

JIGNASA STUDY PROJECT ON

**Impact of AASARA Pension Scheme on Rural Livelihood
-A Study in Janagaon District.**

2018-2019

By

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Yours faithfully,

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CERTIFICATE

This is to certify that the study project entitled “Impact of Aasara pension scheme of rural livelihood , a study in Janagoan District. The present study is carried out by our students 1) Adunoori Ranadheer (B.A JMC III Year E/M) 2) Bukya Kaveri (B.A. JMC III Year E/M) 3) B. Rajesh (B.A. JMC III Year E/M) 4) Edula Naveen(B.A JMC III Year E/M) 5) Konga Akhil(B.A JMC III Year E/M) under the supervision of Dr.Shyamu Ganta, Assistant Professor of Economics, Department of Economics, KGC Hanamkonda for **JIGNASA Study Project** for 2019-20 Academic Year.

Place: Hanam konda
Date 31-12-2020

Signature of the supervisor
Principal
DR.SHYAMU GANTA

Signature of HOD

Signature of the

Impact of AASARA pension scheme on rural livelihood -a study in Janagaon District

Introduction:

The need for social safety nets is a critical concern for governments across the globe and for the billions of men, women, and children striving to improve their livelihoods. As interest in and the use of social safety nets keep growing, countries struggle to make social safety net interventions more effective and to integrate them better in their overall social protection and labor systems.

The idea of social security, including pensions, originates from the notion that everyone must have protection against vulnerability and deprivation but in practice, it has come to be linked to job security, whether one has a job in the formal or the informal sector. Under the Directive Principles Article 41, the State is expected to “within the limits of its economic capacity and development, make effective provision for securing the right to work, to education and to public assistance in cases of unemployment, old age, sickness and disablement and in other cases of undeserved want.

Despite constitutional provisions, India spends only 1.4% of its Gross Domestic Product on social protection. China spends several times more at 5.4%. As per an Asian Development Bank study in Asia and the Pacific, even much smaller countries do better than India on the social protection index, with Sri Lanka spending 3.2%, Thailand 3.6% and Nepal 2.1% of GDP on social security.

In the past, social security pensions provided were meager and, barely sufficient to cover the basic minimum requirements of the needy. With a view to combat the ever-increasing cost of living and inflation, the Government of Telangana as a part of its social safety net strategy, hereby, introduces the Aasara pensions with a view to ensures secure life with dignity for all the poor. This scheme is meant to protect the most vulnerable sections of society in particular the old and infirm; people with HIV-AIDS, widows, incapacitated weavers and toddy tappers, who have lost their means of livelihood with growing age, in order to support their day to day minimum needs required to lead a life of dignity and social security.

Need for the Study:

As the government of Telangana is implementing many schemes towards the development of the society among them one of the important schemes is called Aasara pension is affecting nearly 39 lakh people who are benefiting from the scheme. Our study is only to a tiny corner of the state, which covers a very little area, though the study needed to understand the implementation of the scheme as well as to know how rural livelihood is affecting the scheme.

Objectives of the Study:

1. To have a broad idea on pension schemes at all India level and in Telangana state.
2. To analyze the pension schemes of state government of Telangana
3. To find out the impact of the Aasara pension scheme on rural livelihood.
4. To identify the Difficulties in distribution of pension.
5. To evaluate the ongoing Aasara pensions to suggest the suitable measures..

Methodology

Sample Technique:

We have selected Purposive Sampling Method to get the right information for this project work. A purposive sample is a non-probability sample that is selected based on characteristics of a population and the objective of the study. Purposive sampling is also known as judgmental, selective, or subjective sampling. Purposive sampling may be the only appropriate method available if there are only limited number of primary data sources who can contribute to the study

Survey Questionnaire:

On the basis of Study project topic and the real intension behind the work, as we have served (acquired information through interview) a questionnaire which contains approximately 20 questions and it covered maximum information related to the topic.

Data Collection:

The Data collected for the purpose of this project is mainly Primary Data and some of the information is collected from the Secondary Data sources like Information from internet, Telugu Academy, Private Publishers and Government Official Websites.

To find the real objective of the scheme a Simple Percentage Method has been selected in which how the respondents are be able to survive and in what way,i.e whether there is positive or negative relation is existing between pension scheme and their livelihood.

Percentage method is a simple statistical tool which gives overall summary of the project. It is based on the sample response to a particular question or it is simply known as average method.

Sample Selection:

For the purpose of this Project sample beneficiaries are selected from Chennur, Mallampally, Thorrur and Gudur villages of Janagaon district. In these villages purposive Sampling Method is used for the collection of the data.

Review of Literature:

James A. Thorson, in *Aging in a Changing Society* tries to figure out the massive population shift, which the world is experiencing, as a revolution unprecedented in human history. Until the 20th century, the worldwide pattern showed women bearing many children, a few of whom lived adulthood, and fewer lived up to old age. Not only the number of older people has been increasing, but the ways in which different generations see the world have been changing as well. The physical as well as the psychological process of ageing and the health care system is well explained in the book. The topics are more applied than theoretical.

Ellen Rhoads Holmes and Lowell D. Holmes, the authors of the book, *Other Cultures, Elder Years* are anthropologists who are interested in gerontology say that it is a discipline that must take all people and all cultural traditions into consideration if we are to contribute to an understanding of the process of human ageing. The authors concerned the modernization influences in developing countries and its effect on the status and role of the elderly. Because change is an ongoing process in all societies, the impact of cultural change on the elderly is clearly noted. The book explains how the cultural tradition shapes the needs and roles of seniors. The other concern is with change, especially modernization and accompanying demographic change, and its effect on the status and wellbeing of the elderly.

Srivastava in his book, *The Aged and the Society* compiled the outcome of a socio-economic study conducted in some selected areas of Delhi, covering a wide socio-economic spectrum. The study was carried out in order to identify programmes, services and assistance needed for utilizing the skills and experience of the aged so that they become more useful to

society. Much has indeed been written on the humanitarian aspects of the elderly, such as Medicare, old age homes, counselling and community centres.

In *The Rural and Urban Aged*, Maninder Singh Randhawa has attempted to scientifically investigate the various sociological aspects of ageing in both the rural and urban areas. In the rural communities of India, the joint family system is still prevailing to a large extent and such families do not throw the aged to the mercy of the society. There the aged participate in productive activities as much as they can. So the elders in rural communities still enjoy a high status and play a major role in decision making. According to Singh, the aged in the urban area also enjoy a fairly high status in their families and the so-called problems are only a trend. The major problems arise due to the abrupt retirement from an occupation, which is considered as a normal phenomenon of modern industrial society. He quotes Burgess, who points out that the increasing problems of ageing in an urbanized society are: difficulty in finding satisfying and substitute activities, economic security, loss of status, decreasing social participation in organization, greater unhappiness and maladjustment, loss of health and illness. Singh concludes that the aged with higher education and economic status enjoy a leadership position in their families in both rural and urban areas.

Pati and Jena in *Aged in India*, have attempted a multidisciplinary approach towards understanding of the problems the aged and planning for their rehabilitation. The social concepts include transition in social positions, roles, status and characteristics of person. Mohanty⁴³ says, to know how to grow old is the masterwork of wisdom and one of the most difficult chapters in the great art of living. Jamuna⁴⁴ likes to make use of the rural elderly women as resource persons to the communities around and consider them as assets rather than liability. Counselling is also an important measure to the older individual to minimize ruptures with children or younger members and to keep their social relationships in constant repair. The book gives guidelines to planners and social workers for developing action programmes for the cause and care of the elderly population both in rural and urban areas of the country.

Ageing in India is research conducted by Kirpal Singh Soodan pertaining to the aged in the city of Lucknow. His demographic analysis shows gradual increase in number of aged. He compares the educational level, the age of migration to the city and their economic dependence. He found that the majority of the aged spend their free time doing odd jobs connected with household work, looking after children and 'doing nothing'. Free time pursuit

of men was solitary in nature, while women spent free time in interpersonal activities. Information about the available welfare services was also a major concern of this study.

Social Assistance schemes in India

The National Assistance Program consists of four sub-schemes

Indira Gandhi National Old Age Pension Scheme (IGNOAPS)

The Indira Gandhi National Old Age Pension Scheme (IGNOAPS) is a non-contributory old age pension scheme that covers Indians who are 60 years and above and live the below poverty line. All individuals above the age of 60 who live below the poverty line are eligible to apply for IGNOAPS. All IGNOAPS beneficiaries aged 60–79 receive a monthly pension of Rs. 300 (Rs. 200 by central government and Rs. 100 by state government). Those 80 years and above receive a monthly pension amount of Rs.750.

Indira Gandhi National Widow Pension Scheme (IGNWPS)

Indira Gandhi National Widow Pension Scheme(IGNWPS),introduced in the year 2009,provides BPL(Below Poverty Line) widows in the age group 40 to 64(later revised 40 to 59) with a monthly pension of Rs. 200 per beneficiary.After they attain the age of 60,they qualify for pension under Indira Gandhi National Old Age Pension Scheme(IGNOAPS).

Indira Gandhi National Disability Pension Scheme (IGNDPS)

Eligibility: Individuals aged 18 years and above with more than 80% disability and living below the poverty line.

National Family Benefit Scheme (NFBS)

In the event of death of a bread-winner in a household, the bereaved family will receive lump sum assistance of ₹20,000. The bread-winner should have been between 18–60 years of age. The assistance would be provided in every case of death of a bread-winner in a household

AASARA pensions in Telangana

Aasara pension scheme is meant to protect the most vulnerable sections of society, in particular, the old and infirm; people with HIV-AIDS, widows, incapacitated weavers and toddy tappers, who have lost their means of livelihood with growing age, in order to support their day to day minimum needs to be required to lead a life of dignity and social security.

The government, as a part of its welfare measures and social safety net strategy, introduced the “Aasara” pension, with a view to ensuring secured life with dignity for all the poor. The scheme is administered by the Ministry of Rural Development, Government of India. It is fully funded by the Central Government, unlike some other welfare programs where the Union government shares costs with the State Governments.

With a view to combat the ever-increasing cost of living and inflation, the Telangana Government introduced on 8th November,2014, a new Pension scheme called “Aasara” enhancing the monthly Pension from Rs.200/- to Rs.1000/- for old age persons, widows, weavers, toddy tappers and AIDS patients and Rs.500/- to Rs.1500/- for disabled persons. The government also extended the financial assistance @ Rs. 1000/- per month to the poor Beedi worker under Aasara Scheme from the month of March 2015 onwards. In the past, Rs.835.63 Crores per year was spent by the previous Government. Now the Telangana Government is spending approximately Rs.4000.00 Crores per year for payment of pensions under the new Aasara Pensions Scheme. This is 478% increase over the past

Effect From:

The new social safety net scheme proposed by the government now called Aasara Pension Scheme and came into effect from November 8th, 2014.

The below table-1 shows us that the overall beneficiaries of the Telangana State are Thirty Eight Lakh Seventy thousand among them Thirteen Lakh Thirty Thousand are Old-age pensioners, Four lakh Seventy Thousand are disabled, thirteen lakh ninety thousand are widows ,Thirty five thousand are weavers, Sixty thousand are toddy tappers, Beedi workers are forty one Lakhs, single woman one lakh twenty thousand, art pensioners forty four thousand.

Table-1: Aasara Pension Scheme Scenario in Telangana

Sl. no	Category of pension	No. of beneficiaries
1	Old age	1339685
2	Disabled	477767
3	Widow	1393773
4	Weavers	35629
5	Toddy Tappers	60112
6	Beedi Workers	407619
7	Single Woman	120492
8	Art Pension	44086
	Total	3879163

Note: Govt has mentioned Beedi workers & Single woman under this category.

Source: <http://www.aasara.telangana.gov.in>

As per the table-1 out of total 38,79,163 beneficiaries highest category of pension is going to widow.

AASARA Pensions in Nizamabad District

Table-2

Sl. no	Category of pension	No. of beneficiaries
1	Old age	63342
2	Disabled	19557
3	Widow	69852
4	Weavers	206
5	Toddy Tappers	1050
6	Beedi Workers	97010
7	Single Women	9584
8	Art Pension	2140
	Total	262741

Source: <http://www.aasara.telangana.gov.in>

The table-2 shows that the beneficiaries number in the district. The number of beneficiaries are 2.6 lakhs in the district where Old-age Pensioners are about to 63k , disabled 19.5k widow pensioners 69k, weavers 1k, Beedi workers 97k , single woman are 9.5k , art pensioners are 2k.

Eligibility Criteria for sanction of AASARA Pension

The Government of Telangana with a view to identify eligible beneficiaries conducted a comprehensive one day Samagra Kutumba Survey (SKS) of households in the State of Telangana on August 19, 2014. The data collected during the Survey is expected to form the basis of identifying the poor and vulnerable who are truly eligible for the social safety net protection, through the AASARA Pensions.

The persons belonging to the households fulfilling one or more of the following conditions and whose annual household income is more than Rs.1.50 lakhs in rural areas and Rs.2.00 lakhs in urban areas listed below shall not be eligible for Social Security Pensions. The details of eligibility criteria are shown in below table-3.

Table-3: Eligibility criteria:

S.NO	Type of Pension	Eligibility
1	Old Age	Age 65 years and above.
2	Weavers	Age 50 years and above.
3	Widow	Age 18 years and above. Death certificate of her husband. Every year Updation on re-marriage for young widows (up to 45 Years)
4	Toddy Tappers	Age 50 years and above.
5	Pension to persons with HIV-AIDS (ART pension)	Who are undergoing Anti Retroviral Therapy (ART).
6	Differently Abled with (persons disabilities)	Irrespective of age. Disabled persons having a minimum of 40% disability under SADAREM assessment. In case of Hearing Impaired, the minimum disability should be 51% (as per G.O.Ms No. 31 dt. 01-12-2009). (In case of a minor child, the pension shall be disbursed to the mother/father of the disabled child)

Source: <http://www.aasara.telangana.gov.in>

Pension Amount

Government hereby fixes the pension amount per month for the following categories of pensioners as detailed below table:

Table:4

SN	Category	Monthly Pension Amount (Rs.)
1	Old Age	1000
2	Widow	1000
3	Disabled	1500
4	Weavers	1000
5	Toddy Tappers	1000
6	Persons with HIV-AIDS	1000

Source: <http://www.aasara.telangana.gov.in>

The Table-4 reveals that the Government is paying pension Rs.1500/- (fifteen hundred rupees) for month to the disabled category persons and paying pension Rs.1000/- (one thousand rupees) per month to all other category pensioners.

Social status of the sample beneficiaries

As per the survey majority of the beneficiaries are related to the BC/SC/ST communities (92%)

Table-5: Sample of Social Status

Social Status	Number of sample (N)	Percentage (%)
OC	12	15%
BC	45	56.25%
SC	15	18.75%
ST	8	10%
Total	80	100%

Size on the basis

Source: Primary data

Table no.5 shows us the social status of sample size. Total sample size is 80. Among them 12 respondents are from Open Category-OC (15%), 45 respondents are from Backward Classes-BC (56.25%), 15 respondents are from Scheduled Castes-SC (18.75%) and 8 respondents are from Scheduled Tribes-ST (10%).

Sample Size on the basis of Social Status and annual Income

Table-6: Annual Income of the Beneficiaries

Social status	Below 50,000 (N)	%	Below 1 Lakh (N)	%	Above 1 Lakh (N)	%	TOTAL (N)
OC	2	2.5%	4	5%	6	7.5%	12
BC	8	10%	27	33.75%	10	12.5%	
SC	10	12.5%	4	5%	1	1.25%	
ST	5	6.25%	3	3.75%	-	--	
TOTAL	25	31.25%	38	47.5%	17	21.25%	100%

Source: Primary data

As per the sample data of table-6 Nearly 31.25% of the beneficiaries having below 50,000 annual incomes and 47.5% are having below 1 Lakh Income per Annum. And 21.5% are above 1 lakh group. Above beneficiaries data represents the vulnerability of the poor who are unable to meet their basic needs. Among the total sample size all of them are living in very poor or poor conditions.

Category Basis

Table-7: Category Basis:

	Widow (N)	%	Old-age (N)	%	Disabled (N)	%	Toddy tapper (N)	%
OC	5		6		1		-	
BC	15		18		3		9	
SC	6		8		1		-	
ST	2		5		1		-	
Total	28	35%	37	46.25%	6	7.5%	9	11.25%

Source: Primary data

The table-7 shows us category of pension on social status of sample respondents. As per the data 46.25% beneficiaries are getting old age pensions, 35% are getting widow pensions, 7.5% are getting disabled and 11.25% are fell in the toddy tappers. Most of the respondents are receiving old-age pensions, next to that widow and toddy tappers.

Living status:

Table-8: Living status

Social status	Single (N)	%	Spouse (N)	%	Joint family (N)	%
OC	3		9		-	
BC	5		30		10	
SC	6		8		1	
ST	2		5		1	
Total	16	20%	52	65%	12	%

Source: Primary data

The table-8 shows us living status of pensioners on the basis of social status of sample respondents. Among total sample size 65% are living with spouse 20% are single and 15% are joint family.

Pension using status

Table-9: Pension using status

Category	Own needs (N)	%	Joint family needs (N)	%	For children (N)	%
Widow	4		2		10	
Disabled	7		1		5	
Old-age	30		12			
Toddy tappers	2		9		4	
Total	43	53.75%	24	30%	19	23.75%

Source: Primary data

The table-9 indicates us pension using status of pensioners on the basis of category of pension of sample respondents. 53.75% beneficiaries are using pension amount for their own needs, 30% are spending for joint family needs and 23.75% are spending for their children needs.

Dependency for livelihood

Table-10: Dependency for livelihood

Social status	Only pension (N)	%	Pension and working (N)	%	Other sources (N)	%
OC	7		4		1	
BC	13		20		12	
SC	5		6		4	
ST	3		4		1	
Total	28	35%	34	42.50%	18	22.50%

Source: Primary data

As per the table-10 We came to know that for 35% of pensioners the source of income is only pension 42.50% of the beneficiaries are getting their income through pension and working, remaining 22.50% earning through other sources..

Health status

Table-11: Health status:

Social status	No health issues (N)	%	Seasonal disease (N)	%	Chronic disease (N)	%
OC	4	5%	7	8.75%	1	1.25%
BC	11	13.75%	28	35%	6	7.5%
SC	4	5%	9	11.25%	2	2.5%
ST	3	3.75%	3	3.75%	2	2.5%
Total	22	27.5%	47	58.75%	11	13.75%

Source: Primary data

As per the table.11. among the total 27.5% said that they have no health issues, 58.75% are suffering with seasonal diseases and 13.75% facing chronic diseases in which they have a life threat.

Mode of receiving amount

Table-12: Mode of receiving amount

Mode of receiving	Number of respondents	%
Through queue	65	80%
Receiving at home	15	20%
Total	80	100%

Source: Primary data

According to the above table 80% of the beneficiaries are receiving their pension amount by standing in the queue at the distribution centre, but 20% are receiving at their home this happened because of their disability, unable to walk and visual problems.

Impact of Aasara pension on the basis of Social status

Table-13: Impact of Aasara pension on the basis of Social status

		Impact of Aasara pension							
Item	Social status	Pre-Aasara				Post-Aasara			
		Response				Response			
		Yes	%	No	%	Yes	%	No	%
<i>Fulfilling food needs</i>	OC	5	6.25%	7	8.75%	11	13.75%	1	1.25%
	BC	10	12.5%	35	43.75%	41	43%	4	5%
	SC	5	6.25%	10	12.5%	13	16.25%	2	2.5%
	ST	2	6.25%	6	7.5%	7	8.75%	1	1.25%
	Total	22	27.5%	58	72.5%	72	90%	8	10%
<i>Fulfilling medical needs</i>	OC	1	1.25%	11	13.75%	5	6.25%	7	8.75%
	BC	7	8.75%	38	47.5%	19	23.75%	26	32.5%
	SC	1	1.25%	14	15%	7	8.75%	8	10%
	ST	1	1.25%	7	8.75%	3	3.75%	5	6.25%
	Total	10	12.5%	70	87.5%	34	42.5%	46	57.5%
<i>Fulfilling other needs</i>	OC	-		12	15%	8	10%	4	5%
	BC	1	1.25%	44	55%	16	20%	29	36.25%
	SC	-		15	18.75%	3	3.75%	12	15%
	ST	-		8	10%	2	2.5%	6	7.5%
	Total	1	1.25%	79	98.75%	29	36.25%	51	63.75%
<i>Improving Standard of living</i>	OC	-		12	15%	11	13.75%	1	1.25%
	BC	1	1.25%	44	55%	42	52.5%	3	3.75%
	SC	1	1.25%	14	17.5%	12	15%	3	3.75%
	ST	-		8	10%	6	7.5%	2	2.5%
	Total	2	2.5%	78	97.5%	71	88.75%	9	11.25%
<i>Enriching the Purchasing Power</i>	OC	4	5%	8	10%	11	13.75%	1	1.25%
	BC	17	21.25%	28	35%	43	53.75%	2	2.5%
	SC	6	7.5%	9	11.25%	15	18.75%	-	
	ST	3	3.75%	5	6.25%	8	10%	-	
	Total	30	37.5%	50	62.5%	77	96.25%	3	3.75%

Source: Primary data

Table-13 shows us that Impact of Pre-Aasara pension on the basis of social status of pension, the results are as follows,

Impact of Pre-Aasara pension , on fulfilling food needs ,27.5% are satisfied with the amount they are receiving, among which 6.25% are OC, 12.5% are BC,6.25% are SC and 2.5% are ST. while the remaining 72.5% are not satisfied with the amount , among which 8.75% are OC, 43.75% are BC, 12.5% are SC and 7.5% are ST.

Impact of Pre-Aasara pension pension on fulfilling medical needs, 12.5% are satisfied with the amount they are receiving, while the remaining 87.5% are not satisfied with the amount, among which 13.75% are OC, 47.5% are BC, 15% are SC and 8.75% are ST'.

Impact of Pre-Aasara pension on fulfilling other needs, 1.25% are satisfied with the amount they are receiving, while the remaining 98.75% are not satisfied with the amount, among which 15% are OC, 55% are BC, 18.75% are SC and 10% are ST.

Impact of Pre-Aasara pension on improving standard of living, 2.5% are satisfied with the amount they are receiving, while the remaining 97.5% are not satisfied with the amount, among which 15% are OC, 55% are BC, 17.5% are SC and 10% are ST.

Impact of Pre-Aasara pension on enriching the purchasing power, 37.5% are satisfied with the amount they are receiving, while the remaining 62.5% are not satisfied with the amount, among which 10% are OC, 35% are BC, 11.25% are SC and 6.25% are ST.

The Impact of Post-Aasara pension on the basis of social status of pensioner, the results are as follows,

Impact of Post-Aasara pension on fulfilling food needs, 90% are satisfied with the amount they are receiving, among which 13.75% are OC, 43% are BC, 13.75% are SC and 8.75% are ST. while the remaining 10% are not satisfied with the amount,

Impact of Post-Aasara pension on fulfilling medical needs, 42.5% are satisfied with the amount they are receiving, among which 6.25% are OC, 23.75% are BC, 8.75% are SC and 3.75% are ST. while the remaining 57.5% are not satisfied with the amount,

Impact of Post-Aasara pension on fulfilling other needs, 36.25% are satisfied with the amount they are receiving, while the remaining 63.75% are not satisfied with the amount, among which 5% are OC, 36.25% are BC, 15% are SC and 7.5% are ST.

Impact of Post-Aasara pension on improving standard of living, 88.75% are satisfied with the amount they are receiving, among which 13.75% are OC, 52.5% are BC, 15% are SC and 7.5% are ST. while the remaining 11.25% are not satisfied with the amount,

Impact of Post-Aasara pension on enriching purchasing power, 96.5% are satisfied with the amount they are receiving, among which 13.5% are OC, 53.75% are BC, 18.75% are SC and 10% are ST. while the remaining 3.75% are not satisfied with the amount.

Impact of Aasara pension on the basis of Category of Pension

Table-14: Impact of Aasara pension on the basis of Category of Pension

Impact of Aasara pension									
Item	Category Of pension	Pre-Aasara				Post-Aasara			
		Response		Response		Response		Response	
		Yes	%	No	%	Yes	%	No	%
Fulfilling food needs	Widow	9	11.25	19	23.75	24	30	4	5
	Old age	8	10	29	36.25	34	42.5	3	3.75
	Disabled	2	2.5	4	5	6	7.5	-	
	Toddy tappers	3	3.75	6	6.25	8	10	1	1.25
	Total	22	27.5	58	72.5	72	90	8	10
Fulfilling medical needs	Widow	3	3.75	25	31.25	16	20	12	15
	Old age	4	5	33	41.25	12	15	23	28.75
	Disabled	1	1.25	5	6.25	2	2.5	4	5
	Toddy tappers	2	2.5	7	7.5	4	5	5	6.25
	Total	10	12.5	70	87.5	34	42.5	46	57.5
Fulfilling other needs	Widow	2	2.5	26	32.5	9	11.25	19	23.75
	Old age	6	7.5	31	38.75	16	20	21	26.25
	Disabled	1	1.25	5	6.25	2	2.5	4	5
	Toddy tappers	1	1.25	8	10	2	2.5	7	7.5
	Total	10	12.5	70	87.5	29	36.25	51	63.75
Improving Standard of living	Widow	-		28	35	15	18.75	13	16.25
	Old age	1	1.25	36	45	23	28.75	14	17.5
	Disabled	-		6	7.5	5	6.25	1	1.25
	Toddy tappers	1	1.25	8	10	8	10	1	1.25
	Total	2	2.5	78	97.5	51	63.75	29	36.25
Enriching the Purchasing Power	Widow	13	16.25	15	18.75	26	32.5	2	2.5
	Old age	14	17.5	23	28.75	36	45	1	1.25
	Disabled	1	1.25	5	6.25	6	7.5	-	
	Toddy tappers	2	2.5	7	7.5	9	11.25	-	
	Total	30	37.5	50	62.5	77	96.25	3	3.75

Source: Primary data

Table-14 shows us that Impact of pre aasara pension on the basis of category of pension; the results are as follows,

Impact of pre aasara pension on fulfilling food needs, 72.5% are not satisfied with the amount they are receiving, among which 23.75% are widows, 36.25% are old-age, 5% are disabled and 6.25% are toddy tappers. While the remaining 27.5% are satisfied with the amount,

Impact of pre aasara pension on fulfilling medical needs, 87.5% are not satisfied with the amount they are receiving, among which 31.25% are wadows, 41.25% are old-age, 6.25% are disabled and 7.5% are toddy tappers. while the remaining 12.5% are satisfied with the amount.

Impact of pre aasara pension on fulfilling other needs, 87.5% are not satisfied with the amount they are receiving, among which 32.5% are widows, 38.75% are old-age, 6.25% are disabled and 10% are toddy tappers. while the remaining 12.5% are satisfied with the amount,

Impact of pre aasara pension on improving standard of living, 97.5% are not satisfied with the amount they are receiving, among which 35% are widows, 45% are old-age, 7.5% are disabled and 10% are toddy tappers. while the remaining 2.5% are satisfied with the amount,

Impact of pre aasara pension on enriching the purchasing power, 62.5% are not satisfied with the amount they are receiving, among which 18.75% are widows, 28.75% are old-age, 6.25% are disabled and 7.5% are toddy tappers. while the remaining 37.5% are satisfied with the amount.

The Impact of post-aasara pension on the basis of category of pension, the results are as follows,

Impact of post-aasara pension on fulfilling food needs, 90% are satisfied with the amount they are receiving, among which 30% are widows, 42.5% are old-age, 7.5% are disabled and 10% are toddy tappers. while the remaining 10% are not satisfied with the amount,

Impact of post-aasara on fulfilling medical needs, 57.5% are not satisfied with the amount they are receiving, among which 15% are widows, 28.75% are old-age, 5% are disabled and 6.25% are toddy tappers. while the remaining 42.5% are satisfied with the amount.

Impact of post-aasara pension on fulfilling other needs, 63.5% are not satisfied with the amount they are receiving, among which 23.75% are widows, 26.25% are old-age, 5% are disabled and 7.5% are toddy tappers. while the remaining 36.25% are satisfied with the amount.

Impact of post-aasara pension on improving standard of living, 63.75% are satisfied with the amount they are receiving, among which 18.75% are widows, 28.75% are old-age, 6.25% are disabled and 10% are toddy tappers. while the remaining 36.25% are not satisfied with the amount,

Impact of post-aasara pension on enriching the purchasing power, 96.25% are satisfied with the amount they are receiving, among which 32.50% are widows, 45% are old-

age, 7.50% are disabled and 11.25% are toddy tappers. while the remaining 3.75% are satisfied with the amount,

Impact of Aasara pension on the basis of health status

Table-15: Impact of Aasara pension on the basis of health status

Impact of Aasara pension									
Item	Health status	Pre-Aasara				Post-Aasara			
		Response				Response			
		Yes	%	No	%	Yes	%	No	%
Fulfilling food needs	No health issues	22		-		22		-	
	Seasonal disease	-		47		42		5	
	Chronic disease	-		11		8		3	
	Total	22	27.50	58	72.50	72	90.0	8	10.0
Fulfilling medical needs	No health issues	10		12		22		-	
	Seasonal disease	-		47		12		35	
	Chronic disease	-		11		-		11	
	Total	10	12.50	70	87.50	34	42.50	46	57.50
Fulfilling other needs	No health issues	10		12		18		4	
	Seasonal disease	-		47		11		36	
	Chronic disease	-		11				11	
	Total	10	12.50	70	87.50	29	36.25	51	63.75
Improving Standard of living	No health issues	2		20		22		-	
	Seasonal disease	-		47		29		18	
	Chronic disease	-		11		-		11	
	Total	2	2.50	78	97.50	51	63.75	29	36.25
Enriching the Purchasing Power	No health issues	14		8		22		-	
	Seasonal disease	13		34		46		1	
	Chronic disease	3		8		9		2	
	Total	30	37.50	50	62.50	77	96.25	3	3.75

Source: Primary data

Table-15 shows us that Impact of pre aasara pension on the basis of health status the results are as follows,

72.50% are not satisfied with the amount they are receiving, while the remaining 27.5% are satisfied with the amount on the basis of fulfilling food needs.

87.50% are not satisfied with the amount they are receiving, while the remaining 12.50% are satisfied with the amount on the basis of fulfilling medical needs.

87.50% are not satisfied with the amount they are receiving, while the remaining 12.50% are satisfied with the amount on the basis of fulfilling other needs.

97.50% are not satisfied with the amount they are receiving, while the remaining 2.50% are satisfied with the amount on the basis of improving standard of living.

62.50% are not satisfied with the amount they are receiving, while the remaining 37.50% are satisfied with the amount on the basis of enriching the purchasing power.

The Impact of post-aasara pension on the basis of health status the results are as follows,

90% are satisfied with the amount they are receiving, while the remaining 10% are not satisfied with the amount on the basis of fulfilling food needs.

57.50% are not satisfied with the amount they are receiving, while the remaining 42.50% are satisfied with the amount on the basis of fulfilling medical needs.

63.75% are not satisfied with the amount they are receiving, while the remaining 36.25% are satisfied with the amount on the basis of fulfilling other needs.

63.75% are satisfied with the amount they are receiving, while the remaining 36.25% are not satisfied with the amount on the basis of improving standard of living.

96.25% are satisfied with the amount they are receiving, while the remaining 3.75% are not satisfied with the amount on the basis of enriching the purchasing power.

Difficulties in Receiving Pension on the basis of Social status

Table-16: Difficulties in Receiving Pension on the basis of Social status

Difficulties in Receiving Pension on social status					
<i>Item</i>	<i>Social status</i>	<i>Response</i>			
		<i>Yes</i>	<i>%</i>	<i>No</i>	<i>%</i>
<i>Monthly not paying</i>	OC	1	1.25	11	13.75
	BC	2	2.50	43	53.75
	SC	2	2.50	13	16.25
	ST	1	1.25	7	8.75
	Total	6	7.50	74	92.50
<i>Technical problems(Cash + staff + signals)</i>	OC	1		11	
	BC	4		41	
	SC	2		13	
	ST	1		7	
	Total	8	10	72	90.0
<i>Difficulties in thumb impression</i>	OC	10		2	
	BC	34		11	
	SC	10		5	
	ST	4		4	
	Total	58	72.50	22	27.50

Source: Primary data

Table-16 shows that the difficulties in receiving pension on the basis social status of pension 92.50% said that the authorities are paying regularly on monthly basis. Only 7.50% are said that they are not receiving regularly.

90% said that there no middlemen in receiving pension. Only 10% opined that there are middlemen in receiving pension.

72.5% opined that there will be a long queue in thumb impression for receiving pension. 27.50% they are receiving conveniently.

Difficulties in Receiving Pension on the basis of Category of Pension

Table-17: Difficulties in Receiving Pension on the basis of Category of Pension

Difficulties in Receiving Pension on category basis					
<i>Item</i>	<i>Category Of pension</i>	<i>Response</i>			
		<i>Yes</i>	<i>%</i>	<i>No</i>	<i>%</i>
<i>Monthly not paying</i>	Widow	1		27	
	Old age	3		34	
	Disabled	1		5	
	Toddy toppers	1		8	
	Total	6	7.50	74	92.50
<i>Technical problems(Cash + staff + signals)</i>	Widow	2	2.50	26	32.50
	Old age	3	3.75	34	42.50
	Disabled	2	2.50	4	05.00
	Toddy toppers	1	1.25	8	10.0
	Total	8	10.0	72	90.0
<i>Difficulties in thumb impression</i>	Widow	5	6.25	23	28.75
	Old age	10	12.50	27	33.75
	Disabled	4	05.0	2	2.50
	Toddy toppers	3	3.75	6	7.50
	Total	22	27.50	58	72.50

Source: Primary data

Table-17 shows that the difficulties in receiving pension on the basis of category of pension 92.50% said that the authorities are paying regularly on monthly basis. Only 7.50% are said that they are not receiving regularly.

90% said that there no technical problems in receiving pension. Only 10% opined that there are technical difficulties in receiving pension.

72.5% opined that there are no difficulties in thumb impression for receiving pension. While 27.50% are facing more problems in receiving pension.

Difficulties in Receiving Pension on the basis of Mode of receiving Pension

Table-18: Difficulties in Receiving Pension on the basis of Mode of receiving Pension

Difficulties in Receiving Pension on receiving mode					
Item	Category Of pension	Response			
		Yes	%	No	%
<i>Monthly not paying</i>	Through queue	4	5.0	61	76.25
	Receiving at home	2	2.50	13	16.25
	Total	6	7.50	74	92.50
<i>Technical problems(Cash + staff + signals</i>	Through queue	3	3.75	62	77.50
	Receiving at home	5	6.25	10	12.50
	Total	8	10.0	72	90.0
<i>Difficulties in thumb impression</i>	Through queue	58	72.50	7	8.75
	Receiving at home	-	-	15	18.74
	Total	58	72.50	22	27.50

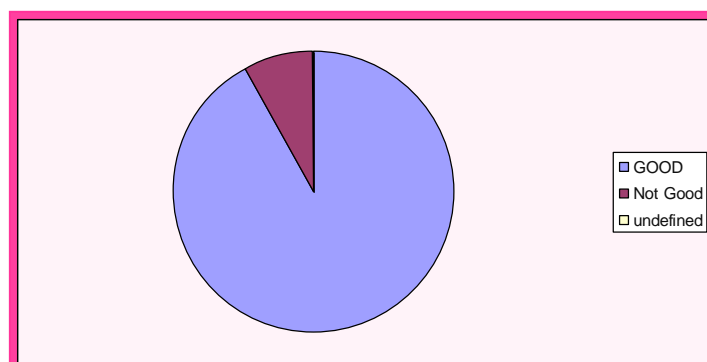
Source: Primary data

Table-18 shows that the difficulties in receiving pension through the mode of receiving pension, 92.50% said that there the authorities are paying regularly on monthly basis. Only 7.50% are said that they are not receiving regularly.

90% said that there no technical problems in receiving pension. Only 10% opined that there are technical problems in receiving pension.

27.50% opined that there will be a difficulty in thumb impression for receiving pension. 72.50% they are receiving conveniently.

Overall Opinion on AASARA Pension Scheme



Major Findings:

- The Impact of pre aasara pension on the basis of social status of pensioner, the results are as follows,
 - Impact of pre_aasara pension , on fulfilling food needs ,27.5% are satisfied with the amount they are receiving, among which 6.25% are oc, 12.5% are bc,6.25% are sc and 2.5% are st. while the remaining 72.5% are not satisfied with the amount , among which 8.75% are oc, 43.75% are bc, 12.5% are sc and 7.5% are st.
 - Impact of pre_aasara pension on fulfilling medical needs, 12.5% are satisfied with the amount they are receiving, while the remaining 87.5% are not satisfied with the amount, among which 13.75% are oc, 47.5% are bc, 15% are sc and 8.75% are st.
 - Impact of pre_aasara pension on fulfilling other needs, 1.25% are satisfied with the amount they are receiving, while the remaining 98.75% are not satisfied with the amount, among which 15% are oc, 55% are bc, 18.75% are sc and 10% are st.
 - Impact of pre_aasara pension on improving standard of living, 2.5% are satisfied with the amount they are receiving, while the remaining 97.5% are not satisfied with the amount, among which 15% are oc, 55% are bc, 17.5% are sc and 10% are st.
 - Impact of pre_aasara pension on enriching the purchasing power, 37.5% are satisfied with the amount they are receiving, while the remaining 62.5% are not satisfied with the amount, among among which 10% are oc, 35% are bc, 11.25% are sc and 6.25% are st.
- The Impact of post-aasara pension on the basis of social status of pensioner, the results are as follows,
 - Impact of post aasara pension on fulfilling food needs, 90% are satisfied with the amount they are receiving, among which 13.75% are OC, 43% are BC, 13.75% are SC and 8.75% are ST. while the remaining 10% are not satisfied with the amount,
 - Impact of post aasara pension on fulfilling medical needs, 42.5% are satisfied with the amount they are receiving, among which 6.25% are OC, 23.75%

are BC, 8.75% are SC and 3.75% are ST. while the remaining 57.5% are not satisfied with the amount,

- Impact of post aasara pension on fulfilling other needs, 36.25% are satisfied with the amount they are receiving, while the remaining 63.75% are not satisfied with the amount, among which 5% are OC, 36.25% are BC, 15% are SC and 7.5% are ST.
 - Impact of post aasara pension on improving standard of living, 88.75% are satisfied with the amount they are receiving, among which 13.75% are OC, 52.5% are BC, 15% are SC and 7.5% are ST. while the remaining 11.25% are not satisfied with the amount,
- Impact of post aasara pension on enriching purchasing power , 96.5% are satisfied with the amount they are receiving, among which 13.5% are OC, 53.75% are BC, 18.75% are SC and 10% are ST. while the remaining 3.75% are not satisfied with the amount.
- The Impact of pre aasara pension on the basis of category of pension, the results are as follows,
 - Impact of pre aasara pension on fulfilling food needs, 72.5% are not satisfied with the amount they are receiving, among which 23.75% are widows, 36.25% are old-age, 5% are disabled and 6.25% are toddy tappers. while the remaining 27.5% are satisfied with the amount,
 - Impact of pre aasara pension on fulfilling medical needs, 87.5% are not satisfied with the amount they are receiving, among which 31.25% are widows, 41.25% are old-age, 6.25% are disabled and 7.5% are toddy tappers. while the remaining 12.5% are satisfied with the amount.
 - Impact of pre aasara pension on fulfilling other needs, 87.5% are not satisfied with the amount they are receiving, among which 32.5% are widows, 38.75% are old-age, 6.25% are disabled and 10% are toddy tappers. while the remaining 12.5% are satisfied with the amount,
 - Impact of pre aasara pension on improving standard of living, 97.5% are not satisfied with the amount they are receiving, among which 35% are widows, 45% are old-age, 7.5% are disabled and 10% are toddy tappers. while the remaining 2.5% are satisfied with the amount,

- Impact of pre aasara pension on enriching the purchasing power, 62.5% are not satisfied with the amount they are receiving, among which 18.75% are widows, 28.75% are old-age, 6.25% are disabled and 7.5% are toddy tappers. while the remaining 37.5% are satisfied with the amount.
- The Impact of post-aasara pension on the basis of category of pension, the results are as follows,
- Impact of post-aasara pension on fulfilling food needs, 90% are satisfied with the amount they are receiving, among which 30% are widows, 42.5% are old-age, 7.5% are disabled and 10% are toddy tappers. while the remaining 10% are not satisfied with the amount,
 - Impact of post-aasara on fulfilling medical needs, 57.5% are not satisfied with the amount they are receiving, among which 15% are widows, 28.75% are old-age, 5% are disabled and 6.25% are toddy tappers. while the remaining 42.5% are satisfied with the amount.
 - Impact of post-aasara pension on fulfilling other needs, 63.5% are not satisfied with the amount they are receiving, among which 23.75% are widows, 26.25% are old-age, 5% are disabled and 7.5% are toddy tappers. while the remaining 36.25% are satisfied with the amount.
 - Impact of post-aasara pension on improving standard of living, 63.75% are satisfied with the amount they are receiving, among which 18.75% are widows, 28.75% are old-age, 6.25% are disabled and 10% are toddy tappers. while the remaining 36.25% are not satisfied with the amount,
 - Impact of post-aasara pension on enriching the purchasing power, 96.25% are satisfied with the amount they are receiving, among which 32.50% are widows, 45% are old-age, 7.50% are disabled and 11.25% are toddy tappers. while the remaining 3.75% are satisfied with the amount.
- The Impact of pre aasara pension on the basis of health status the results are as follows,
- 72.50% are not satisfied with the amount they are receiving, while the remaining 27.5% are satisfied with the amount on the basis of fulfilling food needs.

- 87.50% are not satisfied with the amount they are receiving, while the remaining 12.50% are satisfied with the amount on the basis of fulfilling medical needs.
 - 87.50% are not satisfied with the amount they are receiving, while the remaining 12.50% are satisfied with the amount on the basis of fulfilling other needs.
 - 97.50% are not satisfied with the amount they are receiving, while the remaining 2.50% are satisfied with the amount on the basis of improving standard of living.
 - 62.50% are not satisfied with the amount they are receiving, while the remaining 37.50% are satisfied with the amount on the basis of enriching the purchasing power.
- The Impact of post-aasara pension on the basis of health status the results are as follows,
- 90% are satisfied with the amount they are receiving, while the remaining 10% are not satisfied with the amount on the basis of fulfilling food needs.
 - 57.50% are not satisfied with the amount they are receiving, while the remaining 42.50% are satisfied with the amount on the basis of fulfilling medical needs.
 - 63.75% are not satisfied with the amount they are receiving, while the remaining 36.25% are satisfied with the amount on the basis of fulfilling other needs.
 - 63.75% are satisfied with the amount they are receiving, while the remaining 36.25% are not satisfied with the amount on the basis of improving standard of living.
 - 96.25% are satisfied with the amount they are receiving, while the remaining 3.75% are not satisfied with the amount on the basis of enriching the purchasing power.
- The difficulties in receiving pension on the basis of category of pension 92.50% said that the authorities are paying regularly on monthly basis. Only 7.50% are said that they are not receiving regularly.
- 90% said that there no middlemen in receiving pension. Only 10% opined that there are middlemen in receiving pension.

- 72.5% opined that there will be a long queue in thumb impression for receiving pension. 27.50% they are receiving conveniently.

Suggestions:

- Delivery mechanism should be corrected because most of the beneficiaries widow/old-age groups
- In some of the areas middlemen are existing in sanction of pension amount to the beneficiaries. Hence we strongly suggest the government to look into this matter where government is blamed by these acts
- It is highly recommended that due to inflation most of the people are spending their income on essentials hence we suggest the government to increase the pension amount to meet essentials in which they are foregoing to satisfy another essential want.

Conclusion

There are some loopholes in delivery mechanism if they are corrected, Aasara will really improves the livelihood and those who are suffering with chronic diseases and seasonal diseases policy makers has to take appropriate or suitable measures for improving their health conditions and standard of living.

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