Do the ultra-poor benefit from receiving income generating assets as grants?

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I. Introduction

The Millenium Development Goals target halving, between 1990 and 2015, the proportion of those living on less than a dollar a day. Although less prevalent in popular discussions about poverty reduction strategies, studies going back to atleast Lipton(1988) have systematically documented the idea that programs and policies targeted at the "poor" as a homogenous group have often not only had no affect on the poorest among the poor but also often impacted them adversely. This group, often called the "ultra poor", presents the most significant challenge for development practitioners and policy makers as they evaluate existing strategies and grope for new solutions – removing credit constraints via mico-loans being one of the most promising ones in recent history.

Buoyed by the award of the Nobel Peace prize to the founder of the Grameen Bank, Microfinance, in its many forms, has emerged as the rising star to counter poverty. Yet, one of the criticism that has stuck and often acknowledged even by its supporters is that it has been ineffective in helping the poorest of the poor. One of the responses to the criticism has been to provide grants in the form of income-generating assets instead of loans to the ultra-poor along with other intensive services. The idea has been that the income generated from the assets would serve to bring the ultra-poor to a position where they could benefit from the more mainstream micro-credit organizations. This paper provides a preliminary report on the impact of one such program working in one of the poorest regions in India.

In this paper, I first describe the population that the intervention tries to target, the program and the context in which it is operating. Given the dominance of microfinance in today's discourse of development, I briefly dwell on the relationship between the program and the microcredit movement. I then introduced the research design I am using to evaluate the possible effect the program has had on its participants. Section 7 provides information from a baseline survey of a sample of participants and non-participants. In section 8, I discuss findings from the survey along with in-depth interviews conducted with a small number of participants at two points in times since the beginning of the program. Currently, this is the only piece of information that can be used to obtain a preliminary sense of the programs workings and its estimated influence on its participants.

II. Who are the Ultra-Poor?

Although used often, there is no absolute definition of the term utltra-poor and it varies from study to study and often used interchangeably with the term hard-core or extreme poor (Halder and Mosley 2004). While some studies like Alamgir (1998) use land ownership and the absence of well-bodied males as the primary criteria to distinguish the ultra-poor. Others use it more broadly to refer to the section of the population that although living in extreme-poverty are not destitute. While the destitute are physically unfit for any mainstream development program and hence with limited sustenance options other than charity, the ultra-poor are thought to have at least the physical capability of being able to sustain themselves from earnings (pecuniary or non-pecuniary).

There is also disagreement on the extent to which the ultra-poor have characteristics that differentiate them from the rest of the poor. Among the first to identify them as a separate group, Lipton (1988) believes that "in several ways, the ultra-poor -- the poorest 10-20 percent of people in India, Bangladesh or the Sahel -- are different from the further 25-35 percent who fall below the 2250-calorie line." Other studies, like Rahman and Hossain (1995) and cited in Halder and Mosley argue that the extreme poor and moderate poor do not differ significantly on several observable characteristics. However, Halder and Mosley, argue this is largely a result of relying on income data that are always difficult to collect. The strategy adopted by Halder and Mosley instead is to start without any fixed criteria for distinguishing the extreme poor and instead ascertain the opinion of the people themselves in identifying those in extreme poverty. They summarise their findings about the ultra poor by stating that the ultra poor have:

> "Usually smaller households with more females than male. Their average value of house is very low and the majority of the households are "educationally dark." Economically, they are almost absolutely landless, depend mostly on wage employment and some depend on outside help for survival. Many household members above age 60 have to work for a livelihood so that the dependency rate is relatively lower than better-off household. However, their wage rate is low and most households suffer from a high level of food insecurity."

In particular they find that the 'average' ultra-poor household comprised of 3.8 members, 1.3 male and 2.5 female, of which 10 percent were children below 10 years of age with females heading 35 percent of households. While on average they owned 5.6 decimals of land, 80 percent of economically active population participated in some gainful employment.

Despite the disagreements on who the extreme poor are and the extent to which they form a distinct group within the poor, most studies agree that the set of constraints that bind them from being able to escape extreme poverty are too complex to be overcome by "one-size fits all" programs like mainstream microfinance and state interventions that target at best a single point of leverage. The narrative provided by an ultra-poor woman in Matin et al (2008) describes both the complexity of the problem and caution with regard to finding a solution:

> "We are caught up in a complex knot – other poor people also get caught up from time to time in a knot, but their knots are simpler..you can easily detect the source of the knot and do something about it…our knots have many sources..often pulling on one carelessly makes the knot more complex" (quoted in Matin et al. 2008).

III. Beyond "micro"

Microfinance, as its proponents would like to label it, or micro-credit as it critics depict reality, has been one of those rare tools that finds favour not only from governments, non-profits but the profit-seeking private sector as well. As a result of pre-eminent position it has come to occupy in the development discourse, it is hard to articulate an income-enhancing program or intervention without clearly explicating its relationship with microfinance.

One of the strongest criticisms has been that micro-credit does little to alleviate the conditions of the poorest and therefore those most in need. The critics have pointed to the rapidly growing Non-Banking Financial Companies or NBFCs (many of which were non-profit microfinance institutions) in India as examples of organizations that target relatively better-off households with micro-loans but make little dent in bringing the ultra-poor out of poverty. Despite claims that micro-credit can eradicate poverty, that the extreme poor are least likely to benefit from micro-credit is not a new finding. In fact, the first systematic evaluation of microfinance programs (Hulme and Mosley 1996) pointed to exactly that. Citing this, Mahajan

(2006, emphasis in original) this writes, "a vast majority of *those whose starting income was below the poverty line actually end up with less incremental income after getting a microloan,as compared to a control group which did not get the loan.* This should stop converts from offering microcredit as the solution for poverty eradication, since it seems to do more harm than good to the poorest."

IV. The Intervention

The program being studied is located in West Bengal. Located in eastern India, West Bengal has a population of 82 million with a population density of 325 (?) persons/square kilometer-- the highest among all states in India. In line with the average distribution in other states, 72 percent of West Bengal's population live in the rural areas. Muslim's make up nearly a third of West Bengal's population -- a share that is only less than their share in Jammu and Kashmir. By all conventional measures of poverty, West Bengal fares worse than the all India average (John and Mutatkar 2006).

The primary inspiration for the intervention is Bangladesh Rural Advancement Committee's (BRAC) Income Generation for Vulnerable Groups Development (IGVGD) the Income Generation for Vulnerable Groups Development (IGVGD) Program and like the IGVGD it offers a coordinated effort to untangle the complex knots that keep the ultra-poor vulnerable (Matin et al. 2008).

The intervention is pictorially represented in Appendix 1 and included the following components:

1. Targeting and Selection

The issue of targeting and selection of intended beneficiaries is a sensitive one in any intervention. Targeting and selection are particularly critical in an intervention that is conceptualized and articulated around the idea that the group it seeks to work with not only needs special attention but also has been hitherto neglected by existing programs and strategies. "T" selected those households fulfilling at least of three of the following conditions:

1. Own less than 20 decimals of irrigated land
2. Absence of active adult male members earning a regular salary

3. Non-ownership of productive assets
4. Household having child labour/school-aged children not going to school (max 14 yrs age)
5. Presence of women working as housemaid or as irregular wage earners.

In addition, the program employed two exclusion criteria that would rule out participation in the program

1. Presence of an able bodied adult male with a regular source of income
2. Membership in a MFI or programs providing subsidies by the government.

The program also used a participatory wealth ranking (PWR) process that allowed communities to themselves select the poorest households among those fulfilling the above criteria. Doing so was important not only because it ensures more consistent and accurate targeting but also because it engages the community at the beginning of the intervention itself and ensure a community buy-in for the formation of organizations like the Village Development Council described later. As Matin et al (2008) write, "the process and rational of articulating who the programme is targeting, is central to creating a common understanding of the overall programme approach and rational to [participation from] a wide range of stakeholders (the programme implementers and the community).

Although the data corroborate that the criteria described above were indeed followed in large part, further visits to the field indicate that exceptions did occur in some cases. For instance, in some cases the households were a part of government programs providing housing or support for income generation activities. However, the exceptions seemed few and even in these cases the vulnerabilities that distinguished the selected households from those not selected were clearly evident.

2. Formation of Women Groups

Although the intervention was targeted at individuals, self-help groups were formed right at the inception with each group having between 10 to 15 members. The groups were to meet every week and form a platform for both collection of savings and reinforcement of training on utilization of the productive asset.

3. Identification of income-generation asset

An asset that has the potential of increasing the productive capacity of recipient women was identified by a consultative process that included other members of the household and program staff. The asset being transferred was worth between $100 to $125. In most cases, the asset was in the form of livestock with four goats and sheeps being the most popular choices. In addition to the livestock, recipients received construction material to build shelter to keep their livestock.

4. Training

Each recipient had to attend three days worth of training prior to receipt of the income-generation asset. The training provided information on of the asset being received, basic principles of accounting, health education including the preparation of ORS and other social issues. To compensate for the travel costs and the opportunity costs of time, attendees were provided a transportation allowance.

5. Subsistence Allowance

Recognizing the precarious nature of lives of the ultra-poor, the program included a subsistence allowance. Not only was this to encourage better care of the livestock (most common asset) being received, but also to tide the household through till the investment in the asset provided economic returns since in most cases the "enterprise" around the asset had a gestation period of over a year.

6. Regular Engagement

Program staff kept in regular touch with the recipients, meeting them in their homes along with their assets. This served to provide support and information in the care of the livestock as well as ensure weekly savings as part of Self-Help Groups. In addition, this served to break the isolation that typically surrounds the ultra-poor.

V. Study Design

The ideal design for a quantitative impact analysis would be a randomized trial in which participants are selected randomly (using a lottery) from a pool of eligible women. The women not selected to receive the intervention would constitute the control group, with the selected women being the treatment group. The random process of selection would ensure that the treatment and control groups are equivalent at baseline i.e. prior to receiving the intervention. Such a design would therefore allow us to attribute any observed differences between the treatment and control groups

after receipt of the intervention by the treatment group to the program itself. Unfortunately such a design was not feasible. First, the beneficiaries had been selected prior to the beginning of the evaluation. Second, even if the beneficiaries had been selected after the evaluation team came in, it would have been necessary to randomize at the village level to isolate the impact the project i.e. after identifying eligible women in multiple villages, a village would be selected randomly as a treatment or control village and all eligible women in a treatment village would receive the program and no eligible women in a control village would receive the program. Randomization at the village level is necessary for two reasons. First, households living in a village more often than not have strong social and economic ties – either as family or friends with relationships going back generations. Given this context, it is hard to conceive that benefits received by one household (assuming that the program is beneficial) are not shared with others – regardless of whether or not they have been assigned to a treatment or control group. In fact, these spillovers need not be necessarily positive. For instance, one of the successful participants was a recent victim of a dacoity apparently carried out by a few individuals in her neighborhood. Second, randomizing within a village makes it politically difficult for an organization to function in a village with some eligible women receiving the program and others not. The extent to which the randomness and therefore fairness of the lottery system can be appealed to is a matter left to the judgment of program field staff.

On the other hand, randomizing between villages implies that the program has to be operating in a large number of villages. This is necessary to have enough statistical power to be able to detect impacts. However, from a program perspective simultaneously operating in a larger number of villages is challenging and poses strains on the resources – financial and human that an organization might have. The challenges are even greater in this particular case, since the program works with partner organizations on the field that it has to identify, guide and monitor.

The research design that I am using is a quasi-experimental design. It will compare the experiences over time between a random sample of program participants and women who were eligible, selected and interested in participating in the program but could not. The reason for exclusion was that lack of a suitable place to build an office compelled the implementing organisation to relocate their office in a different village than they had originally intended. The new office was considered too far from

the villages in which the comparison group women lived and hence it was decided to drop them from the program. To the extent that the choice of office location is not correlated with a woman's ability to benefit from the program, the event can be thought of as an exogenous shock that determined program participation between the intervention and comparison groups. I take advantage of this "natural" experiment to evaluate the impact of the program.

VI. Data

The sample for the comparison group is restricted to those women and households all initially selected to receive the intervention but livening in villages that the organisation chose not to work in. The sample for the intervention group was selected from similar villages as measured by a poverty concentration ratio defined as the total number of selected households in a village by the total number of households. All women who were selected to receive the intervention living in these villages were surveyed with 160 in the intervention group and 90 in the comparison group. Each woman was asked a wide range of questions on socio-economic and demographic characteristics of her household.

The primary aim of the data collection to collect information to describe the baseline socio-economic conditions of the intervention and comparison groups. However there are important limitations in the data. Unfortunately, the study started between one to two months after the intervention had already been in place with beneficiaries already receiving the training and assets in most cases. The data collection was conducted in August 2007 and in retrospect, in considerable haste. As a result the quality of the data is uneven with inconsistencies at some places with components of household expenditure not adding up to total expenditure for instance. This is also evident in the varying sample sizes for different dimensions reported because of either non-response or invalid responses. Therefore, while examining the data it is important to examine the overall picture that emerges across the various dimensions examined.

VII. Comparison at Baseline

The available data do not allow us to examine the outcome of the intervention, which is the primary purpose of the study. Nevertheless it is important to examine the

available data for two reasons: a) to describe the sample being studied and contrast it with other populations receiving similar interventions b) to compare the differences between the intervention and comparison groups along several observable characteristics. Therefore, chosen characteristics not only describe socio-economic conditions along which the ultra poor are typically found to differ from the rest of the poor, but because they might also be correlated with outcomes likely to be impacted by the intervention.

Household size and Composition

On average, the households in the comparison group are significantly bigger than those in the intervention. As Table I reports, not only are there more females in the intervention group but also the number of children less than 10 years old. However, the distribution of number of male earning members does not differ significantly between each group. Twenty three percent of households in the comparison group do not have a single male earning member in the household, while the figure is 17 percent in the intervention group. This is also reflected in the martial status of the interviewed women in the two groups reported in Table III. Nearly 20 percent of interviewed women and 15 percent in the comparison group are divorced, widowed or separated from their husbands.

Household's earning capacity

Table II suggest that the number of earning members on average comparison and intervention group households are similar and so is the dependency ratio (calculated as the number of total number of household members less than 10 years or greater than 60 years per household member between 10 and 60 years – the earning ages). However, the percentage of earning age members economically active was greater on average in the intervention group in comparison to the comparison group, with the difference being statistically significant.

Asset ownership

None of the households owned any major asset like TV, furniture, sewing machine or electric fans. The only consumer durables that were owned were clocks, cycles and their ownership is described in Table IV. While 16 percent of the intervention group owned a cycle, only 9 percent of the comparison group did the same. Similarly, a

large proportion of intervention group households were likely to own a clock (24 percent) than the comparison group (16 percent). Almost all households in the comparison and intervention group live in households that are *kaccha* i.e. made of non-permanent materials like mud and thatch (Table V).

Food Security

Consistent with findings from other studies, Table VII suggests that households in both intervention and comparison group experience a high degree of food insecurity. Nearly three out of four households in both the groups report experiencing at least one day in the week gone by where they did not have enough food for two meals. While the intervention group did not have enough food for two meals for 1.73 days on average, the number is 1.63 days for the comparison group. Looking back the last 30 days, 33 percent of households in the intervention and 38 percent in the comparison group did not have any food for the whole day on at least one day. However, among those who report not having any food for the whole day, the comparison group reported a much higher degree of prevalence of such days with nearly 82 percent stating that this would happen between three to ten times in the past. Going beyond chronic and severe food insecurity, nearly 88 percent of intervention group members and 82 percent of comparison group members report not being able to eat the kind of foods they would have liked with nearly 80 percent among these reporting that this happened at least three days in the last 30 days.

Health Status and Access to Healthcare

Vulnerability to debilitating sicknesses and accidents is clearly evident in the study sample as suggested by Table VIII. Around 73 percent of both intervention and comparison group households report that either them or member of their household had been sick or for more than seven consecutive days in the last year. Only 41 percent of households in the intervention group and 37 percent in the comparison group, were able to take the sick or injured member to the desired place for treatment with lack of money being the primary reason.

Given the high rates of prevalence of diarrhea in the region, women were also asked if they knew about ORS. Forty percent of women in the comparison group and 65 percent in the intervention group claimed to know about it. Making ORS is one of the things taught as part of the training. Since almost all women in the intervention group

had received training by the time of the interview (reported in Table X) the higher levels of awareness in the intervention group is not surprising. Instead, what might be of concern to the program implementers is the fact that awareness levels aren't even higher.

Agricultural Practices

Since ownership of livestock and cultivation (most often subsistence and mono-crop) is quite prevalent in the area, the survey also asked questions on agricultural and livestock practices of households. As responses reported in Table IX suggest, the practice of livestock vaccination, visiting a veterinarian, applying medicines to crops, changing seeds regularly were largely absent in the study sample and the intervention and comparison groups did not differ significantly on this.

Usage of Subsistence and Travel Allowances

One consequence of the delay in the initiation of the study was that we were able to collect information on how the program beneficiaries were using the subsistence and travel allowances provided to them during the initial phase of the intervention and described earlier. Table X- Table XII report on these. While 90 percent of surveyed women in the intervention group spent at least some part of their allowance on food, 17 percent used some part of it to spend on medicine. As a share of total expenditure from these allowance, expenditure on food constituted 60 percent on average while that on medicine constituted seven percent.

VIII. Discussion

The data collected two months after the initiation of the intervention are consistent with the programs intention to target those living in extreme poverty. There is complete absence of ownership of assets either demonstrating current wealth or the ability to generate income in the future. Coupled with sever food insecurity, experience of significant health shocks and is clear evidence of the vulnerabilities and harsh socio-economic conditions of these households.

The picture provided by the data also corroborates more qualitative assessments. As part of the study, I have also been following six women who have received the intervention and conducted two rounds of unstructured but detailed interviews with them. First the distinction between households selected for the

intervention (the ultra poor) and those that are not but living in the same village (and would perhaps fall in the moderately poor category) is usually stark and clearly evident. The ultra poor households are typically found to be living in isolated huts and spatially disconnected from the rest of the hamlet or village. In some part this reflects both the landlessness of these households as well as the souring of relationships that have pushed them to the fringe. While both the ultra and moderate poor often share the deprivations that characterize poverty, there was a sense of despair and helplessness in the aspirations of the ultra poor when I first spoke to them close to the beginning of the program.

While it is too early to say what the impact of the intervention might be, the second visit to the intervention villages approximately 6 months after the first provides some hints of a positive impact although perhaps in unexpected dimensions and because of unanticipated sources. Most of the women had suffered set backs with regard to the asset that had been transferred to them with a infectious disease killing many of the goats in the neighboring villages. Not surprisingly, I did not find any traces of an economic impact. Yet despite this they seemed more in control of their lives with one of them articulating in no uncertain terms the increased empowerment she felt – while earlier she would need to ask her mother-in-law before going out for official work, she felt she no longer needed to. Referring to the program staff, she felt that today there was someone to stand beside her. Similarly while one of the women admitted she was not able to express how the program had helped her, she felt that attending SHG meetings was helping her. Another woman who six-months earlier seemed a passive recipient of assets in the form of livestock was able to share her plans for diversifying the kind of livestock she owned despite loosing her original assets as a result of bird-flu.

Albeit only suggestive, these interviews provide a clue about elements of the intervention that could be the "cause" for impacts. In particular, perhaps what might be the more important intervention is not the asset itself but in fact the rest of the "soft" support and engagement that accompanies the asset. This does not imply that the asset is unnecessary, but that it might not be sufficient. The asset and allowance perhaps provide the incentives and structure around which engagement with the ultra-poor can be engaged. If this were to be true this would be consistent with Matin et al's (2008) story of complex knots that need to tugged in multiple but co-ordinated manner.

The second finding that seemed to emerge from the detailed interviews was that some of the beneficiaries would use the subsistence allowance to buy additional livestock but of a different type than what they had chosen to receive as part of their asset transfer. When asked why they had not chosen the livestock currently being bought as their asset transfer, the answer would often center around the scale demanded by the program. For instance, one of the women had taken a loan to buy a pig but had not asked to receive pigs from the program because she felt she did not have confidence in her capacity to handle four pigs simultaneously – the number she would received had she opted for pigs. While this does pose administrative and logistical challenges, this does suggests the need to be even more flexible in terms of the assets being transferred to households living in extreme poverty.

Finally, to conclude, the detailed qualitative interviews also suggest the need to be cautious in interpreting results from surveys covering a larger number of households but in less detail. While it is of course difficult to generalize from a few interviews, they do suggest that some of the impacts being discovered qualitatively might not be adequately captured in the large survey. Second, although the primary intervention might be the asset transfer itself, it would be challenging to isolate the impact from the receipt of the asset itself and that due to other proximate causes.

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Table I: Household Composition

	Intervention	Comparison	P-value
N	160	90	
Size of Household	5.26	4.42	0.0001
Number of Female Members	2.75	2.48	0.0946
Number of members less than 10 years	2.41	2.1	0.0410
No. of members greater than 60 years	1.14	1.13	0.879
Number of Male Earning Members			0.208
0	16.46	22.73	
1	79.1	76.14	
2	4.4	1.14	

Table II: Number of Earning Members

	Intervention	Comparison	P-value
N	153	82	0.20
1	77.12	78.05	
2	17.1	18.2	
3	5.9	3.7	
Dependency Ratio	0.85	0.86	0.948
Percentage of Earning Age Members Economically Active	58.35	52.62	0.042

Table III: Marital Status

	Intervention	Comparison	P-value
N	158	88	
Married, Living Together	85.44	79.55	0.324
Married, Not Living Together but in Economic Contact[1]	0.00	2.27	
Married, Not Living Together and no Economic Contact	2.53	2.27	
Widow	10.13	12.50	
Divorced	1.90	3.41	

Table IV: Ownership of Assets

	Intervention	Comparison	T-test (P-value)
N			
Cycle	0.16	0.09	0.1040
Clock	0.24	0.16	0.1023
Food Stock	0.03	0.01	0.319

[1] Economic Contact: The husband either contributes economic resources, draws economic resources or has any say in how resources are utilized or allocated in the household, although he does not live in the same house.

Mobile Phones	0.01	0.01	0.92
Scooter/Motor-Cycle	0.01	0.00	0.454

Table V: Household Type

	Intervention (N=158)	Comparison (N=85)	Pearson Chi-Square (P-value)
Pucca	1.90	2.35	1.4695 (0.480)
Mixed	5.70	2.35	
Kuccha	92.41	95.29	

Table VI: Primary Occupation

	Intervention	Comparison	Difference
(I=159, C= 87)			
Operators, labourers	79.25	81.61	5.6208 Pr = 0.060
Cultivators	9.43	14.94	
Service Work	11.32	3.45	

Table VII: Food Security

	Intervention	Comparison	P-value
N			
Last 7 days			
Not Enough Food for 2 meals (I=158, C=87)[2]	0.73	0.75	0.744
Number of days, not enough food	1.73	1.63	0.585
Last 30 days			
Not able to eat preferred foods (I=159, C=87)	0.88	0.82	0.168
Frequency of Occurrence			0.019
< 3 days	22.14	18.31	
3-10 days	74.29	67.61	
> 10 days	3.57	14.08	
Not able to have 2 meals (I=155, C=88)	0.65	0.70	0.3473

[2] The Numbers in the parentheses indicate the sample size by comparison group. For example, I=158 indicates there were 158 valid responses among intervention group members for the relevant question.

	Intervention	Comparison	P-value
Frequency of Occurrence			0.002
< 3 days	38.78	14.52	
3-10 days	60.20	80.65	
> 10 days	1.02	4.84	
No food for whole day (I= 150, C=87)	33.3	37.9	0.474
Frequency of Occurrence			0.023
Rarely (once or twice in the past 30 days	44.00	15.15	
Sometimes (three to ten times in the past 30 days)	54.00	81.82	
Often (more than ten times in the past 30 days)	2.00	3.03	

Table VIII: Access to Healthcare

	Intervention	Comparison	Difference
N	157	86	
Household member sick >=7 days	0.73	0.72	0.93
Obtained desired treatment	0.41	0.37	0.619
Knowledge of ORS (I=145, C=84)	0.65	0.39	0.0002

Table IX: Agricultural Practice (Percentage following a particular practice)

	Intervention	Comparison	Pearson Chi-Square (P-value)
N			
Vaccinate livestock (I=127, C=50	12	10	0.1174 (0.732)
Ever visited a doctor for your animal (I= 142, C=49	07	10	0.5033 (0.478)
Apply medicines in crops (I= 113, C=39	14	10	0.3865 (0.534)
Change seed regularly (I=114, C=40)	25	17	0.8407 (0.359)

Tables for TUP Entrepreneurs Only

Table X: Training and Allowances (Receipt and Use)

	Percentage (unless noted otherwise)
Training Received (Percentage)	100
Number of Days of Training Received (N=155)	
1	0.7
2	4.5
3	82.6
4	11.6
5	0.6
Travel Allowance Received (Mean) (N= 155)	Rs. 39.9
Subsistence Allowance Received (Mean) (N= 140)	Rs. 573.8
Amount of Subsistence and Travel Allowance Money Spent (Mean) (N=84)	Rs. 585.2
Total Itemized Expenditure of Subsistence and Travel Allowance (Mean) (N=160)	Rs. 453.7
Amount of Subsistence and Travel Allowance Money Saved (Mean) (N=84)	Rs. 29.7
Location of Savings (N= 45)	
Cash/Informal & SHGs	2.0
Company/MFIs	2.0
SHGs	95.6

Table XI: Percentage of Entrepreneurs Spent Some Part of Allowance on

(N=124)	
Cloth	0.81%
Conveyance(General)	37.10%
Education(Fee, Tuition, Books, Transportation)	8.87%
Feed (for livestock)	12.10%
Food	89.52%
Fuel	8.06%
Loans/Interests	0.81%
Medicine	16.94%
Other expenses	32.26%
Socal Expenses(Festivals etc)	0.81%

Table XII: Expenditure of Allowances

Percent of Allowances Spent on:	
Cloth	.07
Conveyance(General)	4.2
Education(Fee, Tuition,Books,Transportation etc.)	.6
Feed (for livestock)	2.3
Food	59.0
Fuel	1.03
Loans/Interests	0.1
Medicine	7.0
Other expenses	4.4
Socal Expenses(Festivals etc)	.14

Appendix 1: Pictorial Description of Intervention (Ref: Internal Documents of Program Organisation)