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Comparative Analysis of Quality of Life among BPL Families in Rural Haryana: A case Study

Dr.P.K.Malik*

Abstract: *Though green revolution and implementation of various integrated rural area development programme are mainly indicating towards rural development & improvement in socio-economic condition of the rural areas. As Integrated Rural Development Programmes generally refers to the process of improving the quality of life(QOL) and the economic well being of people living in rural areas but it is also bitter fact that poverty is growing at a faster pace in rural areas. In India 68.84 percent population (2011 census) belongs to rural areas, which are typically lack basic health and hygienic condition/services. So, the Analysis of the quality of life of rural population specifically socially & economically down trodden section of the society lying Below Poverty Line (BPL) families to understand the pathetic picture of life in rural areas is an utmost need of the hour. Social Problems, disparities, wellbeing and quality of life are the new domains of geographic study in this post modern era. The quality of life studies are also becoming more relevant for inclusive development of society and country. The present study is based on primary survey of 304 BPL households of 4 different villages (Sidhrawali, Rathiwas from Gurgaon District and Garhi Alawalpur and Kapdiwas of Rewari District) of Haryana. This paper is an attempt to determine the quality of life statistically in BPL families of rural areas. The study area was selected by keeping in mind proximity, size and feasibility to carry out survey in best possible way. For determining the Quality of life in BPL families of rural Haryana Composite Index and Standard Deviation Technique has been used. To calculate the composite index primarily 16 variables were chosen to determine Quality of life. The paper also attempts to briefly compare the condition of BPL families with India Vision 2020 and suggest some measures of inclusive development and planning to improve quality of life in BPL families of rural areas.*

Introduction: Though the formulation and implementation of various Integrated Rural Area Development plans is an indicator of development process, but it is also a bitter fact that poverty is relatively growing faster in BPL families of rural areas. In India 68.84 Percent population belongs to rural areas, which are typically lack basic health and hygienic condition/services. One of the targets set by world's leaders in 2000 was to improve significantly the lives of rural population by 2020. The National Rural Health Mission (2005-2012) was launched by the Government of India in 2005-06 to provide effective health care to rural population in the country. The primary focus of the mission is to improve access of rural people, especially women and children, to equitable and affordable primary health care facilities. The situation in rural areas has not improved at up to mark in quality parameters and the overall condition of BPL families

relatively worsens in rural areas. The BPL families comparatively portray a pathetic picture of life in rural areas. The ultimate objective of all planning and even human living is to improve Quality of life and the resultant enduring happiness peace or contentment of population. Social Problems, disparities, wellbeing and quality of life are the new domains of geographic study in this post modern era. The quality of life studies are also becoming more relevant for inclusive development of society and country."The soul of India lives in its villages", declared M. K. Gandhi at the beginning of 20th century. According to the 2011 census of India, 68.84% of Indians (around 833.1 million people) live in 640,867 different villages which have decreased from 72.2 percent in 2001. It is expected to decrease about 60 % by the year 2050. But the striking question is that total volume of population in rural areas is growing. So the volume of Below Poverty Line Population which is an economic benchmark and poverty threshold used by the government of India to indicate economic disadvantage and to identify individuals and households in need of government assistance and aid is also upward trend. It is determined using various parameters which vary from state to state and within states.

Need & Justification: The regional variation in India has widened, especially during the 1990s (Shand & Bhide 2000). The National Human Development Report 2001 for India (2002) reveals vast differences in human development and poverty between the States of India, at the state level, there are wide disparities in the level of human development. The disparities amongst the States with respect to human poverty are quite striking. Socio-economic disparities across the regions and intra-regional disparities among different segments of the society have been the major plank for adopting planning process in India since independence (NHDR 2002).. It is well known that in a large economy, different regions with different resource bases and endowments would have a dissimilar growth path over time (Bhattacharya and Sakthivel, 2004). Regional variation in India is now a matter of serious concern (Ghosh, 2008).

Author Correspondence

Dr.P.K.Malik

Assistant Professor in Geography,
Government College Sidhrawali,
District Gurgaon -Haryana

The study has been selected keeping in mind proximity and feasibility constraint in conduct of field survey. The study area lies in sub-urban area & is under transformation phase from agriculture to industrial activities.

Four villages have been selected to represent the best possible Socio-economic condition of the study area under transformation. Weaker section of the society specifically lack behind in pacing adaption to socio–economic makeover in respect developmental parameters. (MalikP.K.2014). Thus quality of life comparatively depreciates among such societies. In Developing countries disproportionate growth of population and health & hygiene facilities negatively have an effect on the quality of life among BPL families. Hence four best representative villages in reverence of socio-economic condition have been chosen to be aware of the enormity of the quality of life among BPL families. Though the percentage of BPL household and population decreased but in absolute figure it has increased.(Table-1)It reflects that the quality of life among BPL families has exasperated with passing time. So there is an imperative call for to study, investigate the quality of life parameter and find out the practicable elucidation to get better the quality of life among BPL Families. The study is based on primary survey of 304 BPL households of four different villages (Sidhrawali, Rathwas,Kapdiwas and Garhi Alawalpur) of Gurgaon and Rewari Disrict of Haryana. This paper is an attempt to analyse the quality of life parameter among BPl families.The magnitude of BPL population in rural areas has increased from about 14.0 percent to 24.95 percent in Haryana.

Objective: The study was undertaken with following objectives:

1.To study the Quality of life among BPL Families.
2. To determine and examine the quality of life of BPL families of different villages.
3.To compare the quality of life of BPL families in different villages.
4.To suggest inclusive measures to rural planning for improvement of Quality of life of BPL families.

Data and Methodology: In this study 304 BPL families have been covered from four villages purposively selected from Gurgaon and Rewari district of Haryana (Table-1&2). A household is developed by defining as a group of persons who usually live together and take food from common kitchen. In the present study an attempt has been made to present a brief description of quality of life among BPL families. Data collection was carried out from January 2015 to March 2015.Both secondary and primary data have been collected in order to fulfil the objective of present study. The main source of secondary data is the census publication and district rural development authority Rewari and Gurgaon. Primary, data are collected through an interview schedule by field survey of 304 BPL households of four different villages (Sidhrawali, Rathiwas from Gurgaon District and Garhi Alawalpur and Kapdiwas of Rewari District) of Haryana(Annexure-1). .Sample survey of BPL families from four purposively selected villages comprising 76 households from sidhrawli village,95 from Rathiwas village,59 from Gahi village and 74 from Kapdiwas village respectively was carried out .For determining the quality of life among BPL families composite Index and Standard Deviation Technique (Bracy, 1952, R.L. Singh and Rana

P.B.,Singh,1979)have been used. To calculate the composite index 16 variables were chosen to determine quality of life. Statistically each variable was powered with X1, X2; etc. Reasonable weightage was assigned to each variable. Composite Score of all variable are taken as X value and mean value is calculated. After that Standard Deviation value is calculated. The quality of life under deviation is grouped and finally comparative analysis is done to show quality of life in different villages.

Table-1

BPL Families in Four Different Selected Villages of the Study Area

Sr.No.	Village	District	No. of Households	No. of BPL Households	Population	Average Households Size in Sq. Km.	Average Density of Household
1	Sidhrawali	Gurgaon	1073	76	5506	78.95	6.55
2	Rathiwas	Gurgaon	600	95	3502	72.79	6.10
3	Garhi Alawalpur	Rewari	429	59	2170	69.90	7.42
4	Kapdiwas	Rewari	538	74	2722	75.93	6.05

Source : Field Survey

Table-2

BPL households in the study area(2011)

Sr.No.	**Name**	**Percentage of BPL Families**
1	**Gurgaon District**	**21.42**
2	**Rewari District**	**22.52**
3	**Haryana**	**24.95**

Source: District Rural Development Authority

The Study Area: The study area includes four different villages (Sidhrawali, Rathiwas from Gurgaon District and Garhi Alawalpur and Kapdiwas of Rewari District of Haryana. Sidhrawali is a Yadav dominated while Rathiwas is a Jat dominated village in Pataudi Mandal in Gurgaon District . Sidhrawali is educationally better off than the other villages of the study area .It has fairly well developed facilities for education up to the college and B.Ed level. Kaspdiwas is yadav dominated and Garhi Alawalpur is Jat dominated village of Dharuhera Tehsil of Rewari District which has marginal concentration of industrial labourers in the village. In the study areas agricultural activities has been largely affected by the industrial sprawl. Sidhrawali and Kapdiwas villages are situated at National Highway no.8 while Rathiwas and Garhi Alawalpur Alawalpur are located about 1.5 to 2.0 Kilometre on approach road from National Highway No.8(Table-2).

Table-3

Location of Villages

Sr.No.	Name of Village	District	Latitude	Longitude
1	Sidhrawali	Gurgaon	28°15'48"N	76°49'49"E
2	Rathiwas	Gurgaon	28°16'06"N	76°50'51"E
3	Kapdiwas	Rewari	28°14'36"N	76°48'39"E
4	Garhi Alawalpur	Rewari	28°13'12"N	76°48'45"E

Source: Census of India 2011

Table-4
Selected Variables for Quality of Life in Below Poverty Line (BPL) and their X Values

Variables	Quality Parameter	Indicator	Weight age Value	Study area														
				Sidhrawali			Rathiwas			Garhi Alawalpur			Kapdiwas			Total		
				No. of House hold	%of House hold	X Value	No. of House hold	%of House hold	X Value	No. of House hold	%of House hold	X Value	No. of House hold	%of House hold	X Value	No. of House hold	%of House hold	X Value
A	B	C	D	S-i	S-ii	S-iii	R-i	R-ii	R-iii	G-i	G-ii	G-iii	K-i	K-ii	K-iii	K-i	K-ii	K-iii
X1	Source of Light	Solar	3	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
		Electricity	2	73	96.05	1.92	82	82.32	1.73	56	94.91	1.90	71	95.95	1.92	282	92.76	1.86
		Kerosene	1	03	3.95	0.04	13	13.68	0.14	03	5.09	0.05	03	4.05	0.04	22	7.24	0.07
X2	Electric Gadget	AC	5	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
		Fridge	4	07	9.21	0.37	12	12.63	0.50	13	22.03	0.88	16	21.63	0.86	48	15.79	0,63
		Cooler	3	13	17.10	0.51	18	18.95	0.57	12	20.34	0.61	17	22.97	0.69	60	19.74	0.59
		Fan	2	55	72.37	1.45	60	63.16	1.26	34	57.63	1.15	38	51.35	1.03	187	61.51	1.23
		Nothing	1	01	1.32	0.01	05	5.56	0.05	00	00	00	03	4.05	0.04	09	2.96	0.03
X3	Electric	Yes	2	74	97.37	1.95	85	89.47	1.79	57	96.61	1.93	70	94.59	1.89	286	94.08	1.88

	Meter	No	1	02	2.63	0.03	10	10.53	0.10	02	3.39	0.03	04	5.41	0.05	18	5.92	0.03
X4	Fuel used for cooking	Solar Cooker	5	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
		LPG	4	26	34.21	1.37	21	22.10	0.88	19	32.20	1.29	41	55.40	2.21	107	35.20	1.41
		Electric Heater	3	02	2.63	0.08	00	00	00	03	5.08	0.15	04	5.41	0.16	09	2.96	0.09
		Kerosene Oil	2	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
		Firewood	1	48	63.16	0.63	74	77.90	0.78	37	62.71	0.63	29	39.19	0.39	188	61.84	0.62
X5	Source of drinking	Water Supply	3	68	89.48	2.68	92	96.84	2.90	01	1.69	0.05	74	100	3.00	235	77.30	2.32
		Hand Pump	2	04	5.26	0.11	03	3.16	0.06	56	94.92	1.90	00	00	00	63	20.72	0.41
		Well	1	04	5.26	0.05	00	00	00	02	3.39	0.03	00	00	00	06	1.97	0.02
X6	Housing Condition	Pucca	3	64	84.21	2.53	42	44.21	1.33	33	55.93	1.68	54	72.97	2.19	193	63.49	1.90
		Semi Pucca	2	09	11.84	0.24	46	48.42	0.97	18	30.51	0.61	14	18.92	0.38	87	28.62	0.57
		Kuccha	1	03	3.95	0.04	07	7.37	0.07	08	13.56	0.14	06	8.11	0.08	24	7.89	0.08
X7	Sewage Disposal Facility:	Sewer	3	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
		Pit	2	00	00	00	00	00	00	00	00	00	05	6.76	0.14	05	1.64	0.03
		Open	1	76	100	1.00	95	100	1.00	59	100	1.00	69	93.24	0.93	299	98.36	0.98
				Sidhrawali			Rathiwas			Garhi Alawalpur			Kapdiwas			Total		
A	B	C	D	S-i	S-ii	S-iii	R-i	R-ii	R-iii	G-i	G-ii	G-iii	K-i	K-ii	K-iii	K-i	K-ii	K-iii
X8	Place of Child Delivery:	Govt.Hospital	3	31	40.79	1.22	49	51.58	1.54	18	30.51	0.91	36	48.65	1.46	134	44.08	1.32
		Private Hospital	2	25	32.89	0.66	23	24.21	0.48	18	30.51	0.61	22	29.73	0.59	88	28.95	0.58
		Any other(At home)	1	20	26.32	0.26	23	24.21	0.24	23	38.98	0.39	16	21.62	0.22	82	26.97	0.27
X9	Place of Waste Dumping	Fixed by MC/ Panchayat	4	00	00	00	57	60.0	2.4	21	35.59	1.42	03	4.05	0.16	81	26.64	1.07
		On some family fixed place	3	00	00	00	09	9.47	0.28	28	47.46	1.42	01	1.35	0.04	38	12.5	0.37
		On Road or Street	2	76	100	2.00	07	7.37	0.15	10	16.95	0.34	58	78.38	1.57	151	49.67	0.99

		Near water bodies	1	00	00	00	22	23.16	0.23	00	00	00	12	16.22	0.16	34	11.18	0.11
X10	Medical Facility	Govt. Hospital/CHC/PHC	3	29	38.16	1.15	42	44.21	1.33	35	59.32	1.78	50	67.57	2.03	156	51.32	1.54
		Private Clinic	2	37	48.68	0.97	36	37.89	0.76	24	40.68	0.81	24	32.43	0.65	121	39.80	0.80
		Traditional Practicenor	1	10	13.16	0.13	17	17.90	0.18	00	00	00	00	00	00	27	8.88	0.09
X11	Ration card	Yellow card	3	62	81.58	2.45	87	91.58	2.75	49	83.05	2.49	53	71.62	2.15	251	82.57	2.47
		Pink Card	2	11	14.47	0.29	08	8.42	0.17	08	13.56	0.27	16	21.62	0.43	43	14.14	0.28
		Without Card	1	03	3.95	0.04	00	00	00	02	3.39	0.03	05	6.76	0.07	10	3.29	0.03
X12	Literacy	Literate	2	40	52.63	1.05	44	46.32	0.93	27	45.76	0.91	36	66.21	1.32	147	48.35	0.97
		Illiterate	1	36	47.37	0.47	51	53.68	0.54	32	54.24	0.54	38	53.35	0.51	157	51.64	0.52
X13	Female Literacy	Literate	2	21	27.63	0.55	22	23.16	0.46	13	22.03	0.44	20	27.03	0.54	76	25.0	0.5
		Illiterate	1	55	72.37	0.72	73	76.84	0.77	46	77.97	0.78	54	72.97	0.73	228	75.0	0.95
				Sidhrawali			Rathiwas			Garhi Alawalpur			Kapdiwas			Total		
A	B	C	D	S-i	S-ii	S-iii	R-i	R-ii	R-iii	G-i	G-ii	G-iii	K-i	K-ii	K-iii	K-i	K-ii	K-iii
X14	Drinks/drug/smoking	NIL	4	16	21.05	0.84	24	25.26	1.01	11	18.64	0.75	19	25.68	1.03	70	23.03	0.92
		Smoking	3	42	55.26	1.66	61	64.21	1.93	38	64.11	1.93	38	51.35	1.54	179	58.88	1.77
		Drinks	2	15	19.74	0.39	10	10.53	0.21	09	15.25	0.30	16	21.62	0.43	50	16.45	0.33

		Drug	1	02	2.63	0.03	00	00	00	01	1.70	0.02	01	1.35	0.01	04	1.64	0.02
X15	Density of House	Low	3	11	14.47	0.43	10	10.53	0.32	05	8.47	0.25	19	25.68	0.77	45	14.80	0.44
		Medium	2	64	84.21	1.68	85	89.47	1.79	13	22.03	0.44	53	71.62	1.43	215	69.41	1.39
		High	1	01	1.32	0.01	04	4.21	0.04	41	69.50	0.69	02	2.70	0.03	48	15.79	0.16
X16	Height /Weight/ Age of a Child b/w 5-9 years.	Normal	4	09	11.84	0.47	13	13.68	0.55	06	10.17	0.41	11	14.86	0.59	39	12.83	0.51
		Mild (I-grade)	3	19	25.0	0.75	19	20.0	0.60	13	22.03	0.66	17	22.97	0.69	68	22.37	0.67
		Moderate(II-grade)	2	34	44.74	0.89	47	49.48	0.99	28	47.46	0.95	30	40.54	0.81	139	45.72	0.91
		Severe(III-grade	1	14	18.42	0.18	16	16.84	0.17	12	20.34	0.20	16	21.63	0.22	58	19.08	0.19

Source: Field survey

Table-5

Auxiliary Variables for Quality of Life in Below Poverty Line (BPL)

Sr.No.	Miscellaneous Variables		Sidhrawali	Rathiwas	Garhi Alawalpur	Kapdiwas	Total
			76	95	59	74	304
1	Type of Family	i)Joint	40	33	23	31	127
		ii)Nuclear	36	62	36	43	177
2	Literacy Rate in percentage		47.37	61.05	54.24	66.21	57.22
3	Female Literacy in Percentage		50.00	45.26	38.98	36.49	42.68
4	Sex Ratio		832	824	813	803	818
5	Size of Family	i)Large -10 and above	02	01	07	02	12
		ii)Medium-6-9	27	25	27	17	96
		iii)Small 1-5	47	69	25	55	196
6	Percentage of people insightful to health and hygiene condition						
7	Percentage of people Gratified about present life surroundings	i)yes	82.89	81.05	74.58	95.95	83.62
		ii)no	17.11	18.95	25.42	04.05	16.38
8	Average monthly electricity bill in Rs./-owed		820/-	581.27/-	577.97/-	1340/-	829.81
9	Average no. of electric point per house		2.24	1.82	1.57	3..33	2.24
10	Percentage of Peoples Perceptive to wear Ironed Cloth		30%	0.23%	25%	32%	27.5
11	Distance of source of water in Km		-	-	-	0.57	0.14
12	Average Size of House in Sq.Yard		78.95	72.79	69.90	75.93	74.39
13	Average no. Of Rooms per household		1.65	1.91	1.79	2.64	2.0
14	Percentage of House type:	i)Modern	11	27.37	5.09	34.67	19.54
		ii)Traditional	89	72.63	94.91	65.33	80.46
15	Sewage disposal condition for	i)Average	44	15	34	02	95

	Households:	ii)Poor	32	78	25	74	209
19	No. 2/3wheelar Vehicle in Possession per household		6	09	14	22	51
20	Labour pain period in hours	Minimum	4.59	4.25	4.19	03.27	4.10
		Maximum	25.50	26.42	22.39	21.69	24
20	Any other						

Source: Field survey

Parameter of Quality of life: In the present study altogether 16 variables have been carefully chosen to determine the existing quality of life among BPL families of study area (Table-4&5).

1. **Source of Lighting(X1):** Electricity is considered as a parameter of measurement of development and quality of life. Regarding this parameter it is seen that 92.76 percent of sample households in the study area used electricity, while 7.24percent household used Kerosene as a source of lighting. But it is remarkable that 5.92 percent of the household had no electric connection.

2. Electric Gadget(X2): Electric gadget is one of the among numerous socio economic indicators to signifying the quality of life. Thus, possession of Electronic gadget is given due weight age in identification of quality of life among BPL Family. In the study area 15.79 percent have fridge, 19.74 percent cooler and 61.51 percent have fan facility in their house. 2.96 percent of households does not have any gadget.

3. Electric Meter(X3): Haryana has been declared 100 percent electrified state. But it is remarkable that in the study area 5.92 percent does not have electric connection. This reflects a tragic picture of BPL families in rural areas.

4. Fuel used for cooking(X4): Regardless to say that fuel used for cooking is a vital factor of the measurement of quality of life. It is observed that 35.20 percent households are using LPG for cooking, 2.96 electric heaters and a majority of households i.e. 61.84 percent households are using firewood and cow dung cakes as a fuel for cooking. It is pertinent to mention here that much of them have not got LPG connection they use the small cylinder of 2 and 4 kg.

5. Source of Drinking Water(X5): Safe and pure drinking water is basic need for life. The sample survey reveals that 22.72 percent of households use hand pump as source of water, 1.97 percent well, while only 77.30 percent house has access to piped water supplied by HJB or Local governing body (Panchayat) for drinking. The quality of hand pump water is not up to mark.

6. Housing Condition (X6): More than one billion people of the world live in derisory housing condition. The situation is most unpleasant in rural areas of developing countries. The type of houses basically depends upon the geographical environment as well as economic and social structure of the people.(Sahay,2006).In the study area 63.49 percent of sample households are pucca and 28.62 percent semi pucca and 7.89 percent kutcha.

7. **Sewage Disposal facility(X7):** Sanitation is not only significant for hale and hearty living but also ensuring a hygienic environment. The majority of sample households had poor sewage disposal facility. The stipulation of 98.36 percent family disposing their sewage in open is laying face down to mainly disagreeable disinfected surroundings .The poor sewage provision undoubtedly point towards the poor quality of life.

8. Place of Child Delivery (X8): It is explored that most village maternal deaths occur where women delivered their child at home. Follow-up of a group of pregnant women showed that abnormal labour is frequent. About 24% of women reported a labour that lasted longer than 24 hours. A poor knowledge means that women are less likely to use health services for delivery. So, communities should be encouraged and made responsive to use health facility when they are in family way. In the study area 26.97 percent are devoid of health facilities, which mirror poor quality of life among BPL families.

9. Place of waste dumping (X9): The jeopardy to human wellbeing are compounded in BPL families of selected villages, where garbage collection is missing in most cases and drainage tends to be poor. It grounds for encouragement of insects and other vector diseases intensification .The study area is deficient of adequate arrangement for discarding of domestic wastes. Only 39.14 percent household of the study area, make use of the place fixed by Panchayat for domestic waste dumping.

10. Medical Facilities(X10): Around 2/3 of the rural population in developing areas is anguish from some kind of ailments associated with inadequate stipulation of water and sanitation. There for medical facility is a significant stricture of dimension for quality of life. The 39.80 percent use private clinic 51.32 percent use govt hospital and rest 8.800 percent use traditional medical practicenor. The condition of Garhi Alawalpur and Kapdiwas is better than the other villages where more than 50percent population use government hospital services.

11. Ration Card(X11): Ration card is a significant indicator of poverty in India. Pink ration and yellow ration card holder are issued to the BPL families. The first priority of the government is to distribute ration card to the people. Hence, the officials should work tirelessly to meet the aspirations of the people. But some BPL families residing in rural areas do not have any kind of ration card. The reason for not getting any card is non awareness and lengthy procedure. In the study area 3.29Percent households are devoid of ration cards facility.

12. Literacy(X12): It has been observed that head of the house hold is key factor in decision making. Hence, literacy level of head of the house hold and head lady of house hold is taken into account. Due to wide spread poverty in the BPL families, illiteracy prevails and even it can be said that poverty exists because of illiteracy. Literacy is most significant indicator of socio-economic condition and quality of life. Literacy level is very low in Rathiwas and Garhi Alawalpur village comparative to Kapdiwas and Sidhrawali. which has better literacy than others.

13. Female literacy(X13): Female literacy is not only indicator of education but also status of women in society. The sample area had very poor female literacy. The sample survey shows 25 percent poor female literacy which indicates underprivileged state of women in BPL families of rural areas.

14. Drinking/Drug/Smoking (X14): Drinking/Drug/Smoking is positively correlated with health status. In the study area 3/4th population is addicted of one or other drinking/drug/smoking routine. Smoking is a normal exercise in the study area hence 58.88 percent of population is having smoking behaviour.

15**. Density of house(X15):** Density of house represents the proportion of total number of people to the size of 100 sq.yards area.It shows very scary picture of BPL families.14.80 percent families have low density, 69.41 medium densities and 15.79 percent family living in very high density of housing condition.

16. Height/Weight/Age/of Child of age between 5-9 years (X16): To understand the nutritional/health status of the selected households Height/Weight/Age/of Child of age between 5-9 years has been taken into consideration. It has been observed that 22.37percent households has Mild (1-Grade), 45.72 percent Moderate (II-Grade) and 19.08 Percent Severe (III-Grade) Malnutrition. Only 12.83 percent of household were identified with normal nutritional and health conditions. It shows that BPL families are deprived of quality of food.

Table-6

Composite Score of BPL Families

BPL	X1	X2	X3	X4	X5	X6	X7	X8	X9	X10	X11	X12	X13	X14	X15	X16	X	d	d^2
Sidhrawali	1.96	2.34	1.98	2.08	2.84	2.81	1.00	2.14	2.00	2.25	2.78	1.52	1.27	2.92	2.12	2.19	34.20	-0.57	0.325
Rathiwas	1.87	2.38	1.89	1.66	2.96	2.37	1.00	2.26	3.06	2.27	2.92	1.47	1.23	3.15	2.15	2.31	34.95	+0.18	0.032
Garhi Alawalpur	1.95	2.64	1.96	2.07	1.98	2.43	1.00	1.91	3.18	2.59	2.79	1.45	1.22	3.00	1.38	2.22	33.77	-1.00	1.000
Kapdiwas	1.96	2.62	1.94	2.76	3.0	2.64	1.07	2.27	1.93	2.68	2.65	1.82	1.27	3.01	2.23	2.31	36.16	+1.39	1.932
																	139.08		
																	$\sum X$ = 139.08		$\sum d^2$= 3.289
$\bar{X}=\sum X/N$		$d=X-\bar{X}$		$d^2=(X-\bar{X})$		$\sigma=\sqrt{\sum d^2/N}$													
$\bar{X}$=34.77		σ =0.907																	

Table-7

Levels of Quality of life among BPL Families

Sr.no.	Level of Quality of Life	Statistial Values	Composite Score	Name of Village
1	Good	To + 2	35.678- 36.584	Kapdiwas
2	Medium	To +	34.77- 35.677	Rathiwas
3	Poor	To -	33.863- 34.76	Sidhrawali
4	Very Poor	To - 2	32.956 -33.862	Garhi Alawalpur

Level of Quality of life: To conclude the quality of life, quantitative analysis of data has been done. Aggregates of all the variables have been taken into account. A composite score has been premeditated by adding up the total of all the variables for village wise BPL families (Table-6).The qualitative and quantitative processing is fully justified and four level of quality of life have emerged (Table-7). The BPL family of Kapdiwas village enjoys good quality of life and the condition of BPL families is better than BPL families of other villages selected for the study. The BPL famiies of Rathwas village have medium quality of life. The BPL families of Sidhrawali and Garhi Alawalpur Village

have poor to very poor condition of BPL families. The basic facilities are very poor for the BPL families of rural areas. The situation is worst in Garhi Alawalpur village. The medical facility and drinking water facility are very poor in the villages.

India Vision 2020 has set global and national level goals and targets for various Quality of Life parameters in rural areas. The vision document advocates for the widespread of primary education but study reveals that 48.35 % of population and 25% of female population are only literate in the study area which is far from the above mentioned goals. In the health sector, the goal of expansion of infrastructure for public health, improvement of maternal health, medical care to ensure health for all and also to combat HIV/AIDS, malaria and other diseases could not be achieved. In the study area only 51.32% household use govt. hospital, 39.80 % of private practitioner and 8.88% consult traditional practitioner .For child delivery 44.08percent household used Government Hospital and 28.95% used private hospital Facilities and 26.97 % household are subject to other traditional practices. The major cause of poor quality and non availability of resources is poverty. India vision 2020 advocates food and nutritional security to eradicate extreme poverty and hunger. The study reveals that 3.29% household are without ration card, consequently they are deprived of Government public distribution system (PDS). Population even with ration card is not satisfied with (PDS).87.17 percent of population is identified with mild to severe malnutrition and prone numerous deficiency diseases. India vision 2020 document advocates continuous expansion of the physical infrastructure and reversal of loss of environment resources to achieve social equity and environmental sustainability. But in the study area 39.14% household use place fixed village or family for waste dumping and 60.86% house hold dispose the waste on road or near pond.22.69 % household of sample villages use hand pump water and well for drinking .61.84 % house hold use fire wood/cow dung as source of energy for cooking and 7.24 % households are using Kerosene as source of light. This comparison of the status of BPL families with global and national goals portrays a pathetic picture. Thus we can say if we have to achieve these goals we have to understand the significance of problems related to BPL families. The BPL families problem need special attention not only for improving quality of life but also to achieve the target of India Vision 2020. "If societies do not deal with the problem of BPL families in constructive way they will deal with society in a destructive way". So it is very important to alleviate poverty and inclusive development of the society.

Conclusion: The study highlights that low and very low quality of life exists in the BPL Families. The housing, educational and medical facility is very poor. The lack of piped water supply in the study area leads to high dependence on ground water, the lack of proper waste disposal facility and poor sewage system lead in to pollution and health related problems and the level of disparity is related to the socio-economic setup of the study area .Though the quality of life is low in all sample areas but it varies from one to another .Therefore it is necessary to improve the socio economic condition, which may advance quality of life. In the study area most of the BPL families are aware of the anti poverty programmes but they fail to avail benefits because of lack of proper implementation. These programmes are generally transferred towards the undeserving people. So, there is need of strengthening the role of NGO and private sector in poverty alleviation, participatory planning, and other inclusive planning measures. Finally there is a need of holistic approach to understand the

above mentioned issues at grass root level. The future of humanity depends on how we deal problems and challenges of unequal social development.

References

B B Bhattacharya,S Sakthivel (2004) "Regional Growth and Disparity in India"Economic & Political Weekly, Vol. 39, Issue No. 10, 06 Mar, 2004

Ghosh, M. (2008). "Economic reforms, growth and regional divergence in India. Margin" Journal of Applied Economic Research, 2(3), 265–285.

Malik,P.K.(July 2014) " Socio Economic Profile and Nutritional Status of Mewatie Slum Dweller in Gurgoan City" International Journal of Economics, Law and Social Science ,Vol.1,issue 7,31-37.
Malik,P.K.(August 2014) "Causes and Consequences of Nutritional Deficiency Diseases in South Haryana " International Journal of Business Management & Social Sciences ,Vol.III,Issue 12(IV) ,41-48.

National Human Development Report (2001) "Planning Commission Government of India" March 2002.

Shand, R., & Bhide, S. (2000) " Sources of economic growth – regional dimensions of reforms" Economic and Political Weekly, 42, 3747–3757.

Singh, R.L. and Singh, Rana P.B. (1979): "Spatial Planning in Indian Perspective", N.G.S.I. Research Bulletin

Census of India, (2011), "Town Village Directory", http://www.censusindia.gov. in/2011census/censusdata2k11.aspx

Government of India (2002): "Report of the Committee on India Vision 2020. New Delhi: Government of India.

Government of India (2002): "National Human Development Report 2001". New Delhi: Government of India.

Government of India (2006): "Towards faster and more inclusive growth: An approach to the 11th Five Year Plan": 2007–2012. New Delhi: Government of India.

Mishra, R.N. and Sharma, Pawan kumar (2002): "Quality of life in human settlement-A case study of Jaisalmer District", Studies in Geography, Jaipur

Narayana, M. R. (2008): "Education, Human Development and Quality of Life: Measurement Issues and Implications for India", Published online: Springer Science+Business Media B.V. 2008

Sahay, Anuradha (2006): "Quality of life of slum dwellers: A case study of Bindtoli, Patna west", Annals of the National Association of geographers, India, Vol. XXVI (No. 2).

Singh, R.L. and Singh, Rana P.B. (1979): "Spatial Planning in Indian Perspective", N.G.S.I. Research Bulletin.

Sirgy, J., Michalos, A. C., Ferriss, A. L., Easterlin, R. A., Patrick, D., & Pavot, W. Transactions (2006): "The quality-of-life (QOL) research movement: Past, present, and future", Social Indicators Research, 76, 343–466.

Tripathi (2010): "Socio-Economic Status of Urban poor Living in Slums of Varanasi City", Bhootal Digdarshan (Earth Science Review), Vol. 1, No. 2, Bhaugolik Vikash Sodh Sansthan, Gorakhpur.

Annexure-1

Questionnaire

(Quality of life of BPL family) Sr.No.

1. Name of Head……H.No……Caste……..Village……..

2.Profile of the family 2.1Family Type/Joint/Nuclear

Sr.No.	Name	Relation with head	Age (Height/weight of 5-9 yr child)	Veg./Non.Veg.	Education	Occupation	Income/month	Expenditure	Balance

3.Source of Light:i.Solar iiElectricity iii. Keroscne Oil iv.any other

3.1. Number of electric gadgets:i.AC yes/no ii.Fridge yes/noiii.Cooler yes/noiv.Fanyes/no

3.2. Do you have electric meter yes/no3.3. How much is your monthly electricity billin Rs……..

3.4. How many electric point. 3.5.Do you use iron for cloth yes/no

4.Fuel used for cooking: i.Solar cooker,LPG,Electric heater,Kerosene oil,Firewood/cow dung/Any other

5.Source of drinking: WaterSupply/Hand Pump/Well/any other 5.2.Distance of source of water……..

6.Housing Condition:Pucca/ Semi Pucca/ Kuccha6.1 Size of House……6.2.Total no. Rooms……

6.3 .Storey's /Floor ……..6.4. No.of rooms floor wise:……6.5.House type: Modern/Traditional

7.Sewage DisposalFacility: Sewer/Pit/Open / any other 7.2 Sewage disposal condition: average /poor

8.Place of Waste Dumping: Area fixed by MC/Panchayat/on some family fixed place/on Road or Street/ near water bodies

9.Medical Facility: Govt.Hospital/CHC/PHC/ Private Clinic /Traditional Practionner

10. Literacy in %age 10.1.Female literacy in %age

11.Ration card: Yellow card/Red Card/Pink Card/Without Card
12.Sex Ratio:
13.Height /Weight/Age of a Child b/w 5-9 years.
14.Place of Child Delivery: Govt.Hospital/Private Hospital/Any other
15.Do you believe in small size Family? 15.1 How you manage small family?
16.Do you know about health and hygiene? 16.1. What kind practice to follow it.?
17.What is your opinion about drinks/drug/smoking:
18.Do you have any vehicle:
19.Are you happywith your present life:
20.Any comment: