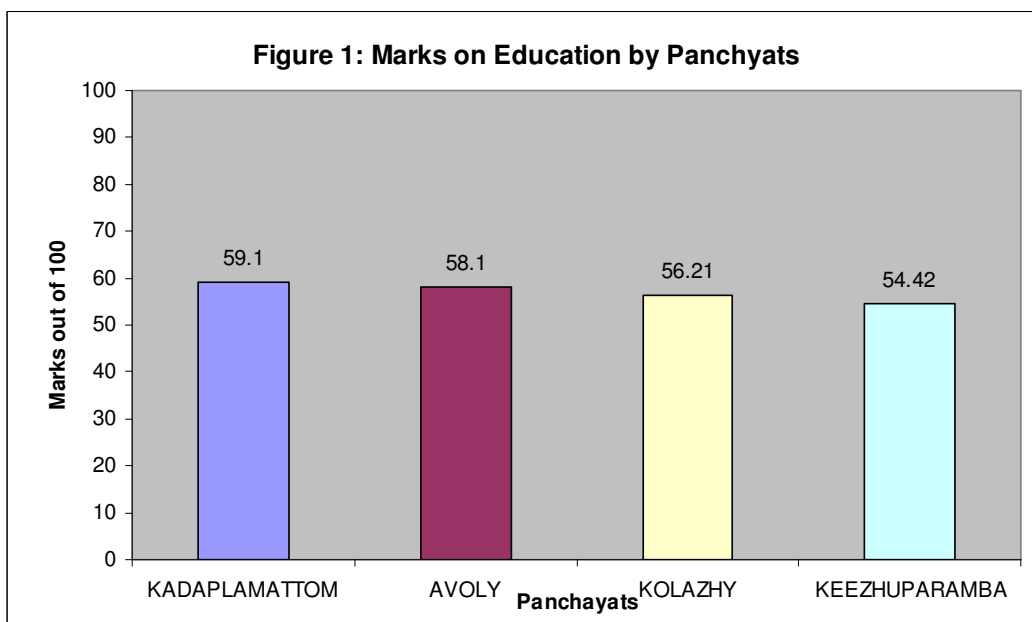
The discussion in this section, for convenience of interpretation, is arranged subject-wise. Some of the explanations made with respect to one subject could be equally applicable to some other subjects too, as there are many common elements in the implementation of these programmes.

Table 2 portrays the general picture of the performance of various services by the four panchayats under study in terms of six sectors. It may be noted that none the services is having sixty per cent marks.

Table 2: Satisfaction Level of Services, Across Panchayats (Marks out of 100)				
SECTOR	KADAPLAMATTOM	AVOLY	KOLAZY	KEEZHUPARAMBA
Education	59.10	58.10	56.21	54.42
Health	51.60	48.00	46.50	52.31
ICDS	47.45	52.60	47.71	49.21
Panchayat Office	54.30	47.00	52.80	51.82
Sanitation	34.60	30.00	32.00	32.33
Governance	53.40	51.80	54.50	52.41
AVERAGE	50.07	47.91	48.28	48.75

4.1 EDUCATION

Lower Primary and Upper Primary schools at the village level are with panchayats. The marks given by the respondents for the schools in the four panchayats are given in Figure 1. It is important to note that none of the panchayats have sixty per cent marks. The highest mark is for Kadaplamattom with 59.1 per cent, followed by Avoly with 58.1 per cent, Kolazy 56.21 per cent and Keezhuparamba 54.42 per cent. In order to understand the reasons behind this rating, it appropriate to have look at the various factors affecting the quality of services.



4.1.1 Access

Children have good access to school in the panchayats. In all the Panchayats under our study schools exist within a distance of 3 k.m. from their residence. Out of the four Panchayats, three have majority of children staying within the distance of one k.m to the school. It may also be noted that in Kerala there exists very good road connectivity in rural areas and majority of the children are going to school by foot, and others are either by bus or by auto-rickshaw.

4.1.2 Usage

Usage of the educational institutions, in terms of attendance of children, is good. In Avoly panchayat 96 per cent students are regularly attending school, followed by Kolazhy with 93 per cent, Kadaplamattom 90 per cent and Keezhuparamba 66 per cent.

However, one has to bear in mind that in Kerala the importance of Government schools is on a downtrend. Interestingly, this is happening when the teachers are qualified and trained and with better infrastructure compared to other unaided schools. In between the government schools and unaided schools, there are aided schools wherein the salary of the teachers is paid by the state government. These aided schools, as in the case of government schools, are facing shortage of students. At the same time, it may be noted that, there is an increasing trend in unaided schools. Since the present study has not looked into this aspect, further observation on this aspect cannot be made.

4.1.3 Facilities

4.1.3.1 Infrastructure

Responses from various panchayats show that the schools have good physical infrastructure. Schools in all the panchayats have buildings with pacca wall and roof, separate class room for each class, benches and desks. Separate latrine facility is available for boys and girls and mid-day meal and drinking water are provided.

Free Text books are supplied to all girl students and to all SC/ST students. As part of the efforts by teachers, notebooks are also distributed by mobilising voluntary contribution from various sources. Medical check-ups are carried out in the school with support from health centres.

Around fifty per cent of the respondents report that classrooms are electrified. Computer, as a teaching aid, is available in the school. Library and laboratory are existing in the schools, but because of the limited usage and access to the students, many of the respondents reported the absence of it.

4.1.3.2 Human Resource

Qualified and trained teachers are employed in these institutions. They are regular to the schools; more than ninety per cent of the respondents from all the panchayats have this opinion. Teachers are interested in conducting monthly examinations, distribution of progress cards, giving homework to the students and monitoring it.

4.1.4 Interface

Parent-Teacher Associations are functioning in the schools and parents are satisfied with its functioning. Parents have good relation with the schools and most of them are visiting schools for various purposes, including enquiry of details of examination, progress card and mark list. The contribution of parents to the school is limited to the annual fee and occasional donations for certain specific purposes.

Parents faced some minor issues and all such issues were resolved amicably when they contacted the school. It is also important to note that there is no bribery relating to the activities at the schools.

4.1.5 Satisfaction

The satisfaction level of respondents/parents, in terms of selected indicators, has been collected and is presented in table 3. The selected indicators are quality and availability of study material, quality of teaching, playground, toilets and attitude of teachers. Opinion on each indicator has been collected by providing five options ranging from completely satisfied to indifferent. It may be noted that these indicators are very closely related. The satisfaction level is found to be around sixty per cent. Even for the study material, designed and developed at the State, parents have dissatisfaction. This indicates their concern for the improvement in the quality of education. Though the teachers are having very good relation with children and parents, the quality of teaching, according to the opinion of parents, are not at the expected level. This again indicates the requirement of an over all improvement in the environment for learning. In the case of infrastructural facilities like playground and toilets, the existing facility is not up to the level of the expectation. In sum, the satisfaction level in educational sector indicates for improvement in quality of services.

Table 3: Level of Satisfaction with Education by Panchayats (All figures in percentages)					
INDICATOR	SATISFACTION LEVEL	PANCHATYATS			
		KADAPL-AMATTOM	AVOLY	KOLAZY	KEEZHUP-ARAMBA
Study Material	Completely Satisfied	63.70	60.00	69.00	91.00
	Partially Satisfied	20.60	8.00	9.00	7.00
	Dissatisfied	11.80	28.00	22.00	2.00
	Indifferent	3.90	4.00	0.00	0.00
Quality of Teaching	Completely Satisfied	66.20	61.00	72.00	42.00
	Partially Satisfied	23.80	9.00	10.00	43.00
	Dissatisfied	4.30	30.00	18.00	15.00
	Indifferent	5.70	0.00	0.00	0.00
Playground	Completely Satisfied	52.50	58.00	61.00	40.00
	Partially Satisfied	19.80	7.00	11.00	41.00
	Dissatisfied	21.80	35.00	12.00	19.00
	Indifferent	5.90	0.00	16.00	0.00
Toilets	Completely Satisfied	57.40	56.00	56.00	32.00
	Partially Satisfied	25.80	13.00	9.00	38.00
	Dissatisfied	8.90	31.00	19.00	30.00
	Indifferent	7.90	0.00	16.00	0.00
Attitude of Teachers	Completely Satisfied	76.20	52.00	68.00	54.00
	Partially Satisfied	14.90	8.00	9.00	32.00
	Dissatisfied	6.96	40.00	12.00	14.00
	Indifferent	1.94	0.00	11.00	0.00
Overall Satisfaction	Completely Satisfied	61.40	60.00	60.00	52.00
	Partially Satisfied	27.30	7.00	13.00	32.00
	Dissatisfied	5.52	33.00	17.00	16.00
	Indifferent	5.78	0.00	10.00	0.00

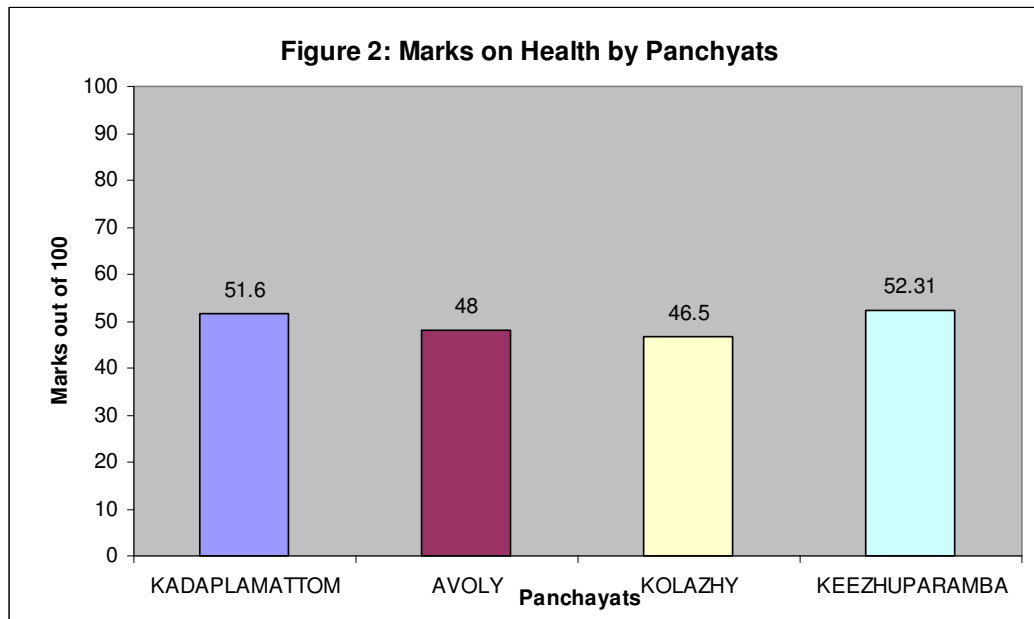
4.1.6 Suggestions

The suggestions for improving the performance of school are: to improve building facility, provide electricity to classrooms, provide sports materials, improve library facility, improve quality of toilets, improve quality of drinking water, improve standard of teaching, and to make available computer facility. It may be noted that the services are available at school, but its quality is very low. The issue is critical when we look at the developments in the

educational sector of the State as a whole wherein private schools are emerging with international level of quality.

4.2 HEALTH

Government health institutions located at the village level are transferred to the Grama Panchayats. The marks given by the beneficiaries of the four panchayats are given in Figure 2. The highest mark is given by respondents from Keezuparamba with 52.31 per cent and the lowest mark is with 46.5 per cent by Kolazhy.



4.2.1 Access

There is good access to health institutions. Majority of respondents have an institution within one k.m. from their residence and all are having at least one institutions within five k.m. The institutions include Indian System of Medicine (Ayurveda), Homeopathy and Allopathic.

4.2.2 Usage

The highest usage is the services from Primary Health Centre (PHC). The second importance in usage is the services from Ayurveda dispensary. Homeopathy is important in some places. All patients are outpatients. The health centres were established with the objective of providing preventive measures. People obtained treatment for fever, body pain, head ache, ENT diseases, asthma, blood pressure, skin diseases, sugar problems, ulcer, joint pain, etc. Patients from all age category are availing the services and the majority are in the age group of 19 years to 45 years.

4.2.3 Facilities

4.2.3.1 Infrastructure

The basic infrastructural facilities exist in the health institutions, but the existing facilities are reported to be insufficient and poor in quality. For example, waiting facilities are provided, but it is not sufficient. Many have reported that there is no sufficient toilet facility and that the environment is not clean. There is no facility in any of the four panchayats for admitting patients. Medicines are given to the patients, but only in a limited manner.

4.2.3.2 Human Resource

Human resources are reported to be very limited. In many places there is only one doctor. What is more important is that period of availability of doctor to the patients is very limited.

4.2.4 Interface

People have good interface with the health institutions. But because of the poor infrastructure and lack of medicine, only limited treatment can be at these health institutions. Majority are of opinion that doctors and staff are regular and behave decently. However, the interface has to be improved. No corruption is reported.

4.2.5 Satisfaction

The level of satisfaction of patients, in terms of 1) duration of time taken for consideration 2) doctor's behaviour 3) nurse's behaviour 4) others mentality to help 5) neatness of institute 6) availability of medicine and 7) over all satisfaction is reported in table 4. It may be noted that level of satisfaction, when we take into account the percentage on completely satisfied, is not remarkable. There are people who are dissatisfied and indifferent, though they are not a majority. For example, in the case of duration for considering patient, the highest completely satisfied group account for only 74.5 per cent in Kadaplamattom. As against this, in Avoly panchayat only 42 per cent are completely satisfied, with 32 per cent dissatisfied. The reason behind this may be because of the limited number of doctors and facilities. Though doctors are coming regularly and in time to the health centres, people have to wait for a long time for meeting him. Due to the limitation of time, the doctor may not be able to take care of all the patients effectively. There are variations across panchayats in rating the behaviour of the doctor and nurses. The response to the neatness of the institute is also disappointing. Satisfaction is also low in the case of availability of medicine. There are incidents of distributing outdated medicines to the patients. The over all satisfaction level is at less than sixty per cent.

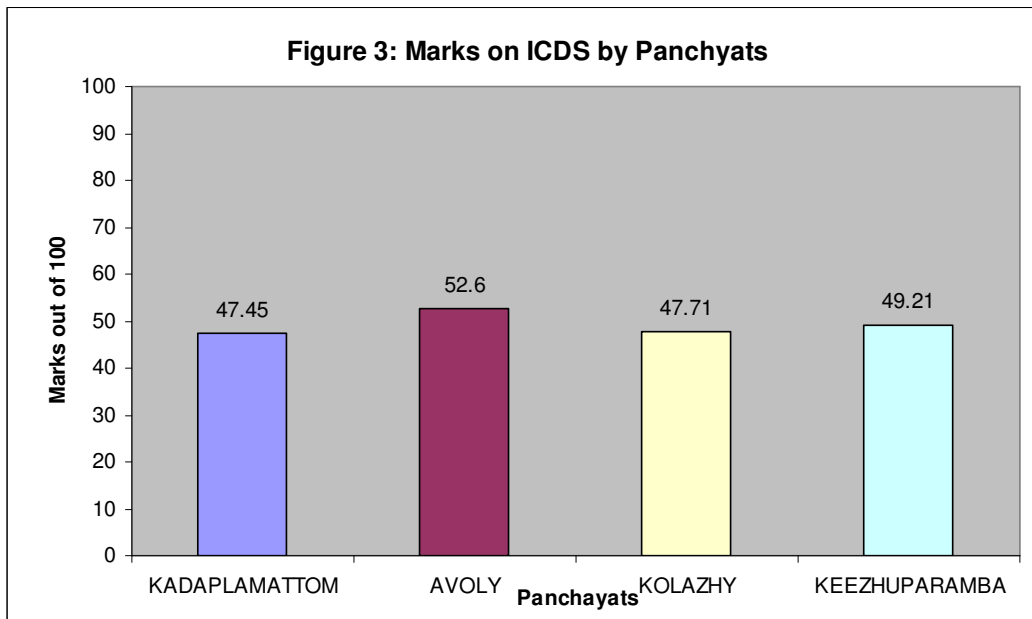
Table 4: Level of Satisfaction with Health by Panchayats (All figures in percentages)					
INDICATOR	SATIS-FACTION LEVEL	PANCHATYATS			
		KADAPLA-MATTOM	AVOLY	KOLAZY	KEEZHUP-ARAMBA
Duration of Time for Consideration	Completely Satisfied	74.50	42.00	55.00	52.00
	Partially Satisfied	14.90	25.00	17.00	25.00
	Dissatisfied	10.30	32.00	20.00	23.00
	Indifferent	0.30	1.00	8.00	0.00
Doctor's Behaviour	Completely Satisfied	78.30	47.00	58.00	64.00
	Partially Satisfied	11.10	23.00	17.00	24.00
	Dissatisfied	5.60	30.00	18.00	12.00
	Indifferent	5.00	0.00	7.00	0.00
Nurse's Behaviour	Completely Satisfied	74.00	59.00	60.00	75.00
	Partially Satisfied	15.00	10.00	15.00	16.00
	Dissatisfied	5.40	31.00	23.00	9.00
	Indifferent	5.60	0.00	2.00	0.00
Others Mentality to Help	Completely Satisfied	58.00	48.00	54.00	62.00
	Partially Satisfied	2.20	7.00	20.00	21.00
	Dissatisfied	2.20	28.00	21.00	17.00
	Indifferent	37.60	17.00	5.00	0.00
Neatness of Institute	Completely Satisfied	55.10	55.00	48.00	58.00
	Partially Satisfied	44.20	10.00	21.00	17.00
	Dissatisfied	0.70	35.00	24.00	20.00
	Indifferent	0.00	0.00	7.00	0.00
Availability of Medicine	Completely Satisfied	59.90	40.00	50.00	67.00
	Partially Satisfied	32.20	15.00	20.00	13.00
	Dissatisfied	9.60	45.00	25.00	20.00
	Indifferent	1.30	0.00	5.00	0.00
Overall Satisfaction	Completely Satisfied	59.60	50.00	49.00	51.00
	Partially Satisfied	23.80	15.00	19.00	21.00
	Dissatisfied	9.90	34.00	26.00	28.00
	Indifferent	6.70	1.00	6.00	0.00

4.2.6 Suggestions

The major suggestions for improving health services are to develop infrastructure for admitting patients, appointment of more doctors on permanent basis, make available medicine, improve the waiting facility, improve latrine facility, provide drinking water, extend the doctor's service in the evening, make available regular service of pharmacist, provide laboratory facility and to introduce token system.

4.3 ICDS

Anganawadies (mother and child care units) are established as part of the Integrated Child Development Service (ICDS) of Government of India. The marks given by respondents from four panchayats under the present study are reported in Figure 3. A cursory look at the figure 3 will reveal the fact that performance of Anganawadies has to be improved substantially. The highest mark is recorded by Avoly panchayat with 52.6 per cent mark, closely followed by Keezhuparamba with 49.21, Kolazhy with 47.71 and Kadaplamattom with 47.45 marks.



4.3.1 Access

Anganawadies are accessible to the mothers and children in villages. Majority of them have it with one k.m. from their residence.

4.3.2 Usage

Children up to the age of 5 and mothers (during pregnancy and after delivery) are going to the Anganawadies for availing the services provided by them. Children are provided with food, playing materials, and medical check-up. Mothers are given nutrient food, medical check-up and sensitisation on mother and child care. Vaccination is done at Anganawadies and BCG, DPT, Polio, and Hepatitis B are important vaccines used with the help of health workers. The teacher act as social activist and visit the homes for motivating the mother and child.

4.3.3 Facilities

4.3.3.1 Infrastructure

The Anganawadies have only limited facilities with a small building which is either owned, or rented. The space available is limited with a room for the children to play and study, basic facility for preparing food.

4.3.3.2 Human Resource

Every Anganawadi has a teacher and a helper. The teacher takes care of the children and mothers. She takes initiative for providing vaccination to the children and mother.

4.3.4 Interface

People's interface with Anganawadies is found to be very good. Public are aware about its activities and children are brought to it voluntarily. There is no issue of corruption. But people are looking forward for more quality services from this institution. People are of opinion that the quality of the service has been increasing over the last four years.

4.3.5 Satisfaction

The satisfaction level of the Anganawadies are examined based on eight indicators, behaviour of teacher, behaviour of helper, supply of food, supply of toys, services during pregnancy, services during delivery, preventive measures and over all satisfaction. The responses are reported in Table 5.

Table 5: Level of Satisfaction with ICDS by Panchayats (All figures in percentages)					
INDICATOR	SATISFACTION LEVEL	PANCHATYATS			
		KADAPLAM-ATTOM	AVOLY	KOLAZY	KEEZHUP-ARAMBA
Behaviour of Teacher	Completely Satisfied	71.00	51.00	90.00	55.00
	Partially Satisfied	12.30	12.00	6.00	24.00
	Dissatisfied	13.80	34.00	1.00	21.00
	Indifferent	2.90	3.00	3.00	0.00
Behaviour of Helper	Completely Satisfied	69.40	49.00	82.00	54.00
	Partially Satisfied	16.20	9.00	11.00	14.00
	Dissatisfied	12.20	38.00	4.00	32.00
	Indifferent	2.20	4.00	3.00	0.00
Supply of Food	Completely Satisfied	54.70	60.00	76.00	52.00
	Partially Satisfied	23.60	4.00	18.00	15.00
	Dissatisfied	13.20	25.00	5.00	33.00
	Indifferent	8.50	11.00	1.00	0.00
Supply of Toys	Completely Satisfied	59.50	58.00	44.00	58.00
	Partially Satisfied	20.60	18.00	35.00	18.00
	Dissatisfied	12.80	16.00	15.00	24.00
	Indifferent	7.10	8.00	6.00	0.00
Service During Pregnancy	Completely Satisfied	19.70	53.00	14.00	40.00
	Partially Satisfied	4.10	7.00	24.00	13.00
	Dissatisfied	22.10	15.00	31.00	47.00
	Indifferent	54.10	25.00	31.00	0.00
Service During Delivery	Completely Satisfied	14.70	41.00	11.00	30.00
	Partially Satisfied	0.90	7.00	15.00	12.00
	Dissatisfied	26.10	11.00	39.00	58.00
	Indifferent	58.30	41.00	35.00	0.00
Prevent-ive Measures	Completely Satisfied	12.60	60.00	23.00	62.00
	Partially Satisfied	0.00	10.00	25.00	19.00
	Dissatisfied	45.50	23.00	21.00	19.00
	Indifferent	41.90	7.00	31.00	0.00
Overall Satisfaction	Completely Satisfied	53.50	55.00	42.00	51.00
	Partially Satisfied	20.40	9.00	44.00	13.00
	Dissatisfied	19.80	33.00	6.00	36.00
	Indifferent	6.30	3.00	8.00	0.00

4.3.6 Suggestions

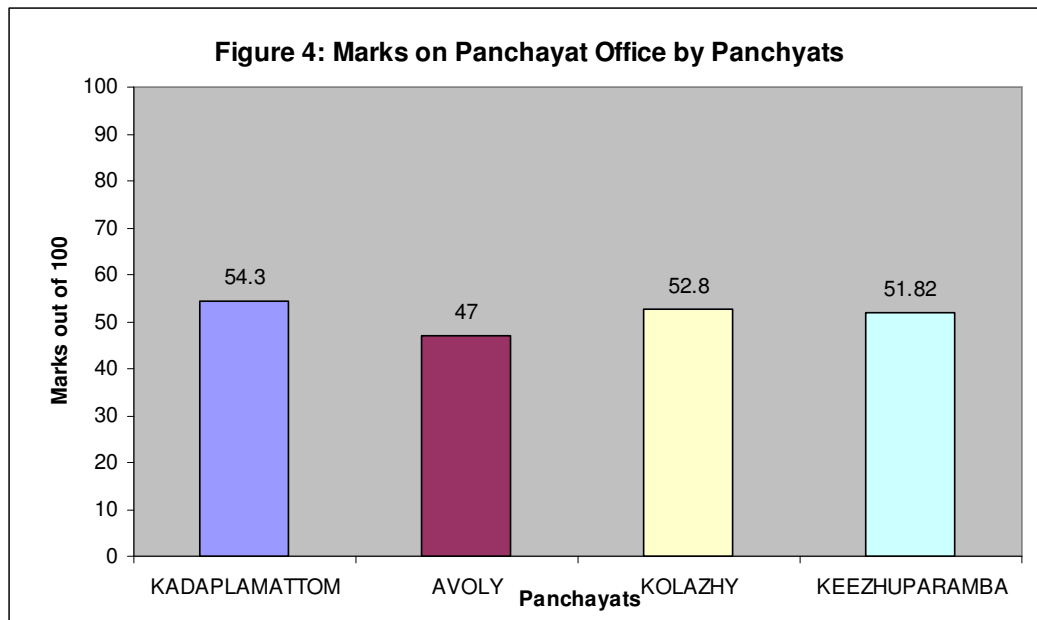
The suggestions for improving the Anganawadies include: develop good building, improve kitchen facility with gas connection, improving space for children to play, provide toys to children, give nutrient food to children and

mothers, conducting regular medical check-up in every three months, keep growth chart for children.

4.4 PANCHAYAT OFFICE

Panchayats in Kerala have both regulatory and development functions. From the office of the Grama Panchayats statutory functions like registering of birth and deaths and issuing of certificates are done.

Figure 4 gives marks given by the respondents from four panchayats under the study. It is important to underline the fact that none of the rating reaches level of 55 per cent. The highest level is observed from Kadaplamattom with 54.3 per cent marks, and the lowest mark is obtained by Avoly with 47 per cent marks. Kolazhy and Kadaplamattom have 52.8 per cent and 51.82 per cent respectively.



4.4.1 Access

The offices of panchayats are located in a convenient location in the village. People, for various purposes, approach the panchayat office, either directly or indirectly through the ward member/agent.

4.4.2 Usage

People go to the panchayat office for obtaining birth/death certificates, building permit, trade license, to pay building tax, to pay employment tax, for ownership certificate, for pension, etc.

4.4.3 Facilities

4.4.3.1 Infrastructure

The panchayats have office facilities with telephone connection.

4.4.3.2 Human Resource

The executive head of a Panchayat is the President and the head of the office functionary is the Secretary. Being the executive head, the President is a full time functionary. The President is assisted by the Secretary and other staff of the panchayat.

4.4.4 Interface

Panchayats have good relation with the people. But some people are found to be hesitant to directly approach the office due either to unfamiliarity or to lack of time. It has been observed that for the same purpose people have to visit the office several times. As a result of this, labourers are losing their wage during the visit to panchayat office.

The major problem with the office is the absence of concerned employee in the office. No incident of corruption is reported by the respondents.

4.4.5 Satisfaction

The satisfaction level of respondents on the functioning of panchayat office has been measured with 8 indicators: 1) information on working hours 2) waiting time and facility 3) procedure and processes 4) simplicity in filling of forms 5) attitude of officers 6) speed in processing 7) transparency in fixing rates and 8) over all satisfaction. The level of satisfaction is reported in table 6. It may be noted that information on working hours is not known to many and many are dissatisfied with the way of informing public about the working hours. The highest level of satisfaction, 77 per cent completely satisfied, is observed in Kolazhy panchayat and it is as low as 55 per cent in Kadaplamattom and Avoly panchayats. Regarding the waiting time and facility, again Kolazhy has the highest percentage of people with complete satisfaction with 80 per cent. But in Avoly, it is only 46 per cent. People are not found to be comfortable with the procedure and processes. The forms given to the public are not simple to fill up.

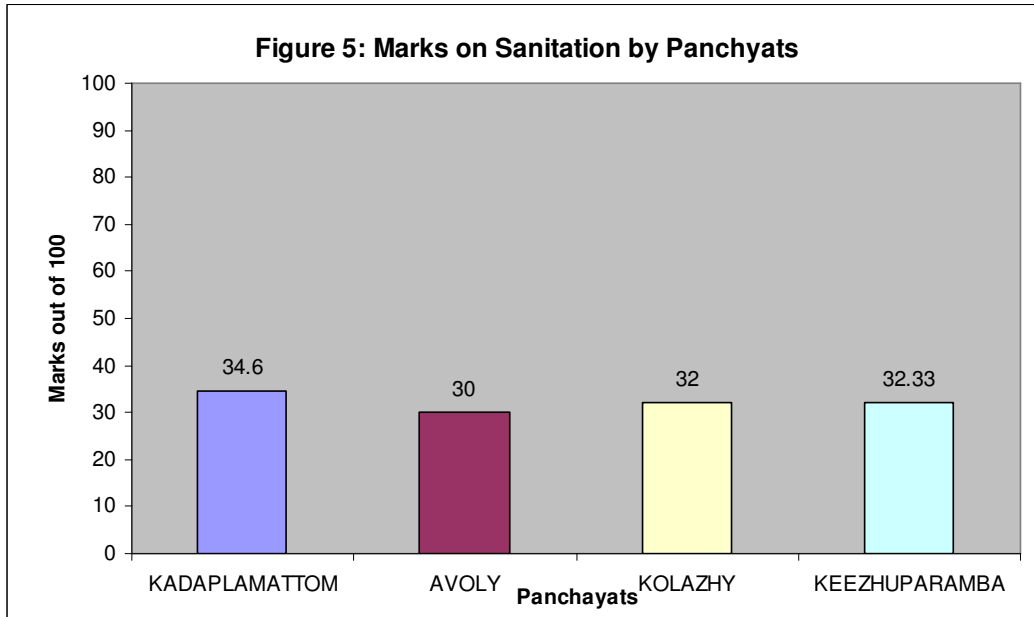
Table 6: Level of Satisfaction with Panchayat Office by Panchayats (All figures in percentages)					
INDICATOR	SATISFACTION LEVEL	PANCHATYATS			
		KADAPLA-MATTOM	AVOLY	KOLAZY	KEEZHUP-ARAMBA
Information on Working Hours	Completely Satisfied	55.50	55.00	77.00	58.00
	Partially Satisfied	3.50	15.00	12.00	22.00
	Dissatisfied	11.20	26.00	5.00	11.00
	Indifferent	29.80	4.00	6.00	9.00
Waiting Time and Facility	Completely Satisfied	67.60	46.00	80.00	53.00
	Partially Satisfied	13.10	20.00	9.00	22.00
	Dissatisfied	10.60	30.00	7.00	21.00
	Indifferent	8.70	4.00	4.00	4.00
Procedure and Process	Completely Satisfied	62.10	39.00	70.00	63.00
	Partially Satisfied	18.30	20.00	23.00	20.00
	Dissatisfied	8.70	37.00	6.00	8.00
	Indifferent	10.90	4.00	1.00	9.00
Simplicity in Filling of Forms	Completely Satisfied	61.20	48.00	65.00	70.00
	Partially Satisfied	14.20	18.00	17.00	15.00
	Dissatisfied	3.80	29.00	7.00	5.00
	Indifferent	20.80	5.00	11.00	10.00
Attitude of Officers	Completely Satisfied	62.60	34.00	50.00	74.00
	Partially Satisfied	13.90	21.00	20.00	18.00
	Dissatisfied	17.10	39.00	10.00	3.00
	Indifferent	6.40	6.00	20.00	5.00
Speed in Processing	Completely Satisfied	62.40	45.00	44.00	66.00
	Partially Satisfied	15.80	23.00	41.00	20.00
	Dissatisfied	8.00	24.00	13.00	6.00
	Indifferent	13.80	8.00	2.00	8.00
Transparency in Fixing Rates/Fees	Completely Satisfied	30.10	50.00	52.00	62.00
	Partially Satisfied	1.60	10.00	12.00	14.00
	Dissatisfied	9.30	32.00	32.00	7.00
	Indifferent	59.00	8.00	4.00	17.00
Overall Satisfaction	Completely Satisfied	53.30	40.00	40.00	59.00
	Partially Satisfied	18.60	26.00	16.00	29.00
	Dissatisfied	8.20	25.00	41.00	4.00
	Indifferent	19.90	9.00	3.00	8.00

4.4.6 Suggestions

The major suggestion for improving the service from panchayat officer are to improve the waiting facility, changing the attitude of employees, establishing an office in each ward for information, ensuring regularity of officers, and computerisation of the panchayat office.

4.5 SANITATION

Activities related to sanitation are limited in panchayats. Marks on services related to sanitation, is given in Figure 5. It is interesting to note that all the panchayats have marks below 35 per cent. The highest mark is scored by Kadaplammattom with 34.6 per cent and the lowest mark is obtained by Avoly.



At present panchayats are engaged in cleaning roads, cleaning drainage, facilitating in providing individual latrines. Along with other agencies panchayat also engaged in sensitisation on sanitation. Solid waste management problem is emerging and panchayats are yet to take it as a serious issue. People are throwing the waste out of their house or burn it on their land outside.

4.5.1 Satisfaction

The level of satisfaction in sanitation activities has been studied with response on cleaning of roads, cleaning of drainage, operation of public toilets, procedure of providing latrine and overall satisfaction. The level of

satisfaction is reported in table 7. In general, one can observe a very low level of satisfaction. A significant per cent of respondents are indifferent in the sense that the service itself is unknown to them.

Table 7: Level of Satisfaction with Sanitation by Panchayats (All figures in percentages)					
INDICATOR	SATISFACTION LEVEL	PANCHATYATS			
		KADAPLA-MATTOM	AVOLY	KOLAZY	KEEZHU-PARAMBA
Cleaning Road	Completely Satisfied	28.40	22.00	45.00	2.00
	Partially Satisfied	6.50	6.00	15.00	0.00
	Dissatisfied	6.80	23.00	34.00	1.00
	Indifferent	58.30	49.00	6.00	97.00
Cleaning Drainage	Completely Satisfied	21.70	21.00	44.00	1.00
	Partially Satisfied	3.60	3.00	15.00	0.00
	Dissatisfied	7.50	26.00	36.00	1.00
	Indifferent	67.20	50.00	5.00	98.00
Operation of Public Toilets	Completely Satisfied	.70	20.00	32.00	0.00
	Partially Satisfied	0.00	1.00	30.00	0.00
	Dissatisfied	6.80	13.00	25.00	1.00
	Indifferent	92.50	66.00	13.00	99.00
Procedure of Providing Latrine	Completely Satisfied	63.80	28.00	40.00	45.00
	Partially Satisfied	8.40	31.00	30.00	8.00
	Dissatisfied	6.50	24.00	12.00	3.00
	Indifferent	21.30	17.00	18.00	44.00
Overall Satisfaction	Completely Satisfied	45.50	26.00	28.00	9.00
	Partially Satisfied	22.90	20.00	34.00	16.00
	Dissatisfied	6.90	34.00	14.00	2.00
	Indifferent	24.70	20.00	24.00	73.00

Reasons for dissatisfaction are lack of public latrines, lack of waste bins for disposing solid wastes, and inadequate financial support for household latrines.

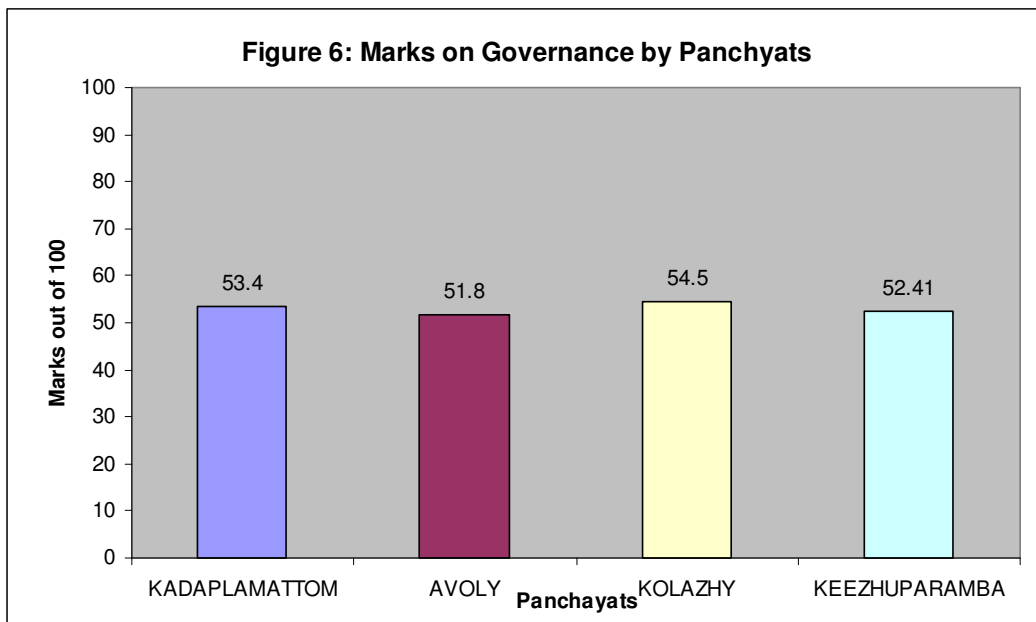
4.5.2 Suggestions

Important suggestion made by the respondents are providing public latrines, sensitisation on sanitation, public compost facility, facility for solid waste management, providing compost pits at home, establishing vermin composting units, banning of plastics, creating sewage facility, and initiating mosquito eradication programme

4.6 GOVERNANCE

Here we make a remote observation on the elements of people's participation in local governance. Voters in every electoral ward of panchayat constitute a Grama Sabha. There are four meetings of Grama Sabha in an year. Every voter has the right to participate the Grama Sabha wherein the activities of the panchayats are discussed and individual beneficiaries are selected.

Figure 6 portrays the marks given by respondents on the existing system and its functioning of Grama Sabha, particularly to the invitation for its meeting, involvement of people, etc. It is interesting to note that the ratings are low with no panchayat having marks greater than 55 per cent.



Section V

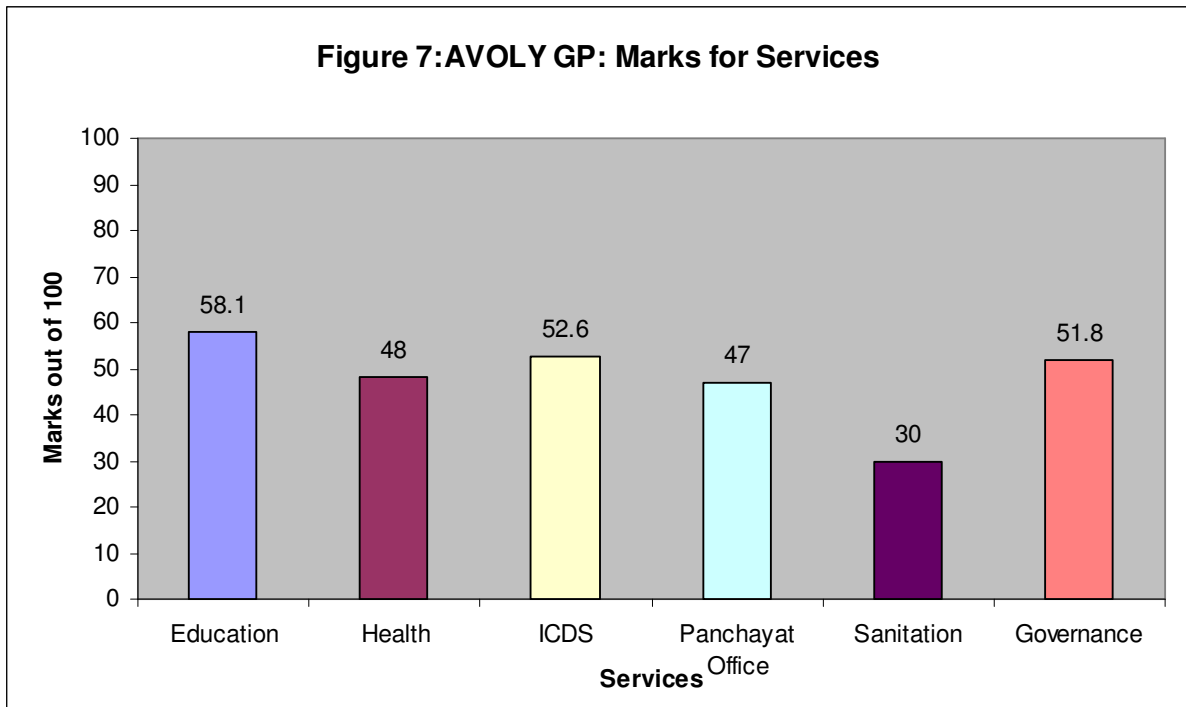
5 DISCUSSION PANCHAYAT-WISE

After having a detailed subject-wise observation on the opinion of service recipients, the present section provides an analysis of services in the four selected panchayats.

5.1 AVOLY

Avoly Grama Panchayat is located in Ernakulam district. Agriculture is the main livelihood of the people. There are 13 electoral wards and the total population of the panchayat is 21636 with an area of 18.6 s.q. k.m.. The citizens report card of panchayat is presented in table 8 and Figure 7. The panchayat got C grade with 47.91 marks. In the case of subject areas of education, ICDS and Governance got B grade. Health and Panchayat Office received C grade and Sanitation got D grade.

Table 8 : REPORT CARD: Avoly		
SECTOR	PERCENTAGE OF MARKS	GRADE
Education	58.10	B
Health	48.00	C
ICDS	52.60	B
Panchayat Office	47.00	C
Sanitation	30.00	D
Governance	51.80	B
TOTAL	47.91	C
Note: A for 60 % and above, B for 50 %-60%, C for 40% to 50%, D for 30 to 40% and E for less than 30%.		



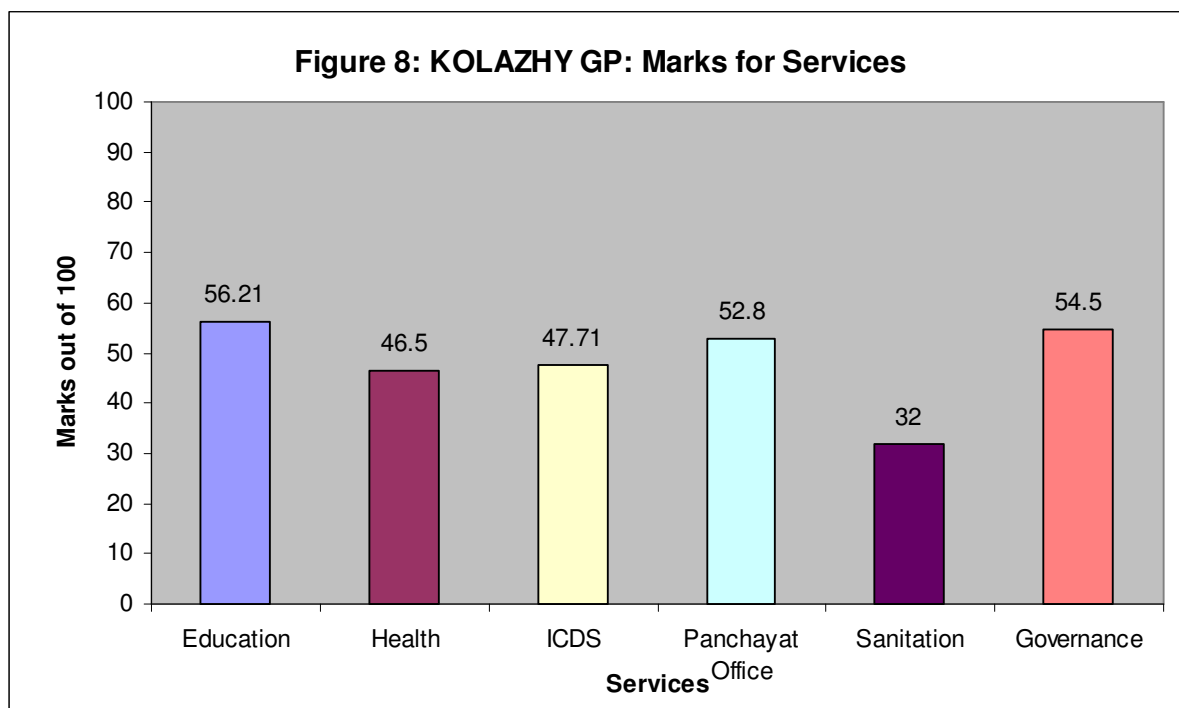
A detailed analysis of the report card of Avoly panchayat is given in ***Annexure-III.***

5.2 KOLAZHY

Kolazhy Grama Panchayat is located in Thrissur district. Agriculture is the main livelihood of the people. There are 16 electoral wards and the total population of the panchayat is 27180 with geographical area of 16.62 s.q. k.m.. The citizens report card of panchayat is presented in table 9 and Figure 8. The panchayat got C grade with 48.28 marks. In the case of subject areas of education, panchayat office and Governance got B grade. Health and ICDS received C grade and Sanitation got D grade.

SECTOR	PERCENTAGE OF MARKS	GRADE
Education	56.21	B
Health	46.50	C
ICDS	47.71	C
Panchayat Office	52.80	B
Sanitation	32.00	D
Governance	54.50	B
TOTAL	48.28	C

Note: A for 60 % and above, B for 50 %-60%, C for 40% to 50%, D for 30 to 40% and E for less than 30%.

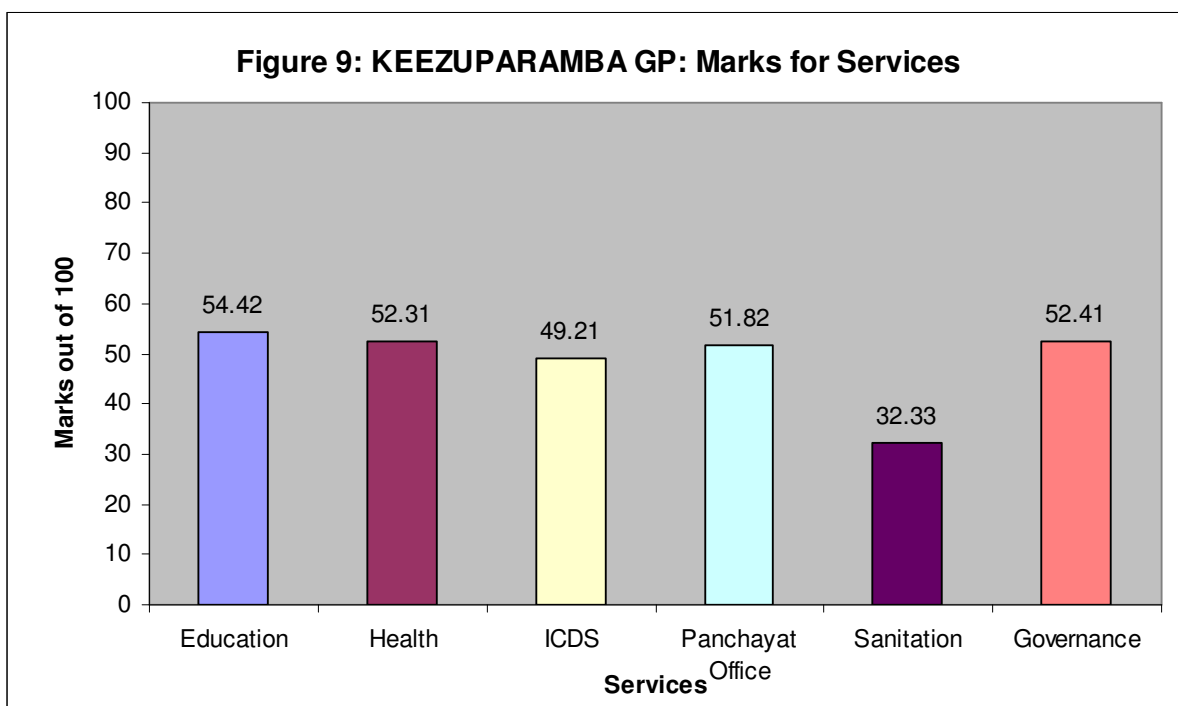


A detailed analysis of the report card Avoly panchayat is given in **Annexure-IV**.

5.3 KEEZHUPARAMBA

Keezhuparamba Grama Panchayat is located in Malappuram district. Agriculture is the main livelihood of the people. There are 13 electoral wards and the total population of the panchayat is 18399 with a geographical area of 14.99 s.q. k.m.. The citizens report card of panchayat is presented in table 10 and Figure 9. The panchayat got C grade with 48.75 marks. In the case of subject areas of education, health, panchayat office and Governance got B grade. ICDS received C grade and Sanitation got D grade.

Table 10 : REPORT CARD: Keezhuparamba		
SECTOR	PERCENTAGE OF MARKS	GRADE
Education	54.42	B
Health	52.31	B
ICDS	49.21	C
Panchayat Office	51.82	B
Sanitation	32.33	D
Governance	52.41	B
TOTAL	48.75	C
Note: A for 60 % and above, B for 50 %-60%, C for 40% to 50%, D for 30 to 40% and E for less than 30%.		



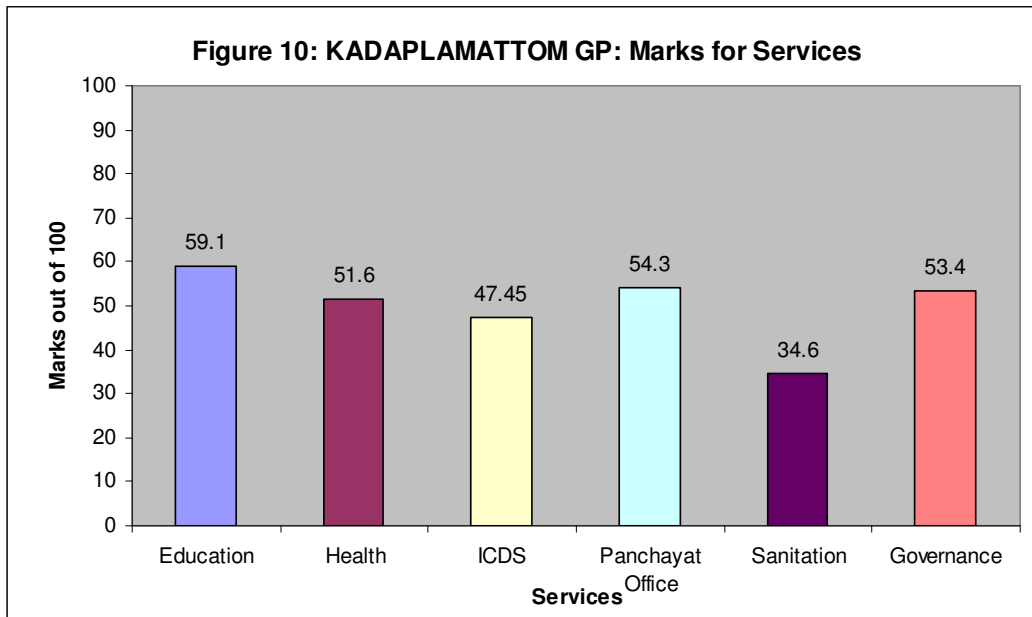
A detailed analysis of the report card Avoly panchayat is given in **Annexure-V**.

5.4 KADAPLAMATTOM GRAMA PANCHAYAT

Kadaplamattom Grama Panchayat is located in Kottayam district. Agriculture is the main livelihood of the people. There are 12 electoral wards and the total population of the panchayat is 13471. The citizens report card of panchayat is presented in table 11 and Figure 10. The panchayat got B grade with 50.07 marks. In the case of subject areas of education, health, panchayat office and Governance got B grade. ICDS received C grade and Sanitation got D grade. It may be noted that Kadaplamattom is the only panchayat having B grade, all other three have C grade.

Table 11 : REPORT CARD: Kadaplamattom		
SECTOR	PERCENTAGE OF MARKS	GRADE
Education	59.10	B
Health	51.60	B
ICDS	47.45	C
Panchayat Office	54.30	B
Sanitation	34.60	D
Governance	53.40	B
TOTAL	50.07	C

Note: A for 60 % and above, B for 50 %-60%, C for 40% to 50%, D for 30 to 40% and E for less than 30%.



A summary of the observations and suggestions made by the respondents are given below. For details of the report see **Annexure VI**

5.4.1 EDUCATION

5.4.1.1 Observations

- All children have access to school and almost all children go school by foot;
- Though the distance is short, 97% of the children go by foot to school.
- Since primary education is free of cost no fee is charged from the children
- Attitude of teachers are reported good, but the teaching quality has to be improved.
- Major reasons for dissatisfaction are lack of adequate infrastructural facilities, lack of availability of study materials in time and low quality of teaching
- The school is not having adequate laboratory facilities
- The class rooms are not partitioned properly
- The majority of parents reported that they had no problems to be solved in the school
- The schools are rated by the respondents by giving 59% marks

5.4.1.2 Suggestions

- Improvement of building facility

- Provision of play ground in the campus
- Improvement of standard of teaching
- Provide road facility
- Construction of more toilets
- Establish laboratory facility
- Provide computer for teaching
- Electrify the class rooms
- Provide library facility

5.4.2 HEALTH

5.4.2.1 Observations

- Only outpatients are treated in the health centre
- Most of the patients are in the age category of 19 to 45 years
- Most of the patients visited the centre for minor ailments
- Health institutions are more accessible to the people
- More than 50 percent uses the Allopathic and 46 per cent uses Ayurvedic medicine
- There is no payment of speed money reported during the course of treatment
- Doctor's attitude and presence are good but the inadequacy of infrastructure and modern medical facilities/instruments lead to poor service from the health centres
- Toilet facility is very limited and poor in quality
- Medicines are not given regularly
- It is reported that outdated medicines are supplied occasionally
- Treatments are effective and 20 per cent reported that diseases are continuing
- Only minor problems were reported and were solved when they approached the centre
- Major reasons for dissatisfaction are non availability of doctor in time, non availability of medicines and lack of lab test facilities and latrine facility.
- Majority opined that the quality of services is better over the past four years
- The health institutions are rated with 51 per cent marks by the respondents

5.4.2.2 Suggestions

- Provide facility for admitting patients
- Infrastructure including building have to be improved
- Make available adequate medicines
- Supply only quality medicine
- Provide facility for the waiting patients
- Appoint permanent and specialised doctors

- Lab facilities are to be established
- Staff should keep punctuality

5.4.3 ICDS

5.4.3.1 Observations

- Anganawadies are functioning in own buildings and rented buildings
- All Anganawadies are accessible to the children
- Major vaccination taken by the children is Polio vaccination
- Anganawadi's services during pregnancy and after delivery are poor.
- Major problems reported are irregularity of Anganawadi teacher, poor quality of food and bad behaviour of Anganawadi teacher and helper
- Major reasons for dissatisfaction are absences of enough building space, lack of enough toys, irregular supply of food and absence of toilet facility
- The average marks given for the Anganawadi service is 47.45 per cent by the respondents

5.4.3.2 Suggestions

- Construct own building
- Provide good latrine facility
- Standard of teaching should be improved
- Provide enough toys for children
- Ensure good drinking water facility
- Regular supply of food
- Electrification of the Anganawadi

5.4.4 PANCHAYAT SERVICE

5.4.4.1 Observations

- Most of the people visit the panchayat office to get certificates and licences
- Very few approach the office indirectly by engaging an agent
- Every body reported that there was no cost for engaging an agent to speed up the service
- During their visit to the panchayat office, they have to wait for sometime and this has led to loss of wage days.
- About 21%of the respondents have lost one or more wage days
- However nobody reported about the payment of speed money to meet their needs
- Major reasons for dissatisfaction are delay, attitude of staff, complexity of office procedures and non-availability of staff.
- Majority of the respondents are not aware about the Citizen Charter

- The net service is rated by an average mark of 54.3 per cent by the respondents

5.4.4.2 Suggestions

- Provide facility for information
- Attend the needs of the people without delay
- Ensure the punctuality of the office staff
- Change in the attitude of the staff
- Provide waiting facility
- Make the office procedure more transparent
- Computerisation of the panchayat office

5.4.5 SANITATION AND SOLID WASTE MANAGEMENT

5.4.5.1 Observations

- Grama Panchayat is not giving serious attention for sanitation activities
- Most of the households have latrines with closet constructed with own money or with Government support
- Majority reported that there is not much sensitisation about sanitation in Grama Panchayat
- Most of the people reported that waste management facility is poor. Most of the people throw solid waste and water to open places
- The average mark given to sanitation is 34.6 per cent by the respondents

5.4.5.2 Suggestions

- Provide public latrine facility
- Sensitize the people for sanitation activities
- Sewerage facility is to be improved
- Provide facility for solid waste management

5.4.6 GOVERNANCE

5.4.6.1 Observations

- The number of visit by the respondents shows that the participation of the people in governance is not good
- Some of the respondents are not informed about the Grama Sabha meeting
- Participation in Grama Sabha meeting is 61%
- The coverage of Kudumbashree activities is above 68 per cent

5.4.6.2 Suggestions

- Ensure maximum involvement of the people
- All members should be informed in time
- Enhance the coverage of Kudumbashree / Neighbourhood groups

6 CONCLUDING OBSERVATIONS

This section is devoted for presenting some tentative conclusions and a few suggestions emerging out of the survey and discussions.

- 1 Kerala is a State which has gone far ahead, compared to other Indian states, in decentralised governance and development. From 1996-97 onwards the local governments in Kerala had been given mandatory functions in local level planning and development. Also, 30 to 40 per cent of the state plan fund have been transferred to these local governments for formulation and implementation of development plans at the local level. The Panchayats at the three tiers have been engaged in participatory planning since 1996-97. Institutional mechanisms for social accountability are part of the governance structure in Kerala. Apart from the conventional auditing system, a Performance Audit is functioning for handholding the local governments in managing the developmental and statutory functions assigned to them. An **Ombudsman** for local governments is established to safeguard local governments from corruption. The Grama Sabha is given the right to look into all aspects of governance ranging from beneficiary selection to the details of budget and annual financial statement.
- 2 In spite of all these mechanisms, the existence social accountability cannot be ensured without a mechanism for systematically collecting the responses from recipients of services. Of course, there are encouragements to better performing panchayats by constituting Swaraj Trophy at State level and district level. The winning panchayats will be getting additional financial support for its developmental activities as an encouragement for their better performance. At present, the selection of panchayats for the award is based on indicators relating to financial management and physical achievements and not related to the evaluation by beneficiaries. It will be more meaningful if the selection process is such a manner as to incorporate systematic feedback from the beneficiaries also. With this long term objective in mind, the present study made an attempt to examine the performance of panchayats in service delivery based on feedbacks from beneficiaries/citizens. The focus areas of the study are education, health, ICDS, services from panchayat office, sanitation and provisions of people's participation in governance.
- 3 Before proceeding to make final observations it is worthwhile to have a general look at the over all scenario of some of the service areas particularly in the case of education and health. It is generally discussed

in public that the government schools are in low demand, despite the existence of basic infrastructure, qualified and trained teachers. Competition from private sector with different curriculum and syllabi and with modern infrastructure poses very strong challenge to government schools. Perhaps the high cost of these private schools that prevents the people to send their children to private schools. Similarly, in the case of health sector, there exist private hospitals with high quality in service. Of course, these observations are not derived from results of the present study, but are only general observations which will be useful in understanding the mindset of respondents in rating the services.

- 4 The over all performance of the panchayats in service delivery is not satisfactory Only one panchayat to B grade and all others got C grade. All the services are rated below sixty per cent. However, there is positive trend in improving the quality of services during the last four years, according to the responses from all the panchayats.
- 5 In the case of education, none of the panchayats have got marks above sixty per cent. The highest mark is obtained by Kadaplamattom with 59.1 per cent. The schools are accessible to the children and are having basic infrastructure like building, bench and desk, drinking water, toilet and playground. The interface of parents with the school is very smooth and there is no corruption. The satisfaction level of respondents on study material, quality of teaching, attitude of teachers, playground and toilets are found to be less than sixty per cent. The suggestions for improving the performance of school are to improve building facility, provide electricity to classrooms, provide sports materials, improve library facility, improve quality of toilets, improve quality of drinking water, improve standard of teaching, and to make available computer facility. It may be noted that the services are available at school, but its quality is very low. The issue is critical when we look at the developments in the educational sector of the State as a whole wherein private schools are emerging with international level of quality. In the context of the dual control existing in the schools, state government, line department, panchayats and local people have responsibilities, in various forms, to improve the quality of education.
- 6 Health institutions are also transferred institutions from health department and there exists dual control. Keezhuparamba has got highest mark (52.31 per cent) for the health service. It may be noted that none of the four panchayats got mark greater than 55 per cent. There is good access to the people to health centres. It is desirable to bear in mind that these health centres (Allopathic) are originally envisaged for providing support for preventive measures. As a result of this facility for inpatients are not developed. People are generally treated for ailments like fever, body pain, head ache, ulcer, joint pain, etc. Basic infrastructure is available, but is reported to be insufficient for the patients. Waiting facility and toilet facility are there, but insufficient and poor in quality. The human resources are reported to be insufficient. In many centres service of doctors is not enough compared to the demand

for the service. In such cases service of more than one doctor is required. The interface with the health institution is very smooth and no corruption is reported. The suggestions for improving the health sector are to develop infrastructure for admitting patients, appointment of more doctors on permanent basis, make available medicine, improve the waiting facility, improve latrine facility, provide drinking water, extend the doctor's service in the evening, make available regular service of pharmacist, provide laboratory facility and to introduce token system. As in the case of the educational sector, dual control also existing in health sector. Intervention is required by panchayats, health department and state government for improving the quality.

- 7 Integrated child development is taken care of by Anganawadies. The performance of Anganawadies is to be improved. The highest mark is recorded in Avoly panchayat with 52.6 per cent and the lowest mark is recorded in Kadaplamattom with 47.45 marks. Anganawadies are accessible to the children and mothers. With the help of the health workers vaccination is given to children and mothers in these institutions. Children are provided with food, toys, and medical check-up. The infrastructural facilities are very limited compared to the expectations of the people. The interface with Anganawadies by people is very smooth and there is no corruption. The suggestions for improving Anganawadies are having good building, improve kitchen facility with gas connection, improving space for children to play, provide toys to children, give nutrient food to children and mothers, conducting regular medical check-up in every three months, keep growth chart for children. For improving the situation of Anganawadies, efforts from panchayat, line department, and state government is required.
- 8 From the office of grama panchayat a number of services are provided and people have to directly interact with this office. The panchayat has both regulatory and development functions. Licenses are issued and taxes are collected at the office. Respondents are reporting that they have good access to the panchayat office, but the service from the office has to be improved. It may be noted that none of the panchayats got greater than 55 per cent marks on its office performance. Due to the cumbersome nature of its functioning some people do not directly approach the office. For the same purpose, people have to visit time and again and some are losing their wages. The suggestions for improving the service from panchayat office are to improve the waiting facility, changing the attitude of employees, establishing an office in each ward for information, ensuring regularity of officers, and computerisation of the panchayat office.
- 9 Activities for sanitation are limited in panchayats. Panchayats are engaged in cleaning roads, cleaning drainage, facilitating in improving individual latrines. Among the services under the present study, sanitation has the lowest rating; all the panchayats got marks below 35 per cent. The highest mark recorded in Kadaplamattom with 34.6 per cent. People are dissatisfied because of the lack of public latrines, lack

of waste bins for disposing soled waste, and of inadequate financial support for household latrines. Important suggestion made by the respondents are providing public latrines, sensitisation on sanitation, public compost facility, facility for solid waste management, providing compost pits at home, establishing vermi composting units, banning of plastics, creating sewage facility, and initiating mosquito eradication programme.

- 10 People's participation in local governance is also has to be improved. The suggestions for improving participation are to inform all the members in advance, and expand the activities of Grama Sabha.
- 11 In sum, the performance of panchayats, as rated by its recipients of services, has to be improved substantially. None of the services is rated greater than the level of sixty per cent. Efforts in the direction of service delivery have to be initiated by panchayats, but adequate support has to be extended from the line departments and from State government for a significant improvement in the quality of service.
