Responsible Mica Initiative

Community Empowerment Program
Long-term Impact assessment report

improve

December 2025

EXECUTIVE SUMMARY: CEP's MAIN LONG-TERM IMPACTS

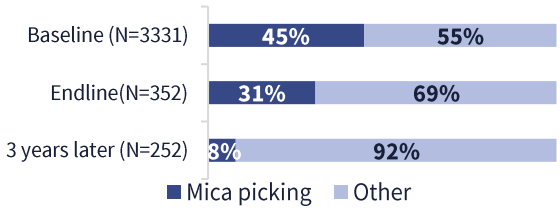
Social security

95% of households have been linked to at least one additional form of social security three years after the program, and 98% of them declare it has helped them reduce household expenses. The Jan Suvhida Kendras set up by the CEP to provide help with scheme access are still in use.

Livelihood

There is a steep **decrease of the proportion of households relying on mica picking as their primary source of income** (**8% three years after the end of the program** compared to 31% at endline and 45% at the baseline).

Primary means of livelihood at baseline, endline and three years later



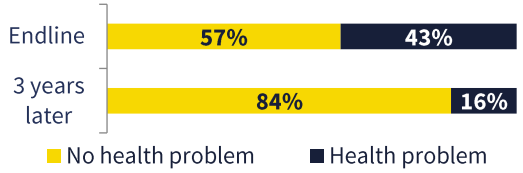
Moreover, **32% of households** who benefited from CEP trainings reported that **at least one member of the household is still earning an income thanks to the training** three years after the program. Assets provided have also helped with improving farming yields and setting up local businesses and shops. Levels of income have increased greatly compared to 2022.

Health and nutrition

61% of households who were assisted **by the CEP to grow their kitchen garden still maintain it** today.

Preventive health behaviours have been widely sustained: **almost all households retained at least one habit, and most maintained three or more.** Participation in health-related camps during the CEP is still strongly associated with adopting a higher number of preventive practices three years later. Additionally, **households increasingly use multiple healthcare providers**, first ones being private hospitals and Jhola chaap practitioners, while attendance at public facilities has declined. In the end, physical health has improved markedly since endline: the proportion of households reporting **health problems fell from 43% to 16%.**

Households that record health problem at the end of the program and 3 years later



Education

Engagement and school attendance have improved, with 95% of parents reporting that their children stay in school longer. The *Bal Manch* and sports or play activities and equipment appear to be important levers of success.
Furthermore, comparing literacy and numeracy levels in the CEP sample with the national average (ASER) **shows outstanding results for children in our study sample.**

The different pillars of the CEP contributed to enhancing households' resilience and life satisfaction on the long run. Parents do not show statistically significant differences in educational aspirations for their daughters and sons. **Child labour has decreased, from 4% to 2%**, and **the role of mica picking in child labour has sharply declined, from 58% to 18%.**
Local volunteers, teaching staff, village leaders and AWC workers reported in focus group discussions an overall shift in mentalities brought by the program, with a **stronger sense of community and cooperation towards improving lifestyles and maintaining program outcomes**. They also unanimously report a **shift in attitudes towards women**, who are more empowered by earning money thanks to trainings and assets provided by the CEP and who feel more confident to participate in community meetings and to speak up for their rights (domestic violence, menstrual health, etc.).

Introduction

Context

India is the world's largest source of mica, a mineral that is used in a wide range of industries. It is mined extensively in India's east state of Jharkhand where a variety of factors contribute to poor working conditions including the use of child labour. The region is poor, and families face financial pressure to bring their children with them to collect mica. The mica workforce lives in villages that are largely dependent on mica and offer little access to education, health care and government services. The region and the mica industry in particular lack enforcement of laws and regulations needed to provide enforceable oversight of the industry. There is no mechanism to incentivize the adoption of workplace and labour standards or to prevent illegally mined mica from entering the global mica supply chain.

Responsible Mica Initiative

The Responsible Mica Initiative (RMI) aims to engage multiple stakeholders under a Coalition for Action to contribute to the establishment of fair, responsible and sustainable mica supply chains globally, starting with Bihar & Jharkhand, India, that are free of child labour and provides responsible working conditions. Adopting a holistic approach, RMI implements three program pillars simultaneously:

1. Mapping and workplace standards

RMI members must map the source of mica in their products to exporters, processors and mines in India. Each member's supply chain participant must then adopt workplace environment, health, safety and fair labour practices that include a prohibition on the use of child labour.

2. Community empowerment

Villages that provide the workforce for mica mines and processors are empowered to access improved educational resources for children, better health care, alternative means of livelihood to improve overall livelihood, and government social programs.

3. Legal frameworks

RMI encourages the creation of laws and regulations and related enforcement mechanisms that will govern all aspects of the mica industry and establish a responsible and sustainable mica supply chain.

To effectively implement its three program pillars, the Responsible Mica Initiative works with multiple stakeholders from a variety of disciplines and organisations who bring their expertise and commitment to address the mica challenge.

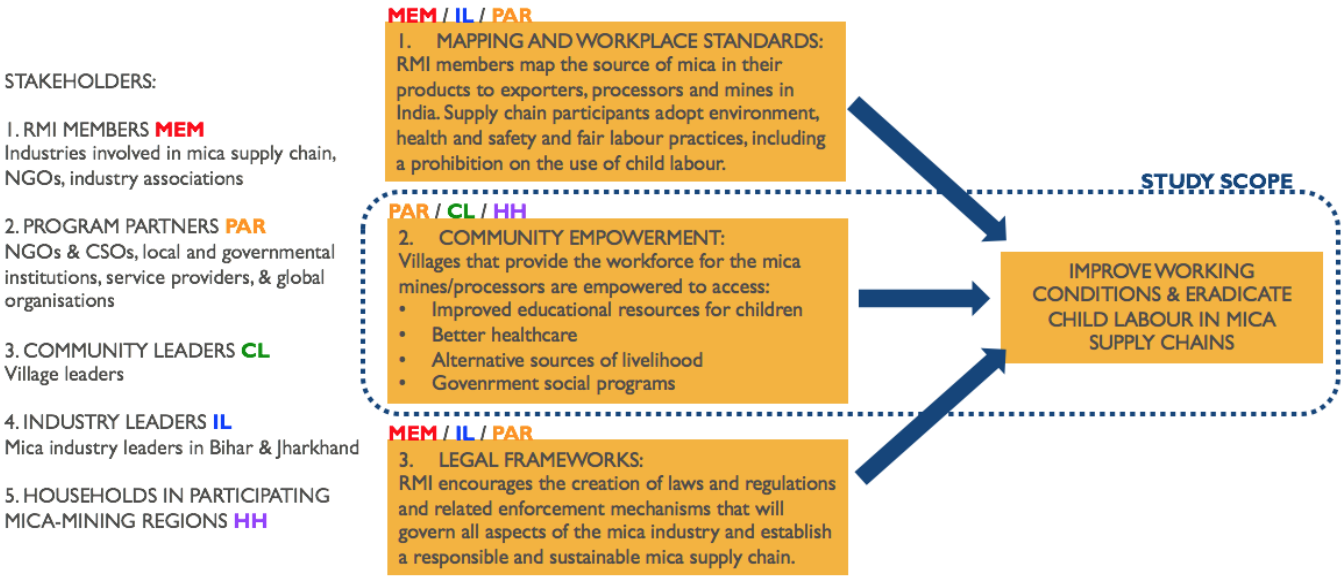
Study scope: Community Empowerment Program

At the heart of RMI's approach, the Community Empowerment Program (CEP) is a 3-year program already implemented in 180 villages, 32 of which (those supported by the CESAM consortium) will be included in the scope of the current evaluation project. The CEP employs a holistic approach, aiming to improve working conditions and eradicate child labour by improving four key components: enhanced livelihood, raised nutrition and health standards, improved access to quality education and improved access to government services. Program impacts on these four components were already measured at program end, in 2022. The current study, conducted three years later, aims at assessing the sustainability of the CEP's outcomes and impacts.

Key Evaluation Question

Sustainability: How sustainable are program activities and impacts, have they been maintained after external support was withdrawn? What are the key factors of such sustainability, and how can the CEP be improved in future editions in such way?

Relevance: From a three-year-forward perspective, how relevant and significant do the CEP activities and impacts remain in terms of local requirements and priorities with respect to mica mining conditions and the eradication of child labour?



Partner NGOs from the CESAM consortium:

Abhivyakti Foundation
Rashtriya Jharkhand Seva Sansthan
Samajik Parivartan Sansthan
Srijan Mahila Vikas Manch

The evaluator: Improve

Created in 2009, Improve is a social enterprise whose mission is to guide actors who work for a more solidary, fair and sustainable society.

Whatever the stage of development or the size of a project, Improve guides organisations in achieving their social mission by providing expertise in impact evaluation. Using a range of quantitative and qualitative evaluation methods in addition to cost-benefit analysis, Improve adapts its approach depending on the needs of the organisation. Improve's three main approaches are: impact evaluation consulting and implementation, impact evaluation coaching, and made-to-measure training.

Improve has worked with more than 200 organisations, including investment funds, foundations, businesses and charities.

Field data collection partners: DAI Research & Advisory

DAI Research & Advisory Services (DAI) is a research and advisory firm based in India, dedicated to advancing knowledge and driving informed policy decisions through rigorous research and expert consulting services. DAI has emerged as a trusted partner for academic institutions, government agencies, and development organizations seeking evidence-based solutions.
DAI's vision is to contribute to a more informed and equitable society through the power of research and policy analysis, by providing cutting-edge academic insights and strategic consulting services that empower their partners to make informed decisions, shape policy, and drive positive change.

Methods

Scoping and planning phase

The scoping and planning phase was carried out in 2021 as part of the evaluation of the CEP project set in a different group of 40 villages in the same region (supported by the BJSAM consortium). The evaluation of this project in 2022 replicated the methods of the first one, and the current study used similar methods. The scoping and planning phase was mostly centred around the construction of a Theory of Change (ToC).

The Theory of Change

Improve's expertise relies on the « **Theory of Change** » (ToC).

The ToC is a strategic tool that visually represents the expected social change process according to the viewpoint of a specific stakeholder. It starts by specifying all the activities that make up the program, lists the impacts these engender, and finally hypothesizes how these impacts contribute to the social mission statement. Once finalized, the map offers **a clear snapshot of all identified and potentially measurable impacts** of the activities proposed by the program. It also allows for specific hypotheses to be formulated, that will be tested in the evaluation.

This mapping traces the path of our reasoning at a specific time, and can therefore be adjusted according to the scope of the study and the evolution of the program.

Theory of Change of the CEP

During the evaluation of the CEP implemented by the BJSAM consortium, RMI had first formulated a social mission statement for the CEP; this forms the focal point of the ToC, towards which all activities and impacts are directed. Then two interactive online workshops had been held with members of the RMI team, in order to establish all the different activities that make up the CEP, and the impacts they are presumed to engender. The resulting information from these workshops had been used by Improve to create a comprehensive ToC, outlining all CEP activities relating to the 4 different pillars of activity, and short-term and long-term impacts, in addition to long-term generic impacts. More information retrieved from CEP documentation sent by RMI (baseline study report, quarterly reports, monitoring documents, etc.) and from four interviews with program directors had also fed into the construction of this ToC.
Although the actions implemented by the CESAM consortium have differed slightly from those put in place by the BJSAM consortium, the general framework remained the same, thus the same ToC could be used in the present evaluation (see at the end of the Methods section).

Battery of indicators

The battery of indicators results from the theory of change and is a document that provides a detailed account of all indicators that will be measured as part of the study. As such, this document can be considered an operationalisation of the ToC (or parts of the ToC) and is used to later construct the questionnaires and interview guides. This study adapted the battery of indicators used in the program-end evaluation.

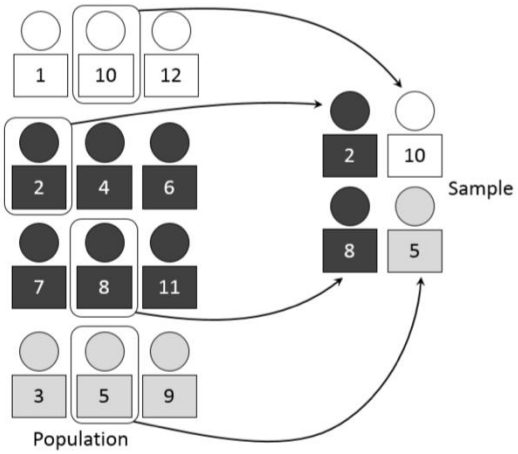
Data collection methods: Questionnaires

Participants

Main impact questionnaire: Planned participants were 251 household (HH) heads in 32[1] villages participating in the CEP, who responded on behalf of the entire household for indicators concerning impacts of the CEP in terms of education, livelihood, health and social security. This sample of 251 households (out of a total population of 3334) was selected to give a 5,9% margin of error, with 95% confidence interval. This means that, for example, if in the sample of 251 HH, we find 20% are engaging in some form of child labour, we can be sure with 95% certainty (95% confidence interval) that the true rate of child labour in the larger population is 14,1-25,9% (5,9% margin of error). Selection of households followed a stratified random sampling procedure, which ensures proportional representation of all sub-groups in the final sample (see diagram below).

[1] As one of the program-implementing partners is no longer part of the consortium, 8 villages out of the 40 included in the program scope could not be included in the present study.

For comparability purposes, the sample for the current study was based on the sample drawn for the program endline study, with a back-up draft of households to compensate potential attrition in the main sample.



In this case, random selection of households to take part in the study was stratified by village, as well as by receipt of aid (in a financial form, with scholarship grant, or in kind), such that each village would be proportionately represented in the final sample, and similarly with the group of aid-recipient households. Random selection of households was carried out by assigning each one a random number following a uniform distribution law.

With a total of 252 households effectively surveyed, the margin of error is 5,93 %, which ensures that the sample of households is large enough to be sufficiently representative of the population from which it was drawn. The stratified sampling procedure was a success - all villages are represented by a proportionate number of households (see Table A in the annex).
Concerning stratification by receipt of aid, 754 households (23%) from the population of 3334 were reported by RMI to have received some form of aid (scholarship grant or an asset or both).

Literacy and numeracy testing: Participants were all household children aged 6-14 years (this is the age group targeted by the education pillar of the CEP), resident in the households randomly selected to take part in the study.

Material

The present evaluation uses the same questionnaires created for the program-end CESAM consortium evaluation, for household heads and for children. Both questionnaires had a few questions and answering options added or removed, as well as some questions rephrased, as agreed on during an online workshop with members from the RMI team, the operational partners and the DAI team, such that it captures better the sustainability of the CEP outputs and outcomes.

Main impact questionnaire: An online questionnaire had been created using Survey CTO software, which allows for data to be collected in an offline mode, which is useful in contexts where internet access/quality cannot be guaranteed.
The questionnaire was created in English and translated into Hindi, following three steps – forward translation, back translation and reconciliation, and was then tested with a few households[2]. The changes brought to the questionnaire in the present evaluation did not go through the same process of three steps translation and field testing, as they were marginal.

Literacy and numeracy testing: Literacy and numeracy testing was carried out using the ASER Centre tools for testing reading and math level. The ASER Centre is an autonomous assessment, survey, evaluation and research unit within the Pratham network that provides tools for rigorous assessment of outcomes and processes in education and other social sectors. The tools consist of simple visual aids in Hindi that allow the tester to quickly and simply assess the reading and math level of children. The tools have been tested and found to have a good level of test-retest reliability, inter-rater reliability, concurrent validity and convergent-discriminant validity. Data resulting from these tests were entered in a separate online survey that also contained information about the child being tested (age, sex, school grade) and responses to simple questions concerning their perceptions of the school.

[22] For more detail, see the impact evaluation report for the CEP implemented by the CESAM consortium.

Procedure

All DAI investigators followed procedural guidelines created by Improve and DAI. Investigators worked in mixed-sex pairs and were accompanied by a village volunteer when possible. Households had been warned in advance that they would be required to take part in the study and information on the nature and aims of the questionnaire were provided. If a household was absent on the day of testing, the next chronological household in the randomised draft was selected for questioning, to prevent bias in selection of households. On arrival in the household, after introductions one of the investigators explained to households the aims of the study, what could be expected during testing, and it was explained that they were free to terminate the session at any time and/or not respond to questions if they wished. Once they had given their consent, one investigator proceeded to administer the questionnaire to the household head. Meanwhile, the second investigator administered the literacy and numeracy tests to any eligible household children. Administration of the questionnaire plus literacy and numeracy testing generally took no more than 30 minutes. At the end of each day, investigators uploaded completed questionnaires and translated qualitative responses into English.

Data collection methods: Focus groups

Participants

Planned participants were 64 community leaders, teachers, Anganwadi Centres (AWC) workers and NGOs/implementing partners in the participating villages, randomly selected from a list of eligible potential participants provided by the operating partners (the same list as 2022 was used). It was estimated that 1 or 2 participants per village (32 to 64 in total) would give sufficient information to reach information saturation. Although planned participants were difficult to mobilise, NGO partners from the CESAM consortium helped to gather more participants with similar profiles. In the end, 8 focus groups were held, each one with 5 to 12 participants and covering four villages, with a greater diversity of postitions represented: AWC Sevika, Jal sahiya, Poshan sakhi, Sahiya, Sevika, Bal manch member, Education trainer, Principal, SLC Teacher, SMC representative, teacher, community organiser, community volunteer, livelihood volunteer, project coordinator, NGO field trainer, NGO secretary, Mukhiya, Ward member, Ward sadhak, Gram panchayat development plan sardash, Gram podhan, Gramin member, Panchayat pritinidhi, Panchayat samiti member, SHG member.

Materials

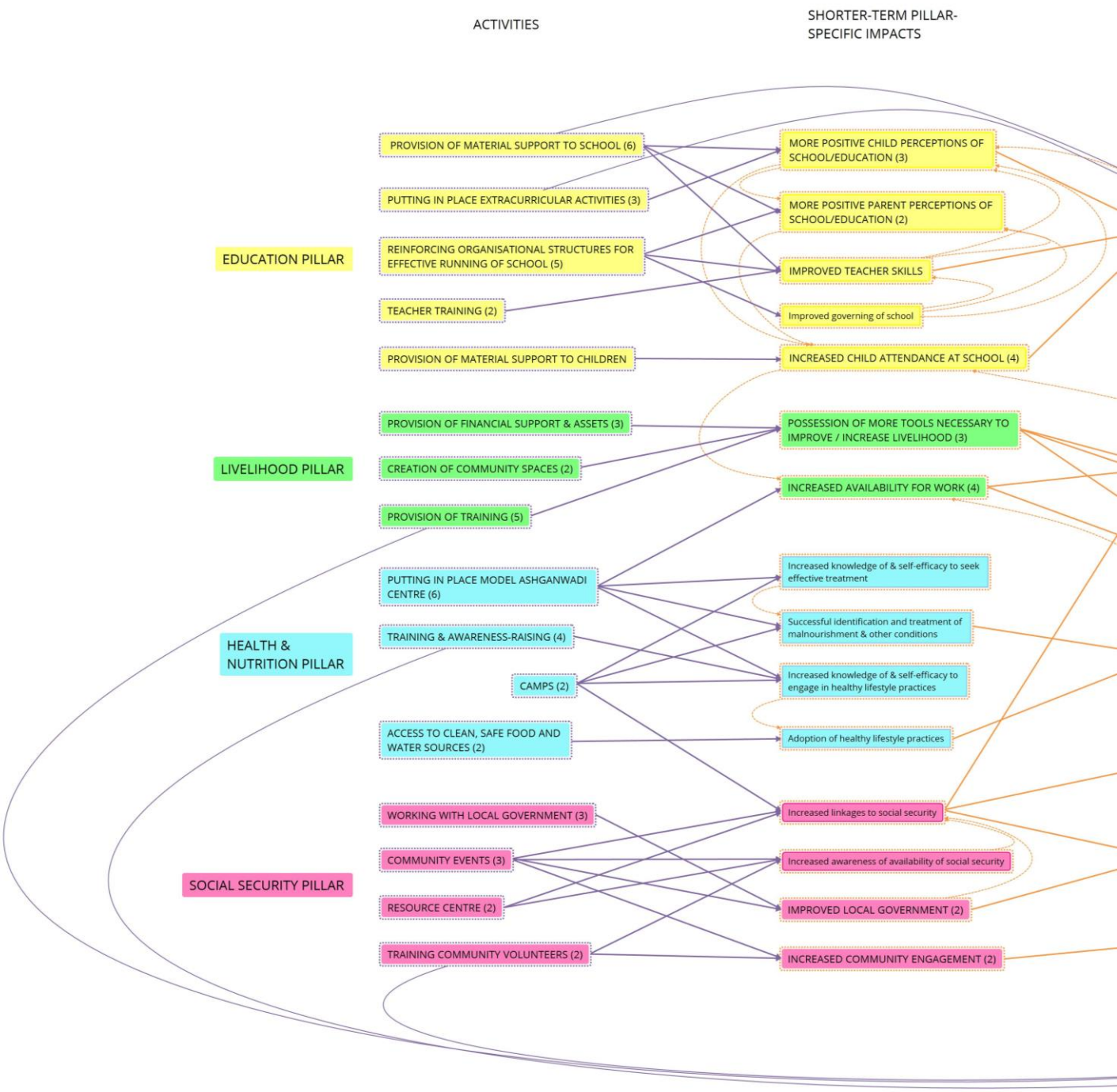
A written focus group guide was created, with an introductory text explaining the aims of the study and what could be expected of the focus group. Additionnally, a short questionnaire was created in order to collect quantitative data on the persistence of CEP activities in the villages. These were created in English and translated into Hindi by the DAI team.

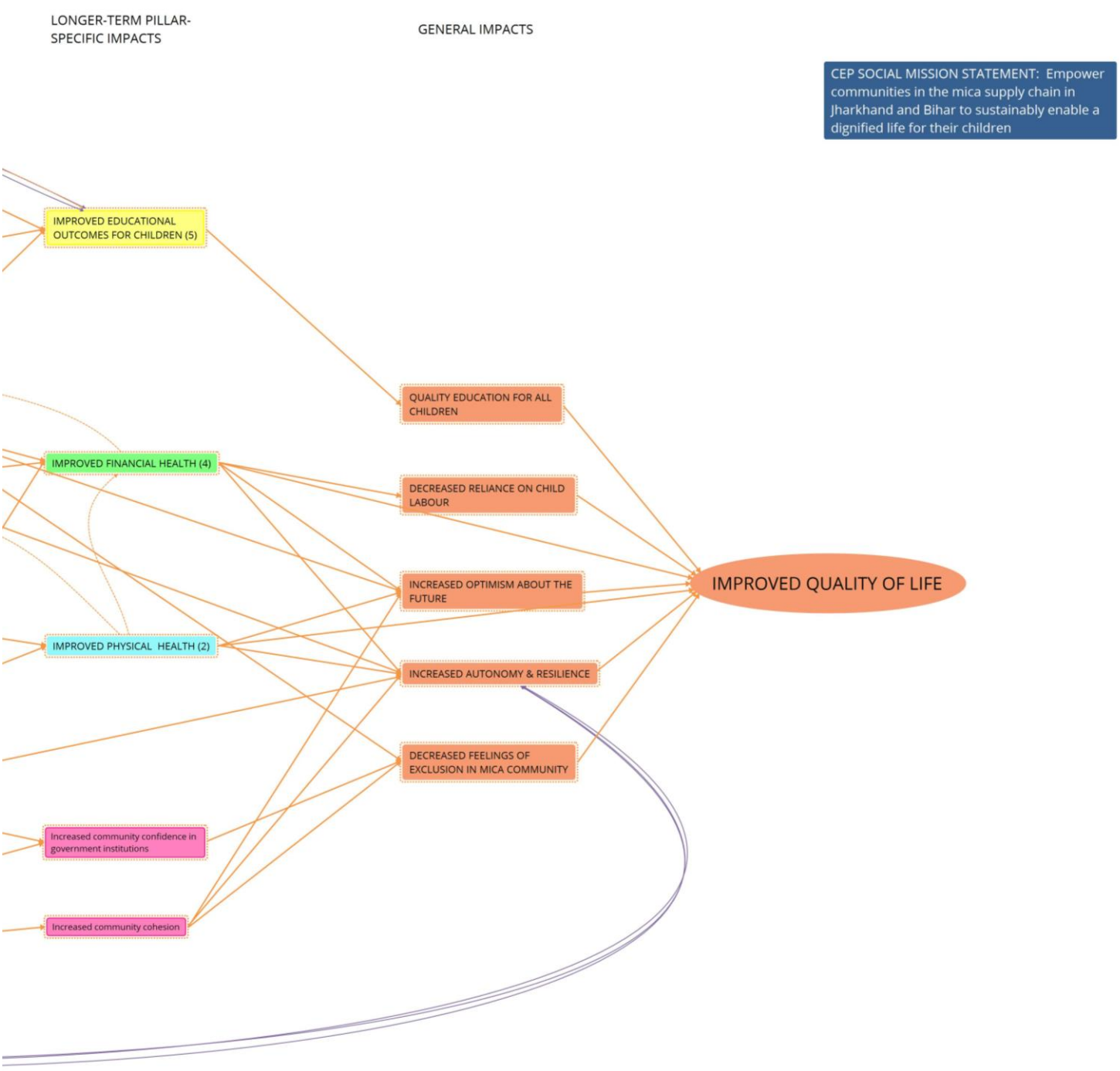
Procedure

The focus groups were semi-structured, which means interviewers used the interview guides to cover certain themes in the interview but were relatively free in terms of how they questioned the interviewee and could cover additional topics if the interviewee had more to say.

Focus groups were conducted by a pair of interviewers with one person asking questions and the other recording any notes. They lasted for two to three hours. All interviews were transcribed and translated into English.

Theory of Change of the Community Empowerment Program




LONGER-TERM PILLAR-SPECIFIC IMPACTS
GENERAL IMPACTS
CEP SOCIAL MISSION STATEMENT: Empower communities in the mica supply chain in Jharkhand and Bihar to sustainably enable a dignified life for their children
IMPROVED EDUCATIONAL OUTCOMES FOR CHILDREN (5)
IMPROVED FINANCIAL HEALTH (4)
IMPROVED PHYSICAL HEALTH (2)
Increased community confidence in government institutions
Increased community cohesion
QUALITY EDUCATION FOR ALL CHILDREN
DECREASED RELIANCE ON CHILD LABOUR
INCREASED OPTIMISM ABOUT THE FUTURE
INCREASED AUTONOMY & RESILIENCE
DECREASED FEELINGS OF EXCLUSION IN MICA COMMUNITY
IMPROVED QUALITY OF LIFE

Results

Impacts

Sample description

Respondents: household heads

The 252 household heads questioned were predominantly male (Figure 1) with only one third being female. They were aged between 21 and 84 years, with an average age of 44 years for female and 51 for male household heads (Figure 2). Unsurprisingly, respondents are a little older than in 2022. However, in 2022, 88% of respondents were female.

Figure 1. Sex distribution of household heads

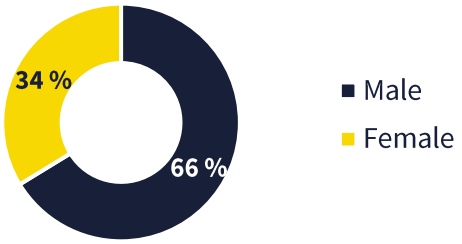
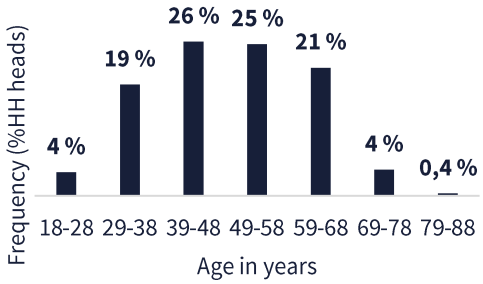


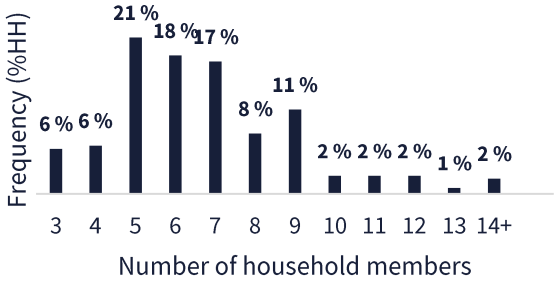
Figure 2. Age distribution of household heads



Households

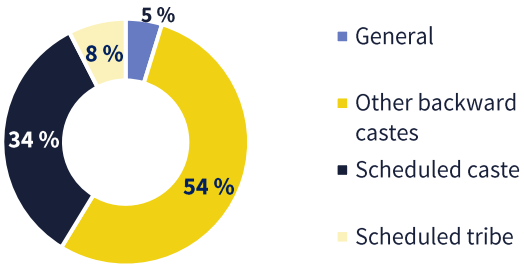
Household size varied from 1 to 17 members (Figure 3), with a mean of 7 persons per household, which is a rather large number and above the average 4.5 household size in rural India, and a bit higher than the average household size in Jharkhand (5.3 members), according to the NFH survey from 2019-21.

Figure 3. Size distribution of households



The largest proportion of sample households were from other backward castes (54%), followed by scheduled castes (34%), scheduled tribes (8%) and general castes (5%), as shown in Figure 4.

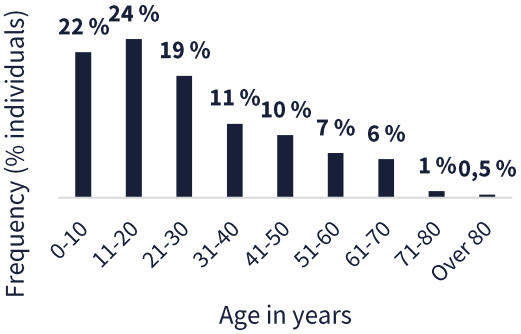
Figure 4.Caste distribution of households



Individuals

There was a total of 1431 household members reported to be living in the 252 households, with an equal proportion of females and males, with a mean age of 27 years (Figure 5: minimum = 0 years, maximum = 95 years; mean in 2022 = 27 years).

Figure 5. Age distribution of individual household members



Impact: Social security

In this section, we explore how many households still maintain social security linkages three years after the end of the program, and whether it has sustained the reduction in household spending that was observed during the program. We also analyse whether those who were involved in community activities remain active, and whether this has influenced their sense of involvement in community decision-making.

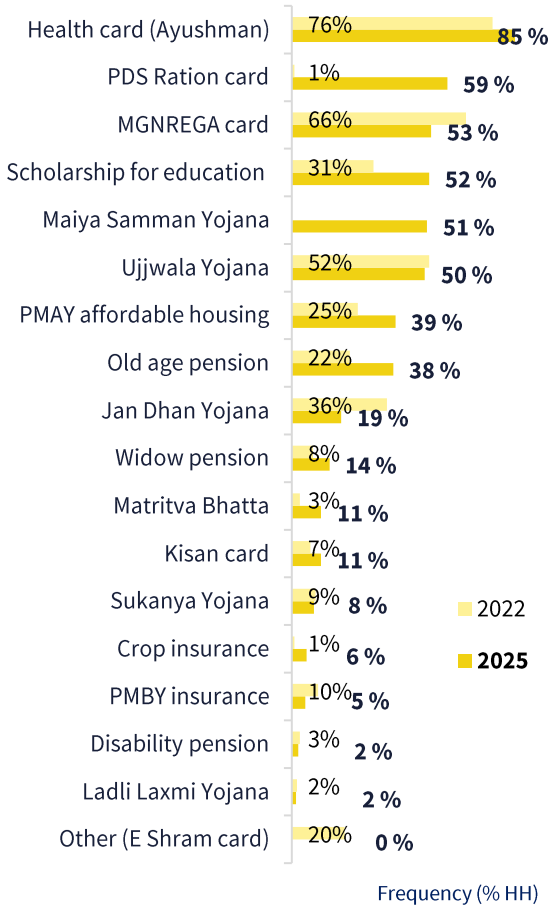
1. Maintaining linkages to social security

Linkages to schemes

In order to assess the number of social security linkages three years after program end, household heads were asked if they or anyone in their household were attached to various different forms of social security, three years after the program.

As displayed in Figure 6, the greatest number of households had signed up for the health insurance card (213 HH or 85%), the PDS ration card (115 HH or 59%) and the MGNREGA job card (133 HH or 53%). The percentage of people with a PDS ration card, a health insurance card, a scholarship, PMAY affordable housing or old age pension has significantly increased since the end of the program, while participation in MGNREGA has declined, although more than 50% of households still benefit from it. The fifth most common linkage was the Maiya Samman Scheme program (129 households, or 52%), which was created in 2024 by the Jharkhand government and targeting women. The E-Shram card was not mentioned in 2025, although it was mentioned by 20% of respondents in 2022. The Jan Dhan Yojana, which was the fourth most used scheme three years ago, has seen its use significantly decline by almost half. [3]

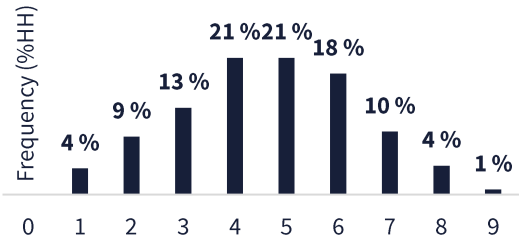
Figure 6. Proportion of households linked to various social security schemes



More than 95% of households were signed up for more than one form of social security (Figure 7), **whereas they were 88% in 2022**. We recorded 0 households that had not signed up for any social security schemes three years after the program (they were 16 HH, 5%, in 2022), and only 10 households had registered for a single scheme, which represent 4% of all households. Most of them had signed up for 4 or 5 different schemes (52 HH, or 21% each), 3 schemes (33 HH, or 13%) or 6 schemes (46 HH, or 18%). On average, households were registered in 4.65 schemes in 2024 compared to 3.72 in 2022. There has been a significant increase[4] in the average number of social security schemes per household between the end of the program and three years later.

[3] All evolutions were confirmed statistically (Khi2, significant at the 5% threshold)
[4] T-test, significant at the 5% threshold

Figure 7. Number of different types of social security per household in 2025

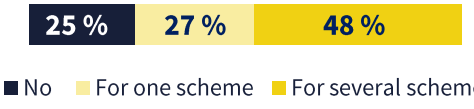


The role of the CEP

The long-term role of the CEP in connecting households to schemes can be investigated through the permanence of Jan Suvidha Kendras, which were set by the program, 1 for every 8 villages. Focus group participants reported that the Jan Suvidha Kendras are still running regularly and accessible by the local population in 22 to 28 of the 32 villages (69% to 89%)[5].

Access to the social security schemes has been facilitated by Jan Suvidha Kendras, with **75% of households reporting having received Assistance from them for at least one scheme after program end.** 25% (or 62 HH) didn't received any help, 27% (or 69 HH) received help for one scheme and 48% (or 120 HH) for at least 2 schemes (see in Figure 8).

Figure 8. Facilitated access to security schemes thanks to Jan Suvidha Kendras



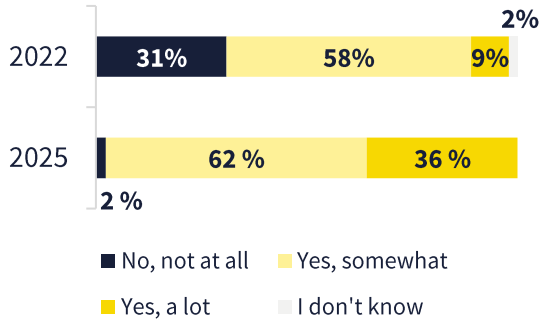
The role of the CEP was also mentioned during the focus groups, from a broader perspective: one benefit of the program is the increased awareness about government schemes, as the participants state: "*Before the program, people were often deprived of benefits simply because they weren't aware or didn't know how to apply without paying bribes*" or "*Essentially, the community learned to access the rights that were already theirs.*"

Before the program, villagers, especially women, were largely unaware of government schemes and how to access them; "[women] *were not interested because they lacked information*". The program significantly increased awareness at the village level; "*people became aware. Today, they know that having information leads to receiving benefits*". Women now actively attend meetings, exercise their rights, and help spread information within their communities. Vulnerable groups receive support through volunteers who assist with forms and applications. As a result, villagers are better informed, more united, and able to fully benefit from government schemes; "*The awareness that they can demand these rights is a permanent change*".

Impact of social security schemes

Households were asked if the social security had helped reduce their spending. In 2022, although a third did not see any effect, 58% said it had helped a bit and 9% said it had reduced spending a lot. **Three years after the program, 98% of households have witnessed that social security schemes were helping them to reduce their expenses, with more than one third reporting a very strong impact** (Figure 9). There is a significant improvement[6] in the perception of the schemes' financial impact between 2022 and 2025. It is not surprising: this impact was expected to not be strong at first, and to gain momentum as time went by.

Figure 9. Reduced household spending as a result of social security



[5] The focus group data was clustered by group of four villages. When asked if an output of the CEP was still in place, three answers were possible: "No" means that the output had disappeared in all four villages, "Yes, at full extent and regularly" meant it was the case in all four villages, and "Yes but to a limited extent" meant that it was "Yes" for some villages and "No" for others.

[6] Khi2, significant at the 5% threshold

2. Increased community engagement

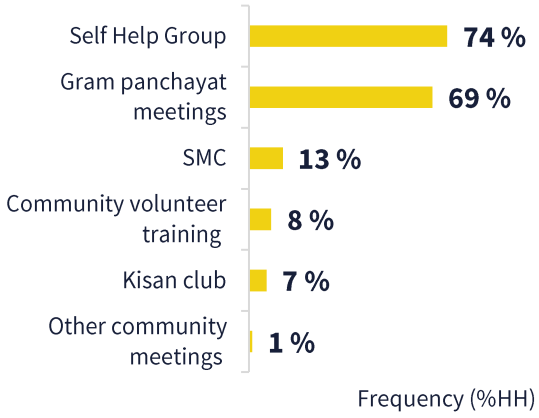
Respondents were asked if they were involved in community activities during the program and if they stayed in those activities over the last 3 years.

More than 94% of households remembered being involved in community activities during the program, and **over 93% reported being involved nowadays in at least one type of activity**. On average, households participated in 1.7 different community activities. Although they confirmed their continued involvement, they now participate in fewer types of activities (an average of 1.2). This represents a statistically significant decrease[7].

As can be seen in Figure 10, the activities that households are most involved in are the self-help groups (187 HH or 74%) and gram panchayat meetings (173 HH or 69%). Other community activities involve less than 15% of households, such as School Management Committees (SMC) with 13% (or 32 HH) of households, community volunteer training at around 8% (or 21 HH), and Kisan Club (grassroot-level farmers' clubs) at around 7% (or 16 HH). Responses in the "other" category included Children's stage / Forum for children, Bhole Baba livelihood group, and "women's mutual savings group in their own village". The difference between the percentages in 2022 and 2025 can be explained by the fact that the populations are not the same and that people may not easily remember what they participated in three years ago. They might feel that they have been participating in these activities for longer than they actually have.

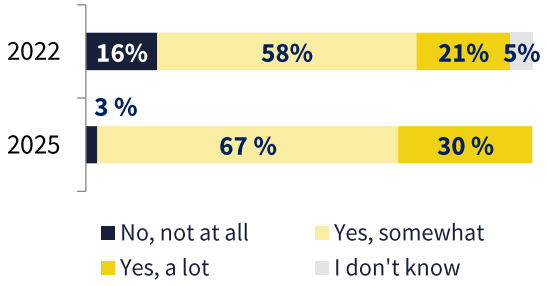
Moreover, focus group participants were quite unanimous about the CEP's positive lasting impact on community participation and dynamism. Participation in SMCs, Gram Panchayat meetings, Bal Manch sessions, Kisan Clubs, and Self-Help Groups is said to have increased significantly. Focus group participants said the CEP's training and awareness efforts have strengthened the quality of participation. Monthly SMC meetings now focus on children's attendance, studies, and nutrition, and Gram Panchayat meetings discuss local development priorities effectively. "*The training on GPDP had a huge impact. Now, people participate in Gram Sabhas enthusiastically. They don't just list a few schemes; they ensure everyone's problems are heard.*" Livelihood initiatives and self-help groups have empowered women financially, with many managing savings, loans, and digital transactions independently. Farmers have improved agricultural practices through Kisan Clubs, applying scientific methods and seasonal crop planning.

Figure 10. Part of households implicated in various community activities



All those who are still involved in at least one form of community activity were asked if they felt more involved in community decision-making as a result. More than 95% responded positively: 159 households (67%) said they felt somewhat more involved and 159 households (30%) said they felt much more involved (Figure 11). Moreover, this perception is more positive today than at the end of the program 3 yars ago[8].

Figure 11. Increased sense of being involved in community decision-making as a result of increased community involvement



[7] T-test significant at the 1% threshold
[8] Khi2, significant at the 1% threshold

Conclusions

- Not only have households maintained their social security linkages, but the proportion of households signed up for at least two forms of social security has also increased, from 88% in 2022 to 95% in 2025.
- The role of the CEP is significant, as 75% of households received assistance through the Jan Suvidha Kendras, and this is confirmed by the qualitative study via focus groups.
- It is interesting to note a positive development regarding women, whose awareness-raising seems to have been very effective.
- The results also confirm a reduction in household spending, with 98% of households observing that this helped them lower their expenses.

Impact: Livelihood

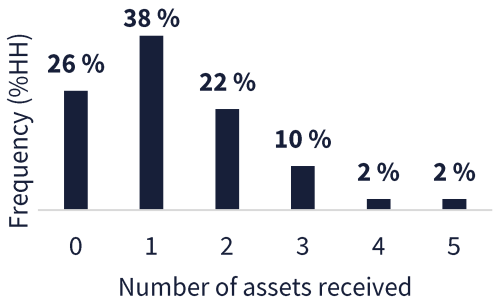
In this section we first look at assets and trainings provided by the CEP, and how they impacted households. Secondly, we analyze whether households appear to have diversified their means of livelihood, reducing their dependence on mica. We then delve into the impact of the program on financial health, in terms of income, perceived financial situation and income stability.

1. Possession of tools necessary to improve/ increase livelihood

Assets

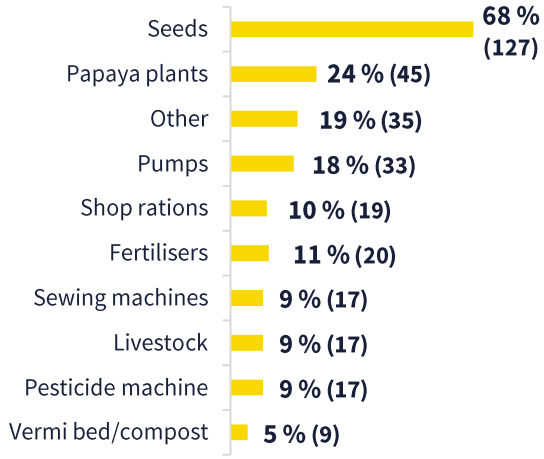
Household heads were asked if they had received asset help from the CEP during the program. 65 households didn't get anything but the rest received some form of asset help. Most were provided with one type (95 HH) or two different types of assets (65 HH), as can be seen in Figure 12. However, we can mention that the number of assets reported in 2025 does not match the one reported in 2022, which can be explained by a lack of memory by the household's heads or by a misunderstanding of what constitutes an asset.

Figure 12. Number of assets received as reported in 2025



In total, 339 different forms of asset were reported to be distributed to villagers in 187 households. As shown below in Figure 13, were the resource most frequently given out, with 127 lots of seeds being distributed (68% of HH received some). Following that, papaya plants (24% HH) and irrigation pumps (18% HH) were most frequently distributed, followed by shop rations, fertilisers and sewing machines. In the "other" category (19% HH), people listed WASH kits, fruit tree plants, materials for cultivation, water access (drinkable or for irrigation) and shops.

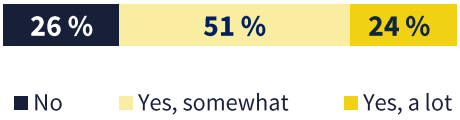
Figure 13. Type of assets received (N = 187)



Frequency (% asset recipient HH and no. HH)

Households were also asked if they felt that the assets, they received are still useful today, and 74% of them considered that they are. 24% (or 44 HH) of the households stated that the assets were really useful, while 51% (or 94 HH) considered them somewhat useful, and 26% (or 48 HH) did not find any usefulness in these assets today (Figure 14).

Figure 14. Households assessing if the CEP assets still support their daily life nowadays



An analysis was conducted to understand whether the perceived usefulness of the impact was linked to the district or the caste of the households, but the results weren't relevant[9]. However, analysis showed that **the more assets households received, the more likely they are to perceive a positive impact on the long term[10].**

More detailed analysis was conducted, comparing different types of assets. Sets of seeds tend to be less perceived as impactful in the long term than

[9] Khi2, not significant
[10] Spearman correlation, significant at the 1% threshold

other assets (58% of HH who got it reported asset impact, vs. 77% for HH who received assets other than seeds)[11]. It can be explained by the fact that this asset could only be used once and then had to be regenerated by the households themselves, and that its success could be more sensitive to the weather.

On the contrary, irrigation pumps were more likely to be perceived as having a long-lasting impact (94% of HH who got it reported asset impact, vs. 70% for HH who received assets other than the pump)[12], and a strong one specifically, compared to other assets (39% of HH who got it reported "a lot" of impact, vs. 20% for HH who did not) [13]. This effect was even stronger for households who had received a sewing machine, as 59% of them noted "a lot" of asset impact, compared to 20% for households who did not get a sewing machine[11]. **This last result echoes the endline study, where sewing machines were also found to be highly appreciated.**

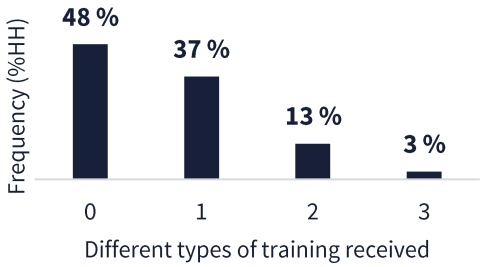
Households were asked more specific feedback about the impact they felt from the assets. 38% mentioned an economic benefit, whether by **lowering expenditure** (21%) or by **increasing income** (17%): "*Have to buy less at home*"," *Helps in getting food at home; if there is extra produce, we sell it and get money, which helps us do other work.*". 16% highlighted their higher capacity to **irrigate their field**: "*We now get water properly; earlier there was a water problem. Fifteen families in our village now get water*". 7% mentioned an improvement in **food quality or quantity**, and 3% **health** benefits. 13 households out of the 17 who had received a sewing machine described a positive and lasting impact.
On the other end, 20% of asset receivers deplored a lack of long term impact, mostly because **sets of seeds were used and not renewed** through cultivation (15%) or because of **damage to the asset** (7%, mostly tree or livestock death).

During focus groups, respondents were asked what long term effect assets helped the recipients to achieve. Assets helped people to develop their businesses and to be more efficient so it improved their income and their financial welfare: "*The impact of the assets is clear. Earlier, people were willing to work but lacked the means. Once they received an asset, they started their own work and kept expanding it*", "*Today, when we go and look, we see that compared to the past, someone who received one machine has bought a second one and expanded their business*". They are making continuous efforts to keep the assets in good condition (mainly sewing machine and pumps) so they can continue benefiting from them *"we established systems to maintain assets, like collecting small contributions for electricity bills or pump repairs*". Those assets influenced positively farming, or small shop business.

Training

Household heads were asked if they or any member of their household had received training during the program. While 121 households (48%) said they had received no training, 92 (37%) had benefited from one form of training, and the remaining 39 households (16%) had members go through between 2 or 3 different types of training (Figure 15). However, we can mention that the number of trainings that households state having followed in 2025 is different than the number recorded in 2022, which could be explained by a lack of memory by the household's heads or by a misunderstanding of what was a training.

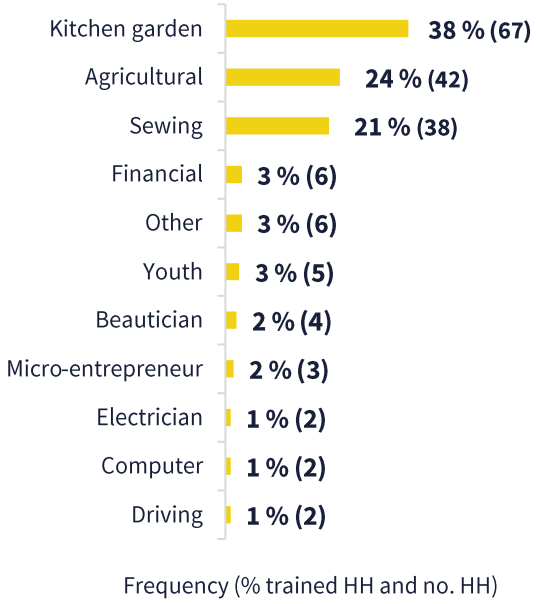
Figure 15. Receipt of CEP training (N=252)



The distribution of trainings reported to be received is shown in Figure 16. Kitchen garden training was the most frequently taken (67 HH), followed by agricultural training (42 HH) and sewing (38 HH). In the "other" section households mentioned vehicle repair and health training (6 HH).

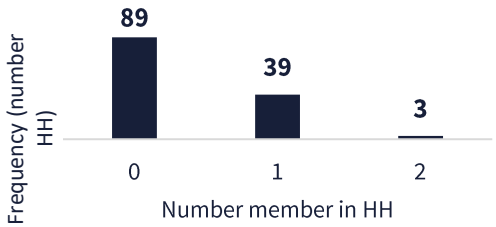
[11] Khi2, significant at the 10% threshold
[12] Khi2, significant à the 1% threshold
[13] Khi2, significant at the 5% threshold

Figure 16. Types of training received (N=177)



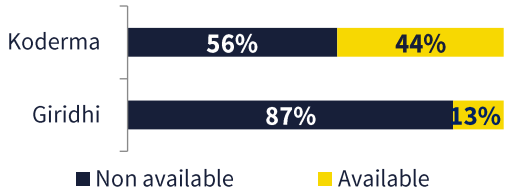
32% of the households (or 42 HH) state that they have at least one member who is still earning money thanks to the training, three years after the end of the program, as shown in Figure 17.

Figure 17. Number of people that still earn money thanks to the training (N=131)



The possibility to have more earners in the household after three years thanks to the training does not differ by caste[14], but it was higher in Koderma district (44%) than in Giridih (13%)[15], as shown in Figure 18.

Figure 18. Households with at least one more earning member thanks to the training, by district (N=131)



Other analyses also showed that some trainings are more effective than others. Households who received a sewing training are more likely to report a lasting impact than households who received other kinds of trainings (52% vs. 25%)[14]. Meanwhile, the kitchen garden training also showed significant results but not a positive impact on the number of earning members. This result is not surprising, since the main objective of kitchen garden training was to support home consumption and reduce household expenses, rather than increase income.

Household heads were asked to elaborate on the (lack of) impact from the trainings three years later**.** 53% (or 125 HH) said they found the trainings useful. Among them, 17% said that the training was helpful but only for use at home, and that they were not able to generate income from it, such as; *"Not much, but we don't have to buy vegetables from outside"* or, *"Even today, I do sewing work and grow vegetables in the kitchen garden because of the training."*. Meanwhile, 6% reported that they could earn an income thanks to the trainings, for example: *"Yes, the training was helpful because it taught us how to grow vegetables on a small piece of land, so we can eat fresh vegetables and also sell some to earn income."* Other respondents explain that they put to use the skills they acquired, but do not give more detail on this generating an income or not.

During the focus groups, sewing was often mentioned as really useful and as a training that allowed families to have a permanent job. Thanks to the kitchen garden training, they also improved their gardening skills. This training was seen as a great benefit: "t*he "Kitchen Garden" initiative was very beneficial; people are now getting nutritious food at home.*" It allows families to have a better diet without spending too much money.

[14] Khi2, not significant
[15] Khi2, significant at the 1% threshold

On the long term, training helped young people to get trained and allow them to find a job: "*We have **young** people […] who took training; some are now in jobs and standing on their own feet, even without our constant follow-up*", and "*Unemployed youth who received this training now have a skill*", for example as an electrician. Trainings also allowed to use assets optimally.

Meanwhile, some trainings were deemed less relevant, such as thread work training which was faced with a lack of outlet, and mushroom training which wasn't sustained because it was too much constraint and too complicated to follow: "*We couldn't find mushroom seeds locally. Also, it requires temperature management and a clean, specific environment which was difficult to construct here. People didn't see enough immediate benefit or a clear market to sell the produce, so they didn't initiate it a second time*".

On the other end, 32% of households stated that they were not aware of the training when it was offered: "*We haven't received any other training; if we had known, we would have attended.*" - focus groups added that "*Some training happened outside the village. Because of that, some people were unable to attend*".

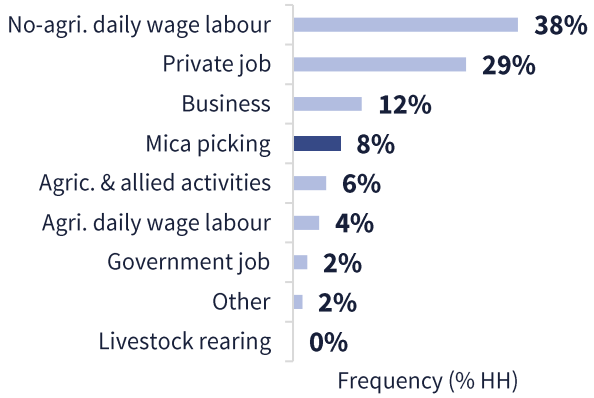
Many household respondents focused on why the training was not particularly helpful; some had stopped using the training, while others lacked the resources to use them (no sewing machine or insufficient space). Some appreciated the help the training provided at home but expressed disappointment that it did not give them employment opportunities: "*We cannot earn employment from this; we only use the skills at home, which helps our household*," or, "*Currently, the kitchen garden does not provide income because we grow vegetables only for home consumption.*" Some households also mentioned a lack of necessary materials to use the training, as illustrated by this statement: "*I do not have a sewing machine, so I cannot get any kind of help from it.*"

2. Livelihood diversification

Primary means of livelihood

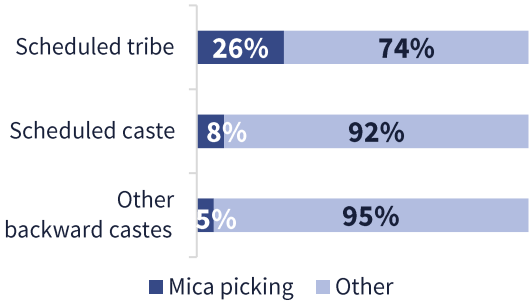
When asked what the primary source of livelihood was in their household, only **20 households (8%) said they relied first on mica picking** (Figure 19). This comes after non-agricultural daily wage labour (38% or 95 HH, such as employment in shops or restaurants), private jobs (29% or 73 HH, corresponding to contractual jobs in private companies) and businesses (12% or 29 HH, referring to running small shops or other micro businesses). Agricultural and allied activities (6%) and daily wage labour (4%) came after mica picking.

Figure 19. Primary means of livelihood (N=352)



In order to further explore the factors associated with mica picking, new categories were created to represent mica picking (8%) and all other jobs (92%). There was no significant relationship between mica picking and district but there was with caste[16], such that mica picking was most prevalent as a primary means of livelihood among scheduled tribe households, followed by scheduled caste households, and ultimately other backward caste households, as illustrated in Figure 20.

Figure 20. Mica picking by caste (N=240)

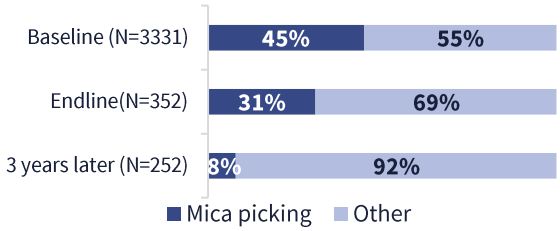


Using data from the baseline study conducted before the CEP started (N = 3331 HH) and the data collected at the end of the program three years ago (N=352), the evolution of mica picking as

[16] Khi2, significant at the 1% threshold

primary means of livelihood can be explored (Figure 21).

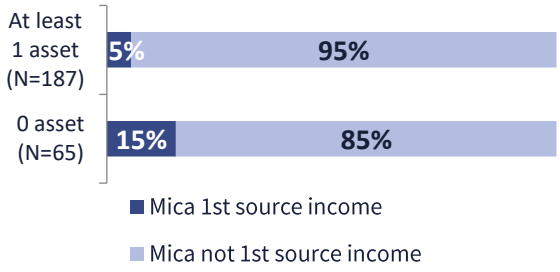
Figure 21. Primary means of livelihood at baseline, endline and three years later



This reduction in the proportion of households engaging in mica picking as their primary means of livelihood is statistically significant. **This is a key result, showing that the proportion of households for whom mica was their primary means of livelihood decreased from 45% to 31% over the course of the program and continue to decrease until 8% 3 years after.** However, we cannot be sure that this decrease was due to the actions of CEP.

Therefore, we further analysed whether receipt of training or assets impacted mica picking. As can be seen in Figure 22, mica picking rates were higher among those households who had received 0 assets through CEP (15%) than among those households who had not received assets (5%). The same analysis was made for training without any significant results, as for three years ago.

Figure 22. Mica picking by receipt of at least one type of asset



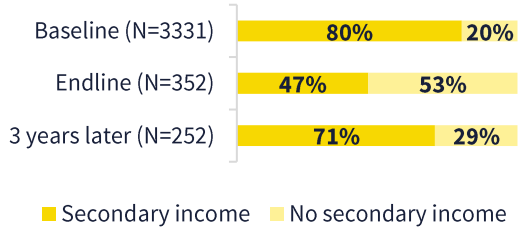
This finding is confirmed by comments made in the focus groups: "*We say assets because previously people used to go to pick "Dibra" (Mica) or do child labour for others. But after taking the given assets, people focused on self-employment*". Support to poor farmers strengthened livelihoods, such that they don't need to engage in mica picking any longer: "*The poor farmers received great support for their livelihood. People who went to pick mica faced danger in the mines—health issues or the risk of mines collapsing. But farmers who stayed home to farm remained healthy, and employment became easier.*"

Secondary means of livelihood

178 households (71% of the sample) reported that they had a secondary means of livelihood. For 53 households (30%, 21% of total HH) this secondary means was mica picking[17], for 47 households (26%, 19% of total HH) it was agriculture and allied activities, for 29 households (16%, 12% of total HH) it was non-agricultural daily wage labour, and for the rest it was business (22 HH or 12%), agricultural daily wage labour (17 HH or 10%), private job (7 HH or 4%) and government job (3 HH or 2%).

We then compared the proportion of households having a secondary means of income three years later with the endline and the baseline. As shown in Figure 23, about 80% of households were reported as earning a second income at baseline, which would mean a third of the beneficiaries from the program had a second income before and lost it by the end of the program. But three years later the number of households that have a second income increased again and reached 71%.

Figure 23. Evolution of households having a secondary means of income over time



In the endline study, the steep decrease was interpreted as a measurement error (lack of coherence in data collection between baseline and endline), but it could also be that in 2022,

[17] At program end, mica picking was the secondary source of income for 22% of all households. Therefore, three years later, the decline in the share of households having mica as their first means of livelihood is not explained by mica shifting to being a secondary source, but by a lower number of households involved in this activity.

income diversification was still impacted by the aftermath of the Covid-19 pandemic.

To investigate the contribution of the CEP to income diversification, we looked at whether receipt of assets or training had enabled households to generate a secondary income. **Those households who had received some form of training or assets were more likely to have a secondary means of livelihood than those who hadn't. 79% vs 62% for the training (Figure 24) and 75% vs 58% for the assets[18](Figure 25)**.

Figure 24. Secondary means of livelihood by receipt of training

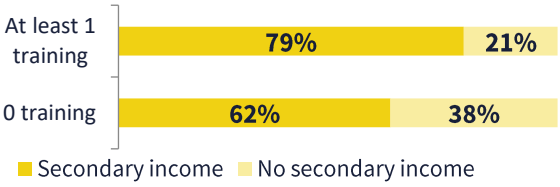
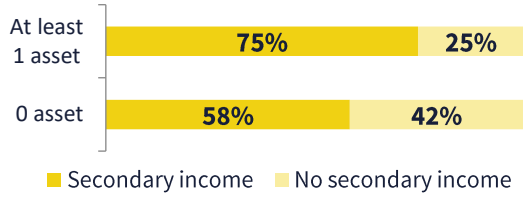


Figure 25. Secondary means of livelihood by receipt of asset



According focus groups participants, in the long term the program led to more employment; "*Employment has increased. In this area, picking Mica (Dhibra) is the base survival work—it hasn't stopped because people depend on it. But we added new layers*". **Consistently with the survey results, focus groups show that RMI program helped to develop other way to earn an income than mica picking**; "*Vocational training created service providers. Asset support created shopkeepers*".
Farming is one of them since training allowed farmer to increase their yields; "*Farming income increased from 500 to 5,000 or 15,000 rupees due to better training*". It's also beneficial for non-farmers, as states here; "*people have started growing vegetables in every household. They use some for their own consumption and sell the surplus in the market, generating income. This was made possible through motor irrigation, which wasn't available before*". "*People learn by watching one another*". Being taught leads to sharing knowledge, which then improves the overall welfare of the community.
Some people also got opportunities to open a shop to help with household expenses. There are multiple stories about shops expending into two or three locations; "*their interest grew along with small income, and now it has expanded. One business expanded into two or three*", "*They opened two or three businesses*". Women are also concerned by this evolution: "*they learn how to sew and how to run a business*", and "*women who received sewing machines learned to use them and are now running their own businesses. Moreover, they are teaching others*". **For women, it was a huge change in employment**, while previously women didn't have money "*Now SHGs are formed, and they get loans at low rates from the government, women became aware, went to them, and now at least 10-15 women have learned sewing and are stitching clothes. Among them, one or two women set up small cosmetic shops along with sewing*", "*Before the program, women lacked knowledge about business. Now […] they have gained both the assets and the knowledge to run businesses*". However, one group brings nuance: in their villages, women's businesses slowed down after the team left because "*the flow of information stopped […] we didn't have enough knowledge about supply chains or markets*".

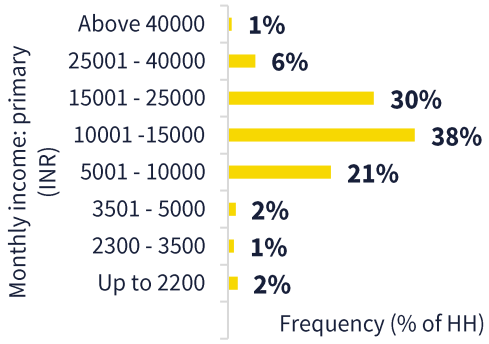
3. Improved financial health

Increased income from primary means of livelihood

Households were asked to report their monthly income within income brackets, as displayed in Figure 26. The median income from primary means of income was 10001 - 15000 INR per month.

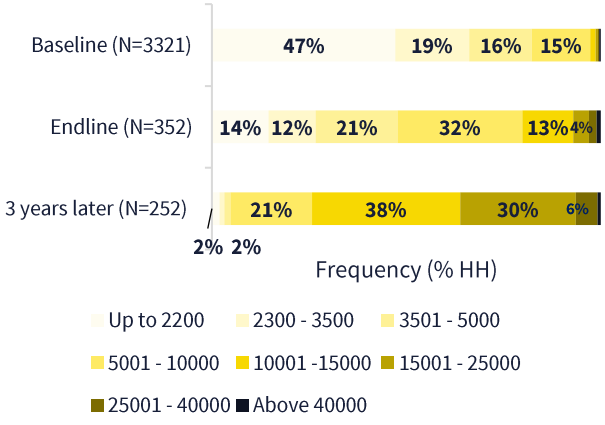
[18] Khi2, significant at the 1% threshold

Figure 26. Income from primary means of livelihood



In order to assess how income had changed over time, we compared the three years after the program data with the endline and the baseline data, collected from the full population of households. Note that we harmonised the figures to a monthly scale for the purpose of being consistent between the three data bases. According to Figure 27, at baseline, there were 1.4% of HH earning more than between 10001 and 1500 INR per month, vs. 13% at endline and 38% three years after. There were 0.6% of HH in the 15001-25000 bracket income at baseline, vs. 4% at endline and 30 % 3 years after the end of the program; the 25001-40000 bracket comprised 0.3% of HH at baseline and 2% at endline and 6% 3 years later.

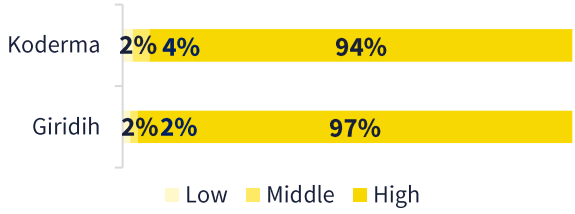
Figure 27. Primary monthly income at baseline, endline and 3 years later



Primary income appears to have increased greatly between baseline and endline but is even greater three years later, as the proportion of households earning up to 2200 INR per month would drop from 47% to 14% and is now around 2%, while the percentage of households earning more than 5000 INR per month would soar from 18% to 55% and is now at 95%. The magnitude of this evolution may be over-estimated due to a difference in measurement of incomes between the baseline and the endline questionnaires, but is still possible between endline and three years later. An obvious improvement can be observed in income level between these two datasets.

We can explore which factors could determine the level of income three years after the program. It did not differ significantly by caste or with training and asset, but it did by district[19], with more Koderma households being in the lowest income brackets than Giridih households. Obtaining a lower income from their primary means of livelihood may explain why households from Koderma are more likely to have a secondary source of income than those in Giridih. In Figure 28 below, households were categorised as low income (up to 2200 INR per month), middle income (2300-5000 INR per month) or high income (5001-25000 INR per month).

Figure 28. Primary income by district



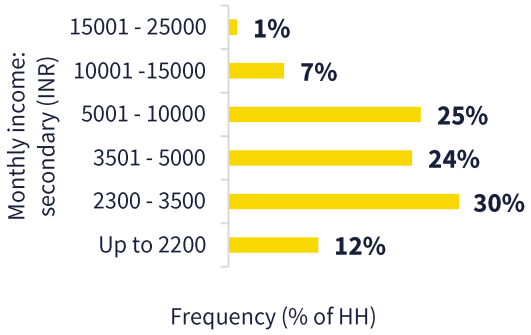
However, receiving assets becomes irrelevant when considering the level of education of the household head, which is a stronger factor of income variation[20]. The more highly educated the household head is, the higher the income.

Increased income from secondary means of livelihood

Households were asked to specify the monthly amount of their secondary income. The distribution is shown below in Figure 29 for the 178 households who mentioned having one:

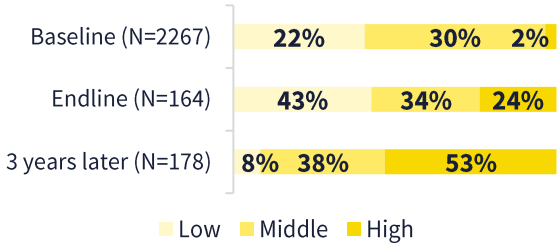
[19] Anova, significant at the 1% threshold
[20] Multiple regression, significant at the 1% threshold

Figure 29. Income from secondary means of livelihood (N=178)



In order to assess how income from secondary means of livelihood had changed over time, we compared the endline data and the baseline data with the data collected three years after the end of the program (Figure 30).

Figure 30. Secondary income at baseline, endline and 3 years later



As for primary income, data lacks comparability between baseline and endline, thus we can only suppose that secondary income has increased between the baseline and the endline, but we can assess an increase in secondary income between the baseline or the endline compare to the three years later secondary income.

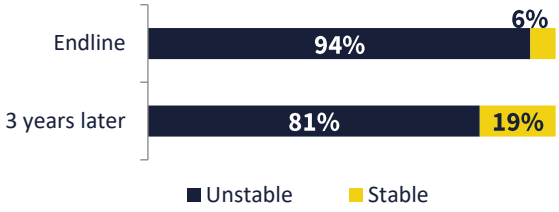
In order to investigate whether secondary income three years after the end of the program was impacted by the activities of CEP, we explored the relationship between receipt of assets or training and level of income from secondary means of livelihood. However, as in the endline study, there was no significant relationship with any of those CEP actions.

Income stability

Household heads were asked if their income remained stable throughout the year. 47 households out of 252 (19%) reported that their income was stable. 205 households (85%) said their income was unstable (Figure 31).

An analysis to compare endline and three years later data reveals a significant improvement of the number of households who earn a stable income[21].

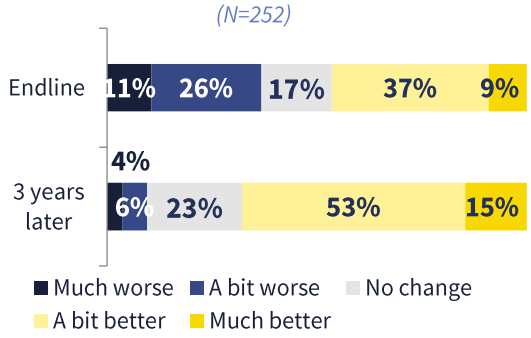
Figure 31. Income stability over time



Subjective financial situation

When households were asked about their financial situation now compared to three years ago, 68% of household heads responded positively, with 134 households (53%) saying it had improved a bit and 37 households (15%) saying it had improved a lot. And there is no change for 57% of the households (23%) (Figure 32).

Figure 32. Perceived improvement to financial situation (N=252)



Respondents were asked to elaborate on why they felt their situation had improved, worsened, or remained the same. Households who perceived a deterioration often mentioned rising expenses for children's education: "*Earlier, when the children were small, expenses were not that much*" or health issues that weakened their financial condition, as one respondent explained: "*Due to illness, the financial situation became weak.*" Several also pointed to the lack of perceived benefits from the program, saying for example: "*If we didn't get anything from the program, then how could things improve?*" Others felt that although they received something, it did not lead to progress: "*A goat was given but it died, so there was no benefit,*" or "*I*

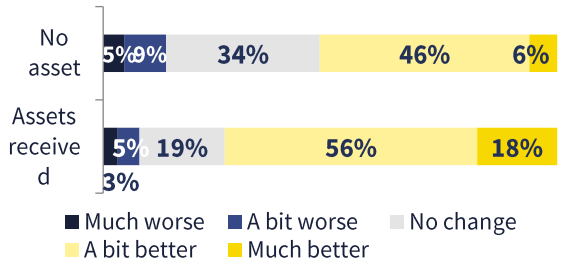
[21] Khi2, significant at the 1% threshold

didn't pay much attention to work, didn't attend the training, and didn't properly use or benefit from what was provided." Some households reported no change simply because their daily activities remained the same: "*We did the same work before, and we do the same work now*" or because inflation erased any potential improvement: "*Things are the same as before… prices have increased even more.*"

On the other hand, households who reported an improvement often linked it to support received from the program, opportunities within the household, or small income sources. For instance, some noted that they were "*benefiting from the items received under the CESAM program.*" Another respondent highlighted how education within the family improved their situation: "*Earlier, no one in the family was educated… now our son is educated, which makes managing expenses much easier.*" Others mentioned diversifying income through mica collection; "*Sometimes, we collect mica, and that helps cover extra household expenses*", which provided modest yet meaningful improvements in their day-to-day living conditions.

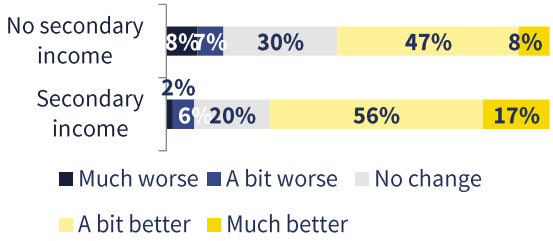
A higher level of income is slightly associated with feeling an improvement in financial situation[22]. Statistical analysis confirms that **respondents with a better perception of their financial situation also tend to have received assets[23]** (Figure 33)**.**

Figure 33. Perceived improvement to financial situation by receiving assets or not



Finally, the last analysis made showed that **people who have a good perception of their financial situation are more likely to have a secondary income[24]** (Figure 34).

Figure 34. Perceived improvement to financial situation by having a secondary income or not



Conclusions

- Assets continue to have a long-term impact: 74% of households were granted one or more assets, and among them, 74% still found them beneficial three years after the end of the program. Certain factors (number and type of assets) enhance these positive impacts, including an economic benefit for more than one-third of households.
- 52% of households had one or more members participate in a training, and 53% of them reported that it was useful. 32% of households stated that they have at least one member who is still earning money thanks to the training, three years after the end of the program.
- A very important result was achieved: 31% of households depended on mica picking as a primary source of income at endline, compared to 45% before the program. Three years later, only 8% rely on mica picking as their primary income. Moreover, both primary and secondary income levels have significantly improved compared to the endline and are even higher than at baseline.
- The results on financial situation are also positive: incomes have increased, income stability has improved for a larger number of households, and the perception of their financial situation is better for more households as well. It is worth noting that there is a positive relationship between the number of assets obtained through the program and the perceived improvement in one's financial situation.

[22] Spearman correlation, significant at the 1% threshold, but the correlation coefficient is only 0,19
[23] Anova, significant at the 1% threshold
[24] Anova, significant at the 1% threshold

Impact: Health

In this section we analyze the long-term impact of the program on preventive health and curative health behaviours. We then investigate whether the program has had positive impacts on physical health.

1. CEP outputs and their sustainability over time

Health-oriented activities during the CEP included:

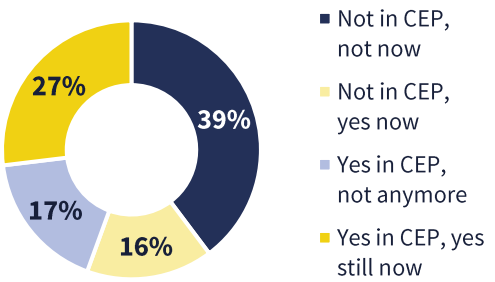
- setting up safe drinking water stations (five in total, one for every eight villages);
- modelling Anganwadi Centres for quality services (twenty-three modelled AWC in total, at the village level, out of a target of thirty);
- helping villagers growing and maintaining kitchen gardens;
- the organisation of village-level activities to tackle different health issues: health camps, vaccination camps, nutrition camps, and Village Health, Sanitation & Nutrition Days. VHSND in particular provided vaccine services, routine check-ups and post-natal check-ups for women.

Focus group participants confirmed that the water stations were still operational in 28 of the 32 villages (89%), and that the same goes for 100% of the Anganwadi Centres.

Kitchen gardens

We asked households heads if they grow a kitchen garden nowadays, and if the CEP had helped them to set it up. As shown in Figure 35, 43% of households grow a kitchen garden in 2025, whereas 44% of households had set up a kitchen garden during and thanks to the CEP. Therefore, the same proportion of households has been growing a kitchen garden ever since the end of the program, but a good third of them have been renewed. **61% of households who were helped by the CEP for their kitchen garden still grow it nowadays.** On the other hand, only 30% of households who had not grown a kitchen garden with the CEP do have one today.

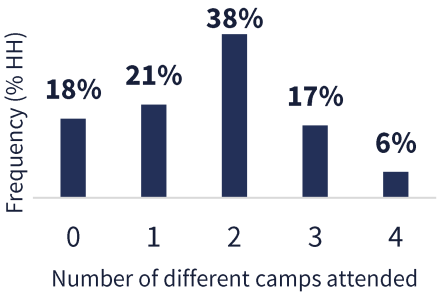
Figure 35. Households who have grown a kitchen garden, during the CEP or now



Health-related camps

Although they were organised only during the program and not afterwards, it is interesting to investigate long-term impacts of health-related camps for former participants. Household heads were asked if they had accessed these four types of camps during the program. As shown in Figure 36, there are some disparities among households about the number of different camps attended: 46 respondents (18%) had not attended any health-related camp, whereas 15 had participated in all four camps (6%). These numbers are coherent with the attendance rates declared in the 2022 study.

Figure 36. Number of different camps attended during the CEP



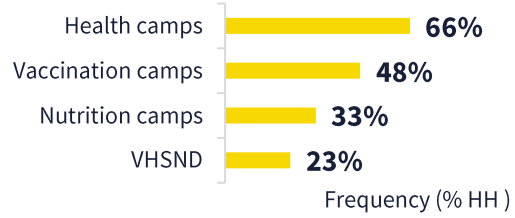
The number of different camps attended did not differ significantly by district[25], but it did vary by caste, as scheduled caste households have a slightly lower attendance rate (mean = 1,5 events) than households from scheduled tribes and other backward castes[26] (mean = 1,9 or 1,8 events respectively). This difference by caste was not apparent in the 2022 study, which had focused only on a six-month period.

[25] Anova, non-significant

[26] t-test, significant at the 5% threshold

Health camps had the highest rate of attendance, 66% of respondents having participated in them, followed by the Vaccination camp with an attendance of 48% of the households. Nutrition camps and VHSND exhibit a lower visitor rate (Figure 37).

Figure 37. Visitor rate by type of camp

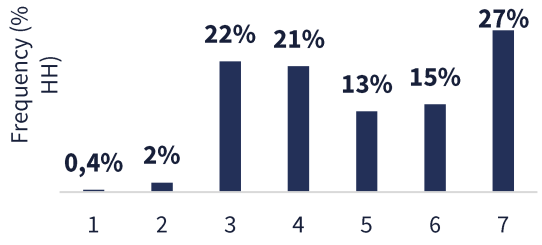


2. Preventive health practices

Preventive health behaviours

Household heads were asked what health practices they or members of their household have kept doing after the end of the program. **No respondent answered that they had kept none of the health habits. 27% of the sample reported that they had made changes in all 7 specified domains**, and more than half of the sample had maintained 5 or more preventive health behaviours (55%) (Figure 38).

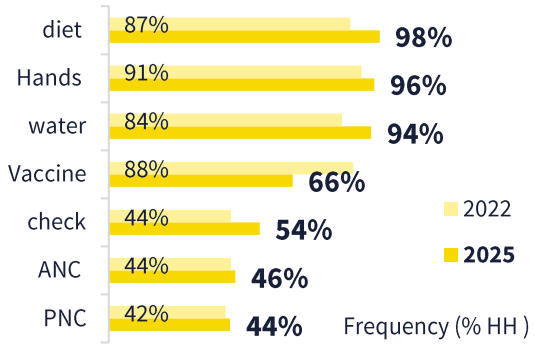
Figure 38. Number of different preventive health behaviours adopted in the household in 2025



As can be seen in the Figure 39 below, handwashing and other hygiene behaviours was the practice most engaged in (91% of HH) in 2022 and the percentage of households that follow this habit is even higher three years later (96% of HH). There were also an improvement of diet habits (from 87% to 98%) and drinking habits (from 84% to 94%) [27]. It suggests that households have internalized these practices and continue benefiting from them.

[27] Khi2, significant at the 1% threshold

Figure 39. Percentage of households who maintain their changes during the last 3 years to each health behaviour



Hygiene practices were also discussed in the focus groups: handwashing with soap has become routine, and entire villages have become cleaner: "*Washing hands with soap before eating and after the toilet has become a practice.*"

On the contrary, there was a steep decline in vaccination (from 88% to 66%), which is however the only negative evolution over time in preventive health habits. It can be explained by two reasons: first, vaccination, once done, does not need to be repeated as often as other habits; second, three years ago was the COVID period, which meant a higher rate of vaccination purely to prevent COVID. In addition, focus group participants state that there was a real change in mindsets about vaccination, as informing people helped them to understand the importance of this practice, such that "*People got vaccinated and are doing it now*".

Regular health check-ups, initially reported by less than half of respondents, increased over the three-year period, indicating a gradual integration of this behaviour into routine health management. Ante Natal Care (ANC) and Post Natal Care (PNC) attendance didn't show any significant improvements, though these practices remain relevant only for households with members concerned by pregnancy or postpartum needs.

The analysis shows a significant association between the number of preventive health behaviours adopted by households and their participation in health camps. Individuals who attended more health camps tended to adopt a

higher number of preventive practices[28]. This pattern mirrors the findings observed in 2022, suggesting that camp participation contributed to reinforcing and sustaining these behaviours over time.

The analysis of the links between participation in different types of health events and the maintenance of preventive behaviours three years after the end of the program reveals heterogeneous patterns across practices. Regular health check-ups remain positively associated with having attended a health camp[25], as well as with participation in a VHSND session[29]. In contrast, no association is found between health camp participation and handwashing, mainly because adherence to hygiene practices is now nearly unanimous, making it impossible to detect behavioural differences across groups.
Participation in vaccination camps is strongly and significantly associated with maintaining vaccination behaviour. 90% of the household members who attended the camp continued their vaccination habits, while 47% of households that did not attend any camp reported doing it. Confirming the central role played by these camps in promoting and sustaining immunization practices. This is particularly relevant given the overall decrease in vaccination rates observed three years later. On the other hand, unlike in 2022, VHSND sessions no longer show an effect on vaccination, likely because their earlier impact depended on the simultaneous presence of vaccination camps, which left a stronger and more lasting impression on households.

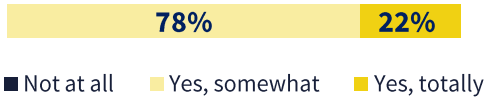
Drinkable water

The analysis shows no significant link between attending health camps and drinking safe water, which is expected since almost all households already adopted this behaviour, making it statistically impossible to identify influencing factors. However, the fact that a large majority of the water stations set by the CEP are still functional supports the idea of the CEP playing a part in it.

Diet and health state

We examined in which extent households continue to use kitchen gardens established with support from the CEP to feed their families (Figure 40). Among the 104 households that had set up a kitchen garden with CEP assistance, 63 (61%) reported that they still rely on it for family consumption. Of these 63 households, 78% said the kitchen garden "somewhat" contributes to feeding their family, while 22% stated it "totally" contributes.
This result indicates that a majority of households maintain a tangible benefit from the kitchen gardens they developed through the program. Interestingly, 39% of households no longer use their kitchen garden for family nutrition. This raises questions about the reasons behind this: it could be due to challenges in maintaining or producing enough, or it could reflect households' decisions to reallocate their time to other activities that provide greater or more reliable food or income. However, qualitative data from the household survey and from the focus groups gives more weight to the former hypothesis, with general praises of the kitchen gardens and frequent mentions of the difficulty to maintain them after one season.

Figure 40. Households who used kitchen garden to improve their feeding practices

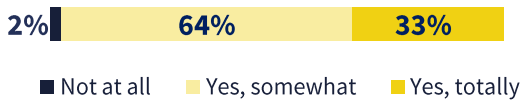


The link between receiving CEP support for a kitchen garden and adopting a healthier diet could not be explored statistically, as diet improvement is so widespread among beneficiary households. However, it is worth noting that many focus group respondents highlighted the impact of kitchen gardens, explaining that **families now grow and eat nutritious vegetables at home, which has reduced illness among children**; "*People are now getting nutritious food at home […] children are falling sick less often.*"

Furthermore, **98% of households who participated in a nutrition camp declared it had helped them to improve their children's nutrition grade, or child care practices, or general feeding practices** (Figure 41)**.**

[28] Spearman correlation, significant at the 1% threshold
[29] [29] Khi2, significant at the 1% threshold

Figure 401. Households who felt the nutrition camp helped them improve their feeding practices (N=82)



Respondents were asked to more specifically how the nutrition camp had helped them improve their diet practices or their children's health. Health improvements were frequently mentioned, particularly regarding children, with 23% of respondents noting better overall household health. Several respondents reported adopting new daily habits promoted by the program. For example, one household said, "*We follow everything that was taught: how to eat and what foods to include; if we eat healthy food, we will remain healthy.*" Others emphasized hygiene and nutrition practices, with statements such as, "*Now we have started paying attention to cleanliness and eating green leafy vegetables*"; "*In the nutrition camp, we were taught that children should be given medicine as needed and provided with nutritious food*" and "*Feed the children nutritious food regularly and ensure they wash their hands before eating.*" In addition, 71% of households now focus on eating balanced meals, 15% emphasize cleanliness, 10% wash hands before meals, and smaller shares follow practices related to storing food safely, drinking clean water, maintaining general hygiene, and taking medicine.

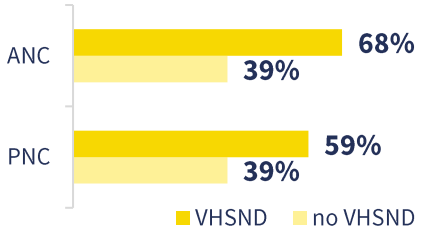
These comments were echoed in the focus groups, where nutrition camps were praised several times. Participants argued that awareness around malnutrition increased through nutrition camps, where mothers learned practical feeding and hygiene techniques; "*They now feed them Bajra and Ragi… malnutrition can be reduced.*"

Antenatal care and Postnatal care

We examined the relationship between participation in VHSND camps and the use of antenatal care (ANC) and postnatal care (PNC) services[30]. The analysis shows a significant positive association: households that attended VHSND camps were more likely to engage in both ANC and PNC services. Specifically, 68% of households who participated in VHSND camps reported attending ANC services, compared to 39% among non-participants. Similarly, 59% of VHSND participants reported attending PNC services, versus 39% among non-participants. These results suggest that VHSND camps have a lasting effect on maternal health behaviours (Figure 42).

This finding allows a strong interpretation of causality. Households currently accessing ANC and PNC were not necessarily expecting a child or caring for a young infant three years ago, meaning that the VHSND camps likely preceded the pregnancy and acted as a preventive intervention. Therefore, the association observed is unlikely to be confounded by pre-existing behaviours, making the case for a causal effect of VHSND participation on maternal health practices. This pattern was already observed in 2022, confirming the robustness of the results.

Figure 412. Households who attend to VHSND camps and followed ANC and PNC practices (N=252)



3. Curative health practices

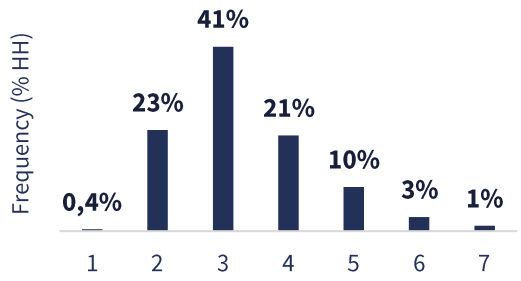
Households were asked if they would know where to access healthcare if a household member were to fall ill tomorrow. Out of 252 household heads, 251 responded positively. They were then asked which types of curative health services they had accessed in the last semester (see Figure 43 below). 77% of households consult multiple services. Only one household reported not visiting any service, while 57 households (23%) visited one type of service.

The mean number of services consulted in 2025 (2,35) is slightly but significantly higher than in 2022 (1,71)[31]. This indicates that households are, on average, consulting a slightly higher number of health services compared with 2022.

[30] Khi2, significant at the 1% threshold

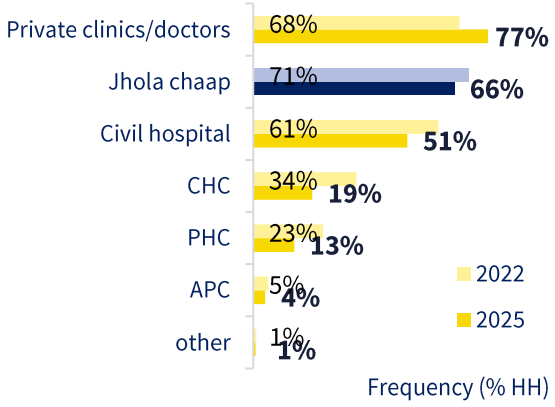
[31] T-test, significant at the 1% threshold

Figure 423. Number of different healthcare services used in last 6 months



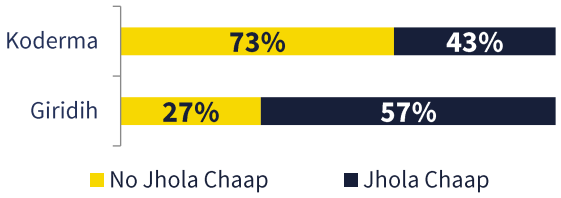
They gave the detail of what type of healthcare they had accessed in the last 6 months (Figure 66). In 2025, 77% of households visited private hospitals, 66% Jhola chaap (quack doctors), 51% government hospitals, and smaller respectively 19%, 13% and 4% attend Community Health Centres, Primary Health Centres, or Additional Primary Health Centres (Figure 44). Compared with 2022, use of public facilities has decreased, while private hospital visits have increased. Jhola chaap remains the second most frequently used service. These findings are only partly reflected in one focus group participant's statement: "*Through health camps, we connected people to the CHC (Community Health Centre). We taught them that visiting the government CHC saves money and ensures better treatment compared to local quacks*", and "*People now go to Gama for treatment, saving money and getting checkups nearby*".

Figure 44. Access to different healthcare services in last 6 months



The use of Jhola chaap services varies significantly by district[32]. In 2025, 57% of households in Giridih reported visiting a Jhola Chaap provider (see Figure 45), compared with only 43% in Koderma, while there was no such difference in 2022.

Figure 435. Access to different healthcare services in last 6 months

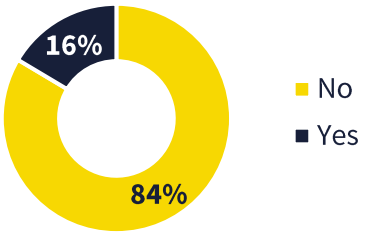


In contrast, Jhola chaap usage is not significantly associated with caste[33], consistent with the findings from 2022.

4. Improved physical health

Household heads were asked if they thought their families had any health problem this last 30 days. As shown in Figure 46, a vast majority answered no.

Figure 446. Households who state that none of their family member had health problem this past 30 days.



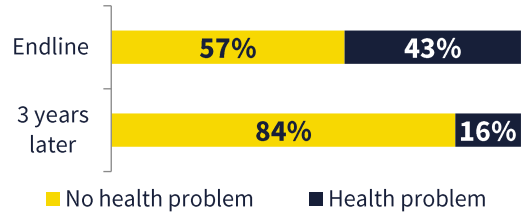
When asked about the health problems experienced by the 282 household members, respondents most frequently mentioned fever in 55%of the case, followed by colds with 14% and coughs at 10% rate. Fever episodes could vary in duration, sometimes lasting only a day but occasionally persisting longer. Other commonly reported sickness included vomiting (3%), diarrhea (1%), and headaches (2%). Respondents also described more chronic or severe illnesses, such as malaria (5%), typhoid (3%), pneumonia, tuberculosis, jaundice, thyroid issues, and chickenpox.

[32] Khi2, significant at the 1% threshold
[33] Khi2, non-significant

In addition to general illnesses, households reported a range of body-related problems. Leg pain was reported by 7% of members, stomach pain by 5% and after there was bone fractures, back pain or knee problems. Some less frequent conditions included anemia, diabetes, epilepsy, mental health problems or low blood pressure. The data highlight a mix chronic, and occasional health problems affecting household members.

A comparison of household health problems at the end of the program and three years later shows a significant improvement over time[34]. At endline, 43% of households reported experiencing at least one health problem, but 3 years after the program only 16% reported a health issue (Figure 47).

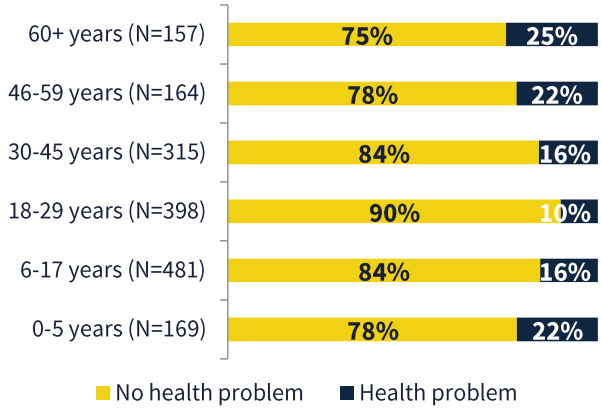
Figure 457. Households that record health problem at the end of the program and 3 years later



The presence of health problems does not differ significantly by sex[35], indicating no statistically robust association between gender and reported illness. However, the result demonstrates a trend that women report health problems slightly more frequently than men, that's consistent with what was already observed in 2022. This recurrent trend suggests that women may remain somewhat more exposed, or are more likely to report health difficulties.

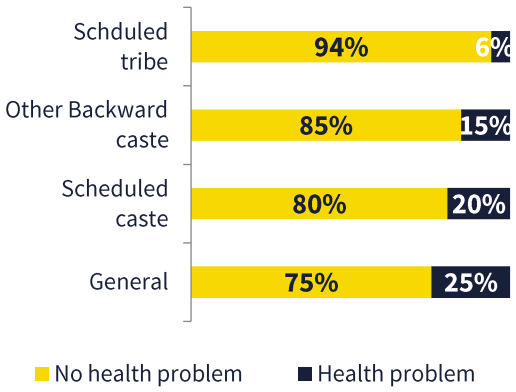
Health problems show a clear and statistically significant association with age[36]. The youngest and oldest age groups report the highest levels of health issues, with 22% of children aged 0–5 and 25% of adults aged 60 and above experiencing a health problem. In contrast, young adults, 18–29 years, report the lowest rate which is 10%. Intermediate age groups are in a mid-range 16% for both 6–17 and 30–45 years and 22% for 46–59 years. The findings are consistent with those from 2022 and highlights that vulnerability to illness is concentrated at both extreme age brackets (Figure 48).

Figure 468. Incidence of health problems by age



Health problems are also significantly associated with caste[37]. Some caste groups report notably higher levels of health issues than others, as shown in Figure 49 (no statistical difference between "Scheduled caste" and "General", though).

Figure 479. Incidence of health problems by caste



Health problems do not appear to be associated with the district, as the relationship is not statistically significant[38]. In other words, households in Giridih and Koderma report similar levels of health issues in 2025.

[34] Khi2, significant at the 1% threshold
[35] Khi2, non-significant
[36] Logit, significant at the 1% threshold
[37] Khi2, significant at the 1% threshold
[38] Khi2, non-significant at the 5% threshold

These findings contrast with the 2022 results, where Koderma showed a higher prevalence of health problems, and where there was no difference by caste.

Health has become more of a shared concern from the focus group respondents' perspective; for example, they stated that "*Previously, if someone fell sick, people stopped visiting their house. If someone had a fever, they misunderstood it as magic, witchcraft, or ghosts […] But now, people immediately say, "No, leave all this and go to the doctor first.*"", and "*Previously, people would hide illnesses. Now, they seek advice from neighbours or community volunteers*". Health is no more an individual problem; it becomes a collective concern; "*community solidarity has improved. If someone is sick or has an accident, the village collects money to help them*".

Conclusions

- 61% of households who were helped by the CEP for their kitchen garden still grow it nowadays.
- Preventive health behaviours have been widely sustained: almost all households kept at least one habit, and most maintained three or more. Participation in health-related camps is strongly linked to adopting and maintaining these practices.
- VHSND participation had a clear positive effect on ANC and PNC use even three years later, suggesting an impact on maternal health behaviours.
- Nutrition camps were perceived as helpful by nearly all participants, to improve their diet, hygiene, and childcare practices.
- Households increasingly use multiple healthcare providers, especially private hospitals and Jhola chaap practitioners, while public facility attendance has declined.
- Physical health has improved markedly since endline: health problems fell from 43% to 16%, with higher vulnerability at the youngest and oldest ages and among some caste groups, but no district or age differences.

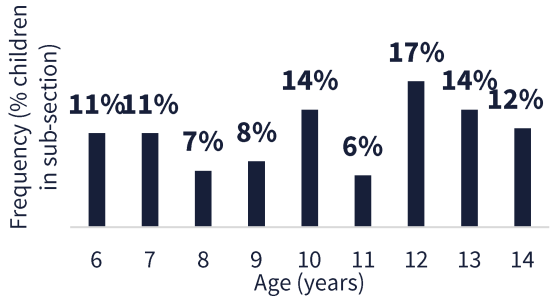
Impact: Education

In this section we explore the impact of the program on perceptions of the school, on attendance, and on literacy and numeracy. Some of the questions were asked to household heads who are parents, others directly to their children. As it was not possible to track individually, three years later, children who were attending CEP-modelled schools during the program, the methodological approach chosen for this section was to focus on the school themselves, and on children (and their parents) who attend these schools nowadays. Instead of looking for long-term impacts of all education-related CEP activities on the children who benefited from them between 2019 and 2022, we explore the persistence of CEP outputs, and how these outputs can still benefit children today.

There were 355 individual children aged between 6 and 14 years of age in 177 of the sampled households. The distribution of children by age indicates that the largest groups were children aged 6 (53 children, 15%) and 12 (50 children, 14%). The age of children in the sample ranged from 6 to 14 years, with a mean age of 9.9 years.

A subsample of 179 children aged 6-14 were directly surveyed. As shown in Figure 50, the distribution of children by age indicates that the largest groups were children aged 12 (31 children, 17%), 10 (25 children, 14%), and 13 (25 children, 14%). The mean age of children in the sample was 10.3 years.

Figure 50. Age distribution among surveyed children (N=179)



The sex distribution was similar among the two groups of 355 and 179 children, with 53% being male and 47% being female.

1. Permanence of CEP outputs in the schools

One of the main CEP actions towards education was to bring support to enhance school facilities and equipment, as well as teaching quality. Some of the outputs were meant to outlast the program[39]:

- Safe learning environment measures (enclosing the school premises, access to safe water, clean toilets)
- Play and sports equipment
- School libraries
- Print-rich environment (wall paintings which served as learning supports and for decoration)
- Teaching and learning materials

Focus groups perspective

Participants were asked specifically on the above-mentioned outputs. They confirmed the permanence of play and sports equipment, school libraries and print-rich environments in 100% of the schools. However, only four out of eight groups (16 villages) confirmed that the safe learning environment was still in place.

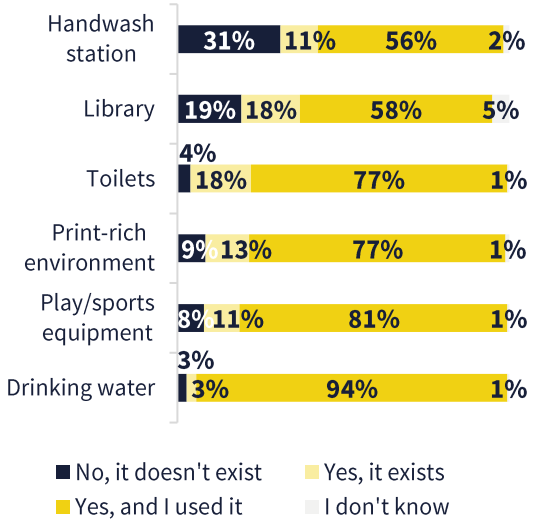
Children's perspective

Children were asked about the presence and the use of the various school facilities brought by the CEP (Figure 51). Each of the facilities has been used by a majority of children, but the rate of permanence and usage is variable. Most used facilities are drinking water station (94% of children), play and sports equipment (81%), print-rich environment and illustrated books (77%), and toilets (77%). Some facilities existed but were not used by all children: for example, 18% of children reported that the library existed but they did not personally make use of it, and 18% indicated the toilets existed but they did not use it. This last result echoes subsequent results showing a persistent toilet hygiene issue, resulting in children staying away from them. Libraries and handwash stations were less frequently accessed,

[39] Other activities were set up during the program but did not carry on afterwards, such as: Slow learning centers (SLC) where slow learning children could benefit from additional classes and activities; teacher training; SMC training; educational events (social issues rally, drawing competition, drama competition, etc.)

with respectively 58% and 56% of children reporting they had used them. A small proportion of children reported that certain facilities did not exist at their school, notably handwash stations (31%), libraries (19%), print-rich environment (9%) and play equipment (8%). Very few children indicated that they did not know whether the facilities existed (1–5%).

Figure 51. Permanence and use of school facilities by the children (N=179)



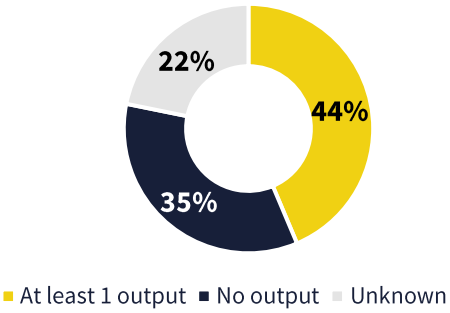
When asked about their favourite aspects of school, children highlighted the importance of **playing and sports**, with 50% mentioning that they like it. Specifically, 31% emphasized playing or practicing sports, and 24% mentioned play equipment or sports facilities. As one child noted, "*We get the opportunity to play*". Learning activities were also frequently cited: 22% of children mentioned studying as a favourite activity, while 12% highlighted reading books or accessing the library. Altogether, **45% of students mentioned something related to learning, including studying, books, teachers, or teaching equipment**. Children expressed their interest in education in statements such as: "*Studying at school is done well, and the teacher comes on time*", "*Teachers make us do games and exercises and teach studies in a good way*", and "*I have more interest in education, especially in mathematics.*". Other aspects of school were less frequently mentioned: 10% of children highlighted teachers, 9% teaching equipment, 6% the general school environment, and 4% good hygiene. Some children appreciated the school's facilities and visual environment, as illustrated by comments like "*The computer lab*" and "*I like seeing colourful paintings and posters.*"

Children were also asked about aspects of school they liked the least. Notably, 31% of children reported that there was nothing they disliked, indicating overall satisfaction. However, **school toilets were a common concern, cited by 30% of children**. Other hygiene-related issues were mentioned less frequently, 9% of children noted problems with drinking water or handwashing facilities, and 2% mentioned other hygiene issues. Some children highlighted aspects related to teachers (6%) or play and sports equipment (4%) as least liked, while a small number mentioned school food (2%).

Parents' perspective

In addition to the children, the 55 parents whose children were enrolled in a CEP-modelled school were asked about the permanence of CEP outputs in their child's school[40]. **44% of them declare that at least one of the outputs still exists in the school, while 35% of them state that none of the outputs still exist in the school**. Finally, 22% of parents don't know or do not answer regarding output sustainability (see Figure 52).

Figure 52. Parent perceived school output sustainability



Among outputs which remained, **most cited are drawing or painting activities, and sports equipment.**

Parents were asked about the importance of having certain facilities and resources in their children's schools (Figure 53). The vast majority of

[40] Parents are likely to be less informed than children on this matter, so their answers give us more insight on their perceptions of quality schools and education.

parents considered these elements are really important in school. 79% reported that it was very important, while 19% said it was somewhat important. Only 2% of parents were unsure, and no parent indicated that it was not important at all.

Figure 53. Age distribution of children in child survey (N=185)

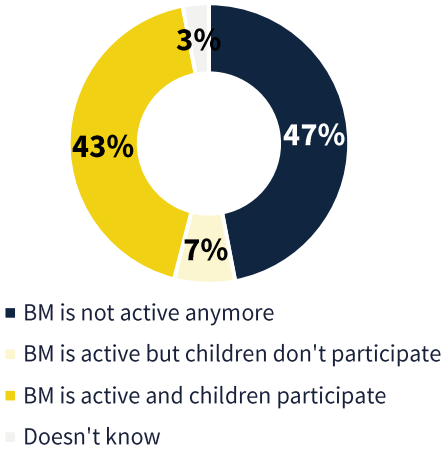
45% of parents link these outputs to an improvement of learning conditions for their children, meaning by **making children enjoy more going to school** (and thus improving attendance), **more interested and engaged** in school work, and **easing the learning process**. Several parents pointed out the benefits of the **print-rich environment, sports equipment and computers availability**: "*Children understand more by observing drawing activities*"; "*Having sports equipment motivates children to go study*"; "*computer classes make children smarter*". Moreover, some parents highlighted the importance of **children's health**, especially since staying healthy helps them succeed in their studies. A few parents also appreciate that their children are **given opportunity to play**: "*We are from a poor family, cannot send children outside, but if school has facilities, it is very good*".

Permanence of Bal Manch activities

The CEP has promoted Bal Manch, groups for play-based learning activities and artistic activities open to all children in a same village, aiming at increasing their aspirations to education and learning. We investigate whether Bal Manch remains sustained three years after the end of being supported by the CEP, based on household evaluations.

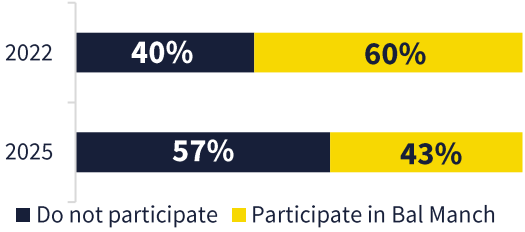
Among the 177 household heads with 6-14 years-old children, 50% stated that Bal Manch is still active in their village (Figure 54). Answers are not always consistent within the same village, which means it could be a matter of parents not being informed about Bal Manch, rather than activities having completely stopped. Among those who are aware of Bal Manch activities, 85% send their children to participate, showing that even if the groups are not present in all villages, they are highly appreciated where they are maintained and known about. **There is at least one family aware of Bal Manch continued activities in 29 out of 32 villages,** and there is at least one family whose child is participating in 27 out of the 32 villages.

Figure 54. Bal Manch activity



A comparison between the 2022 and 2025 survey shows a significant decrease in children's participation in the Bal Manch activities[41]. In 2022, 60% of households reported that their children participated in Bal Manch, whereas this proportion decreased to 43% in 2025. Households that report non-participation increased from 40% in 2022 to 57% in 2025 (Figure 55). It is possible that these results can be explained by parents' lack of awareness of the existence of the *Bal Manch*. This perception bias may have been present in the 2022 study and may have grown over the years, particularly among parents who enrolled a child in school for the first time between the two studies.

Figure 55. Evolution of Bal Manch participation



[41] Khi2, significant at the 1% threshold

There also appears to be a significant difference in Bal Manch participation across districts[40], with higher attendance in Koderma (54%) than in Giridih (34%). However, this gap completely disappears when analysis is restricted to families who reported being aware of the Bal Manch. In this subgroup, 88% of informed families in Giridih and 84% in Koderma reported participation, with no significant difference[42].

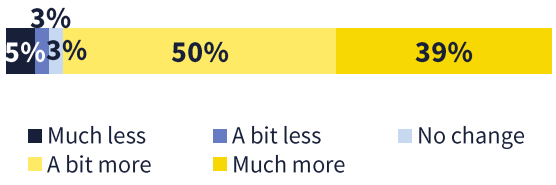
The analysis of Bal Manch participation by caste group shows no statistically significant differences[41].
Similarly, comparing Bal Manch participation in reference to the education level of the household head reveals no significant association[43]. Participation rates remain similar regardless of whether the household head has low, medium, or high levels of education.

2. Perception of school and attendance

School perception due to Bal Manch

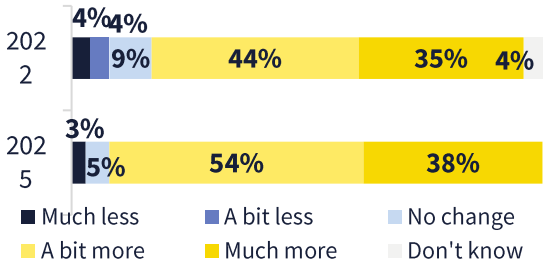
A majority of households report that their child's participation in the Bal Manch had a positive effect on how much they enjoy going to school. Half of parents (50%) say their children enjoy school a bit more, and 39% say they enjoy it much more. Only a small minority report a decrease in enjoyment, 5% much less, 3% a bit less and 3% stated that there is no change (Figure 56). These results are consistent with the endline study[44].

Figure 56. Parent perceptions of children's increased enjoyment of school due to Bal Manch



Household heads perception about school engagement appears generally positive after a participation in the Bal Manch. 54% of parents reported that their children were a bit more invested in their schoolwork, while 38% reported that their children were much more invested. Only 5% observed no change, and very few parents, 3% reported that their children were less engaged. When comparing the 2025 results with 2022, there is a significantly more positive perception of school investment in 2025 than in 2022[45] (Figure 57).

Figure 57. Parent perceptions of children's increased engagement in school work due to Bal Manch



Perceptions of the importance of education

All those household heads with at least one child of 6-14 years of age (whether enrolled in a CEP school, other school or not enrolled at all) responded to questions on the importance of school education. This was a subset of 177 households. 94% of parents reported that having their children receive school education is "very important", while 6% considered it "quite important." No parents reported that school was "not important."

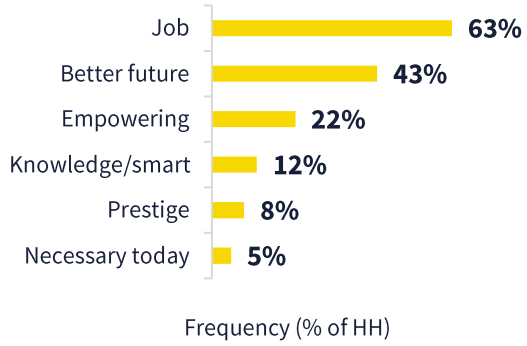
The proportion of parents rating school as very important increased from 74% in 2022 to 94% in 2025, while those reporting quite important decreased from 25% to 6%.[46].

The main benefit parents see in education is getting better **job opportunities** (63%), followed by being able to **improve one's life** (43%). It is then seen as **empowering** (22%, "*Being educated ensures knowledge and intelligence. Proper education is important so that the child can stand on their own feet*"), including by developing one's **knowledge and intelligence** (12%)(Figure 58). A few parents find that education is a **source of**

[42] Khi2, non-significant at the 5% threshold
[43] Logistic regression, non-significant at the 5% threshold
[44] T-test, non-significant at the 5% threshold
[45] T-test, significant at the 1% threshold
[46] Khi2, significant at the 1% threshold

prestige, others that it has become **necessary nowadays** whereas it was not the case before. Moreover, 11% of parents mention how a child's education **benefits his whole family**, and 10% are all the more wishing that their children get an education **because they themselves did not have that chance and see how it affects them today**.

Figure 58. Child investment distribution by year



School effort

Households' efforts to support their children's education remain consistently high. In 2025, 97% of parents reported having made additional efforts over the past three years to improve or maintain the quality of their child's education, while only 3% reported not having. These results are identical to those observed at the end of the program[47], but the proportion of parents making these efforts is so high that it creates a ceiling effect, making it difficult to obtain a significant increase

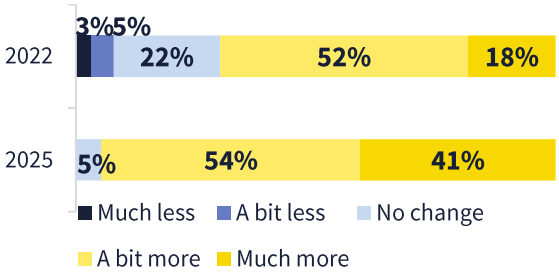
A content analysis of parents' explanations shows that they have been actively trying to improve or preserve their children's education over the past three years, using different strategies. Several emphasized to their children that **studying would allow them to avoid the hardship** their parents experienced: "*If you study, you won't have to do labour work like us*", or highlighted the **long-term benefits**: "*If they study, they will get a good job and live a better life*". Around 9% explicitly mentioned job and future perspective, while others used **rewards** to encourage them: "*If you go to school every day, you will get a cycle*". A small number relied on affection or in opposition scold them for not going. Parents also reported numerous material and structural efforts to support learning.

Nearly half (49%) arranged tuition or extra classes, sometimes combined with study material or provide them a way to go to school: "*We provided tuition and even a mobile phone for online classes*", "*We arranged a bus so they can attend daily*" or "*We buy new books so the child can study well*". Some invested in **private schooling** when they were dissatisfied with government schools (5%). Finally, many parents described efforts related to **daily study habits and attendance**, with more than half **(54%) ensuring that children attend school regularly and on time**: "*We wake them early, get them ready, and send them every day*". Others assisted directly with learning at home: "*We sit with them during homework*". Some emphasised the importance of maintaining focus by making children avoid household labour: "*We don't make them work so they can concentrate on studies*".

School attendance

Households' perceptions of school attendance indicate a clear improvement in 2025 compared with 2022. Among parents whose children participated in the Bal Manch, **54% reported that their children stayed a bit longer at school and 41% reported that they stayed much longer**. Only 5% indicated no change, and none reported a decrease (Figure 59).

Figure 59. Increased attendance in school (hours per day) due to attendance to a Bal Manch



The program has had a strong and lasting impact on education in the village, especially on school attendance, motivation, and learning environments. The focus groups conducted reveal testimonies consistent with the results of the survey questionnaire. Many respondents noted that attendance has increase; "*where 20 children used to go to school, now 100 to 150 go*" and "*dropouts are next to nothing now.*" A major factor behind this change is the Bal Manch, which made

[47] Khi2, non-significant at the 5% threshold

children feel responsible for each other and encouraged consistent attendance. Sports and play-based learning also transformed children's interest in school. After receiving equipment, "*children come to play, and through playing, they study*" which helped remove the fear and burden of education. Girls' participation has increased significantly, with many now studying in Grades 11 and 12, and "*the number of girls higher than boys in participation.*" **The program also reduced child labour in mica mining, a major barrier to schooling; "*Now that child labour has stopped, attendance in school has increased.*"**

4. Improved educational outcomes for children

In order to assess literacy and numeracy levels, all children of 6-14 years of age in sampled households were tested using the ASER reading and math testing tools. This allows children to be placed in one of 5 categories reflecting their level of proficiency.

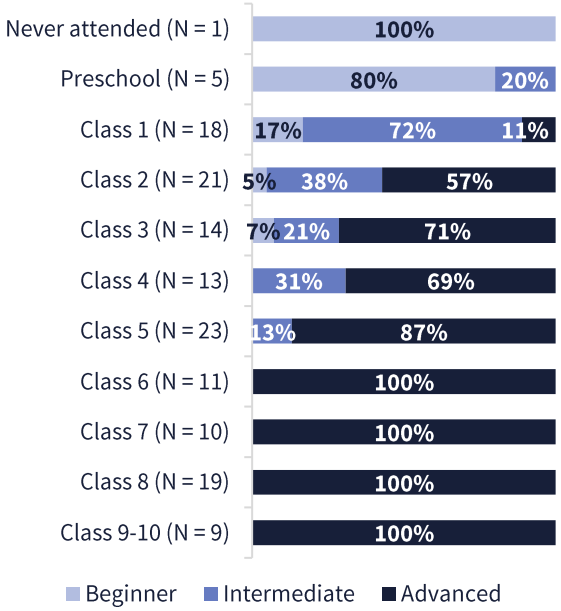
Literacy

Of the 179 children tested, 10 children (6%) were categorised as beginners, which indicates that they could not recognise letters. A further 13 children (7%) were placed in the letter category, which describes children who can recognise letters but not whole words (Figure 60). 28 children (16%) could recognise single words but not a short phrase (word category). 22 children (12%) were able to read a short paragraph (paragraph category). Finally, 106 children (59%) could read a short story (story category).

Figure 60. Literacy levels in CEP sample (N=179)

To simplify interpretation of results, in the diagrams that follow we collapsed the categories such that children who could recognise letters or words were designated intermediate and those who could read paragraphs or stories were designated advanced. The beginner category remained the same. In statistical analyses we used the 5 original categories. First, we explored the distribution of literacy levels by class. As expected, this shows reading level becoming more advanced as we move to the more advanced classes, and this is statistically significant[48].

Figure 61. Literacy levels by class



Child literacy levels distributions by sex is relatively similar. Among boys, 50% are classified as advanced readers, while 33% are at the intermediate level and 18% at the beginner level. Among girls, 38% are advanced, 37% are intermediate, and 26% remain at the beginner level. Although the figures seem quite different, there was no significant relationship between sex and literacy level[49], unlike in 2022 when boys showed higher scores than girls. It should be noted that the tests conducted take into account all the variable categories rather than the broad categories of 'beginner,' 'intermediate,' and 'advanced'; this indicates that the distribution of girls' scores has become closer to that of boys. This result is valid for all children from surveyed households, since this sub-sample of 179 tested children has the same distribution by sex than the larger group of 355 children[50].

[48] Pearson correlation, significant at the 1% threshold

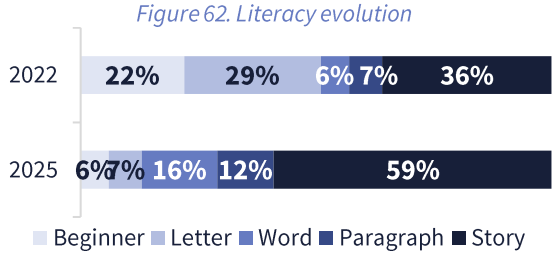
[49] T-test, non significant. This discrepancy between apparent variable distribution and statistical result is likely to happen when considering small samples, in which a few unusually "extreme" values can distort the distribution.

[50] Khi2, non-significant

In contrast, there was no significant link between literacy level and caste[51] or district[52], consistently with the endline study.

A comparison of literacy levels between 2022 and 2025 shows dramatic improvement in children's skills. In 2025, 59% of children reached the story level, compared to 36% in 2022. Similarly, the proportion of children able to read at the paragraph level increased from 7% to 12%. Meanwhile, the number of children in the lowest categories decreased, in beginner it went down from 22% to 6%, and in letter recognition level from 29% to 7%, as shown on figure 62. The test confirms that this shift is statistically significant[53].

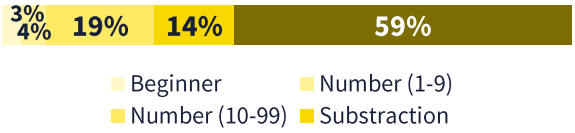
Figure 62. Literacy evolution



Numeracy

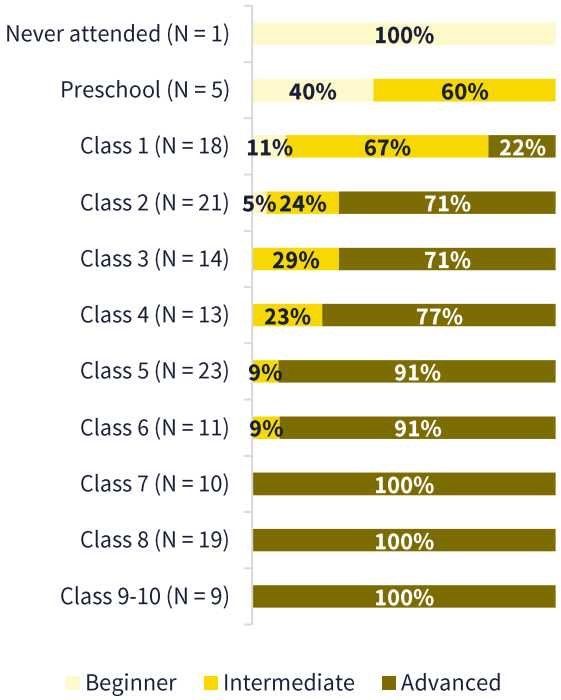
Of the 179 children tested, 6 children (3%) were categorised as beginners, which indicates that they could not recognise numbers. A further 8 children (4%) were able to recognise only single-digit numbers and 34 (19%) could also recognise double-digit numbers. 25 children (14%) could carry out a long subtraction sum and a further 106 children (59%) could also carry out a long division sum (Figure 63).

Figure 63. Numeracy levels in CEP sample



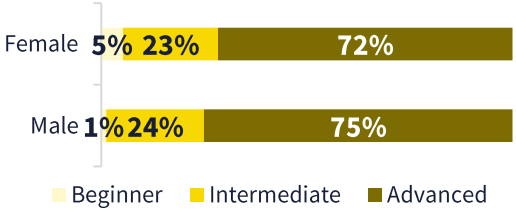
As with literacy, to simplify interpretations three categories were created, representing beginner, intermediate (able to recognise single- or double-digit numbers) and advanced (able to conduct long subtraction or long division sum). These categories were used for the diagrams below but analyses used the original 5 categories to explore the relationship between numeracy and class, sex, caste and district. As shown below (Figure 64), numeracy level is seen to increase through the classes, and this pattern is statistically significant[54].

Figure 64. Numeracy levels by class



Contrary to literacy, numeracy levels were also significantly associated with sex[55], such that numeracy was higher in boys than in girls, which is the same result as three years ago.

Figure 65. Numeracy levels in CEP sample, by sex

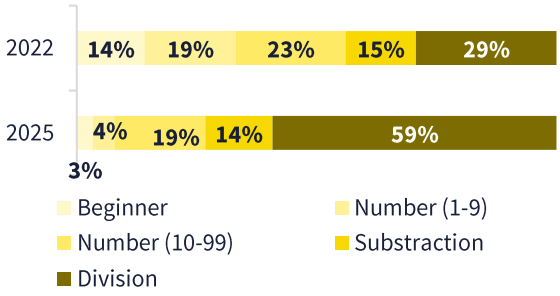


[51] Anova, non-significant
[52] Welch Test, non-significant
[53] Khi2, significant at the 1% threshold
[54] Pearson correlation, significant at the 1% threshold
[55] T-test, significant at the 5% threshold

In contrast, there was no significant link between numeracy level and caste or district[56], consistently with the 2022 study.

Similarly to literacy, children's skills in numeracy have increased steeply between program end and three years later. In 2025, 59% of children had reached the division level, compared to 29% in 2022. Meanwhile, the proportion of children able to do subtraction and to count until 99 didn't change a lot, respectively it went from 15% to 14% and from 23% to 19%. The number of children in the lowest categories decreased, in beginner level it went down from 14% to 3%, and in single-digit numbers level from 19% to 4%, as shown on figure 65. The test confirms that this shift is statistically significant[57].

Figure 66. Numeracy evolution



In order to compare the literacy and numeracy of the children in the CEP sample with another equivalent sample, we consulted the 2024 ASER report which provides their most recent literacy and numeracy test data. Because all children entering Class 3 in India should be able to read a short text fluently and calculate a subtraction sum, ASER looks at the percentage of children in Class 3 who are at "story" level for literacy and at least "subtraction" level for numeracy. They tested children all over India, and the table below shows the percentages in the ASER sample for India as a whole, followed by the state of Jharkhand (JK). The comparative result for the CEP sample is shown in the bottom row (Table 4). Similarly, in Class 5 children should be able to read a story and calculate a division sum, so ASER looks at the percentage of children in Class 5 who are in the "story" and "division" categories. Finally, these same percentages are calculated at Class 8.

Table B. Literacy & numeracy levels at Class 3, 5 and 8: ASER vs. CEP samples

Class 3 (N = 16)		Class 5 (N = 20)		Class 8 (N = 12)	
Story	Subst.	Story	Divis.	Story	Divis.
INDIA					
27%	34%	49%	31%	71%	46%
JHARKHAND					
20%	31%	45%	30%	70%	51%
CEP					
64%	**71%**	**74%**	**83%**	**100%**	**95%**

The table displays absolutely brilliant results for children in our study sample, more so in comparison with India and Jharkhand averages. We had already observed high results in previous studies, but only for 8th-grade students, and even more notably for the 'story' category. Obtaining positive results on the tests administered to children is consistent with all the other observations made: parents are more convinced of the importance of school, more concretely involved in their children's education, and children are indeed staying in school longer, etc. However, given the exceptional nature of these test results, we explored alternative explanatory hypotheses. The conclusions are presented below:

- The distribution of students across the different classes is equivalent in 2022 and 2025; With one exception: 19% do not know which class they are in, but based on their level distributions, this cannot explain the test result
- Students in class 3, 5, and 8 have the same average age in both studies (2022 vs. 2025)
- The protocol is very strict and leaves no room for the interviewer's interpretation.
- The data collection team was interviewed and confirmed having observed very good results among the students.
- The data collection team confirmed that the protocol was properly followed in the field.
- The surveyors submitted each completed survey directly to the server without making any modifications afterward.
- The national test has not changed since the 2022 study.

[56] Anova, non-significant

[57] Khi2, significant at the 1% threshold

The data collection team, who were able to make direct observations in the field, reported the following possible explanations:

- **Regular schooling and additional support**: most of the children were regularly attending school, and many of them also take special classes or private tuitions outside school hours. Additionally, the Bal Manch program is active in several villages, and children participate enthusiastically in its learning activities.
- **Community and educational initiatives:** in a few locations, surveyors informally heard about recent education-oriented campaigns and community activities. While they cannot verify the scale or exact impact, such initiatives may have had a positive influence on the children's performance.
- **Support from local NGOs:** In some areas, NGO partners are actively involved in providing academic or extracurricular support to students. This additional assistance could also have contributed to improved results.

Conclusions

- It is very important to consider both parents' and children's perspectives to understand the sustainability of activities and their impacts. Indeed, some parents appear to have limited knowledge of the activities and facilities at school: the results regarding the Bal Manch indicate variability in perception from one household to another, and regarding the facilities, children's responses reveal more lasting elements than those of the parents. Overall, if we assume that the results reflect a lack of knowledge among some parents, then the actions carried out within the CEP framework appear to be quite sustainable.

- On the other hand, hygiene remains an important issue: the absence of handwashing stations and the fact that toilets are considered a common concern by 30% of children indicate areas where the program could be improved.

- Other results are particularly notable and indicate very positive impacts. The perceived importance of school has increased significantly among parents; they are making more efforts to enable their children to attend school, and they observe that their children are staying at school longer.

- The *Bal Manch* and certain activities and facilities related to sports and learning through play appear to be important levers of success.

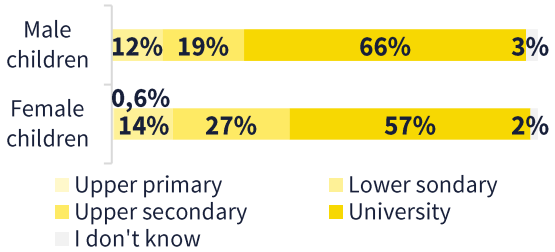
General impacts

The following section explores the general impacts that are not specific to one pillar in particular. These are the impacts that form a bridge between the pillar-specific impacts and the social mission of the program. Here, we explore whether the program provided a quality education for all children, reduced child labour, increased resilience and improved life satisfaction on the long run.

1. Quality education for all children

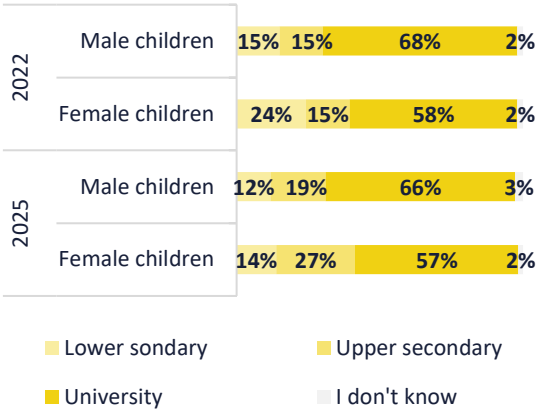
All those parents who had children in CEP schools were asked what level of education they would like their male children and their female children to reach. Out of 177 respondents who reported on their male children, 117 (66%) wanted them to get a university education, 34 (19%) hoped them to reach upper secondary level and 21 (12%) secondary level (Figure 66). Similarly, among the 175 respondents who reported on their aspirations for their female children, the largest proportion (99 parents or 57%) also hoped for a university level education, 48 (or 27%) hoped them to reach upper secondary level and 24 (or 14%) for a lower secondary level. 1 parent (less than 1%) also wished for their female child to graduate upper primary, whereas this option was not brought up for male children. **The difference in aspirations for male and female children is not statistically significant**[58], while it was tendential in 2022.

Figure 67. Aspired level of education for female and male children



We also compare these results with the aspiration level of education in 2022, to evaluate if difference between gender has evolved between the end of the program and 3 years later. Analysis showed significant results between 2022 and 2025 overall[59] and for female[58], but not significant for male children[57] (see Figure 67). Higher aspirations for female children are due exclusively to a shift from "Lower secondary" to "Upper secondary".

Figure 68. Aspired level of education for female and male children



2. Child labour and child marriage

The International Labour Organisation (ILO) defines child labour according to the following specifications:

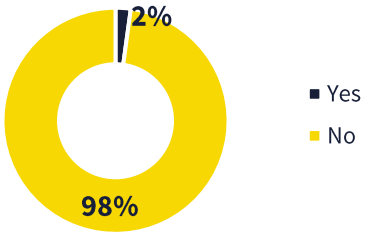
- Any child aged 5-11 years engaging in 1 hour of more paid work per week
- Any child aged 12-14 years engaging in 14 hours or more paid work per week
- Any child aged 15-17 years engaging in 43 hours or more paid work per week

In order to assess the amount of child labour occurring in the sample, we asked household heads to report how many hours per week each child engaged in paid work (along with their age and other information). **Out of the 508 children aged 5-17 years in our sample, 11 (2%) were engaging in an amount of paid work that would be defined as child labour** (Figure 68).

[58] Khi2, non-significant at the 5% threshold

[59] Khi2, significant at the 1% threshold

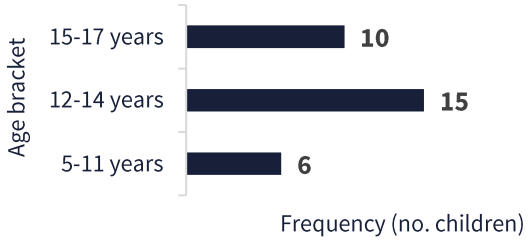
Figure 69. Percentage of sample children engaged in child labour (N=508)



An analysis of the evolution of child labour between 2022 and 2025 shows a significant decrease[60], from 4% to 2%.

Of these 11 children, 2 (18%) were female, and they were in the age brackets shown below in Figure 69. No statistic comparison could be made due to the size of samples.

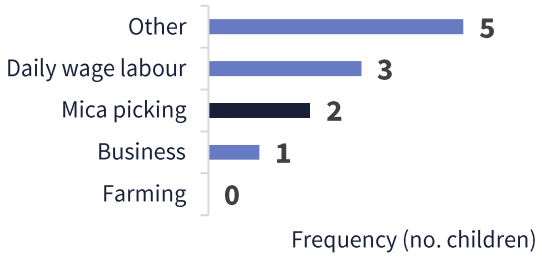
Figure 70. Age distribution of children engaged in child labour (N=11)



All of these children engaged in one sole type of paid work. As can be seen in Figure 70, other work and daily wage labour are the most prevalent types of work among the children, while mica picking activities significantly decreased since 2022[59] (58% in 2022 and 18% in 2025). The "other" category were in the private sector (hotel, packing firm, ration shop).

Another excellent result concerning child labour is the lower incidence of mica picking: whereas in 2022 58% of working children were engaging in mica picking, it applied to only 18% of working children in 2025.

Figure 71. Type of work engaged in by child labourers (N=11)



There was no clustering of child labour by household: the 11 children engaged in child labour were spread across 11 households.

A tendency suggests that higher primary household income is associated with a lower likelihood of child labour, but this relationship is not statistically significant[61].

Concerning mica picking as the primary income, the sample sizes are too small to allow valid statistical analysis, as very few children are engaged in labour. We therefore lack sufficient variation to draw any conclusion about the relationship between child labour and mica being the main income source.

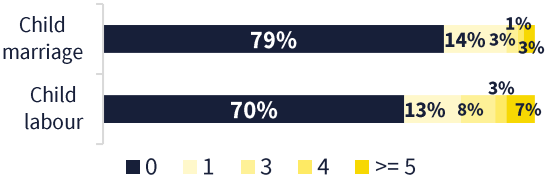
According to the 2024 ILO Global Estimates of Child Labour, 7.8% of children worldwide are engaged in child labour. In the Asia–Pacific region, the rate is lower at 3.1% overall (3.9% for boys and 2.2% for girls). In comparison, the present sample shows that only 2% of children are engaged in child labour, it's **below both the global average and the regional average, especially for boys**.

Lastly, households with at least one child attending Bal Manch activities were asked if their children asked questions or talked more about child labour at home and how many times over the last year. The same question was asked about child marriage. (Figure 71). 30% of children raised questions at least once about child labour, and 21% about child marriage.

[60] Khi2, significant at the 5% threshold

[61] Logistic regression, non-significant at the 1% threshold

Figure 72. Prevalence of children who raise their voices at home about child labour and child marriage (N=76)



In the focus groups, participants were very enthusiastic about the decrease they observed in child marriage and child labour incidence, which they spontaneously **linked to higher school attendance, fostered by Bal Manch activities and awareness campaigns on the importance of education**: *"Previously, there wasn't much knowledge about education, so child marriage and child labour happened. My area is a "Dibra" (Mica scrap) area. Guardians used to take children to pick mica scraps—this is called child labour—or take them to the fields to work instead of school. But the organization came and raised awareness. Now that point (child labour) has become zero."*; and *"Because of Bal Manch, children who used to do child labour (picking mica/scrap) connected with education. Attendance in school increased. Child labour and child marriage stopped. The Bal Manch children ran a campaign, which increased participation in education. It raised awareness among children and their parents/guardians."*

Other participants also highlighted the role played by the assets provided to the households, and the subsequent income improvement: "[Child labour] *stopped to some extent. The Bal Manch was linked specifically to keep children out of the mines, as many had been injured or killed. That has changed—children are staying connected to school. Assets played a huge role in this. If people don't do Mica labour, how will they eat? The assets—sewing machines, shops, livestock—gave them an alternative livelihood right here in the village. Mica mining will end someday, but sewing or running a shop is a long-term business. Those who received these assets have largely stopped going to the mines.*"

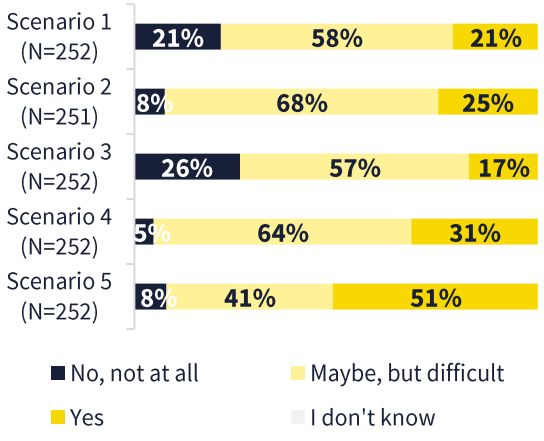
3. Resilience

In order to assess resilience, household heads were asked if they could deal with a series of potential unforeseen circumstances, as shown below:

1. One household member is no longer able to earn money
2. Death of livestock or failure of crop
3. Damage to house from a storm
4. Health problem of a household member necessitating a one-week stay in hospital
5. Arrival of a new family member who will stay with permanently and who you will need to support financially

As displayed in Figure 72, 21% and 26% of households don't feel able to deal at all respectively with one household member no longer able to earn money or with a damage to the house from a storm. On the other hand, they feel most confident about coping with the permanent arrival of a new family member, with half of respondents saying they could manage it (51%). In contrast, income loss of a household member, crop or livestock failure, and housing damage are perceived as difficult to handle by the majority of households (57% and 68% reporting "maybe, but difficult"). Health shocks are especially challenging: only 31% feel able to face a week-long hospital stay. Overall, for most scenarios, households tend to indicate that they could cope, but often only with difficulty.

Figure 73. Perceived ability to deal with unforeseen circumstances



Regarding the evolution between program end and three years later, households are significantly more confident in their capacity to cope with all scenarios (with less households stating a firm "no" and more households declaring a clear "yes", with the exception of scenario 4, for which the share of negative answers grew).

In order to assess if the factors of resilience remained the same as in the endline study, we created a mean score for each household based on how well they thought they could deal with all 6 scenarios.

In the Theory of Change, an important predictor of resilience is financial health. Therefore, we tested whether income from primary means of livelihood and/or improvement in subjective financial situation predicted resilience scores. Both were significantly associated with resilience as in 2022[62], such that households with a greater income, or with better perceived financial health felt more able to cope with the presented scenarios.

In order to link this more directly with CEP activities, we looked at the CEP activity found to have an effect on subjective financial situation: distribution of assets. Conversely with 2022, there was no significative results for this analysis[63]. Households that received assets weren't more resilient than households who didn't.

4. Quality of life

Life satisfaction after the programme

Household heads were asked about their life satisfaction. It appears generally positive in the 2025 sample, with more than 40% of households describing themselves as satisfied, very satisfied or even completely satisfied. Other respondents associated their satisfaction with their happiness and mentioned to be happy or very happy (7%). The qualitative statements highlight important theme for those households such as the number of earning members, income stability, financial improvements, resilience in case of shocks, and food quality and quantity. A smaller group of households express dissatisfaction, mainly due to low or unstable income, high expenses, health issues, or a lack of resilience. They were 10% to express their dissatisfaction or their unhappiness. Other 33% households' heads had more balanced feedback, stating that they are somewhat satisfied, or a little satisfied for example.

Community cohesion

Households were also asked about their participation in community activities, allowing us to explore whether higher community engagement is associated with better life satisfaction. The qualitative satisfaction categories (positive, balanced, negative) were recoded into a numerical scale to conduct statistical tests. The contrast between positive and negative life satisfaction is statistically significant[64], indicating that respondents with low satisfaction tend to participate less in community activities.
Lastly, there is no statistical relationship between life satisfaction and feeling involved in community decision-making[65].

Conclusions

- Regarding differences in educational aspirations between girls and boys, the results show a positive evolution since the 2022 study. Parents do not have statistically different aspirations for their daughters and sons.
- Child labour has decreased, from 4% to 2%. This result is consistent with the overall findings across different pillars (livelihood, education, etc.) and with focus group testimonies. Moreover, the role of mica picking in child labour has sharply declined, from 58% to 18%.
- Analyses on resilience are also positive: respondents are more confident in their ability to cope with various situations compared to 2022. Despite this improvement over time, in absolute terms, most situations remain somehow challenging for many households.
- 40% of households describe themselves as satisfied, very satisfied or even completely satisfied with their lives. More earning members, better resilience and financial improvement were mentioned as elements of life satisfaction.

[62] Correlation, significant at the 1% threshold
[63] Correlation and Anova, non-significant at the 5% threshold
[64] Anova, significant at the 5% threshold
[65] Anova, non-significant

Results

Qualitative interviews (focus groups)

Qualitative impacts analysis

As presented in the methods section, qualitative data collection has consisted of 8 focus groups of 5 to 12 participants, with various stakeholders of the CEP. Interviewees have been questioned on specific outputs and outcomes of the CEP, which have been displayed in this report in complement to the survey analyses. Other broader topics were discussed in the focus groups, such as the main benefits of the program, supporting and limiting factors for continued outputs, and suggestions to support impact on the long term, for the former beneficiaries of this CEP, and for beneficiaries of future CEPs. This section will therefore present what the various stakeholders said during the focus groups about these broader topics.

Ongoing impact of the program

During the focus groups, participants were asked what benefits their communities continued to experience after the program. The first point, brought up in 7 out of 8 focus groups was **irrigation**. They stated that water pumps have been of great help to farmers, who could improve their yields: "*Water scarcity and lack of facilities were major problems here, but the provision of motors brought immense convenience to our farming*" and "*providing a motor to one farmer with one acre of land actually benefits the five acres of land surrounding him*". **Farming methods also improved**, with "*better resources utilisation*". People value the training that allowed them to produce more: "*They taught us how to farm in less space and with less water*" which applies not only to farming but also to kitchen garden training.

Another overall benefit is **a more convenient access to a range of facilities and services, saving time and energy**. For example, with sewing services: "*The community benefits because they don't have to travel to distant villages for tailoring needs. It supports the local economy and saves everyone time*". Grocery stores are appreciated for similar reasons: "*Waiting eight days for the market just to buy salt or oil is difficult. So, opening a grocery shop in the village was a huge achievement.*" or with the Common Facility Centre's flour mill: "*The flour mill also saves us a 10-12 kilometer trip.*"

Others valued livelihood impact and how important it was, specifically thanks to the assets provided; "*The asset support for shops and farming provided long-term benefits*".

Educational outputs and outcomes were strongly highlighted, especially the **Bal Manch activities**, perceived as highly beneficial for the children: "*The formation of the Bal Manch at the village level has been incredibly beneficial. Through it, we created a sense of unity among the children**. It played a crucial role in reconnecting children who had dropped out or drifted away from education completely**. It has not only brought them back to school but is also building their leadership capacity.*" ; "*The Bal Manch worked the best, and we are still continuing that activity even today*". Thanks to the program, **children have more equipment and are more involved and interested in studying**: "*studying has become a habit for them. The village benefited immensely because children received books, pens, pencils—everything needed for their studies*", "*Also, children who used to drop out of studies due to lack of money received help through scholarships, so their studies continued*".

Another theme is the change in mindsets, in relation to vaccination and to women's place in the community.

During one focus group, they also state that health was an important aspect; "*It brought a fundamental change in our hygiene habits and family diet*". Awareness efforts improved health, especially regarding malnutrition, and helped families access government schemes: "*People benefited a lot […] they got houses, pensions, and scholarships for children.*"

Attitudes towards women, as well as the role they play in the communities, have shifted towards **women being more empowered,** as reported in all of the eight focus groups. Participants mention **women attending more public meetings and participating in the discussions**, because they are now aware that useful information will be given for their children nutrition, health, or even for themselves. Fors instance, they were taught sewing skills and provided with sewing machines, which made them income earners for their households. This gives mutual benefits as mentioned: "*Not only are women earning an income, but the community benefits because they don't have to travel to distant villages for tailoring needs. It supports the local economy and saves*

everyone time". Women also acquired **more financial independence, and a better capacity to manage household finances**: "*She doesn't have to wait for her husband to send money from outside, nor does she have to beg a moneylender for a loan*", "*Earlier, women didn't even know how to sit properly in a meeting or speak to people. Now, they manage everything themselves […] They know how to run their households efficiently so they don't face financial trouble*". Lastly, one participant observed that "*Women have become significantly more empowered;* ***they now openly discuss their rights and speak out against violence***."

"*Previously, in meetings, fewer children or mostly boys would participate. Girls were rarely allowed out of the house […] now in Bal Manch meetings, the number of girls is often higher than boys. Girls are speaking up and asking questions. The mindset that "girls should stay inside" has changed*" Similarly, women's presence in meetings has grown, and they actively participate: "*Now, they participate so much that men stand behind, and women are in the front! They know exactly when the meeting is, what date the Gram Sabha is, and what forms are needed.*"

Lastly, there is **more support for girls at school, especially through sports activities**: "*There is a newfound importance given to sports, especially for girls. We recently had a sports officer visit who was amazed to see* ***how much leadership our girls displayed***."

Maintaining and using program outputs

As stated in the focus groups, there is a **general effort to maintain the outputs set up by the CEP**: "*We work with the community to ensure sustainability. Even if the project ends after three years, the work shouldn't stop*". **Collective action** is taken to maintain what proved useful and ensure continued benefits: "*Previously, a motor was given for irrigation […] After it burnt, the Kisan Club (Farmers' Club) collected money and bought a new motor themselves*". **Community activities are more dynamic**, which represents a change in the way the communities organise themselves: "*We want to say that this program didn't just bring individual change; it brought a change in the thought process of the whole society*".

People mentioned that the practices that persisted were mostly linked to assets (such as motor pumps for farming) or to skills acquired and passed down through families (like sewing). "*Training provided the most long-term help.*"
From their point of view, the Jan Suvidha Kendra was truly sustainable: "*People go to the village CSC to fill out forms for all schemes and to use online services.*" People continue to go there to obtain information about social schemes, and everyone shares what they learn within the community: "*If someone went to the city and learned something new, they shared it with the group.*" All of the eight focus groups mentioned that **villagers are now aware of how to benefit from social schemes, and they go sign up for them**: "*Earlier, they waited for a camp. Now, if they have knowledge, they go directly to the Block office to apply for benefits.*"

Villagers have become more self-reliant thanks to the assets they received, **they learned to manage and sustain these resources on their own**: "*For the CFC, we use the savings or profits generated to buy new items when old ones wear out. We are self-sustaining.*" Some initiatives continue to grow over time, as people reinvest their earnings and learn from experience: "*Yes, they are running continuously. For example, the small shop that was provided, the shopkeeper used the profits to expand it. He became trained by experience and grew the business, which benefits the villagers.*"

Supporting factors for continued outputs

Two key elements for facilitating output persistence were mentioned during the focus groups: support from the local leader and community participation: "*Cooperation of the local people and the Local Bodies was the primary factor. Once that cooperation was there, the training became effective. It was a collective contribution*" and "*If I have to pick one, it is Community Participation*", "*The biggest factor was community unity and the strong connection formed between the people and public representatives*".

Less important factors but still discussed in focus group are the **training** that allows to get information and **financial help**: "*Economic help provided great support to move in the right direction*".

Focus group participants generally agreed that they had developed a capacity to build activities as a team, specifically thanks to the trainings they received for it, which has made

them able to carry on the work nowadays. Training had a strong impact because "*people didn't know how to use a computer or fill out a form… we learned how to do things online and access various schemes,*" which helped the community understand their rights and navigate government systems. One mentioned the current focus group "*You can see it right now. All of us speaking here were connected to the organization*". In another focus group, participants highlighted the impact that it had; "*It taught us the "art of living." […] Because we changed our own lives and habits […] we were able to influence our homes and society effectively*". **They also developed the capacity to work together, and at a bigger scale:** "*We learned […] how to manage work across 10 villages instead of just one. We became "masterminds" at this work*".

Activities that couldn't be sustained

As mentioned in the "Impact results" section of this report, some of the CEP trainings (thread work and mushroom cultivation) proved unsuccessful, and some of the businesses set up by women with CEP support slowed down after the program ended. A few other outputs were mentioned in the focus groups as difficult to sustain.

There are some difficulties for farmers to meet as they did during the program and then to convey their problems to the Block or Agriculture Department. Also, the pumps were difficult to use without pipe for some community "*The organization worked for our benefit, but if we could get support again to fulfil the incomplete dreams of the farmers and children*".
SMC meetings faced a temporary setback because "*people started thinking, 'It's a government school, let the government manage it,'*" and without the NGO's presence, motivation dipped slightly before stabilizing again.
Some older Bal Manch members ended up getting married as they grew older, and younger children's teaching is incomplete because "*they stopped getting new information, their learning remained incomplete*" which created difficulties for them.

Obstacles to output sustainability

The main difficulty to ensure sustainability has been the **absence of designated local volunteers who would provide oversight after the project**. "*When the project was running, there was a specific person responsible for oversight. Now that the project has left, that role is vacant.*" While coordination exists to some extent and groups like Bal Manch continue, there is a noticeable gap in mobilisation and guidance.
Financial constraints are another major obstacle. "*Currently, people have absolutely no capital. The organisation isn't working here now, so there is no support. Small farmers can't invest capital due to a lack of money, so farming is difficult.*" **Equipment provided during the project has also deteriorated, and replacing or repairing it is challenging without funding**.

Motivation and engagement have also been affected, not due to lack of interest but because of the **absence of regular support and guidance**. "*It's not exactly a lack of motivation, but a lack of mobilisation. Previously, a volunteer would go door-to-door to inform us about camps or schemes […] Now that the volunteer is gone, that information chain is broken.*" **Volunteers themselves face financial and technical difficulties**, as they continue to work without help previously provided. "*The main challenge is financial and technical […] volunteers have to travel to other villages to process online forms, which costs them money and time. Since the project support ended, they aren't receiving their stipend, so they are working for free.*"

Suggestions for improving sustainability

Activities to reinforce, reintroduce or experiment

Focus group participants were asked for suggestions to improve output and outcome continuity, and to spot activities which they thought would be relevant to reintroduce to answer the current needs of their communities.

The first feedback was to **maintain some activities, especially Bal Manch**. Reintroducing it in villages where it had stopped was strongly supported: "*we strongly suggest restarting the "Bal Manch" activities to keep the children engaged. Regular events, even if just twice a year, make a huge difference in keeping the momentum going.*". Participants in three different focus groups also emphasized expanding **scholarship support**: **"***Many children […] still need scholarships […] it shouldn't happen that a child doesn't move forward*

because of lack of money" so more eligible children can stay in school. **Slow Learning Centres (SLCs)** were also mentioned, echoing the wishes of some parents in the main household questionnaire.

Along with Bal Manch, the second most cited activity (three focus groups) was the **nutrition camp**, seen as highly beneficial for children's health and still needed in the villages. Regarding health issues, participants from two focus groups highlight the importance to have **a new focus on drugs and alcohol addiction**; "*We need to address new social evils, specifically drug and alcohol addiction, which ruins households*" and "*We need to help people understand the damage so they can leave addiction and build a better life*".

Other activities to maintain are **trainings** that allow to continue the development of the community; "*We feel that if the organization contributes once more, we can go from 60-70% development to 100%. We want to learn new things*". **Vocational trainings** were mentioned for the youth: "*there is a new generation of people who need to learn skills so they can work and earn*". New types of training are also asked: "***nursing** training for girls would be excellent. Also, **advanced farming techniques**. We are stuck doing Wheat and Maize every year. We heard that in Godda district, people are earning well from Papaya farming. We need training on new crops like that, or better training on Mushroom farming, which didn't take off the first time*". They want more knowledge about market; "*If we grow something or make a product, we face problems because we don't know where to sell it or how to transport it. Market linkage is missing*". Another group mentioned the need to re-open a **Kisan club** (farmers' club).
Along with activities, participants also asked for **more assets**, such as seasonally assets (seeds) could be helpful. They recommend to provide more resources, and forming village committees with funds in order to help ensure continuity.

Two focus groups also mentioned the need to **support the Jan Suvidha Kendras** (which help people get linked to social schemes) with computers and printers, and to find a way to turn the volunteer positions into paid jobs.

General suggestions

Several groups point out that **the momentum created by the program, with villager involvement, a sense of community and optimism needs to be sustained**: "*after seeing the excellent work over three years, hope has awakened*"; "*If it runs for a long time, people get used to it. An atmosphere will be created, and a "momentum" will be created*" and "*We had excellent benefits for three years. If it runs for another three years, the development in this rural area will be substantial*".
Therefore, they recommend to implement a follow up: "***You cannot just teach something and leave. Someone has to go back to the people […] to check if they are still practicing what they learned. If they are stopping, we need to ask why and encourage them to continue. Motivation is required. That is why we strongly suggest having a dedicated Staff Member for follow-up***", "*This is our first hope so people get relief […] The program started and is running, but a volunteer is needed for back-support*" and "*we suggest maintaining at least one staff member for follow-up even after a project ends, just to keep things on track*".

Some groups also suggest to target a bit better most vulnerable households: "the poor who were left out—widows, the destitute, those with no land—if they are identified and supported, it would be transformative"; "***For those who are migrating**, if a foundation for employment is made, migration will stop*".

Recommendations

Strategic recommendations

Focus group participants were adamant about the momentum created by the program, in terms of community cohesion, mobilisation and impact, but they also warned about fading participation in community groups and in mobilisation in the absence of a (group of) leaders. In order to keep up the impact momentum, a light intervention could be set up:

- **Having a person or group in charge of monitoring the teams** of volunteers who are still active today, to give them perspective and motivation to keep on.
- **Providing more training to active volunteers** and/or helping them to **recruit and train new volunteers**, in order to renew or expand the teams of volunteers. This would be especially useful to ensure that community meetings or other activities do not go extinct because of the departure of a few key persons.
- **Organising meetings with representants from different villages** so they can share good practices (eg. How in one village they particularly succeeded in maintaining the irrigation pumps). These meetings could be done thematically (Kisan clubs and farming, Bal Manch, Jan Suvidha Kendras, health issues, etc.)
- **Help volunteers to organize events they find beneficial, such as nutrition camps, by training them.** If apart from training, there is also a financial issue regarding event organisation, volunteers could be guided to reflect on how to adapt the nutrition camps in smaller interventions which would be more affordable.

If more material support is considered, it could be focused on key elements which were identified as impact levers, such as:

- **Assets**: irrigation pumps (entirely or spare parts, along with pipes if needed), seeds for the kitchen gardens (along with an extra training on seed collection and conservation if needed), computers and printers for the Jan Suvidha Kendras.
- **Trainings**: identifying new opportunities for trainings leading to job opportunities, with the help of local volunteers. Focus group participants mentioned vocational training, nursing training and advanced farming technique training. NGO partners also stressed out the importance of vocational training.
- **Scholarships** for children, which were advocated for in several focus groups.
- Focusing on **hygiene improvement in schools** (toilets and handwash stations), since it was pointed out by one third of the children as the thing the liked less in school (although neither the parents nor the focus group participants mentioned it). Improving these facilities would also contribute to make girls more comfortable when dealing with menstruations at school, easing school attendance for them.

Other pillar-specific follow-up actions can be implemented.

- Helping to restart **Bal Manch** in the villages where it stopped, and supporting communication efforts about the activities so that all parents and children are aware and can participate.
- Setting up more **Nutrition camps**.
- Regarding social security schemes, investigating why E-shram cards are not being used at all anymore, and why Jan Dhan Yojana use has declined steeply. It could simply be because these programs are no longer offered, or have restricted access, but it could be because of a difficult access. (Further discussion with NGO partners led to suggesting the Jan Dhan Yojana, aiming at helping beneficiaries set up a bank account, had served its purpose and was not much useful anymore, since a vast majority of people had managed to access banking services.)
- Two focus groups pleaded for interventions addressing a new social issue: alcohol and drugs addiction. After needs assessment on this topic, a whole new specific intervention could be designed, maybe with the help of a specialised organisation.
- After supporting farmers with the first step in obtaining agricultural surplus or setting up a crafting activity, support should be provided for the next step: market access and how to sell the products. Producer organisations (cooperatives) could be set up.

Methodological recommendations

Keeping the focus groups as the way of collecting qualitative data

The focus groups provided extensive information, and thus seem like a great way to collect qualitative data. However, it should be noted that not all participants spoke out during the groups. In future focus groups, the interviewers could try to get everyone to speak at least once (especially in groups of 8 people or less).

Rephrasing some of the open questions in the household survey

The household questionnaire was adapted to exploring long-term impact. It counted a greater number of open questions. The analysis revealed that some of these questions could be more specific in order to obtain precise information from the respondents.

- When asking the parents about the different items brought to the schools by the CEP, and if they consider these elements to be important, the follow-up question "Please explain your answer" could be rephrased as "Please explain your answer. Why is it not at all/quite/very important that these elements be present in your child's school?
- When asking household heads "Are more members of your HH able to earn money because of this training, still today? If so, how many more members of the HH?", the follow-up question "Please explain your answer" could be rephrased as "Please explain your answer. How are the trainings helping / not helping more members of your household to earn money, still today?"
- When asking about life satisfaction, the question "How satisfied do you feel with your life now?" could be rephrased as "How satisfied do you feel with your life now? Why is that so?"

Better capture school enrolment and attendance

Although qualitative information was available for this study about school attendance, as well as a survey question about the effect of Bal Manch on school attendance, there was a mistake in the data collection (problem of questionnaire comprehension + questionnaire coding) which made it impossible to quantify the state of school enrolment and of monthly school attendance. In a future evaluation, two precautions could be taken:

- Making sure during the surveyors' training that the first question about school enrolment ("Is he/she enrolled to attend school/AWC pre-school this year?") is well understood as relevant not only for AWC children, but for all 6-14 years-old children. This question is crucial because it determines whether or not additional questions about school enrolment and attendance will be asked.
- Also asking the children directly for back-up, in the child survey: "Are you enrolled in school this year?" and "What is the name of your school?"

Additionally, children could also be asked directly and individually about their participation in Bal Manch activities.

Keeping track of individual answers in the focus groups

The focus group data was merged as if there was only one respondent in each group by the data collection partner. Although it already provides rich information, it can be interesting for analysis purposes to know precisely who said what. This would allow for instance to understand if a certain topic is brought up specifically by men or women, or which village is having a specific issue or sharing a success story.
It would have been even more relevant for the short questionnaire in the focus group, which had been designed to collect quantitative data at the village level. This questionnaire was submitted to the whole group of participants, and answers were not reported at the village level.
Therefore, this point should be added to the focus group guidelines for the data collection partner.

Annexes

TABLE A - Distribution of households in the sample

District	Village	Village population	% of total population	Sample: target	Sample: actual	% of target reached
Giridih	Belakhuta	25	1%	3	3	100%
Giridih	Charki	120	4%	13	13	100%
Giridih	Domni	23	1%	2	2	100%
Giridih	Goriyachu	114	3%	12	12	100%
Giridih	Harla Ghati	27	1%	3	3	100%
Giridih	Nimadih	114	3%	12	12	100%
Giridih	Nimadih (Harijar	124	4%	13	13	100%
Giridih	Tarai	129	4%	14	14	100%
Giridih	Bagdedih	65	2%	7	7	100%
Giridih	Bhikhi	48	1%	5	5	100%
Giridih	Jhaba	34	1%	4	4	100%
Giridih	Konarbak	36	1%	4	4	100%
Giridih	Nawadih	92	3%	10	8	80%
Giridih	Parsoni	92	3%	10	10	100%
Giridih	Purnadawar	57	2%	6	6	100%
Giridih	Sri Rampur	80	2%	8	8	100%
Giridih	Bendro	84	3%	9	9	100%
Giridih	Dharwe	58	2%	6	6	100%
Giridih	Harni	99	3%	10	10	100%
Giridih	Kurchi	64	2%	7	7	100%
Giridih	Kusmai	27	1%	3	3	100%
Giridih	Lakhekura	67	2%	7	7	100%
Giridih	Rajpura	55	2%	6	6	100%
Giridih	Sankh	369	11%	39	39	100%
GIRIDIH TOTAL		2003	62%	213	211	99%
Koderma	Angaar	94	3%	10	10	100%
Koderma	Bardahiya	36	1%	4	4	100%
Koderma	Bhuladih	44	1%	5	5	100%
Koderma	Donaiya	126	4%	13	13	100%
Koderma	Khirikala Khwasl	92	3%	10	10	100%
Koderma	Lathiya	53	2%	6	6	100%
Koderma	Mohnariya	33	1%	3	3	100%
Koderma	Yogidih	45	1%	5	5	100%
Koderma	Gendwadih	65	2%	7	7	100%
Koderma	Baswaria	45	1%	5	5	100%
Koderma	Behradih	145	4%	15	15	100%
Koderma	Chitarpur	142	4%	15	15	100%
Koderma	Jharitanr	101	3%	11	11	100%
Koderma	Nawadih	113	3%	12	12	100%
Koderma	Nero Nawadih	117	4%	12	12	100%
Koderma	Rupandih	80	2%	8	8	100%
KODERMA TOTAL		1331	38%	141	141	100%
GRAND TOTAL		3334	100%	354	352	100%