2018

Baseline evaluation of Project Mesha in Bihar: Factsheet results 2017-2018

Population Council

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Aga Khan Foundation is implementing 'Project Mesha', a community-based program to develop the potential of goat farming among women goat rearers in four blocks of Muzaffarpur district of Bihar. The aim of the project is to increase the income and empowerment of women goat rearers through the implementation of Project Mesha in JEEViKA—run self-help groups (SHGs).

The Population Council conducted the baseline evaluation survey at the end of 2017 among women who were the primary decision makers in the rearing of goats. Women were interviewed across two study geographies – blocks where Mesha project will be implemented and blocks where Mesha project will not be implemented. From each area, women who were SHG members and non-members were interviewed. The findings are based on responses from two groups of women (a) women who are primary goat rearers henceforth referred to as regular women (RW), and (b) women who've given birth in the last two years and are also the primary goat rearers, henceforth referred to as eligible women (EW). The indicators¹ below include basic socio-demographic characteristics and profile of the households. Indicators around ownership of goats, along with goat morbidity and mortality have been captured from household interviews. Women's own income, their contribution to household income as well as income from the sale of goats is recorded. Empowerment of women is measured through their role and decision-making around goat rearing, income and productive resources, access to resources, decision-making around production and income generation, access to productive capital, access to credit, freedom in mobility, self-confidence, financial empowerment and inclusion, and group membership.

Goat morbidity and mortality rates are high: In the Mesha and non-Mesha areas, goat morbidity and mortality are high. This can be explained by lower vaccination and deworming rates. Hence, the role of pashu sakhis is vital.

Loan taking for goat or cattle rearing is low: Around 60% of women have taken a loan. However, loan taken for goat or cattle rearing is substantially low. Women in the intervention area can be encouraged to utilize loans for initiating enterprises on rearing of small ruminants.

Goat rearing supports income generation: Yearly income generated from small ruminants is significantly higher when households have higher number of goats and when women negotiate the sale of goats. Currently, about 40% of women negotiate the sale of goats, and the intervention can improve women's negotiation skills.

Individual empowerment is low across all women: Women have limited autonomy within their families, be it decision making, freedom in mobility or access to productive capital. However, self-confidence, especially among SHG members was higher and can be capitalized on.

Socio-demographics

- Average age of women goat rearers is 38 years, more than two-thirds have no schooling and one in every four women are currently working.
- The reported monthly income of working women is about Rs.1000.
- Majority of respondents are Hindu, and from other backward class.
- About half of the goat rearer households in the Mesha area are in the lowest/lower socio-economic strata.
- More than 50% of families are nuclear, and about 1 in every 5 women's husband is a migrant.

Women in age group 15 - 24 yrs (%)

Average age of women, in yrs

Currently working (%)

Educational status (%)

Average monthly income (₹)

Husband is a migrant (%)

Household profile

Religious status as Hindu (%)

Socially marginalized (%)

Nuclear family structure (%)

Lowest / lower wealth quintile (%)

SHG member from Mesha blocks (N=370)

Non member from Mesha blocks (N=223)

SHG member from non - Mesha blocks (N=294)

Non member from non - Mesha blocks (N=238)

- Less than 25% of households in the Mesha area and about 50% in the non-Mesha area have improved sanitation. Use of clean fuel for cooking is remarkably low.
- Goat mortality is high. Herd size as well as goat morbidity are significantly higher in Mesha areas than non-Mesha areas.
- Very few women received training on goat rearing. A very small proportion of women can recognize signs of goat morbidity. The intervention could focus on recognizing early signs of morbidity.

Household profile

Households with electricity (%)	88.4	91.0	95.6	98.3
Households using clean fuel for cooking ² (%)	17.6*	8.1	20.1	23.1
Households with improved sanitation - utilization of latrines or toilets ³ (%)	23.5	21.1	44.9*	60.1
Households with improved drinking water source ⁴ (%)	97.6	99.6	92.5	93.7
Households with Rastriya Suraksha Bima Yojana (RSBY) card (%)	2.7*	6.3	4.1	6.3
Households with Rural Employment Guarantee Scheme (MNREGA) (%)	28.9	24.7	31.3*	20.6

Goat ownership, mortality and morbidity⁵

- Goats in SHG households from Mesha blocks (N=9,157)
- Goats in non-SHG households from Mesha blocks (N=1,003)
- Goats in SHG households from non-Mesha blocks (N=4,528)
- Goats in non-SHG households from non-Mesha blocks (N=1,299)

Households have been involved in goat rearing at any time in the past one year (%)

Goat rearing, income and productive resources

- Yearly income from goat rearing is higher in the Mesha area (~Rs.1170) than non-Mesha area (~Rs.840).
- Access to schemes such as take home ration and use of Antyodaya Yojna are low, while 50-80% women access Integrated Child Development Services (ICDS) and Public Distribution System (PDS).
- Overall, a low proportion of women have decision making power on purchasing livestock/livelihood activities, selling of products from livelihood activities, taking loan, expenditure on own/child's health and major household expenditures.

Goat rearing, income and productive resources

Access to schemes

Decision making

Women who self decide on	SHG member from Mesha blocks	Non member from Mesha blocks	SHG member from non-Mesha blocks	Non member from non-Mesha blocks
Use of contraception (%)	21.0	22.1	24.5*	16.8
Purchase livestock or other livelihood activities (%)	30.5	33.9	29.9	26.1
Selling of products resulting from livelihood activities (%)	17.0	16.7	17.3	11.1
Expenditure on own health (%)	26.6	26.7	30.3	23.1
Expenditure on children's health (%)	30.1	29.0	33.4*	23.3
Taking loan from any source (%)	18.6	13.4	20.1	14.1
Food crop farming (%)	16.6	20.6	15.7	7.7
Cash crop farming (%)	13.0	16.6	14.0	15.0
Livestock raising (%)	50.5	59.7	53.4	55.8
Non-farming economic activity (%)	17.0	16.7	17.3	11.1
Major household expenditures (%)	13.7	13.1	13.4	12.0
Minor household expenditures (%)	50.8	52.2	56.2*	45.9

SHG member from Mesha blocks (N=370)

Non member from Mesha blocks (N=223)

SHG member from non-Mesha blocks (N=294)

Non member from non-Mesha blocks (N=238)

- Less than 20% of women make their own decisions to use money from formal/informal lenders or friends/relatives or informal savings group.
- Women's mobility is also restricted; about 60–80% women require permission to step out of their homes. Mobility is a critical requirement for women rearing goats to access producer groups and markets.

Inputs provided in most or all decisions for/ on				
Food crop farming (%)	34.5	38.4	32.7	23.4
Cash crop farming (%)	25.7	30.1	23.9	27.3
Livestock raising (%)	53.9	63.4	59.7	61.2
Non - farm economic activity (%)	24.1	25.6	25.1	20.8
Major household expenditures (%)	20.9	27.6	24.4	25.6
Minor household expenditures (%)	52.6	58.7	56.2	52.4
Use of income from food crop farming (%)	32.0	37.0	31.9	22.4
Use of income from cash crop farming (%)	21.2	25.4	21.0	24.6
Use of income from livestock raising (%)	47.5	51.9	48.8	48.4
Use of income from non-farm economic activities (%)	20.3	28.4	24.6	20.3

Decision making

Mobility

Women who do not need permission for

- About half the women reported having self-confidence in sharing information and speaking to people of authority.
- A quarter of women report having their own source of income. About half can decide how to spend their self-earned money.

Self confidence

Financial empowerment and inclusion

	SHG member from Mesha blocks (N=370)	Non member from Mesha blocks (N=223)	SHG member from non-Mesha blocks (N=294)	Non member from non-Mesha blocks (N=238)
Women are involved in major household economic decisions (%)	25.9	33.1	27.4	25.8
Women contribute in household income (%)	21.8	27.4	19.2	19.2
Women have control over how to spend self-earned money (%)	48.6	45.0	50.5	45.2
Women have their own source of income (cash or kind) (%)	25.7*	33.5	26.2	24.3
Women save weekly in the group (%)	97.8	-	99.3	-
Women own and operate bank account (%)	78.5	79.2	86.6*	65.6
Women have taken loan from formal institutions in last 12 months (%)	50.4*	4.7	66.8*	5.2
Women have taken loan from informal sources in last 12 months (%)	33.0	37.2	26.3	22.3
Women have taken loan from SHG in last 12 months (%)	45.7	-	60.9	-
Women have money that they can decide on their own on how to use (%)	80.7	80.8	81.1*	71.2

	SHG member from Mesha blocks (N=370)	Non member from Mesha blocks (N=223)	SHG member from non-Mesha blocks (N=294)	Non member from non-Mesha blocks (N=238)
Women solely own				
Agricultural land (%)	10.4	11.8	12.8	9.3
Other land (%)	10.0	5.5	7.0	7.8
Large livestock (%)	20.3	15.5	22.4*	13.9
Small livestock (%)	52.0	53.1	59.6	58.3
Chickens, ducks, pigeons (%)	1.5	3.2	3.3*	12.4
Farm equipment (non-mechanized) (%)	6.4	8.0	8.3	4.3
Farm equipment (mechanized) (%)	0.0	0.0	4.2	2.3
Non-farm business equipment (%)	4.2	3.9	2.3	3.2
House or other structures (%)	32.5	32.2	32.5	39.2
Large consumer durables (%)	6.8	7.8	18.4	18.4
Small consumer durables (%)	27.3*	18.6	24.7	30.2
Cell phone (%)	49.5	43.0	53.2	51.5
Means of transportation (%)	29.7	28.1	27.6	34.6
Women are an active member of				
Credit or microfinance group (%)	40.1*	2.2	33.9*	0.8
A religious group (%)	4.0	2.8	7.1	3.0

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The Population Council confronts critical health and development issues – from stopping the spread of HIV to improving reproductive health and ensuring that young people lead full and productive lives. Through biomedical, social science, and public health research in 50 countries, we work with our partners to deliver solutions that lead to more effective policies, programs, and technologies that improve lives around the world. Established in 1952 and headquartered in New York, the Council is a nongovernmental, non-profit organization governed by an international board of trustees.

The Population Council conducts research and delivers solutions that improve lives around the world. Big ideas supported by evidence: It's our model for global change.

For additional copies, please contact:

Population Council
Zone 5A, Ground Floor
India Habitat Centre, Lodi Road
New Delhi, India 110 003
Phone: 91 -11-24642901
Email: info.india@popcouncil.org
Website: www.popcouncil.org

Footnotes

1. All indicators are presented in percentages, unless and otherwise specified. Estimates for all the indicators, except the sociodemographic and household profile, are adjusted for women's education, religion, caste and wealth quintile, considering non-member as the reference category in the multivariate regression analysis run separately for the Mesha and non-Mesha areas.
2. Clean fuel for cooking includes electricity, LPG/ natural gas and biogas.
3. Flushed to pipe sewer system, flushed to septic tank, flushed to pit latrine, ventilated improved pit/ biogas pit latrine, latrine with slab, twin pit/composting toilet which are not shared with any other household.
4. Piped water into dwelling/ yard/ plot, public tap/ stand-pipe, tube well or borehole, protected dug well, protected spring, rainwater, community RO plant.
5. Indicators are based on information from house-listing data.
6. Based on information from household schedule.
7. Village health, sanitation and nutrition day.
8. *refers to $p\text{-value} < 0.05$ while comparing the proportions of SHG households with non-SHG households, for each indicator, within Mesha and non-Mesha areas separately.

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