

An Innovative Extension Model for Integrated Rural Development: A Case of Samaj Shilpi Dampati Scheme

B. L. Manjunatha¹, D. U. M. Rao² and Rashmi Singh³

ABSTRACT

The research study conducted in Chitrakoot district of Uttar Pradesh state in India was aimed to study the philosophy, origin, process and functioning of the Samaj Shilpi Dampatis (SSD) scheme along with its socio-economic impact on livelihood of the villagers. SSDs live in a village and work for a cluster of five villages. This cluster of five villages is called a SSD unit. One village was selected randomly from each SSD unit. Twenty farmer households were selected randomly from each village. Totally, 100 farm households were interviewed for primary data collection. Five SSDs (10 functionaries) and twenty officials working in various organizations of DRI were also selected for primary data collection. The study found that SSDs, the grassroots level functionaries, possessed a very high level of achievement motivation, organizational commitment, dedication, faith in people, empowerment, and development orientation. The scheme had a great impact on beneficiaries in their raise in income, savings, and increase in employment days. Majority of the respondents, especially marginal and small farmers, adopted either 1.5 or 2.5 acre model that helped ensure food security for their families throughout the year. Adoption of kitchen gardens in their homesteads helped secure nutritional security for the family. The village sanitation, health and hygiene of respondent households had improved a lot. More than 85 per cent of the families shifted from below poverty line category to above poverty line category. The SSD scheme was found to be cost-effective, efficient and worked for the integrated development of villages. This indigenous concept of rural development needs to be considered for upscaling in other parts of the country. The model holds a great hope for government departments, NGOs and voluntary organizations working at grassroots level.

Key words: Deendayal research institute, dispute/litigation free villages, gandhi, samaj shilpi dampati, village self-reliance campaign

INTRODUCTION

On the eve of addressing the nation on 15 August, 1947, Pandit Jawahar Lal Nehru, the first Prime Minister of India, mentioned that poverty, ignorance and ill-health of the people were the greatest challenges before the newly independent nation. Achieving food security at household level requires that vulnerable people be empowered to help themselves to come out of the vicious circle of poverty, ignorance, and ill-health. One way to achieve this is to educate the people, especially the younger generation. When a person becomes literate or educated, he has more employment opportunities before him. He also has a capacity to earn more being a skilled worker. This enables him to have more purchasing power. A person with more income and better purchasing power

has better accessibility to resources. Better accessibility of resources and its consumption lead to greater production, thus contributing to his family, society and the nation at large.

Thus, integrated rural development encompasses agricultural development, promotion of income generating activities among the rural people, access to better health care facilities and school and tuition support to rural children. Many rural development programmes have been planned and implemented across the globe over the decades for the upliftment of the poor and the underprivileged. In all these programmes, extension functionaries have acted as intermediaries, who took extension activities on behalf of the organization they worked for. Such interventions by extension functionaries

¹ Corresponding Author: Scientist (Agricultural Extension), Division of Transfer of Technology, Training and Production Economics, ICAR-Central Arid Zone Research Institute, Jodhpur, Rajasthan-342003,, ^{2,3} ICAR-Indian Agricultural Research Institute, New Delhi, India.

to promote rural development have seen many setbacks because of various reasons. The first thing is that of heterophily between extension functionaries and the clientele group. Often extension functionaries differ with clientele group on various issues like rural-urban background, educational status, culture, region they belong to, *etc.* The practice of “rural development tourism”, as given by Chambers (2006), restricts sustained interaction between the extension functionaries and the villagers. The second aspect commonly noticed in extension interventions is that extension functionaries live in a city or a town having all the urban facilities. The third aspect commonly noticed around the globe regarding extension functionaries is that they either start with or limit their services to the so-called 'progressive farmers'. The fourth aspect of rural development in developing countries is that the major proportion of extension functionaries at all levels is composed of male functionaries.

Considering all these factors, rural development specialists recommend such a model for rural development where in extension functionaries, especially the grassroots functionaries, come from and live with the community of the clientele group who can empathize with the latter freely. Such approach creates a platform for sustained and continuous interaction between the two parties, helping clientele group to grab the services of the extension organizations for their benefit at all times of day and night as the situation demands. Deendayal Research Institute has addressed all these limitations of rural development through an innovative scheme employing Samaj Shilpi Dampatis (SSD). In this context, the present study was undertaken to study the impact of Samaj Shilpi Dampati scheme being implemented by DRI in Bundelkhand region of central India. This is an innovative extension model working for holistic development of villages. The paper is an attempt to study the origin, philosophy, process and functioning of the Samaj Shilpi Dampati scheme; and to evaluate the impact of the scheme on various components of the village self reliance campaign.

METHODOLOGY

Chitrakoot district was purposively selected since the SSD scheme was introduced and implemented in this district by Deendayal Research Institute (DRI) since 2002. The Karwi tehsil under Chitrakoot district was purposively selected since villages covered under SSD scheme in Chitrakoot district fall under this tehsil. The SSDs live in a village and work for a cluster of five villages. This cluster of five villages is called a SSD unit.

Five such SSD units were selected randomly for the study. One village was selected randomly from each SSD unit. Twenty farmer households were selected randomly from each village. Totally, 100 households from five villages were interviewed for primary data collection. SSDs are the key functionaries of the scheme who live and work in villages on behalf of DRI. So, five SSD couples (10 grassroots functionaries) were selected for interview to elicit primary and secondary data for the study. Twenty officials working in various organizations of DRI who are directly involved in SSD scheme through their resource base, services and capacity building were also interviewed for collecting primary and secondary data. The primary data was collected during January and February 2009 by personal interview with farm households in the selected villages, SSDs and staff of DRI using pre-tested semi-structured interview schedule developed especially for the study. Secondary data from various organizations of DRI and SSDs and published literature (Manjunatha, 2011a; Manjunatha, 2011b; Manjunatha, 2012) were also used to supplement the primary data.

RESULTS AND DISCUSSION

The results have been discussed under two sub-heads:

I) Origin, Philosophy and Processes of Samaj Shilpi Dampati Scheme Establishment of DRI

Mahatma Gandhi and his philosophy are omnipotent and their relevance in today's world cannot be overemphasized. Mohandas Karamchand Gandhi had enunciated several social work and social reconstruction principles that had a sound footing in ground realities in his autobiography *My Experiments with Truth* (Gandhi, 1927). Some non-governmental organizations had put his principles into practice and tested their relevance and potency. The case of Deendayal Research Institute (DRI) is one such empirical evidence of Gandhian concept of social reconstruction that had been put to test in today's rural scenario in Bundelkhand region of Central India. DRI is an NGO established under the leadership and vision of Shri Nanaji Deshmukh in 1969. It envisioned for serving the rural people through an agent selected from the community itself who is committed for the service of the rural poor. DRI has its headquarters at Chitrakoot in Madhya Pradesh. To undertake rural development programmes in the region, DRI has established, over a period of time, a host of institutions such as residential schools, two Krishi Vigyan Kendras (located at Ganiwan (Chitrakoot) Uttar Pradesh and Majhagawan (Satna) Madhya Pradesh), Govansh Vikas evan Anusandhan Kendra (Animal Breeding and Research Center), Arogyadham (Ayurveda, Naturopathy and Allopathy

Hospital and Research Center), Udyamita Vidyapith (Entrepreneurship Training Center) and Educational Research Center (ERC).

DRI implemented the concept of 'Samaj Shilpi' (Samaj = Society; Shilpi = Sculptor) in the year of 1992. All the Samaj Shilpis' were male functionaries. These Samaj Shilpis were the social workers who lived in villages and worked for the villagers on behalf of DRI. The Samaj Shilpi concept was less successful since villagers looked at them with suspicion and did not cooperate with them. People from lower castes and tribal people even feared that these functionaries would abduct their children in the name of free education at residential schools. More importantly, since all Samaj Shilpis' were male functionaries, they could not reach women folk in the villages. The participation of womenfolk in the rural development activities of DRI was negligible. Then, DRI came with the concept of 'Samaj Shilpi Parivar' (Samaj = Society; Shilpi = Sculptor; Parivar = Family/couple). Instead of only male functionaries, the couples were selected for the job of rural development. In the initial years of its establishment, the main priority of DRI was on health component because the malnutrition rate, infant mortality rate (IMR) and maternal mortality rate (MMR) in these tribal and backward region was so high and needed immediate attention. To reflect its emphasis on health, the name of the scheme was again renamed as 'Samaj Swasthya Shilpi Parivar' (Samaj = Society; Swasthya = Health; Shilpi = Sculptor; Parivar = Family/couple). These social worker couple worked for a cluster of villages with special emphasis on improving the health conditions of villagers. Over a period of its implementation, DRI realized that all components of rural development are essential for holistic development of villages. Agriculture, income generation, health, education, and entrepreneurial development of villagers were included in their programmes and activities. The component of 'litigation free villages' as enunciated by Pt. Deendayal Upadhyaya was also added. Finally, in the year 1996, DRI came out with Samaj Shilpi Dampati (Samaj = Society; Shilpi = Sculptor; Dampati = Couple) Scheme. SSD scheme with all the above mentioned components was implemented in March 1996, when nine couples joined the scheme to work in the remote, tribal dominated and dacoit-infested regions in the thick forests of Bundelkhand region. SSDs were newlywed graduate couples selected from the community itself, who were dedicated for the community service and sent to villages after training, to live and work with villagers. Each SSD was allotted a cluster of five villages to work. SSDs lived in a village and worked for a cluster of five surrounding villages. Manjunatha *et. al.* (2011a) reported that 40

percent of the SSDs were graduates and the rest 60 percent were post graduates. Ninety percent of SSDs possessed high level of faith in people, dedication towards work and development orientation.

As DRI gained experience, it realized the importance of working in a campaign mode with set objectives and a time frame for achieving village self reliance. Since January 2002, the scheme was implemented as 'Village Self Reliance Campaign' (VSRC) or 'Chitrakoot Project'. Under this project, DRI took upon itself the task of making 500 villages around this Chitrakoot in two districts, namely Satna district in Madhya Pradesh and Chitrakoot district in Uttar Pradesh, self-reliant in all aspects of rural development by the end of 2010. Chitrakoot Project is an integrated and holistic model for the development of rural India, based on the principles outlined in Pt. Deendayal Upadhyaya's Integral Humanism to create a society based on the complementarity of the family, primary school and the local population (DRI, 2016).

The organizational structure of the SSD scheme is depicted in figure 1. SSDs live in a village and work for the cluster of five villages on behalf of the institute. The village they live in is called as Swavalamban Kendra (Nodal Center for Self-reliance). They motivate, coordinate, organize and work with villagers in all spheres of life. SSDs report themselves to 'Supervisors'/'In charge' of their respective districts. These Supervisors are responsible for the successful implementation of the SSD scheme in their respective districts. These Supervisors report themselves to 'Senior Supervisor'. The Senior Supervisor reports directly to the Secretary of the Institute.

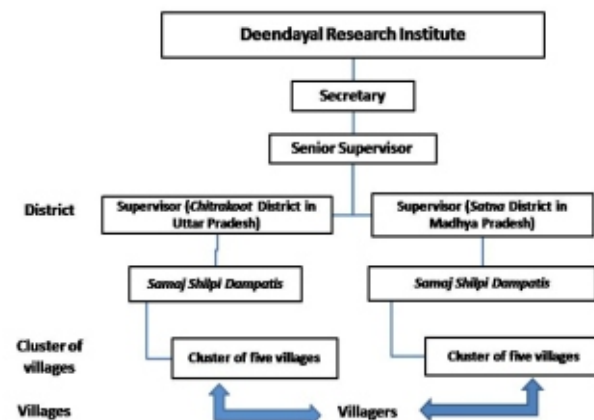


Figure 1: Organizational structure of Samaj Shilpi Dampati scheme

SSDs live and work with villagers in all aspects of their day-to-day life. There is no aspect of village life that has not been covered under the scheme. Though SSDs have a set fixed target to be accomplished for each month, they have enough scope and provision for flexibility in their work. They provide tuition to children; teach them songs, playing music instruments and conduct sports and games events for them. They conduct village survey and identify below poverty line (BPL) families, persons with ill-health, school dropouts and unemployed. They assist BPL families by securing services of KVK, Udyamita Vidyapith in their skill development, training, employment and self employment opportunities. People with ill health are provided basic medicines through Dadima ki Batua, a kit of about 35 ayurvedic medicines for general ailments. Some of the patients suffering from chronic diseases were provided medical treatment and hospitalization in Arogyadham. School dropouts are sent back to schools by convincing their parents the importance of education and by securing more income generating opportunities to their families. Unemployed youth are given training at KVK or Udyamita Vidyapith for self-employment. Watershed programs covering entire village have been implemented successfully with the cooperation of villagers in many villages.

SSDs also identify disputes in the villages. They meet two parties separately and convince them the advantage of solving the disputes at the village itself amicably than wasting time, resources and energy at legal courts. Once both parties agree, they conduct meeting(s) involving both the parties in the presence of a person who is credible in the eyes of both the parties. The dispute is solved through negotiations and arriving at mutually agreed upon terms. In some cases, where SSDs could not convince the parties, the intervention by Supervisors or Senior Supervisors or other functionaries from the Institute (Incharge of Ram Darshan) as third party has yielded wonderful results, since villagers in this region have great regard and credibility towards DRI and its functionaries.

SSDs organize many social and entertainment events for the villagers. The practices of celebrating festivals and social ceremonies in communities, arranging community feasts where people from all castes sit together for lunch or dinner are also promoted. The values of equality, brotherhood, love and respect for each other and feeling of togetherness and belongingness among villagers are promoted in each and every act of SSDs. They mobilize and organize villagers for community works which need villagers' cooperation like constructing approach roads connecting the village to main road/town, conducting

awareness campaigns on various pertinent issues of health and hygiene, education, etc.

Every month a meeting is conducted at village level for four to five SSD couples at a time by the supervisor of that district. The progress of previous work plan is evaluated, constraints and complaints from SSDs in implementing the scheme are heard, and solutions sought and are implemented.

Bimonthly meetings are conducted at KVK, Ganivan in Uttar Pradesh and KVK, Majhagawan in Madhya Pradesh for SSDs working in respective districts. Senior Supervisor chairs these meetings. The progress of ongoing work plan is evaluated. Work plan for the next two months is discussed, prepared and presented. The coordination required from various units of DRI for skill upgradation, training, etc. are discussed and included in the work plan for implementation in next two months.

Six-monthly meeting is conducted for all SSDs at KVK, Ganivan. Performance of each SSD is evaluated. Work plans are prepared. Various sessions to monitor the implementation of each component of the scheme are chaired by heads/ officer-in-charge of each unit responsible for the component. Officials in-charge of KVKs, Udyamita Vidyapith, Educational Research Center (ERC) etc. chair these sessions. The Secretary and Organizing Secretary of DRI will preside over various sessions of the meetings. This meeting lasts for three days.

II) Impact of the ssd scheme on rural development

The extent of achievement of targets set under various components of VSRC in five selected villages is provided in table 1.

There were 76 to 163 families which were below poverty line (BPL) in the selected villages before intervention. The scheme had so much impact on the beneficiaries that 87 to 97 per cent of the BPL families came out of BPL category in the study villages. The reasons were the adoption of 1.5 acres and 2.5 acres cropping system models, improved practices of crop and animal husbandry, skill development etc. that raised annual incomes of the farmer respondents. Large scale watershed development programmes were also undertaken by Krishi Vigyan Kendras of DRI with the coordination of District Rural Development Agencies (DRI, 2002).

The number of unemployed ranged from 47 to 89 in the five villages before intervention. The performance of the scheme in converting unemployed into employed

ones was to the extent of 87 to 100 per cent in the study villages. This was because of income generating options created and provided to rural youth by the scheme through training, skill upgradation, development of self help groups, diversification of agriculture and self-employment opportunities. The impact was visible in terms of increase in number of days employed, number of days employed in off-season and number of eligible family members engaged in income earning activities.

Table 1: Performance of the Samaj Shilpi Dampati scheme on its five components of Village Self-Reliance Campaign

Village	Below Poverty Line (Number of families)		Employment Generation (Number of individuals)		Education (Number of individuals)		Health (Number of individuals)		Disputes Reduction (Number)	
	Target	Achievement	Target	Achievement	Target	Achievement	Target	Achievement	Target	Achievement
Narayanpur	163	142 (87)	47	47 (100)	10	10 (100)	41	39 (96)	10	5 (50)
Ranipur khaki	76	70 (92)	54	53 (98)	151	151 (100)	46	44 (96)	13	10 (76)
Bunihari	79	71 (89)	28	27 (96)	46	46 (100)	25	24 (96)	24	8 (33)
Kanhaipur	88	86 (97)	89	87 (98)	160	160 (100)	44	42 (95)	7	5 (71)
Dhaan	114	109 (95)	48	44 (92)	88	88 (100)	59	55 (93)	11	9 (82)

Note: The figures in parenthesis under all columns represent achievement against target in per cent values.

The number of adults who were illiterate ranged from 10 to 160 in the five study villages. Since education is the front-line programme of the SSD scheme of DRI, the results were 100 percent. No one in the village was left illiterate. The cent-percent performance of the scheme with respect to education component was because of informal education for adult literacy classes. SSDs also provided regular tuition for children in the villages. School dropouts were made to attend schools again.

The number of patients in the village before intervention ranged from 25 to 59. The performance of the scheme on health component was to the extent of 93 to 96 per cent. It showed that 93 to 96 per cent of patients got completely cured either through 'Dadima ki Batua', a kit containing 35 ayurvedic medicines or Ayurvedic and Naturopathic treatment at Arogyadham, a hospital complex with state-of-the-art facilities. One of the key components of SSD scheme was to make the villages litigation-free by solving disputes in the village itself, thereby enhancing the congenial atmosphere and friendly cordial relations among villagers. The performance in this component ranged from 33 to 82 per cent. In three villages the percent of target achievement was more than 70 percent, while in two villages it was below 50 per cent. Some of the disputes in the villages were quite complex

and difficult to solve.

DRI is a unique institution developing and implementing a village development model which is most suited for India. DRI understand that people's power is more potent, stable and enduring than political power (Kalam, 2005a, Kalam 2005b, Kalam, 2005c). I witnessed one of the villages called Patni where the institute has promoted sustainable development based on indigenous and traditional technology, field studies facilitates the development of replicable and tangible model for achieving self-reliance in villages. The programme aims at income generation through value addition, innovative agricultural practices, inculcating scientific temper among the villagers, improvement of health and hygiene, striving towards 100 per cent literacy. Apart from all these development activities, the institute is facilitating a cohesive conflict free society. As a result of this I understand that the eighty villages around Chitrakoot are almost litigation free. The villagers have unanimously decided that no dispute will find its way to court. The reason given by Nana Deshmukhji is that if the people fight among each other they have no time for development. They can neither develop themselves nor the community. This message has been understood by the society and they have decided not to embark on any fighting. All these have been accomplished through DRIs 'Samaj Shilpi Dampati' (a graduate married couple) a new concept of counseling and intervention promoted by DRI (Kalam, 2005a, Kalam 2005b, Kalam, 2005c).

CONCLUSION

DRI established in 1969 kept on experimenting with various models of rural development. In 1992, it came out with the concept of Samaj Shilpi Dampati scheme (SSD). The institution of SSD helped DRI to reach both men and womenfolk in the villages. The work of SSDs covered all aspects of rural development. The scheme has achieved a very high degree of success in each component of rural development. More than 85 per cent of the families shifted from below poverty line category to above poverty line category. The success was cent per cent in case of education component (functional literacy); 90 per cent in case of employment generation and health component. Performance of success varied from 50 to 82 per cent in case of making villages dispute free. The SSD scheme was found to be cost-effective, efficient and worked for the integrated development of villages. This indigenous concept of rural development needs to be considered for upscaling in other parts of the country. Factors essential for upscaling have to be considered and suitable strategies needed for the same have to be devised. The model holds a

great hope for government departments, NGOs and voluntary organizations working at grassroots level.

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