ANNUAL REPORT AND ACCOUNTS
2012-2013

ENGLISH
Gokhale Institute of Politics and Economics

Gokhale Institute of Politics and Economics (GIPE) is perhaps the oldest research and teaching institution in economics in India. Established in 1930, it still remains a leading centre for learning. GIPE, under the guidance of its first Director D.R. Gadgil, emerged as a major ‘think-tank’ on policy issues soon after India’s independence. Scholars who have worked in this Institute include some of the leading names in Indian economic studies. The Institute is located in the premises of the Servants of India Society (Trustees of the Institute), established in 1905 by the great Indian nationalist leader Gopal Krishna Gokhale (1866-1915).

The Institute conducts research on economic development and policy in India. It offers a Master of Arts (M.A.) programme in Economics that is considered among the best in the country. GIPE also offers, from the start, a Ph.D. programme in Economics. To date, the Institute has awarded doctoral degrees to nearly 200 students. In 1993, the University Grants Commission declared GIPE a ‘deemed-university’. In recognition of the quality of teaching and research undertaken, the National Assessment and Accreditation Council awarded GIPE A+ Grade in 2003.

GIPE is noted for empirical research, particularly field-based research in agricultural economics, poverty and population studies. Some of the products of this Institute, such as the 1971 study Poverty in India by V.M. Dandekar and Nilakantha Rath, are classics in their field. Combination of teaching and research is one of the unique features of GIPE.

The library of the Institute, founded in 1905, is one of the foremost among specialised libraries in India in the fields of economics and other social sciences. It is the depository library for all United Nations publications, as well as publications of other leading international development and financial organisations. In 2005, the library completed its centenary. The library originally belonged to the Servants of India Society. Today, the library collection includes 273,000 books and 373 journals including almost all the leading English-language journals in Economics.

Since 1959 the Institute has been bringing out a quarterly journal in English, Artha Vijnana (Economic Science), which is regarded as one of the best academic journals in India. In its 54-year history, the journal has published articles on a wide range of subjects oriented to problems of economic growth and development in the Indian context.
Population Research Centre

The research activities in ‘Population Studies’ in the Institute pre-date the formulation of population policy, the establishment of the official family planning programme and the founding of Population Research Centres and other specialised institutions by the Government of India for carrying out research in population and family planning in the country. The Institute had played a pioneering role in conducting demographic surveys in India. Interest in the study of India’s regional demography can be considered to have commenced with the survey undertaken by the Institute in 1945 on a sample of 2000 women in the city of Kolhapur. This survey has made a lasting contribution towards evolving and establishing a standardized methodology of demographic surveys. This was followed by a series of demographic surveys undertaken by the Institute during the late 1940s and early 1950s in Pune, Nasik, Kolaba and North Satara districts of the Maharashtra State. These demographic surveys were found to be extremely useful because they were carried out at a time when the demographic knowledge for the country as well as the extent of its use in planning exercises was indeed limited. Other studies were taken up with funding from national and international agencies. These studies provided empirical database for studying India’s regional demographic problems.

A research centre in demography was set up at the Institute in 1949. This was the first of its kind. The Union Ministry of Health and Family Welfare gave grants to the Institute for conducting specific studies during 1954-57. In 1963, the Ministry decided to strengthen and extend the research work on population by establishing a Demographic Research Centre as a part of the Institute. In 1978-79, in pursuance of the recommendations of the Demography Advisory Committee, the Centre was re-designated as Population Research Centre (PRC) for the state of Maharashtra. It has earned the distinction of being in the category of ‘fully developed centre’ according to the norms of the Ministry of Health and Family Welfare.

Since the fifties, the Centre started its work by conducting demographic surveys and thus contributed in a large way to the area of survey methodology. After the launch of the family planning programme at the official level, the Centre had contributed by actively participating in the implementation of the sterilisation programme and through communication-cum-action studies. Studies on after-effects of vasectomy camps and acceptance of loop as an IUD gave valuable input about the methods of family planning.

Various dimensions of the family planning programme at its various stages starting with the communication methods, compulsion during emergency, adoption of the spacing methods, maternal and child health, withdrawal of the targets, RCH approach of the programme, RTI/STI, client satisfaction and unwanted pregnancies have been studied by the Centre. The work of NGOs in the field of family welfare has also been evaluated. In recent years the evaluation of sterilisation bed reservation scheme, family welfare training institutions, functioning of ultrasound sonography centres, functioning of urban health posts, and National Rural Health Mission has also been carried out.
In the area of data collection on a wider scale, the Institute has carried out/participated in major surveys in the 1980s and 1990s (NFMS, 1980; NFHS, 1992-93; and RCH Baseline Survey, 1998). Apart from evaluative and fact-finding surveys, many analytical studies were carried out in the PRC. Recently a study of cost of health care in the public hospitals in Maharashtra has been completed at the Centre. The Centre has also completed two rounds of World Bank-sponsored research study on the quality of health care (client and provider satisfaction). The Centre has also acted as a Monitoring Agency for the District Level Household Survey (DLHS-3 and DLHS-4) carried out by the Ministry. The demography of India’s tribal population is another recently completed research project at the Centre. Currently, the Centre is involved in activities related to (a) strengthening of the Health Management Information System (HMIS), the new initiative of the Ministry of Health and Family Welfare, to provide the district and facility level health data on a monthly basis, and (b) monitoring of the State Programme Implementation Plan under National Rural Health Mission (NRHM).

2013: Golden Jubilee Year of PRC

PRC of the Institute, established by the Ministry of Health and Family Welfare, has completed its 50th year during 2012-13. The Institute is planning to organise academic events to commemorate the occasion of Golden Jubilee year with the support of the Ministry. PRC can look back with satisfaction at its achievement during these fifty long years and gratefully recollect the support which the Ministry extended to it.

PRC at Gokhale Institute of Politics and Economics

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<thead>
<tr>
<th>Year</th>
<th>Chronology of PRC at Gokhale Institute</th>
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<tr>
<td>1945</td>
<td>First Demographic Survey in the Country was undertaken by the Institute</td>
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<tr>
<td>1949</td>
<td>First Research Centre in Demography was set up at the Institute</td>
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<tr>
<td>1954-57</td>
<td>Union Ministry of Health and Family Welfare sanctioned grants to the Institute for conducting specific research studies in Demography</td>
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<tr>
<td>1963</td>
<td>Ministry of Health and Family Welfare established a Demographic Research Centre at the Institute</td>
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<tr>
<td>1978-79</td>
<td>Ministry of Health and Family Welfare re-designated the Demographic Research Centre as Population Research Centre</td>
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<tr>
<td>2013</td>
<td>Population Research Centre completed 50 years of its existence (Golden Jubilee) at the Institute.</td>
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Annual Report 2012-13

A summary of activities of the Population Research Centre during 2012-2013, research studies in-progress during 2013-2014, activities of PRC staff during 2012-2013 and audited statements of expenditure for the year ending 31st March, 2013 are presented in this Annual Report.
A. Report on studies and activities completed by PRC for MOHFW during 2012-13

The PRC has undertaken the following activities assigned by the Ministry as its priority activities during the year 2012-13: (1) Quarterly Monitoring of Programme Implementation Plan (PIP) under NRHM for Maharashtra and Union Territory of Dadra & Nagar Haveli; (2) Monitoring of DLHS-4 in Maharashtra; (3) HMIS Core Committee Meetings; (4) Field Visits to the Districts in Connection with HMIS; (5) Analysis of Quality of HMIS Data at the State and District Level for Maharashtra; (6) Monthly On-line Verification of HMIS Data for the Districts of Maharashtra; (7) Comparison of Facility Masters of HMIS and MCTS; and (8) Training programme on Comparison of Facility Masters for the District Level Officials. Details regarding the above activities are given below:

(1) Quarterly Monitoring of Programme Implementation Plan (PIP) under NRHM, by R. Nagarajan, Vini Sivanandan, Arun Pisal, Akram Khan, R.S. Pol and A.P. Prashik.

The Ministry of Health and Family Welfare, Government of India has assigned the task of quality monitoring of important components of the State Programme Implementation Plan (PIP) under NRHM to the Population Research Centre (PRC) for the year 2012-2013. The state of Maharashtra and Union Territory of Dadra & Nagar Haveli were assigned to PRC Pune for this purpose. For preparing the qualitative reports, the PRC, in addition to visiting the State HQs, has visited the selected districts of Maharashtra and UT of Dadra & Nagar Haveli for assessing the implementation of PIP at the ground level during the quarters April-June 2012 and Jul-September 2012. PRC has also visited the selected health facilities (DH, CHC, PHC & SC) and collected the information from facilities and beneficiaries to prepare the qualitative reports.

To carry out quality monitoring and evaluation of important components of PIP, various types of semi-structured schedules were developed. The questionnaires aimed at gathering the data pertaining to the actual implementation of the various components of PIP. The information related to the mandatory disclosures was checked from the NRHM website. The questionnaire administered at the District Health Office obtained the data pertaining to implementation status of the important components of district PIP under NRHM in the district. Another set of schedules was developed to understand functioning of the actual health service delivery under NRHM at various facility levels (DH, CHC, PHC and Sub-Centres). A few beneficiaries at the visited facilities were also interviewed with the help of the exit interview schedule developed to understand the quality of services and benefits received by them under JSSK and JSY.

The qualitative reports prepared by the PRC provide the status and observations/comments regarding the following mandatory disclosures on the State NRHM website: facility wise deployment of all contractual staff engaged under NRHM; MMUs; patient transport ambulances and emergency response ambulances; all procurements, including details of drugs and equipment procured; and buildings under construction/renovation. The reports also provide status and observations / comments regarding the following key issues applicable under the implementation of PIP: programme management, planning, human resources, ASHA, procurement, essential drug list, new
constructions/renovations, vehicles and referral transport, mainstreaming AYUSH, urban RCH, Untied Funds/RKS/AMG, child health, immunization, family planning, Adolescent Health & Menstrual Hygiene Scheme, JSSK, JSY, MCTS, community involvement, etc.

PRC Pune has prepared the following reports on ‘Quarterly Monitoring of Programme Implementation Plan (PIP) under NRHM’ for the state of Maharashtra and its three districts (Nandurbar, Sindhudurg and Raigad) and UT of Dadra & Nagar Haveli, and submitted the same to the Ministry:


The above reports brought out the extent of service delivery under different components of NRHM and identified the strengths and weaknesses of the programme implementation in Maharashtra and its districts and Union Territory of Dadra and Nagar Haveli. The reports provide valuable inputs for the programme management at the district level.

(2) **Monitoring of DLHS-4 in Maharashtra**, by Vini Sivanandan and A.P. Prashik.

The District Level Household Survey 4 (DLHS-4) in Maharashtra is assigned to the Field Agency, VIMARSH, by the Ministry of Health and Family Welfare and the monitoring of the same is assigned to the PRC along with the Nodal Agency, i.e., International Institute for Population Sciences (IIPS), Mumbai. The mapping and listing work for DLHS-4 was started by the Field Agency in July 2012 with the training programme for the same in Nagpur. PRC representatives monitored the training programme in Nagpur and the report of the same was submitted to the IIPS. PRC also monitored the fieldwork for mapping and listing in Latur, Pune, Ahmednagar, Osmanabad and Thane districts; and main survey for Amravati and Yavatmal districts. The detailed monitoring reports on fieldwork and main survey were submitted to the Nodal Agency and the feedback was given to the Field Agency wherever required.
The monitoring of fieldwork for first round of main survey was carried out during January-February 2013. The monitoring report was submitted to the IIPS and the field agency was informed about the quality issues related to the on-going fieldwork for the main survey. The second and third rounds of monitoring of fieldworks to be taken up by the PRC during 2013-14.

(3) HMIS Core Committee Meetings

The Ministry of Health and Family Welfare, Government of India, has constituted a HMIS Core Committee for each state to strengthen the HMIS in the states. As per the guidelines of the Ministry, examination of the issues related to the quality of HMIS data and the efforts to strengthen the same were the priority issues to the Population Research Centres from 2010-11. Accordingly, during 2012-2013, HMIS data for the state of Maharashtra and its districts were scrutinized closely by the PRC and the analyses were presented at the Core Committee meetings for Maharashtra. Regular and close interactions with the state government officials were maintained to facilitate the improvement of quality of HMIS data. The Core Committee meetings were convened by the Regional Director, Ministry of Health & Family Welfare, and organized by Dr. R. Nagarajan, Associate Professor, PRC. In the meetings officials from following offices participated: (a) Regional Director, Ministry of Health & Family Welfare, (b) Directorate of Health Services, Mumbai, (c) State NRHM Office, Mumbai, (d) MIS Cell, DHS, Mumbai, (e) State Health Systems Resource Centre, Pune, (f) concerned district officials, and (g) Population Research Centre, Pune.

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<tr>
<th>Sl. No.</th>
<th>Date of the HMIS Meeting</th>
<th>Venue of the Meeting</th>
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<tr>
<td>1</td>
<td>April 24, 2012</td>
<td>State Health Systems Resource Centre, Pune</td>
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<td>2</td>
<td>May 28, 2012</td>
<td>Population Research Centre, Pune</td>
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<td>3</td>
<td>October 18, 2012</td>
<td>Health and Family Welfare Training Centre, Pune</td>
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<td>4</td>
<td>March 28, 2013</td>
<td>Population Research Centre, Pune</td>
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In the meetings, the following issues were given priority: status of monthly consolidated data uploaded in HMIS web-portal, commitment of HMIS data by the districts and state, quality of HMIS data, triangulation of HMIS data, validation issues in the data, observations from the field visit to the districts, steps taken by the state government to improve the quality of data and for training and capacity-building activities, online verification of HMIS data by PRC and status of facility based reporting. The NRHM Office and MIS Cell also made presentations on their field visits, analysis of data and action taken report on the decision made in the previous HMIS meeting. The minutes of the monthly meetings were prepared and circulated with the officials attended the meetings. Minutes were also communicated to the Directorate of Health Service (Mumbai), MIS Cell and NRHM Office (DHS, Mumbai), and Ministry of Health and Family Welfare (New Delhi) for necessary information and action. These meetings have played an important role in improving the quality of HMIS data at the state and district levels.
(4) Field Visits to the Districts in Connection with HMIS, by Vini Sivanandan, Vandana Shivnekar, Arun Pisal, Akram Khan, R.S. Pol and A.P. Prashik.

One of the tasks assigned by the Ministry of Health and Family Welfare to the PRC during 2012-2013 was the field visits to the districts to understand the implementation of HMIS and to share the analysis of quality of HMIS data carried out by its staff with the concerned district officials. Accordingly, PRC staff made field trips to 8 districts (Thane, Akola, Nagpur, Raigad, Sinhudurg, Nandurbar, Satara and Pune) during 2012-2013 to understand the issues related to HMIS data and to highlight the quality of data to district officials.

During the field visits to the above districts, the PRC staff: (a) interacted with the concerned district officials on various aspects related to HMIS data, (b) shared the analysis of HMIS data with the officials pertaining to the district, (c) highlighted the issues related to quality of data for the district, (d) pointed out the validation issues in the data for the district, (e) visited selected facilities to understand the flow of data, (f) observed the reporting and recording mechanism followed in the district, and (g) gave orientation on HMIS portal and its features to the officials. The observations from these field trips to the individual districts were presented by the PRC staff in the subsequent HMIS Core Committee meetings in the presence of state officials. The latter have also communicated the field visit observations of the PRC to the concerned districts for the necessary action.


HMIS data for the districts of Maharashtra for the years 2011-2012 and 2012-2013 were analysed and presented in the HMIS Core Committee meetings. In every meeting, the data for three/four districts were analysed and presented before the Committee in the form of power point presentations. During the year 2012-13, the HMIS data for Bhandara, Buldana, Osmanabad, Thane, Wardha, Satara, Nashik and Pune districts were analysed and presented before the Committee.

The quality related aspects of HMIS data were deliberated in the meetings in the presence of state government officials. The PPTs were also shared with the concerned district level officials through e-mails. For the analysis of quality of data, the validation criteria developed by the Ministry were used along with triangulation of HMIS indicators with the comparable indicators available in DLHS-3 and NFHS-3. In every meeting, the District Fact Sheets uploaded by the Ministry in the web portal were also taken up for the discussion. From the District Fact Sheets, the PRC highlighted the issues related to Data Coverage/Quality of HMIS data. This activity of PRC sensitized the state and district level officials to understand the quality aspects of the HMIS data pertaining to their districts.

This is a continuous web-based online activity assigned to the PRC by the Ministry of Health and Family Welfare, starting from December 2010. As and when the monthly HMIS data are uploaded by the districts, the staff of the PRC accessed the online HMIS data for all the districts of Maharashtra from the HMIS web-portal and provided their comment/remark in the portal (i.e., online verification of data) on the quality of data. These online PRC verification details are available in the HMIS portal for every district. The district officials can read the online comments/remarks given by the PRC in the web portal. The state and district level officials involved in uploading of HMIS data are expected to access the online verification reports of the PRC and rectify the errors/problems in data indicated by the PRC. It has completed the online verification of monthly data for all the districts of Maharashtra for the year 2012-2013.

(7) Comparison of Facility Masters of HMIS and MCTS for Kolhapur, Pune and Osmanabad districts

The synchronization of HMIS and MCTS ‘Facility Masters’ is a prioritized activity of the Ministry of Health & Family Welfare because the common ‘Facility Masters’ for the two important data sources (HMIS and MCTS) help to integrate the facility level data for effective monitoring of the service delivery for the beneficiaries. In this regard, all PRCs were initially requested by the Ministry to take up this activity for some selected districts of the concerned States/UTs. A comparative analysis of HMIS facility masters was done by PRC for 3 districts of Maharashtra, viz., Pune, Kolhapur and Osmanabad and the same was submitted to the Ministry. The comparison of ‘Facility Masters’ by PRC reveals the following issues: large number of “Other Facilities” (UHP, UHC, PHU, Ayurvedic and Others) are missing HMIS when compared with MCTS; spelling errors are observed in both HMIS and MCTS; style of writing names is not uniform for both HMIS and MCTS; abbreviations (e.g., Bk, bk, Kh, Khu) are used for second name of the places in both the facility masters; when the names are written differently, it is difficult to judge which is the correct name (HMIS or MCTS); first alphabets of the place names are written in small in some cases instead of capital both in HMIS & MCTS; in some cases, the second names of the facilities in HMIS and MCTS are written differently; and second word of name of the place/facility is given in bracket in many cases. Unless the names of the places/facilities are identical for both the Facility Masters, it will be difficult to synchronize the data from the two sources.

(8) Training programme on Comparison of Facility Masters for the District Level Officials of Pune and Solapur Districts (June 25-27, 2012)

As the PRC has completed the comparison of ‘Facility Masters’ of HMIS and MCTS for two districts (Kolhapur and Pune) of Maharashtra, it has extended its help to conduct a three day-training to the district level officials involved in HMIS to synchronize the HMIS and MCTS ‘Facility Masters’ for Maharashtra. Accordingly, three-day training was conducted in the computer lab of
PRC for the officials of two districts (Pune and Solapur) with input from the officials of state MIC Cell and PRC. This has helped the MIS Cell to arrange the training of district level officials for the remaining districts in other regions of Maharashtra to compare and synchronize the ‘Facility Masters’.

B. Report on other studies and activities completed during 2012-13

(1) Between and Within Social Group Disparities in Higher Education: An Assessment of India and Major States, by Vini Sivanandan

Disparity, measured in terms of educational attainment by social groups in higher education, gives an insight because of existing affirmative policies in India. Affirmative policies implemented for almost six decades were expected to bring the traditionally backward social group representation in higher education on par with the traditionally forward social group. An attempt was made in this paper to measure the intra and inter group disparities between and among the social groups by using the Theil index. Analysis showed that between groups disparity exists and within social group disparity is almost negligible in higher education. Analysis further carried out by background characteristics of these social groups showed that within group disparities are observed mainly for females and the employment type casual labourer household almost in all the major states of India. Between groups disparities showed that the social group ‘others’ is having higher educational attainment, whereas traditionally backward social groups of India still lag far behind the traditionally forward group ‘others’ in terms of educational attainment. The disparities are multifaceted and differ from state to state in terms of background characteristics. This research work was presented at the European Population Conference held at Stockholm University during June 13-16, 2012, in the session on “Schooling and Demographic Outcomes - Comparative Analyses”.

(2) Employment situation among various social groups in India, by Vini Sivanandan

Representation by grades in employment by social groups with achievement in higher education gives an insight into existing affirmative policies in India. An attempt was made to measure the intra and inter group disparities between and among the social groups by using decomposition analysis of Theil index, and arithmetic and geometric means by representation in employment rich (grade I) and employment poor (grade II) type of employment. Regional analysis showed caste ‘Others’ with highest participation in grade I type of employment and lowest participation in grade II type of employment, except in rural regions. The difference between the social groups in terms of participation of population in employment further increased with the inclusion of population with higher education. Consistently, the gap between the caste ‘Others’ and ST, SC and OBC further widened in participation in employment when higher education was taken into consideration. Analysis of females with achievement in higher education showed that participation rate in both the grades of employment for caste ‘Others’ was lower than caste ST, SC and OBC. Notably, the females from caste ‘Others’ with higher education and participation in
employment showed below average participation in employment in the year 2005-06. This research work was presented at the European Population Conference held at Stockholm University during June 13-16, 2012, in the session on “Schooling and Demographic Outcomes - Comparative Analyses”.

(3) Health of the Urban Poor in Pune City, by R. Nagarajan.

The urban poor are the fastest growing segment of urban population living mainly in slums and poor settlements. Nearly one-third of the urban population of India is living in slums or slum-like conditions characterized by overcrowding, poor hygiene, sanitation and civic services. The health of the urban poor is as bad as of rural population. This study was a part of the three city specific studies carried out simultaneously in Bhubaneswar, Jaipur and Pune. The study was sponsored by Population Foundation of India, New Delhi and coordinated by International Institute for Population Sciences, Mumbai. The field survey and data entry for the study were carried out by the PRC. The data analysis was completed by IIPS and the final report was released. The study covered different health-related issues of the urban people including the health status of the women and children, living conditions, hygiene and sanitation, utilisation of health facilities by the people, quality of health care services, prevalence of infectious diseases, etc. The study also covered the selected health facilities (public & private) in the city to obtain information on human resources, infrastructure, diagnostic facilities and services provided. The information collected in the survey will help the government to assess health needs of the urban people and to plan better urban health services. Findings of the survey are expected to provide insights for the proposed National Urban Health Mission by the Government of India.

(4) XXXIV Annual Conference of the Indian Association for the Study of Population (IASP), December 13-15, 2012

The XXXIV Annual Conference of the IASP was held at Gokhale Institute of Politics and Economics, Pune during December 13-15, 2012. The staff of the Population Research Centre was instrumental in hosting the conference at the Institute. Dr. R. Nagarajan, Associate Professor, PRC acted as the Local Organizing Secretary. About 200 participants representing universities, research institutions, Population Research Centres, NGOs, international donor agencies and government officials participated in the conference.

This conference had the following events: inaugural session, two plenary sessions on thematic areas, parallel sessions for paper presentation, poster presentation, paper presentation competition for young demographers for the prestigious Dr. C. Chandrasekaran Award, General Body meeting of the Association, and valedictory session.

About 80 research papers were presented in various technical sessions. The authors included established demographers to young Ph.D. scholars. Most of the papers pertained to fertility, RCH, Health Status, Ageing and Migration. A few papers also dealt with methodological
issues, programme evaluation and policy implications. Most papers utilized the available and recent
data from Census, NFHS, DLHS, NSSO, IHDS and other sources. A few papers were based on micro
level studies carried out in rural and urban areas. Three poster sessions were conducted as a part of
this conference. About 60 posters were presented in these sessions, mostly by Ph.D. scholars.

The conference provided an opportunity for interaction among demographers, social
scientists, programme managers and NGOs to deliberate upon various issues concerning population,
health, gender and development. It also provided an ideal platform for young demographers and
research scholars to present their findings to a wider audience to seek suggestions. The conference
was supported by contributions from UNFPA, UNICEF, ICRW, Asian Population Association, Central
Statistical Organization, IIPS and Gokhale Institute of Politics and Economics.

C. Report on studies and activities in progress during 2013-14

(1) Monitoring and Evaluation of Programme Implementation Plan, 2013-14: Ratnagiri District,
Maharashtra, by Arun Pisal, R. Nagarajan and A.P. Prashik

As directed by the Ministry, the monitoring and evaluation of PIP of Ratnagiri district was
taken up for the fourth quarter of the financial year 2012-13. As per the study design, the field visit
for monitoring was completed in the first quarter of 2013-14. Primary data for evaluation pertaining
to the implementation status of the important components of district PIP under NRHM were
collected from the District Programme Management Unit by using the semi-structured
questionnaire. Data were also collected from District Hospital, 1 CHC, 2 PHCs and 4 SCs to
understand the functioning of the actual health service delivery at various facility levels. Few exit
interviews of beneficiaries were also carried out at DH and CHC to understand the services received
by the beneficiaries under Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram
(JSSK). The study is expected to bring out the extent of service delivery under different components
of NRHM and identify the strengths and weaknesses of the programme implementation in Ratnagiri
district.

(2) Monitoring and Evaluation of Programme Implementation Plan, 2013-14: Ahmednagar District,
Maharashtra, by Vini Sivanandan, Akram Khan, Rajendra Pol and R. Nagarajan

As directed by the Ministry, the monitoring and evaluation of PIP of Ahmednagar district
was taken up for the fourth quarter of the financial year 2012-13. As per the study design, the field visit
for the monitoring was completed in the first quarter of 2013-14. Primary data for evaluation pertaining
to the implementation status of the important components of district PIP under NRHM were
collected from the District Programme Management Unit by using the semi-structured
questionnaire. The data were also collected from District Hospital, 1 CHC, 2 PHCs and 4 SCs to
understand the functioning of the actual health service delivery at various facility levels. Few exit
interviews of beneficiaries were also carried out at the DH to understand the services received
by the beneficiaries under Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram
The study is expected to bring out the extent of service delivery under different components of NRHM at the district level and identify the strengths and weaknesses of the programme implementation in Ahmednagar district.


Starting from September 2013, the Ministry has assigned the monitoring of PIP as a monthly activity to the PRC. For this purpose, the Ministry has trained the PRC officials at the orientation workshop on monitoring of district PIP held at National Health Systems Resource Centre (NHSRC), New Delhi during August 12-14, 2013. It has also provided the following to facilitate the PIP monitoring work: (a) the study design; (b) template to prepare the monthly district monitoring reports, (c) three teams from the PRC staff comprising two members each to visit the districts every month, and (d) initial list of seven districts for the monitoring, viz., Nanded, Beed, Jalgaon, Dhule, Aurangabad, Jalna and Nandurbar. Accordingly, starting from September 2013, the PRC will visit the districts identified by the Ministry, monitor the implementation of the PIP and submit the report to the Ministry.

(4) Evaluation of JSSK in Nandurbar District, Maharashtra, by R. Nagarajan, Vini Sivanandan, Arun Pisal, R.S. Pol, Akram Khan and A.P. Prashik

Janani Shishu Suraksha Karyakram (JSSK) launched in 2011 by Government of India is an initiative to assure free services to all pregnant women and sick neonates accessing public health institutions. The free entitlements under JSSK include: free and cashless delivery, free C-Section, free treatment of sick-new-born up to 30 days, exemption from user charges, free drugs and consumables, free diagnostics, free diet during stay in the health institutions – 3 days in case of normal delivery and 7 days in case of caesarean section, free provision of blood, free transport from home to health institutions, free transport between facilities in case of referral as also drop back from Institutions to home after 48 hours’ stay. Free entitlements for sick newborns till 30 days after birth similarly include free treatment, free drugs and consumables, free diagnostics, free provision of blood, exemption from user charges, free transport from home to health institutions, free transport between facilities in case of referral and free drop back from institutions to home. The major objective of the scheme is to reduce the maternal, infant and child mortality by removing the out of pocket expenses for the families. This study aims to understand the functioning of JSSK by each component and entitlement in a high focus district of Maharashtra. The study will be based on the official JSSK records maintained at the health facilities combined with the exit interviews of the JSSK beneficiaries.
(5) An Assessment of ASHA Scheme in Osmanabad District, Maharashtra, by R. Nagarajan, Vini Sivanandan, Arun Pisal, R.S. Pol, Akram Khan and A.P. Prashik

To monitor the performance of ASHAs, Government of Maharashtra has developed a computer-based online database (ASHA Software). This software maintains the profile of ASHAs (with personal information, photograph, performance details, training given, address, mobile number, etc.) and also the live performance of all the registered ASHA workers in the state. The facility/village-wise profile of all the ASHAs appointed in the state is available in the software. The web-portal also captures the monthly live data of 31 different activities of ASHAs, incentives received by ASHAs under various activities, etc. By using the software, customized reports can be easily generated on the pattern of monthly payments to mothers and ASHAs; identification of non/under-performing ASHAs, earnings of ASHAs per month, etc., across all levels (state, district, taluk and PHC level). The online ASHA Software portal is used only by the Health Department to monitor the ASHA scheme. The present study will analyse this data for the district of Osmanabad to understand the functioning of ASHA scheme under NRHM.

(6) Activities Related to HMIS during 2013-2014, by R. Nagarajan, Vini Sivanandan, Arun Pisal, Akram Khan, R.S. Pol and A.P. Prashik

As per the Ministry’s requirements, the following activities related to HMIS are being taken up by the PRC for the current year 2013-2014: (a) Analysis of quality of HMIS data for selected districts for the year 2013-2014; (b) Field visits to the districts in connection with quality of HMIS data; (c) Monthly on-line verification of HMIS data for the districts; and (d) Comparison of MCTS and HMIS ‘Facility Masters’ for the selected districts of the state. Field visits to the districts in connection with the quality of HMIS data are being combined with the field visits to the PIP monitoring.

(7) Monitoring of DLHS-4 in Maharashtra, by Vini Sivanandan and A.P. Prashik

The District Level Household Survey 4 (DLHS-4) in Maharashtra is assigned to the Field Agency, VIMARSH, and the monitoring of the same is assigned to the PRC along with the Nodal Agency (i.e., International Institute for Population Sciences, Mumbai) by the Ministry of Health and Family Welfare. The main survey is in progress in Maharashtra during 2013-14. PRC representatives are continuously monitoring main survey in several districts of Maharashtra and detailed monitoring reports on field surveys are being regularly submitted to the Nodal Agency.

(8) Reversing Son Preference: A Study of Contributory Factors, by R. Nagarajan and others

The sex ratio of child population (f/m) in the age group 0-6 years in India as a whole is not only much lower than the global sex ratio at birth (950 or more girls per 1000 boys), but it declined sharply from 945 in 1991 to 927 in 2001 and further to 914 in 2011. In some regions / states of the
country, the decline in child sex ratio (CSR) was shockingly large and the 2011 Census revealed that the declining trend is catching up with the states/regions hitherto unknown for sex selection. The reasons for the sharp decline in CSR in the country have been extensively documented in recent years by researchers. India, with a largely patriarchal kinship pattern, is known for son preference and discriminatory social practices against women. While the overall survival of women and children in India improved considerably in recent years owing to expansion of primary health care, the easy availability and accessibility to new medical technologies (ultrasound sonography) have brought the new discriminatory practices against females. The earlier regime of neglect and female infanticide has been replaced by the new regime of sex selective abortions/female foeticide. Research studies have reported that the easy accessibility of sex-selection techniques and consequent widespread termination of female foetuses have brought down the sex ratio of children in the country in recent years. In this context, the present study tries to identify the factors that can help to reverse the declining CSR in India and its regions.

While the spurt in research activity in recent years has helped us to understand the factors that are generally associated with son preference – leading to elimination of daughters at birth with the help of technology – this has not led to a better grasp over the combination of factors that are likely to help us to reverse the declining CSR. Understanding the combination of factors that are likely to change the traditional son-prefering mind-set will definitely provide clues to reverse the CSR. However, research so far has not adequately addressed the question of ‘what triggers a change in the son-prefering mindset? Hence, this study aims to find whether son preferring mindset/daughter aversion would go down in near future, and if yes, then what triggers the change in son preferring mindset.

The study will address the following key research questions: Which factors work to bring about the shift in son-prefering mindset? How can these factors be divided – administrative and legal, schemes and programmes, social and economic processes, individual behaviour/factors? Whether these factors work individually or in combination? Which factor or set of factors exerts a greater influence than others to reverse the child sex ratio? Which factors can be studied? How and what methodology to be followed for the replication of the study?

Selected districts from Punjab, Maharashtra and Tamil Nadu which showed improvement in the child sex ratio from 2001 to 2011 are identified to meet the research questions and study objectives. Two major expected outcomes of the study are: (a) development of a methodology for clear identification of factors or the combination of factors that can lead to the reversal of CSR and replication of such methodology in other states/districts; and (b) identification of concrete factors or pathways responsible for reversal of CSR at least in these 3 selected states.

This study is sponsored by the United Nations Population Fund (UNFPA) to the Gokhale Institute of Politics and Economics and is being carried out by a multidisciplinary team of researchers from four Institutions (Gokhale Institute of Politics and Economics, Tata Institute of Social Sciences, International Institute for Population Sciences and PRC, CRRID). The study was initiated in November 2012 and will be completed in May 2014.
(9) Factors Influencing Educational Achievement, by Vini Sivanandan

Majority of the population excluded from education system consists of the first generation learners as their parents are illiterate. Amongst many things, absence of adult literates in large number of households has considerable impact on the life and education of children. According to the 61st Round of NSS (2004-2005) data, although there has been considerable progress in alleviating extreme forms of educational deprivation over the years, the problem of illiteracy is still pervasive. In rural areas, 26 per cent of the households did not have even one literate member aged 15 years and above in 2004-05.

This study uses data from India Human Development Survey (IDHS) 2005 carried out by National Council for Applied Economic Research and Maryland University. The analysis is carried out to measure the population inertia in terms of progression in levels of education by ‘Social Groups’ using Stable Equivalent Ratio. Results reveal the existing disparities between the social groups in terms of progression in higher education. The gap between the Other Backward Castes and Dalits consistently further widened as compared with Brahmins and Other Forward Castes. Analysis by gender reveals that between males and females the disparities are insignificant among Adivasis as compared with Other Forward Castes where the male-female difference is significant. The study is expected to be completed by December 2013.

(10) Third Annual Conference of the Indian Health Economics and Policy Association (IHE&PA)

PRC is hosting the third Annual Conference of the Indian Health Economics and Policy Association (IHE&PA) at the Gokhale Institute of Politics and Economics during January 6-7, 2014. The main theme of the conference is “Health for All to Universal Health Coverage: Journey So Far and Challenges Ahead”. The Association has invited research and policy papers for the conference on the following issues: Health Financing: (a) Issues and Challenges; (b) Health for All, MDGs, and NRHM: Lessons Learned; (c) Health Transition: Issues and Implications; (d) Maharashtra Healthcare System: Achievements and Challenges; and, (e) Other related issues relevant to the current context. PRC is acting as a local host for the conference. All the staff of the PRC will be involved in this activity. The selected papers presented in the conference will be published by the Institute for the wider audience.
Report on other activities during 2012-13

(1) Arup Maharatna


- Completed the draft manuscript (of about 21 chapters) of forthcoming book entitled *India’s Perceptions, Society, and Development: Essays Unpleasant*.

- Acted as a principal guide of seven Masters’ Theses and supervisor of about five Ph.D. dissertations.

(2) R. Nagarajan


- Attended the meeting organised by the Ministry of Health and Family Welfare for the Population Research Centres (PRCs), Regional Directors of MOHFW and Regional Evaluation Teams (RETs) to discuss the role and use of PRCs in quality monitoring of important components of the State Programme Implementation Plans (PIPs), at Nirman Bhawan, New Delhi during June 5-6, 2012.

- Nominated as a Nodal Person by the Ministry for Monitoring Programme Implementation Plan (PIP) under NRHM in Maharashtra and Dadra & Nagar Haveli.

- Organised the three days’ joint training programme for matching the Facility Masters of HMIS and MCTS for district officials of Pune and Solapur Districts at the Institute during June 25-27, 2012.


- Attended the meeting organised by the Ministry of Health and Family Welfare and UNICEF on the field studies/verifications/validations undertaken by the UNICEF on the coverage and quality of HMIS data at India Habitat Centre, New Delhi on September 13, 2012.


- Attended the meeting at the International Institute for Population Sciences, Mumbai as a Committee Member to select the papers for the presentation (oral & poster) at the 34th Annual Conference of the Indian Association for the Study of Population to be held at Gokhale Institute of Politics and Economics during December 12-15, 2012.
• Attended the experts’ consultation on the approach and methodology for the project on “Reversing Son Preference: A Study of Contributory Factors” organized by the UNFPA at India International Centre, New Delhi on November 08, 2012 and presented the “Concept, Approach and Methodology” for the study.

• Attended the workshop on “Mapping the adverse consequences of sex selection and gender imbalance: findings and policy implications” on November 09, 2012 at Rajiv Gandhi Institute for Contemporary Studies (RGICS), Jawahar Bhawan, New Delhi.

• Organized the 34th Annual Conference of the Indian Association for the Study of Population (IASP) at the Institute during December 13-15, 2012. Acted as the local Organising Secretary for the Conference.

• Attended the Data Dissemination Workshop on “India in Transition - An Insight from Census 2011 Data” organised by the Directorate of Census Operations, Maharashtra, for dissemination of data on “Houslisting & Housing Census, 2011” at YASHADA, Pune and presented the analysis of housing data on “Sanitation” for Maharashtra on December 28, 2012.

• Attended the “Review Meeting of the Annual Action Plan of the Population Research Centres” organised by the Ministry of Health and Family Welfare at Nirman Bhawan, New Delhi on April 12, 2013 and presented the Annual Action Plan of the PRC.

• Continued to work as (a) Managing Editor of the Journal Artha Vijnana; (c) Co-ordinator for the Certificate Course on Computer Applications for Economic Analysis; (c) the Officiating Registrar of the Institute till July 17, 2012; and (d) Principal guide for five Ph.D. students of the Institute.

(3) Vini Sivanandan

• Attended the European Population Conference held at Stockholm University during June 13-16, 2012 and presented two papers: (1) Employment Situation among Various Social Groups in India and (2) Between and Within Social Group Disparities in Higher Education: As Assessment for India and Major States.

• Received Ph.D. degree in Population Studies from International Institute for Population Sciences, Mumbai in June 2012.

• Attended training for mapping and listing for DLHS-4 (Maharashtra) in Nagpur during 9-13 July, 2012 and main survey during 17-21 December 2012 in Panvel and submitted the reports on training of mapping and listing and main survey to International Institute for Population Sciences.

• Participated in the 34th Annual Conference of the Indian Association for the Study of Population (IASP) held at the Institute during 13-15 December, 2012 and provided all-round support for the conference as a local organising committee member.

• Attended the “Review Meeting of the Annual Action Plan of the Population Research Centres” organised by the Ministry of Health and Family Welfare at Nirman Bhawan, New Delhi on April 12, 2013.


(4) Arun Pisal, R.S. Pol, Akram Khan and A.P. Prashik

• Involved in the following activities of the PRC during the year 2012-13: field visits in connection with the quality of HMIS data; analysis of HMIS data and preparation of field visit reports for the HMIS Core Committee meetings; on-line verification of HMIS data and uploading the verification report in the portal; communicating with the district officials (by phone & e-mail) regarding the quality of HMIS data; support for organising the IASP Conference at the Institute; comparison of Facility Masters of HMIS and MCTS; Joint Training Programme conducted by PRC and State MIS Cell during June 25-27, 2012 for matching Facility Masters of HMIS and MCTS for district officials; monitoring of DLHS – 4 (Mr. A.P. Prashik); field visit for PIP monitoring; and preparation of PIP monitoring reports.
ACCOUNTS
2012-2013
## FORM OF UTILISATION CERTIFICATE

Certified that out of **Rs. 86,16,000/-** of Grants-in-aid sanctioned and received during the year **2012-2013**, to the Population Research Centre of Gokhale Institute of Politics and Economics, Pune – 411 004 under this Ministry / Department letter No. given in the margin and brought balance of **Rs. 6,82,899.38** on account of unspent balances of the previous year, making the total balance available of **Rs. 92,98,899.38** during the year. A sum of **Rs. 91,55,919.64** has been utilized for the purpose of meeting recurring expenditure for which it was sanctioned and there remains the unspent balance of **Rs. 1,42,979.74** as on **31.03.2013**, which will be carried forward during the next year **2013-2014**.

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Letter No. and date</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>G.20011/2/2012-Stats (PRC-Pune) dated 20-04-2012</td>
<td>Rs. 15,00,000/-</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rs. 52,36,000/-</td>
</tr>
<tr>
<td>2</td>
<td>G.20011/2/2012-Stats (PRC-Pune) dated 09-11-2012</td>
<td>Rs. 18,80,000/-</td>
</tr>
<tr>
<td>3</td>
<td>G.20011/2/2012-Stats (PRC-Pune) dated 01.03.2013</td>
<td>Total Rs. 86,16,000/-</td>
</tr>
</tbody>
</table>

Certified that I have satisfied myself that the conditions of which the grants-in-aid was sanctioned, have been duly fulfilled / are being fulfilled and that I have exercised the following checks to see that money was actually utilized for the purpose for which it was sanctioned.

Kinds of checks exercised.

1. Cash Book/Bank Book  
2. Day Book  
3. General Ledger  
4. Vouchers  
5. Certified Bills

Certified to be correct
For C.V. Chitale and Co.
FRN No: 126338W

Sd/-
Abhay Avchat
Partner
Chartered Accountants
M.No.-112265

Date: 29.07.2013
Place: Pune
Certified that an aggregate amount of grant of **Rs. 86,16,000/-** (Rs. Eighty Six Lakhs Sixteen Thousand only) has been received during the year 2012-2013 from the Government of India, Ministry of Health and Family Welfare, New Delhi under the said Ministry's letter nos.:

<table>
<thead>
<tr>
<th>Sanction Letter No. of the Ministry</th>
<th>Dated</th>
<th>Grant received on Date</th>
<th>Amount Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. G.20011/2/2012-Stats (PRC-Pune)</td>
<td>20.04.2012</td>
<td>11.05.2012</td>
<td>15,00,000/-</td>
</tr>
<tr>
<td>2. G.20011/2/2012-Stats (PRC-Pune)</td>
<td>09.11.2012</td>
<td>29.11.2012</td>
<td>52,36,000/-</td>
</tr>
<tr>
<td>3. G.20011/2/2012-Stats (PRC-Pune)</td>
<td>01.03.2013</td>
<td>07.03.2013</td>
<td>18,80,000/-</td>
</tr>
</tbody>
</table>

**Total** 86,16,000/-

For implementing the project, an aggregate amount of **Rs. 91,55,919.64** (Rs. Ninety One Lakhs Fifty Five Thousand Nine Hundred Nineteen & Sixty Four Paisa only) has been spent for the purpose for which the grant has been sanctioned as per conditions for release of the said grant. Salary and allowances paid to the employees were similar to those payable to the identical category of employees employed under the State Government.

As on 01.04.2012, the Institute had with it an unspent balance of **Rs. 6,82,899.38** for the above purpose, during the year the Institute has received the grant of **Rs. 86,16,000.00** for the purpose, which alongwith the unspent balance of **Rs. 6,82,899.38** aggregates to **Rs. 92,98,899.38**. After adjusting an expenditure of **Rs 91,55,919.64** during the year 2012-2013, there remains an **unspent balance of Rs. 1,42,979.74** with the Institute as on **31.03.2013**.

Signature:

Date: 29.07.2013
Place: Pune

Certified to be correct
For C.V. Chitale and Co.
FRN No: 126338W

Sd/-
Abhay A. Avchat
Partner
Chartered Accountants
M.No.: 112265
### Statement showing Actual Expenditure during the Year 2012-2013

<table>
<thead>
<tr>
<th>MINISTRY OF HEALTH AND FAMILY WELFARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Recurring Expenditure:</td>
</tr>
<tr>
<td>(a) Salaries and Allowances</td>
</tr>
<tr>
<td>Professor</td>
</tr>
<tr>
<td>Lecturer</td>
</tr>
<tr>
<td>Research Investigators</td>
</tr>
<tr>
<td>Field Investigators</td>
</tr>
<tr>
<td>Key-Punch Operators</td>
</tr>
<tr>
<td>Library Assistant</td>
</tr>
<tr>
<td>Office Establishment</td>
</tr>
<tr>
<td>(OS/Steno/Typist/Accounts Assistant/Peon)</td>
</tr>
</tbody>
</table>

(including an amount of Rs. 5,23,218/- kept aside for Shri Moghe.)

(b) Travelling Allowance and Daily Allowance | 1,50,306.00  
(c) Books and Journals                       | 25,867.00  
(d) Printing, Stationery and Contingencies, POL maintenance etc. | 1,52,224.00  

Total | 91,55,919.64

(Rs. Ninety One Lakhs Fifty Five Thousand Nine Hundred Nineteen & Sixty Four Paise only)

Signature:

Date: 29.07.2013  
Place: Pune  

Certified to be correct  
For C.V. Chitale and Co.  
FRN No: 126338W  

Abhay A. Avchat  
Partner  
Chartered Accountants  
M.No.: 112265
Receipts and Payments account for the Population Research Centre for the year ended on 31st March 2013

<table>
<thead>
<tr>
<th>Receipts</th>
<th>Rs. P.</th>
<th>Payments</th>
<th>Rs. P.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unspent Balance with the Institute as on 01.04.2012</td>
<td>6,82,899.38</td>
<td>Expenditure incurred for Population Research Centre during the year 2012-2013</td>
<td>91,55,919.64</td>
</tr>
<tr>
<td>Receipts during the year 2012-2013</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; installment for the year 2012-2013 (Recurring)</td>
<td>15,00,000.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt; installment for the year 2012-2013 (Recurring)</td>
<td>52,36,000.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3&lt;sup&gt;rd&lt;/sup&gt; installment for the year 2012-2013 (Recurring)</td>
<td>18,80,000.00</td>
<td>Unspent Balance with the Institute as on 31.03.2013</td>
<td>1,42,979.74</td>
</tr>
<tr>
<td>Total Receipts</td>
<td>92,98,899.38</td>
<td>Total Payments</td>
<td>92,98,899.38</td>
</tr>
</tbody>
</table>

Signature:                      
Date: 29.07.2013                 
Place: Pune                      

Certified to be correct
For C.V. Chitale and Co.
FRN No: 126338W

Sd/-
Abhay A. Avchat
Partner
Chartered Accountants
M.No.: 112265

R. R. Bhatikar
Registrar
## FORM GFR 19A
(See Government of India’s Decision (1) below Rule 212)

### FORM OF UTILISATION CERTIFICATE

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Letter No. and date</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>G.20011/5/2012-Stats (PRC-Pune) dated 10-10-2012</td>
<td>Rs. 3,54,500/-</td>
</tr>
<tr>
<td></td>
<td>Total Rs.</td>
<td>Rs. 3,54,500/-</td>
</tr>
</tbody>
</table>

Certified that out of **Rs. 3,54,500.00** of Grants-in-aid sanctioned and received during the year **2012-2013**, to the Population Research Centre of Gokhale Institute of Politics and Economics, Pune – 411 004 under this Ministry / Department letter No. given in the margin. The balance available of **Rs. 3,54,500.00** during the year. A sum of **Rs. 3,54,049.00** has been utilized for the purpose of meeting non-recurring expenditure for which it was sanctioned and there remains the unspent balance of **Rs. 451.00** as on **31.03.2013**, which will be carried forward during the next year **2013-2014**.

Certified that I have satisfied myself that the conditions of which the grants-in-aid was sanctioned, have been duly fulfilled / are being fulfilled and that I have exercised the following checks to see that money was actually utilized for the purpose for which it was sanctioned.

Kinds of checks exercised.

Certified to be correct
For C.V. Chitale and Co.
FRN No: 126338W

Signature:
Sd/-
R. R. Bhatikar
Registrar

Sd/-
Abhay Avchat
Partner
Chartered Accountants
M.No.-112265

Date: 29.07.2013
Place: Pune
Certified that an aggregate amount of Non-recurring grant of **Rs. 3,54,500/-** (Rs. Three Lakhs Fifty Four Thousand Five Hundred only) has been received during the year 2012-2013 from the Government of India, Ministry of Health and Family Welfare, New Delhi under the said Ministry's letter no.:

<table>
<thead>
<tr>
<th>Sanction letter No. of the Ministry</th>
<th>Dated</th>
<th>Grant received on Date</th>
<th>Amount Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>G.20011/5/2012-Stats (PRC-Pune)</td>
<td>10.10.2012</td>
<td>23.10.2012</td>
<td>3,54,500.00</td>
</tr>
</tbody>
</table>

**Total** 3,54,500.00

For implementing the project, an aggregate amount of **Rs. 3,54,049.00** (Rs. Three Lakhs Fifty Four Thousand Forty Nine only) has been spent for the purpose for which the grant has been sanctioned as per conditions for release of the said grant.

During the year the Institute has received a grant of **Rs. 3,54,500.00** for the purpose. After adjusting an expenditure of **Rs. 3,54,049.00** during the year **2012-2013**, there remains an **unspent balance** of **Rs. 451.00** with the Institute as on **31.03.2013**.

Signature:

Date: 29.07.2013
Place: Pune

R. R. Bhatikar
Registrar

Certified to be correct
For C.V. Chitale and Co.
FRN No: 126338W

Sd/-
Abhay A. Avchat
Partner
Chartered Accountants
M.No.: 112265

[26]
Statement showing Actual Expenditure during the Year 2012-2013

<table>
<thead>
<tr>
<th>Description</th>
<th>Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MINISTRY OF HEALTH AND FAMILY WELFARE</strong></td>
<td></td>
</tr>
<tr>
<td><strong>I. Non-Recurring Expenditure :</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Office Equipments :</strong></td>
<td></td>
</tr>
<tr>
<td>1) Steel Cupboards with (Locker Facility)</td>
<td></td>
</tr>
<tr>
<td>2) Filing Stacks</td>
<td></td>
</tr>
<tr>
<td>3) Computers</td>
<td></td>
</tr>
<tr>
<td>4) Laser Jet Printers</td>
<td>3,54,049.00</td>
</tr>
<tr>
<td>5) LCD Projector (Portable)</td>
<td></td>
</tr>
<tr>
<td>6) Consumables (Pen Drives/CD’s/DVD/s)</td>
<td></td>
</tr>
<tr>
<td>7) Voltas Split AC</td>
<td></td>
</tr>
<tr>
<td>8) UPS Batteries</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3,54,049.00</td>
</tr>
</tbody>
</table>

(Rs. Three Lakhs Fifty Four Thousand Forty Nine only)

Signature:

Date: 29.07.2013
Place: Pune

Certified to be correct
For C.V. Chitale and Co.
FRN No: 126338W

Sd/-
R. R. Bhatikar
Registrar

Sd/-
Abhay A. Avchat
Partner
Chartered Accountants
M.No.: 112265