



A STUDY ON ACCESSIBILITY OF AMENITIES BEFORE AND AFTER JOINING SHGs

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ABSTRACT

Amenities play a major role for satisfying the basic needs of the human beings. Amenities are the keys to understand the quality of life of human beings. They are precisely what make some places attractive for living and working. Amenities are especially essential to all places to make the life of the people as more comfortable. For better social living facilities, like health care, sanitation, drinking water, education of the children and market are quite indispensable to all. All these facilities have been made available to the villagers as well as to the urban people. In India, nearly 70 per cent of the people belong to rural area. As their earning capacity is meager, their standard of living is in low position. But the extent of utilization of these facilities is deplorably poor in the villages before the formation of the SHGs. SHGs bring considerable changes in the life style of the people. SHGs increase the earning capacity and meet their basic needs. This leads to improve their standard of living. Hence, this study has been undertaken to study whether the SHGs help to improve the amenities among women. The present study is based on both primary and secondary data. The primary data has been gathered from 300 SHG members residing at Virudhunagar through interview schedule by adopting multistage sampling method. The secondary data has been gathered from books, magazines, journals and websites. The primary data has been analysed with the help of Mc Nemer test.

KEY WORDS: Self Help Groups, Amenities, sanitation, health care, market

INTRODUCTION

For better social living facilities, like health care, sanitation, drinking water, education of the children and market are quite indispensable to all. All these facilities have been made available to the villagers as well as to the urban people. But the extent of utilization of these facilities is deplorably poor in the villages before the

formation of the SHGs. The SHGs have created awareness among the members to avail all these infrastructural facilities existing in both the urban and the rural areas to the fullest extent possible. A detailed discussion of each type of amenity available for the SHGs is presented in this study.



AMENITIES

Amenities include drinking water facility, electricity, education, health, agriculture, veterinary Services, women and child development, distribution of essential commodities through Fair Price Shops, distribution of old age and social security pension and disposal of revenue cases.

MEDICAL AWARENESS

Good health sets a foundation for good life. SHGs set the step for creating awareness about good health among the women members. One's health depends on existing gender relation, access to health care, health awareness, income and quality of life. SHGs have played a vital role in promoting the knowledge and awareness on health related issues among the women members.

MEDICAL FACILITY

In the rural areas, health care facilities and medicines are not available easily. But in the urban areas, different types of health care facilities and various systems of medicines such as homeopathy, allopathy, Indian system medicines, herbal and ayurvedic medicines are also available. Private agencies as well as the Government provide these medical facilities. The membership in the SHGs has created awareness among the members who avail the different types of medical facilities provided by the different agencies to lead a healthy and happy life.

SANITATION FACILITY

Sanitation inside the house, in the locality, in the village and in the urban area is indispensable for a healthy living of the people. Due to poor sanitation, different types of diseases spread among the people. Therefore, the individuals and local Government authorities like Corporation, Municipalities and Panchayats pay a special attention to the provisions of sanitary facilities to the people in all areas. The banks grant loans to the people for the construction of the toilets. The improvements in the sanitation by availing the existing facilities and creating new facilities are due to the awareness created by the SHGs among the members.

DRINKING WATER FACILITY

It is the responsibility of the Government to provide good drinking water to all citizens. Keeping this in view, the Government, Municipalities and Panchayats provide drinking water facilities in public places and also to individuals. The water tax is collected from the individual users in the urban areas. During drought seasons, special efforts are made to provide drinking

water in the rural and in the urban areas by using road transport facilities and the railways. The membership in the SHGs creates awareness among members to provide drinking water facilities to their houses by availing the facilities offered by the Government. If the water facilities are not available, from the Government sources they themselves take the initiatives for sinking bore wells to augment their water resources.

EDUCATION FACILITY TO THE CHILDREN

Literacy is considered as one of the important yardstick to judge the extent of development in a country. The literacy level play a significant role in the development of a nation and in the development of the individual citizens. Education makes a member know better about the environment and the facilities in the local area. The level of education motivates the psychological upliftment of a person and widens his social awareness. It also plays an important role in understanding the potentialities of the area.

Education is a tool for social transformation. Only through education, people could improve their individual and social conditions of living. Keeping this in mind, the SHGs educate the members to send their children to schools. Through continuous efforts, the members of the SHGs have been made to realize the benefits of sending their children to the schools and colleges.

MARKET FACILITY

The SHGs are aware of the availability of the market facilities in the residential localities of the members, would enable them to buy fresh commodities at competitive prices, with standard weights and measures. In the absence of the marketing facilities, the members have to buy their necessities from the few shops in the locality, which may charge exorbitant prices for the commodities sold by them.

STATEMENT OF THE PROBLEM

Amenities play a major role for satisfying the basic needs of the human beings. Amenities are the keys to understand the quality of life of human beings. They are precisely what make some places attractive for living and working. Amenities are especially essential to all places to make the life of the people as more comfortable. In India, nearly 70 per cent of the people belong to rural area. As their earning capacity is meager, their standard of living is in low position. Government took lot of efforts to improve the position of them. Among the efforts, SHGs bring considerable changes in the life style of the people. SHGs increase the earning

capacity and meet their basic needs. This leads to improve their standard of living. Hence, this study has been undertaken to study whether the SHGs help to improve the amenities among women.

SCOPE OF THE STUDY

The present study is confined to study the availability of amenities *viz.*, medical awareness, medical facility, sanitation facility, drinking water facility, education facility to the children and market facility for women before and after joining SHGs.

OBJECTIVES OF THE STUDY

The main objective of the study is to analyse the availability of amenities before and after joining SHGs.

RESEARCH METHODOLOGY

The present study is based on both primary and secondary data. The primary data has been gathered from 300 SHG members residing at

Virudhunagar through interview schedule by adopting multistage sampling method. The secondary data has been gathered from books, magazines, journals and websites. The primary data has been analyzed with the help of Mc Nemer test.

MC NEMER TEST

It is a statistical test used on paired nominal data. It is applied to 2×2 contingency tables with a dichotomous trait, with matched pairs of subjects, to determine whether the row and column marginal frequencies are equal (that is, whether there is "marginal homogeneity"). Here, Mc Nemer test is used to analyze the availability of amenities before and after joining SHGs.

HYPOTHESIS

The null hypothesis framed is that there is no significant difference in availability of amenities for women before and after joining SHGs.

Table 1-Amenities before and after joining in SHG

Responses	Number of Members	
	Before joining SHGs	After joining SHGs
Medical awareness		
Aware	122 (40.67)	201 (67)
Not aware	178 (59.33)	99 (33)
Medical facility		
Availed	139 (46.33)	176 (58.67)
Not availed	161 (53.67)	124 (41.33)
Sanitation facility		
Available	173 (57.67)	244 (81.33)
Not available	127 (42.33)	56 (18.67)
Drinking water facility		
Adequate	143 (47.67)	198 (66)
Inadequate	157 (52.33)	102 (34)
Education facility to the children		
Sending to educational institutions	109 (36.33)	196 (65.33)
Not sending to educational institutions	191 (63.67)	104 (34.67)
Market facility		
Available	204 (68)	251 (83.67)
Not available	96 (32)	49 (16.33)
Total	300 (100)	300 (100)

Source: Primary data

(Figures in the parentheses represent percentages to total)

MEDICAL AWARENESS

It is clear that before joining SHGs, 122 (40.67 per cent) had medical awareness and 178 (59.33 per cent) did not have medical awareness. After joining SHGs, 201 (67 per cent) have medical awareness and 99 (33 per cent) do not have medical awareness.

MEDICAL FACILITY

It is understood that before joining SHGs, 139 (46.33 per cent) had availed medical facilities and 161 (53.67 per cent) did not availed medical facilities. After

joining SHGs, 176 (58.67 per cent) have made use of medical facilities and 124 (41.33 per cent) have not used the medical facilities.

SANITATION FACILITY

It is observed that before joining SHGs, 173 (57.67 per cent) had sanitation facilities and 127 (42.33 per cent) did not have sanitation facilities. After joining SHGs, 244 (81.33 per cent) have sanitation facilities and 56 (18.67 per cent) do not have sanitation facilities.

DRINKING WATER FACILITY

It is known that before joining SHGs, 143 (47.67 per cent) had adequate drinking water facility and 157 (52.33 per cent) did not have adequate drinking water facility. After joining SHGs, 198 (66 per cent) have adequate drinking water facility and 102 (34 per cent) do not have adequate drinking water facility.

EDUCATION OF THE CHILDREN

It is observed that before joining SHGs, 109 (36.33 per cent) send their children to educational institutions and 191 (63.67 per cent) did not send their children to educational institutions. After joining SHGs, 196 (65.33 per cent) have send their children to educational institutions and 104 (34.67 per cent) have not send their children to educational institutions.

MARKET FACILITY

It is understood that before joining SHGs, 204 (68 per cent) have stated that they had market facilities and 96 (32 per cent) opined that they did not have market facilities. After joining SHGs, 251 (83.67 per cent) have expressed that they have market facilities and 49 (16.33 per cent) remarked that they do not have market facilities.

Results of Mc Nemer Test for Availability of Amenities for Women Before and After Joining SHGs

McNemer test has been applied to analyse the availability of amenities before and after joining SHGs. The null hypothesis framed is that there is no significant difference in availability of amenities for women before and after joining SHGs. The results are shown in Table 2.

Table 2 Results of McNemer Test For Availability of Amenities for Women Before And After Joining SHGS

Amenities	Calculated value	Table value at 5 per cent level
Medical awareness	14.23*	3.84
Sanitation facilities	60.81*	3.84
Drinking water facility	97.09*	3.84
Market facility	58.34*	3.84
Education facility of the children	24.35*	3.84
Medical facility	40.23*	3.84

Source: Primary data

*Significant at 5 per cent level

Table 2 explains that the calculated values are higher than the table values for all the facilities acquired by the sample members before and after joining SHGs at 5 per cent level. Hence, the null hypothesis is rejected. There is a significant difference in availability of amenities for women before and after joining SHGs

CONCLUSION

SHGs have undoubtedly begun to make a significant contribution in poverty alleviation and empowerment of poor, especially women in rural areas of our country. The empowerment of rural women leads to benefit not only to individual women and women groups, but also to the families and the community as a whole. Women participant of self-help groups are aware of their rights, their creativity and potential growth. The

community based initiatives by women Self-Help Groups especially supplements their house hold income. Thus, it is concluded that the participation of women in Self Help Groups (SHGs) made a significant change on their amenities.

REFERENCE

1. Stormquist and Nelly, P., "The Theoretical and Practical Bases for Physical Amenities" in Digumarti Bhaskara Rao, [E.ds.], *Women Education and Employment, The International Encyclopedia of Women, Vol. 2, New Delhi, Discovery Publishing House, 1998, p.14.*
2. <http://shodhganga.infcibret.ac.in/bitstream/10603/189/2/2.chapter2.pdf>
3. R. Natarajan, "Rural Women Empowerment Through Self Help Groups with Special Reference to Thiruvallur District of TamilNadu – A Perspective Approach" in kanak Kanti Bagch [E.ds] *Micro Finance and Rural Development*, 2000, pp. 264-271.