ASPIRATIONAL DISTRICTS PROGRAMME: AN APPRAISAL

United Nations Development Programme

Aspirational Districts Programme: An Appraisal

December 2020

UNDP partners with people at all levels of society to help build nations that can withstand crisis, and drive and sustain the kind of growth that improves the quality of life for everyone. On the ground in nearly 170 countries and territories, we offer global perspective and local insight to help empower lives and build resilient nations.

Copyright @UNDP India 2020.

All rights reserved

This publication in its entirety may not be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording or any information storage and retrieval system now known or to be invented, without written permission from the publisher.

The team that authored this report includes;

Dr. Basudeb Guha Khasnobis (Development Economist)

Mr. Jaimon C Uthup (Policy Specialist – SDGs)

Ms. Sruti Mohanty (Consultant)

Ms. Upasana Sikri (Technical Expert – ADP)

Mr. Digvijay Singh (Social Protection Specialist)

Mr. Daksh Baheti (Research & Data Analytics Expert)

Mr. Suvir Chandna (Research & Data Analytics Expert)

Ms. Anjali Bansal (Research & Data Analytics Expert)

Ms. Pallavi Kashyap (Coordination Support)

Ms. Kaavya Singh (Coordination Support)

Published in India

United Nations Development Programme,
55 Lodhi Estate,
New Delhi
110003

The authors of the report would like to warmly acknowledge the contributions made by those listed below.

Design, Illustrations & Layout - Thinkstr Consultancy Pvt. Ltd
Aspirational Map designed by Rouge Communications
Photographs – Mr. Biju Boro, Mr. Gaganjit Singh, Mr. Pelevizo Meyase

ASPIRATIONAL DISTRICTS PROGRAMME: AN APPRAISAL

United Nations Development Programme

LIST OF ASPIRATIONAL DISTRICTS

Jammu & Kashmir
1. Kupwara
2. Baramula

Himachal Pradesh
3. Chamba

Punjab
4. Moga
104. Firozpur

Uttarakhand
5. Udham Singh Nagar
6. Haridwar

Haryana
7. Mewat

Rajasthan
8. Dholpur
9. Karauli
10. Jaisalmer
11. Sirohi
12. Baran

Uttar Pradesh
13. Chitrakoot
14. Fatehpur
15. Bahraich
16. Shrawasti
17. Balrampur
18. Siddharthnagar
19. Chandauli
20. Sonebhadra

Bihar
21. Sitamarhi
22. Araria
23. Purnia
24. Katihar
25. Muzaffarpur
26. Begusarai
27. Khagaria
28. Banka
29. Sheikhpura
30. Aurangabad
31. Gaya
32. Nawada
33. Jamui

Sikkim
34. West Sikkim

Nagaland
35. Kiphire

Manipur
36. Chandel

Mizoram
37. Mamit

Tripura
38. Dhalai

Meghalaya
39. Ribhoi

Assam
40. Goalpara
41. Barpeta
42. Hailakandi
43. Baksa
44. Darrang
45. Udalguri
109. Dhubri

Jharkhand
46. Garhwa
47. Chatra
48. Giridih
49. Godda
50. Sahibganj
51. Pakur
52. Bokaro
53. Lohardaga
54. Purbi Singhbhum
55. Palamu
56. Latehar
57. Hazaribagh
58. Ramgarh
59. Dumka
60. Ranchi
61. Khunti
62. Gumla
63. Simdega
64. Pashchimi Singhbhum

Odisha
65. Dhenkanal
66. Gajapati
67. Kandhamal
68. Balangir
69. Kalahandi
70. Rayagada
71. Koraput
72. Malkangiri
73. Nawarangpur
74. Nuapada

Chhattisgarh
75. Korba
76. Rajnandgaon
77. Mahasamund
78. Kanker
79. Narayanpur
80. Dantewada
81. Bijapur
105. Bastar
106. Kondagaon
107. Sukma

Madhya Pradesh
82. Chhatarpur
83. Damoh
84. Barwani
85. Rajgarh
86. Vidisha
87. Guna
88. Singrauli
89. Khandwa

Gujarat
90. Dahod
91. Narmada

Maharashtra
92. Nandurbar
93. Washim
94. Gadchiroli
95. Osmanabad

Andhra Pradesh
96. Vizianagaram
97. Visakhapatnam
98. Y.S.R. Kadapa

Karnataka
99. Raichur
100. Yadgir

Kerala
101. Wayanad

Tamil Nadu
102. Virudhunagar
103. Ramanathapuram

Arunachal Pradesh
108. Namsai

Telangana
110. Asifabad (Komaram Bheem)
111. Jayashankar Bhupalpally
112. Bhadradri kothagudem

MESSAGE

The Asia- Pacific region is an economic powerhouse, a driver of innovation and invention, and is endowed with abundant human capacity, societal energies and natural resources. Carrying diverse and complex developmental issues, the region is challenged by deep rooted inequalities and pockets of instability that threaten peaceful progress.

The 2030 Agenda can only be achieved with a level of scale and ambition in collaboration and commitment across all levels of governments, the many partners and stakeholders involved. Sub-national and local governments have an essential role to play in localizing the global goals, translating and delivering them as integrated programmes and services that work to improve people's lives. This is where impact will matter most.

The Aspirational District Programme in India is designed along these lines. It is an effort to demonstrate that governments and stakeholders can advance sustainable development by designing and implementing together. While targeting a set of specific areas of improvement that have been identified by the communities themselves, it carries rigorous monitoring and data driven decision making approach to keep it on course. The overall success of the programme will be measured by its ability to influence and sustain a more inclusive and locally informed approach to tackling local development.

While the initiative remains at an early stage, the initial findings are on the right track. There will be much to be learnt and improved along the way. This openness to learning and to adapt and grow as needed, will keep the effort honest and accountable to those it serves. I am pleased to see UNDP's engagement in this initiative in India, partnering with Niti Aayog and all stakeholders.

Kanni Wignaraja,
Assistant Secretary-General,
Assistant Administrator and
Director of the Regional Bureau for Asia and the Pacific

MESSAGE

The Aspirational Districts Programme, anchored by NITI Aayog, aims to transform the socioeconomic status of these priority districts. The programme's focus on 3 Cs: Convergence (ofcentral and state schemes), Collaboration (between Centre, State, District and Citizens) and Competition (among the districts in key performance indicators) is proving to be a successful model for stimulating local development.

Focused at district level and instituted by states, the programme hinges on the strengths of local governments to accelerate the realisation of SDG aspirations for communities, households, and individuals, particularly to those at risk of falling behind. It achieves this in big part through e-monitoring the real-time data.

The importance of partnerships and collective action is another hallmark of the Aspirational District Programme, bringing in different development partners with varied expertise to support the district administrations. These partnerships re-emphasise the importance of consolidating our strengths to make the spirit of Agenda 2030 spring to life for all people. UNDP greatly values such partnerships to guide strategic priorities and spur concerted action to deliver on shared objectives.

These and other attributes make the Aspirational District Programme a global example in enlisting sub-national government, with multi-stakeholder partnerships, to ensure that SDG progress becomes real in the eyes of people in their daily lives. The programme is not only replicable within India, but also across the globe.

This report presents an appraisal of the Aspirational Districts Programme. UNDP is committed to closely working with Government of India, and NITI Aayog in particular, along with other partners, to fully achieve the programme's noble objectives.

Renata Dessallien
UN Resident Coordinator in India

FOREWORD

The Government of India launched the Aspirational Districts Programme in January 2018 to accelerate improvement in key development parameters in the most backward districts of the country. The programme marks a paradigm shift from pursuing economic growth towards reducing deep spatial inequalities. The initiative pivots on the Government's motto of 'Sabka Saath, Sabka Vikas', which mirrors the principle of 'Leaving No One Behind' to achieve the Agenda 2030.

The Programme applies innovative techniques by supporting collaboration among multiple levels of governance as well as through public-private partnerships. It applies the 3C principle - Convergence, Competition and Collaboration – and a well-designed system of incentives for good performance which is monitored by a set of pre-determined common indicators. India has been a global leader in advancing the SDG agenda, and it is heartening to see the country's initiative on Local Economic Development (LED) delivering strong results. It merits replication in other parts of the developing world.

As we publish this appraisal of the Aspirational Districts Programme, the world is grappling with the devastating consequences of the Covid-19 pandemic and the unravelling of economic recession. Transformative approaches are needed for progress, including in the Aspirational Districts. The social protection architecture can be strengthened further to impart more resilience to backward regions especially at times of crises.

My special appreciation goes to the Policy Unit of UNDP India, who drove the whole process for this evaluation study.

Shoko Noda
Resident Representative
UNDP India

TABLE OF CONTENTS

EXECUTIVE SUMMARY 1

1 INTRODUCTION AND BACKGROUND TO THE PROGRAMME 5
- 1.1. Institutional Structure and Sectoral Focus: A Transformative Approach
- 1.2. Data Driven Governance – The Key to Programme Efficiency

2 LITERATURE REVIEW 9
- 2.1. Similar Programmes

3 EVALUATION CRITERIA 13
- 3.1. Key Research Questions

4 QUANTITATIVE DATA COLLECTION AND ANALYSIS 15
- 4.1. Net Resilience Index
  - 4.1.1. Methodology
  - 4.1.2. Findings
- 4.2. Difference-in-Difference Method
  - 4.2.1. Methodology
  - 4.2.2. Findings

5 QUALITATIVE DATA COLLECTION AND ANALYSIS 25
- 5.1. Respondents and Sampling for Qualitative Data Collection
- 5.2. Findings
  - 5.2.1. Mapping Sector-wise growth
- 5.3. Governance, Administration and Capacity building
  - 5.3.1. The 3Cs Approach
  - 5.3.2. Targeting the low hanging fruits
  - 5.3.3. Monitoring and Measurement Methods
  - 5.3.4. Capacity building
- 5.4. The role of Champions of Change (CoC) Dashboard in data driven decision making

6 THE IMPACT OF ASPIRATIONAL DISTRICTS PROGRAMME AND WHAT SETS IT APART 35

7 RECOMMENDATIONS FOR THE WAY FORWARD: COUNTERING THE EXISTING GAPS AND CHALLENGES 37

8 BEST PRACTICES 39
- 8.1. Health and Nutrition
- 8.2. Education
- 8.3. Agriculture and Water Resources
- 8.4. Basic Infrastructure
- 8.5. Skill Development and Financial Inclusion
- 8.6. Scalability

List of Box & Tables

List of Tables

Table 1: Sectors, weightage and areas of focus (pg. 7)
Table 2: Evaluation criteria (pg. 14)
Table 3: Summary Statistics for Net Resilience exercise - 2018 and 2020 (pg. 17)
Table 4: CoC and HMIS Data Matching for H&N Indicators (pg. 20)
Table 5: Difference-in-difference results for H&N (pg. 23)
Table 6: Difference-in-difference results for FI (pg. 24)
Table 7: Framework for qualitative analysis (pg. 26)
Table 8: Sampling used for qualitative interviews (pg. 27)

List of Appendix Tables

Table A.1: Data Points Used for Net Resilience index (pg. 46)
Table A.2: Ranking of districts based on change in net resilience since March 2018 to March 2020 (pg. 56)
Table A.3: List of Aspirational Districts (Treatment Group for DiD approach) (pg. 59)
Table A.4: Control Group for DiD approach for Health and Nutrition sector (pg. 61)
Table A.5: Control group for DiD approach for Financial Inclusion indicators (pg. 63)
Table A.6: Comparison of means of treatment and control group for H&N sector (pg. 65)
Table A.7: Comparison of means of treatment and control group for FI sector (pg. 65)

List of Equations

Equation 1: Standardization formulae (pg. 16)
Equation 2: Difference-in-difference estimation (pg. 22)

List of Figures

Figure 1: Comparison of resilience and vulnerability among districts since inception (2018) of ADP (pg. 17)
Figure 2: Top 5 districts with maximum change in resilience since 2018 (pg. 18)
Figure 3: Comparison of top 5 and bottom 5 districts based on performance in net resilience and net vulnerability index (pg. 18)

List of Boxes

Box 1: ADP as a model of Local Area Development (pg. 3)
Box 2: Delta Ranking (pg. 8)
Box 3: Resilience Score Interpretation (pg. 16)
Box 4: Skill Development - Washim (pg. 30)
Box 5: EAP-SDG (pg. 31)
Box 6: Goalpara Two Pronged Strategy (pg. 32)
Box 7: Ranchi Low Hanging Fruits (pg. 32)
Box 8: Technical Support Unit (pg. 33)
Box 10: Data Driven Development (pg. 36)
Box 11: Malaria Mukt Bastar Abhiyan, Bijapur and Dantewada (pg. 40)
Box 12: Poshan App, Ranchi (pg. 41)
Box 13: Hamara Vidyalaya Program, Namsai (pg. 41)
Box 14: Gyanodaya Project, Godda (pg. 41)
Box 15: GoalMart Initiative, Goalpara (pg. 42)
Box 16: Recharge pits, Washim (pg. 43)
Box 17: Black Rice Initiative, Chandauli (pg. 43)
Box 18: Green Technologies Initiative, Goalpara (pg. 43)
Box 19: Yuva BPO Initiative, Dantewada (pg. 44)
Box 20: Bank Sakhis, Ranchi (pg. 44)
Box 21: Scaling of Best Practices (pg. 45)

Acronyms & Abbreviations

ADP - Aspirational Districts Programme
ADs - Aspirational Districts
ADFs - Aspirational District Fellows
APY - Atal Pension Yojana
BRAC - Bangladesh Rural Advancement Committee
BDP - Bangladesh Development Program
BRGF - Backward Regions Grant Fund
C4C - Champions for Change
CoC - Champions of Change
3Cs - Convergence, Competition and Collaboration
CSOs - Civil Society Organisations
CSR- Corporate Social Responsibility
DAC - Development Assistance Committee
DC - District Commissioners
DFS - Department of Financial Services
DMs - District Magistrates
DiD - Difference-in-Difference
EAP-SDGs - Externally Aided Programme on Sustainable Development Goals
FI - Financial Inclusion
FHP - Farm Harvest Price
H&N - Health & Nutrition
HLPF - High Level Political Forum
HMIS - Heath Management Information System
ICDS - Integrated Child Development Services
JICA - Japan International Cooperation Agency
LNOB - Leave No One Behind
LWE - Left Wing Extremist
MSP- Minimum Support Price
MTCs - Malnourishment Treatment Centres
MTSF - Medium-Term Strategic Framework
Non - ADs - Non-Aspirational Districts
NDP - National Development Plan
NGOs - Non-Government Orgnaisations
ODA - Official Development Assistance
OECD - Organization for Economic Cooperation and Development
PMU - Project Management Unit
PMJJBY - Pradhan Mantri Jeevan Jyoti Beema Yojana
PMSBY - Pradhan Mantri Swasthya Beema Yojana
PMJDY - Pradhan Mantri Jan Dhan Yojana
PMFBY - Pradhan Mantri Fasal Bima Yojana
PMGSY - Pradhan Mantri Gram Sadak Yojana
POs - Prabhari Officers
SBA - Skilled Birth Attendant
SDGs - Sustainable Development Goals
TSU - Technical Support Unit
TUP - Targeting the Ultra-poor Programme
UNA - United Nation Agencies
UNDP - United Nation Development Programme
UNVs - UN Volunteers
VO - Village Organisation
VHSND - Village Health Sanitation and Nutrition Day

Executive Summary

Executive Summary

This appraisal of the Aspirational Districts Programme is aimed to assess the effectiveness of the flagship Programme of the Government of India and generate evidence-based documentation which can be used to support NITI Aayog and other stakeholders in their efforts to address existing gaps, evidence-based planning and decision making. It is also expected to provide guidance for district administrations, development partners, knowledge partners and any other stakeholders in achieving the vision and targets set out for the ADP. In addition, the evaluation also aimed to analyze the specific impact of ADP across the different districts, especially in relation to known issues of development challenges among the aspirational districts. The findings of this evaluation confirm that significant progress has been made since the inception of programme. The key findings of the programme are mentioned below:

- **Sector wise growth:**

  The Aspirational District Programme focuses on development across 5 sectors of Healthcare and Nutrition, Education, Agriculture and Water Resources, Basic Infrastructure, and Skill Development and Financial Inclusion. A sector wise analysis of the impact of ADP highlights two chief findings. First, the programme has served as a catalyst for expediting development among Aspirational districts. Stakeholders interviewed mentioned several successful initiatives that are being carried out in the districts. Second, certain sectors such as Healthcare and Nutrition, Education, and to an extent Agriculture and Water Resources have seen some major changes. This is encouraging as these are crucial areas for assessing development. Other sectors of Basic Infrastructure, Financial Inclusion and Skill Development also achieved improvement in indicators since the inception of the programme and offer scope for further strengthening.

- **Better governance through convergence:**

  Among the three approaches of Convergence, Competition and Collaboration, most stakeholders who were interviewed credited Convergence as a crucial approach for the better performance of the districts. The stakeholders emphasised the importance of convergence that fostered moving away from working in silos towards synchronised planning and governance to achieve the targets of the programme.

- **Expediting growth through competitive federalism:**

  The Competition aspect of the 3Cs was also seen to be a helpful method in promoting better monitoring and creating healthy competiton to achieve targets of the programme. This has also served as a motivating factor for districts to increase their efforts and track progress.

- **Collaboration:**

  Although this aspect of ADP has helped ensure systematic and targeted efforts among different organizations, it can be further accentuated. This may especially be helpful as an alternative solution to bridge certain gaps of technical expertise that districts face. The different development partners interviewed also expressed interest in expanding work and collaborating further with government and non-government organization for the programme.

- **Commitment of the top most political leadership:**

  A remarkable feature of the programme that has greatly contributed in its success, is the commitment shown by the top most political leadership of the country to bring about rapid progress in the under-developed pockets in India. This includes regular monitoring of the programme at the level of Shri Narendra Modi, Hon'ble Prime Minister of India, who has motivated and enthused District Collectors to deliver their best at the field level.

Shri Narendra Modi, Hon'ble Prime Minister of India, launching the Aspirational Districts Programme- January 2018

- **What gets measured gets done:**

  In addition to the 3Cs approach, the study also found that the ADP's focus on constant real-time monitoring and data driven decision-making has been a chief contributor to better governance. This has especially helped district administrations in identifying the

strengths or weaknesses of a district, resulting in more strategic and informed approaches for development.

- **Capacity building:**

  While the ADP has strengthened the technical and administrative capacities of the districts, interviews with different stakeholders highlighted the need to focus on this aspect even more. Findings mainly highlight the need for strengthening of internal capacities. Some methods suggested by the stakeholders for addressing this concern were to appoint dedicated personnel such as Aspirational District Fellows or Technical Support Units across all the districts or to collaborate with development partners for providing technical expertise. Other suggestions include provision of skills training for officials and staff, increased flexibility in hiring processes, and increase in incentives for promoting recruitment in these districts.

- **Role of delta rankings:**

  The delta ranking provided on the Champions of Change (CoC) dashboard is a unique and dynamic feature of the ADP. All districts interviewed admitted to having used the dashboard to check their rankings and progress, especially in the initial months of the programme. However, a few stakeholders suggested that rankings be done on a quarterly or annual basis. This would give districts sufficient time to focus on outcomes that require long-term planning and work.

- **Addition or revision of Sectors/Indicators:**

  While stakeholders credited the use of monitoring methods and the use of a pre-determined set of indicators for measuring performance, some highlighted the need to revise a few indicators which are close to being saturated or met by most districts such as "electrification of households" as an indicator of basic infrastructure, or improvement in indicators related to micro-irrigation under the sector of Agriculture and Water Resources. Similar to the suggestion of delta rankings, district administrations suggested that more indicators be measured on a quarterly or annual basis rather than monthly basis, as it would help to implement sustainable and long-term changes.

- **Aspirational districts versus non-aspirational districts:**

  Based on the interviews with different stakeholders, it was found that one of the chief advantages of the ADP is that it has given attention to districts otherwise neglected due to their lower performances. This aspect has aided most districts to demand the necessary support required for their districts.

- **Effectiveness of the ADP:**

  This evaluation found that a key feature that sets the ADP apart from other development programmes is the clear and comprehensive framework it provides to the districts. This framework has provided effective guidance for districts to focus their efforts on achieving the targets of the programme. In fact, the framework is an effective method of ensuring that efforts are synchronised with the wider goals of the country and are not arbitrary in nature.

- **Motivation for the way forward:**

  Interviews with different stakeholders highlighted that while the initial stages of the ADP helped propel notable changes within the districts and the programme's pre-eminence should be maintained. Therefore, as the programme has completed 3 years, it is crucial that efforts be made to motivate districts and reinforce the programme in all respects.

Overall, while the programme may have encountered certain challenges, especially related to capacity building there is no doubt that it has been immensely successful in propelling development among the backward districts. It must be noted most Aspirational Districts are located in remote areas, and some even plagued with Left Wing Extremist (LWE) conflicts. These factors continue to hinder their growth and make it more difficult for any development programmes to be implemented. However, given the political salience around ADP and the concerted efforts of different government and non-government organizations, the districts have experienced more growth and development in the last three years than ever before. Evidence to support this finding can be seen from the difference-in-difference analysis conducted by the evaluation, as well as examples documented under the qualitative analysis section and best practices. Given the positive impact of the programme, it is necessary to ensure the focus on development is encouraged further and momentum gained so far in expediting growth is maintained. Based on the findings of the evaluation, it is recommended that the success of the programme be scaled up and replicated for other sectors and districts.

Overall, ADP is a very successful model of local area development. It is aligned to the principle of "leave no one behind" - the vital core of the SDGs. Political commitment at the highest level has resulted in rapid success of the programme. It should serve as a best practice for several other countries where regional disparities in development status persist for many reasons.

Our
Future

Introduction and Background to the Programme

Introduction and Background to the Programme

The Aspirational Districts Program was launched by the Honorable Prime Minister, Sh. Narendra Modi in 2018, with the objective of expediting the transformation of 112 most backward districts across 28 states through the convergence of government programmes and schemes[1]. The districts were chosen by senior officials of the Union government in consultation with states officials. To shortlist states a composite index of deprivation was constructed using a range of socio-economic indicators[2]. A minimum of one district was initially chosen from every state (except Goa). Predictably, more districts made it to the list of backward regions from the smaller states or states ranking lower in the development spectrum such as Bihar, Odisha, Jharkhand, Chhattisgarh, Uttar Pradesh, and Madhya Pradesh.

As the programme is a policy priority of the Government of India, it is anchored by the NITI Aayog which works in collaboration with central and state governments for the programme to streamline the effectiveness and provide regular checks and guidelines. As a result, officers of Additional Secretary and Joint Secretary ranks have been nominated as 'Central Prabhari Officers' of each district, who together with state nodal officers work with the respective District Collectors/ District Magistrates to drive change at the grassroots level. Furthermore, an Empowered Committee – comprising of Secretaries (Department Heads) of key Central Ministries – has also been set up under the Chief Executive Officer, NITI Aayog to support the various levels of government. This institutional structure is based on an inclusive approach to governance – termed as "Sabka Saath Sabka Vikas" which aims to facilitate growth and development of the entire district, rather than any single group of population. This motto is mirrored in the principle of Leave No One Behind (LNOB), the central and transformative promise of the 2030 Agenda for Sustainable Development.

1.1 Institutional Structure and Sectoral Focus: A Transformative Approach

The Aspirational Districts Programme marks an important shift in the approach towards inclusive development by focusing on five critical sectors – i.e. Healthcare, Education, Agriculture & Water Resources, Financial Inclusion and Skill Development and Basic Infrastructure. The selection of these five themes is based on the fact that they have a direct bearing on the quality of life and economic productivity of citizens[3]. Therefore, each of the sectors have been allocated different weightage[4] and indicators which serve as the basis for measuring performance. The following is the sector-wise breakup of indicators:

[1] While 117 districts were selected initially, West Bengal never joined the programme. Therefore, there are 112 districts now. Baramula and Kupwara, although now part of UT (Kashmir) are still aspirational districts.

[2] NITI Aayog 2018. Transformation of Aspirational Districts: Baseline Ranking and Real-time Monitoring Dashboard.

[3] NITI Aayog, 2018. Deep Dive: Insights from Champions of Change – The Aspirational Districts Dashboard

[4] The ability of district administration in making improvements is among the many factors that results in the differential sectoral weightage. For example, in domains such as basic infrastructure and financial inclusion, much of the progress depends on the federal programmes and action taken by other financial institutions respectively. Thus, these domains have been given a lower weightage. Progress in health, nutrition, agriculture and education – on the other hand – can be greatly impacted by the district administration and have therefore been given more weightage.

Table 1: Sectors, weightage and areas of focus

Themes	Overall weightage	Data-points	Areas of focus
Health & Nutrition	30%	31	• Some of the key areas of focus are antenatal care, postnatal care, contagious diseases, growth of health infrastructure. Aspects of childcare such as Severe Acute Malnutrition, supplementary nutrition under ICDS are also covered under this.
Education	30%	14	• The education sector focusses mostly on learning outcomes at primary and secondary level, especially students' performance in Mathematics and Language • It also focuses on infrastructure pertaining to education institutions such as girls' access to toilets, electricity supply, drinking water, etc.
Agriculture & Water Resources	20%	12	• Indicators for this domain involve improving access to water management as well as market access for farmers, improved agricultural inputs, livestock, among others.
Financial Inclusion and Skill Development	10%	16	• There are six indicators for Financial Inclusion which include improved access to bank accounts, especially through major schemes such as Pradhan Mantri Jan Dhan Yojana, disbursement of loans under Pradhan Mantri Mudra Yojana. • Indicators for the skill development includes both short- and long-term training schemes and the number of apprentices trained. There are 10 indicators for skill development.
Basic Infrastructure	10%	8	• This domain focusses on access to housing water, electricity, and road connectivity. It mainly involves community level infrastructure.
Total	**100%**	**81**	

At the core of this sectoral development ideology, is the ADP's theory of change based on the 3 pillars, popularly referred to as the 3Cs, i.e. –

- Convergence – which is based on the synthesis of different government schemes and authorities (state, district, block level), and
- Collaboration which focuses on partnerships between civil society organisations, philanthropies and government for achieving the targets.
- Competition – which is expected to foster competition and accountability among district governments for achieving the development targets,

In accordance with this approach, the programme requires the involvement of central, state and district government authorities. The programme also involved collaboration with knowledge partners such as Tata Trusts and IDinsight for monitoring and data collection purposes, and several development partners to assist the district administrations in improving the key performance indicators. The development partners on-boarded for the programme are Piramal (Health, Education and Sarwajal), BMGF, Tata Trusts, Microsave, IdInsight, ITC Ltd, CSBC, Lupin, Bharatiya Jain Sangathan, Vedanta, Plan India, Save the Children, L&T, CII and NSE Foundation. In addition, a Project Management Unit (PMU) has been set up at NITI Aayog where experts from United Nations Development Programme and Asian Development Bank are providing technical support to districts in preparing proposals to access funds through various sources. This highlights the collaborative nature of the programme, and an attempt to converge schemes across the sectors at the national, state or district levels aiming to improve the coordination among central and state governments to improve social development indicators.

1.2. Data Driven Governance – The Key to Programme Efficiency?

While the core approach of the programme is based on the 3Cs (Convergence, Competition and Collaboration) a key component in facilitating these, especially pertaining to Competition is through the real time data collection and monitoring undertaken by the NITI Aayog. While district officials are responsible for updating a majority[5] of real time data against the indicators, NITI Aayog commissions regular surveys to ensure validity of data entered on the dashboard.

The baseline assessment for instance, was conducted in March 2018 upon commencement of the programme and used 49 indicators (81 data points) to rank the status of the districts across the five sectors. Since then, districts are ranked on a month-on-month basis, which is displayed on the Champions of Change (CoC) Dashboard dedicated solely for the purpose of monitoring data and providing districts updated information on their performance as compared to other districts. The CoC dashboard provides sector wise ranking as well. This is expected to bring in a sense of competition and accountability, as well as serve as a mechanism for identifying key development sectors that may need further handholding and support.

Although the delta rankings are subject to change frequently, it must be noted that the competitive and dynamic culture fostered by the programme, has resulted in several lesser ranked districts (in baseline ranking) in performing better over the last 3 years. For instance, our evaluation found districts of Simdega (Jharkhand), Chanduali (Uttar Pradesh) and Sonbhardra (Uttar Pradesh) and Rajgarh (Madhya Pradesh) to be among the top performing districts when progress is measured since the beginning of the programme.

Delta Ranking: The Delta ranking method measures incremental changes in performance indicators on a monthly basis. The methodology adopted by NITI Aayog for this purpose, employs a mix of self-reported data entered by districts as well as data points validated by third party agencies such as Tata Trust and IDinsights, also referred to as knowledge partners under the ADP.

[5] While district officials are responsible for uploading a majority of data, data on some indicators – for example in the basic infrastructure and financial inclusion domain – are taken from the concerned Central Ministries.

Literature Review

2

Literature Review

In order to undertake an in-depth literature review, several sources of data were studied. However, as the Aspirational Districts Programme was implemented only over the last three years, studies conducted by third party organizations are scarce. Of these, many are focused on the healthcare and nutrition sector with a particular emphasis on POSHAN Abhiyan.

A recent report by the Institute of Competitiveness (2020)[6] revealed that Health & Nutrition and Education are among the sectors closest to achieving their target by 2022, while agriculture, financial inclusion and skill development require significant attention. Further, the report also found that sectors apart from Healthcare and Education had fewer knowledge /development partners across the districts.

Other studies such as Borah et al. (2020)[7] highlight the improvement in health and nutrition outcomes in Baksa district of Assam since the inception of the ADP. According to the authors, the improvement is also reflected in the district's change in ranking from 107 out of the 112 districts since the ADP's introduction in 2018 to now being ranked as 26 out 112 aspirational districts for health and nutrition as of July 2020 (ranking cited from the CoC portal). This significant change in ranking could be a result of all the major health and nutrition programmes that the district is currently undertaking.

Other independent studies and evaluation reports highlighting such facts, along with presentations, articles available in the public domain, and scholarly databases have been analyzed for this review. The chief aim of this is to serve as the backbone of the methodology and inform the development of the interview guides and quantitative analysis. By studying existing literature, this review aims to map programmes like the ADP and highlight what sets the latter apart.

2.1. Similar Programmes

The BRGF (Backwards Regions Grant Fund) was implemented in India with the aim of addressing regional imbalances by converging existing financial and development resources to reduce overall backwardness and improving livelihood conditions of districts. While these aspects correspond strongly with the Aspirational Districts Programme, there are significant differences between the two in terms of scale, areas of development, focus, and processes of assessment.

First, while The BRGF targeted 250 backward districts, the ADP targets only 112 districts. Second, while the BRGF focused primarily on infrastructure and livelihood programmes, the ADP seeks to categorically improve 5 key sectors. Furthermore, the BRGF established a separate funding mechanism for Panchayats to utilise for development of infrastructure facilities; a concept that ADP has not adopted. The aim of ADP is to function on the convergence of central and state schemes at the grassroots level rather than establishing new and separate units at each level of governance[9].

The most significant difference, however, is the monitoring and assessment methods of the two programmes. While the BRGF hinged on assessing its outcomes on a yearly or five year basis, the ADP outcomes are updated constantly on the CoC portal in the form of composite score and ranks, along with regular evaluation and follow up reports published to provide insights on the progress. This feature of constant monitoring is undertaken with the expectation of fostering a sense of accountability and competition among the districts and also learning from each other's practices: a feature that has not been implemented previously by any government development project/programmes[10].

In addition to the BRGF in India, the ADP can be compared to similar programmes in other developing countries as well. One such project is the Medium-Term Strategic Framework (MTSF) introduced by the Government of South Africa from 2014-2019[11]. Like the ADP, the MTSF aimed to ensure policy coherence, alignment and coordination across government plans as well as alignment with their budgeting processes. It was a part of South Africa's larger "National Development Plan" and included performance agreements between the President and ministers toreflect upon the relevant

[6] Institute of Competitiveness, 2020. An Assessment of Aspirational Districts Programme.
[7] Borah, P.K.; Raj, S.; Sharma, G.K., 2020. Role of Knowledge Management in Transformation of Aspirational Districts Programme – A Case Study of Health & Nutrition Sector in Baksa District of Assam. Journal of Interdisciplinary Cycle Research, Volume XII, Issue VII.
[9] This is complemented by the fact that ADP does not envisage the infusion of large funds as its core strategy.
[10] Sinha, S. 2019. Is the Aspirational Districts Programme Merely A Political Device?. EPW. Vol.54, Issue No. 3. Accessed on: https://www.epw.in/engage/article/is-the-aspirational-districts-programme-merely-a-political-device-development
[11] Republic of South Africa, Medium-Term Strategic Framework 2014-2019. Government Programmes: Accessed from https://www.gov.za/sites/default/files/gcis_document/201409/mtsf2014-2019.pdf

actions, indicators and targets set out in the MTSF. Some of the major areas of focus for the programme were Education, Health, Safety and Security, Economic Growth and Employment, Skills, Infrastructure, Rural Development, and Local Governance. Other similarities include the use of a pre-determined list of outcomes based on which the progress was to be mapped[12] with each department expected to develop annual and quarterly action plans in line with the MTSF outcomes and multi-stakeholder partnerships criteria.

While no evaluation reports about the impact of the Medium Term Strategic Framework (MTSF) 2014–2019 are available to understand its impact, of relevance is a recent study by Haywood et al. (2018)[13] that examines the importance of multi-stakeholder partnerships in achieving South Africa's SDGs, National Development Plan (NDP) and Medium Term Strategic Framework (MTSF). [It should be noted that the NDP and MTSF precede the SDGs plan of action in South Africa as both the NDP and MTSF serve as blueprints through which the SDGs can be achieved].

The researchers highlight that both the NDP and MTSF programmes prioritised the involvement of multi-stakeholder partnerships and established a strong foundation at different levels of governance within the country which expected to expedite its transition to a more inclusive and sustainable growth plan. Among the types of partnerships examined, the researchers highlighted that partnership between the 17 UN agencies in SA and local Civil Society Organisations were among the strongest linkages with the South African Government in driving changes. Other forms of partnership such as business enterprises and academia, although promising, have not been able to establish strong relations with the government as yet. This is an area that perhaps ADP can consider to improve its impact.

Similarly, apart from government-initiated programmes, there appear to be other relevant programmes which specifically target backward regions or populations. The 'Champions for Change (C4C)' programme in Nigeria by the Bill and Melinda Gates Foundation is one such programme[14]. While the ADP has diversified into different thematic sectors, the Champions for Change programme in Nigeria primarily focuses on providing funding to local Nigerian programmes that improve health of women, children, and youth. It also invests in visionary Nigerian civil society leaders, organisations and advocates to provide them the resources, tools, networks, and support they need to drive meaningful change. Much like the ADP, the Champions for Change looks at strengthening grassroot organisations to drive change.

Other relevant programmes include BRAC's (Bangladesh Rural Advancement Committee) Development Programme (BDP) which targeted the upliftment of the "ultra-poor" population[15]. The programme especially focused on livelihood improvement by ensuring community participation along with participation from village organisations and other structures. Members (especially women) were given training for income generating activities and micro-finances when they became a member of the Village Organisation (VO). However, over time, the programmes' assessments found that livelihood trainings and microfinance were not sufficient in upliftment of the 'target population', thereby leading to the introduction of a subsidiary programme of BDP, called 'Targeting the Ultra-poor Programme (TUP)[16].

This revised programme aims to provide transfer of both cash and assets, access to savings and credit facilities, and training for longer term (24 months). The short and medium term impact of this subsidiary programme show that there has been an increase in income and ownership of productive assets (assets which are directly linked to generating income such as land, livestock, farm equipment, etc.) and non-productive assets (assets not related to generating income such as home appliances used for personal use), increased food and non-food consumption, and a favourable shift in ownership of assets and hours spent on self-employment. The programme was also found to positively impact gender equality and empowerment in the areas.

---

[12] Parliamentary Budget Office Republic of South Africa.2016. Monitoring of Performance and Expenditure on the outcomes of the National Development Plan.

[13] Haywood, L. K., Funke, N., Audouin, M., Musvoto, C., &Nahman, A. (2018). The Sustainable Development Goals in South Africa: Investigating the need for multi-stakeholder partnerships. Development Southern Africa, 1–15. doi:10.1080/0376835x.2018.1461611

[14] Champions of change. 2015. Saving the Lives of Women Newborns, and Children in Nigeria. Source: https://www.riseuptogether.org/wp-content/uploads/2016/09/C4C-One-pager-design-10.6.15-final-Sunrise.pdf

[15] Barua P and Sualiman M. Is the BDP Ultra Poor Approach Working? Survey of some Key issues. Dhaka and Ottawa: BRAC and Aga Khan Foundation Canada, 2007. (CFPR/TUP Working paper series No. 16).

[16] Brito, Roberta. 2018. Bangladesh's TUP programme: Challenges in the design of gender sensitive social protection. https://socialprotection.org/discover/blog/bangladeshs-tup-programme-challenges-design-gender-sensitive-social-protection

Another study - by Hulme and Moore (2007) - of the University of Manchester highlight similar trends regarding the TUP[17]. The study highlights that the TUP performance is monitored by the maintenance of a panel dataset that tracks key indicators from a sample of selected ultra-poor households. The authors do not attribute regular monitoring mechanisms as being the key to achievements of the programme; however, this feature relates closely to the finding that TUP participants - as compared to non-participants - had a greater rate of asset accumulation across all domains.

The study also found that the programme has contributed to the general well-being; especially in terms of improved food security. Other indicators also show positive results such as improved access to microfinance and employment, whereby 70% of women were able to repay their microfinance loans. Nutritional outcomes for children was among the few indicators that did not see significant improvement. The potential reasons included possible lags associated with changes in such indicators and non-optimal patterns of intra-household resource allocation.

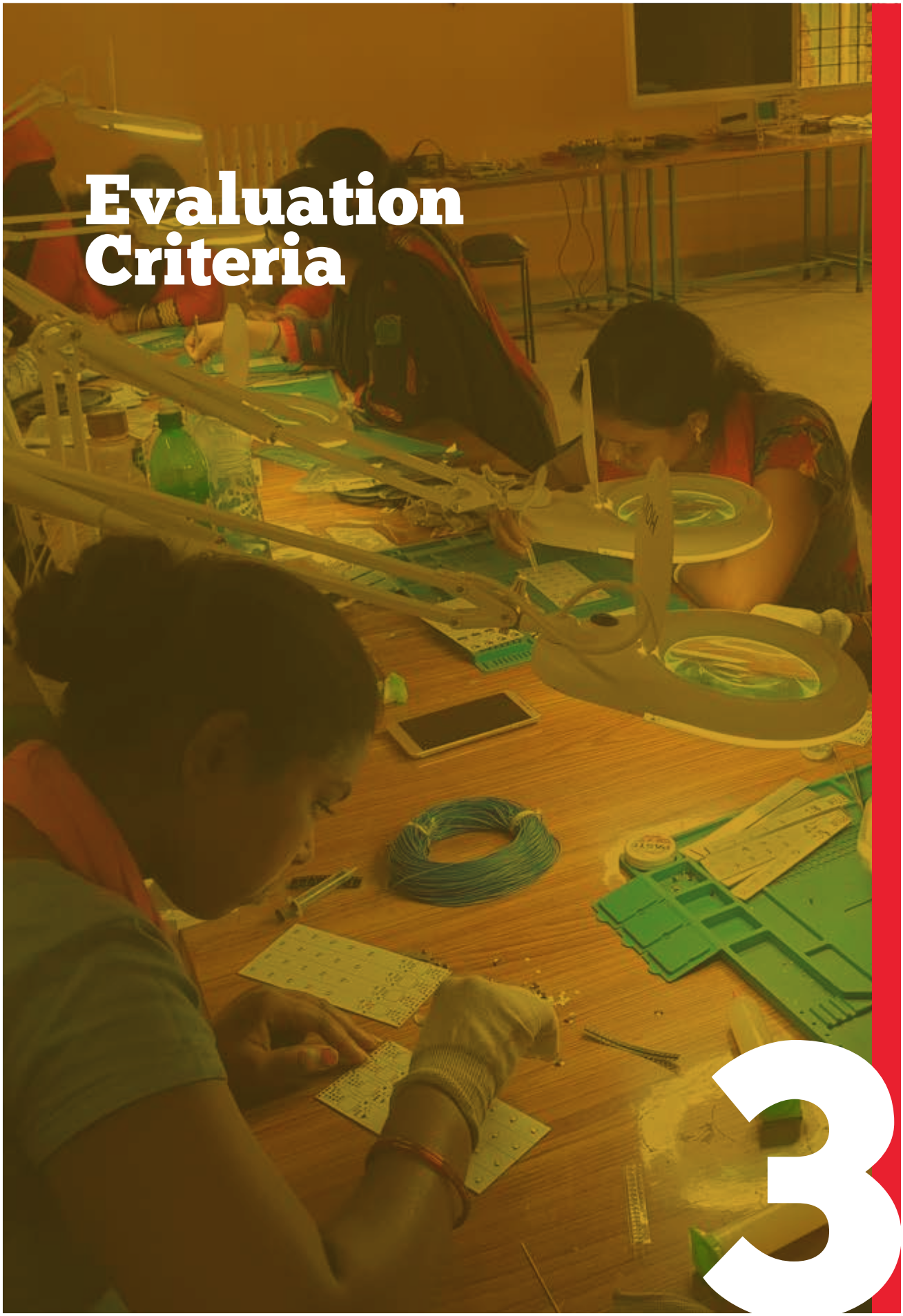
Among the key learnings highlighted by this study, and of relevance to the ADP, is TUP's revised approach in working directly with Village Organisations and using these organisations to gain community support for development aims and objectives. The chief difference between the TUP model and other process models lies in the balancing act of BRAC's technical analysis along with beneficiary participation and decision making. A study by International Growth Centre[18] also confirms the success of the TUP programme and highlights it as a scalable approach that can be successfully adapted to different contexts. It is worth noting that BRAC has reached over 7000 households in Ethiopia, Ghana, Honduras, India, Pakistan, and Peru.

Programmes such as the Medium Term Strategic Framework (MTSF) in South Africa, Champion for Change (C4C) in Nigeria or BRAC'S IDP and TUP programmes in Bangladesh signify the importance of specific and targeted policies or programmes; specifically for improving backward regions. The initiation of the ADP - as seen in this context - proves to be a step in the right direction for socio-economic development.

[17] Hulme, D., Moore, K. 2007. Assisting the poorest in Bangladesh: Learning from BRAC's 'Targeting the Ultra Poor' Programme. University of Manchester, Manchester, United Kingdom

[18] Balboni, C.; Banderia, O; Burgess, R; Kaul; U; 2015. Transforming the economic lives of the ultra-poor. International Growth Centre. Accessed from: https://www.theigc.org/wp-content/uploads/2015/12/IGCJ2287_Growth_Brief_4_WEB.pdf

Evaluation Criteria



3

Evaluation Criteria

3.1. Key Research Questions:

The key research questions for this evaluation are:

- How have the Aspirational districts performed since their inception in terms of improving the key performance indicators of the programme?
- What has been the impact of the programme for the districts? What have been the benefits and challenges?
- How efficient is this programme in effecting change, and is this model of development sustainable in the future?
- Is the ADP replicable in other districts of India, and/or in other developing countries?
- How can the ADP become even more effective in accelerating the significant progress it has already made?

In line with the research questions, this review, especially the qualitative interviews were conducted using the five OECD-DAC (Organisation for Economic Co-operation and Development's Development Assistance Committee) evaluation criteria of (a) **relevance;** (b) **coherence;** (c) **effectiveness,** (d) **impact;** and (e) **sustainability of development results.** The rationale for them is explained below:

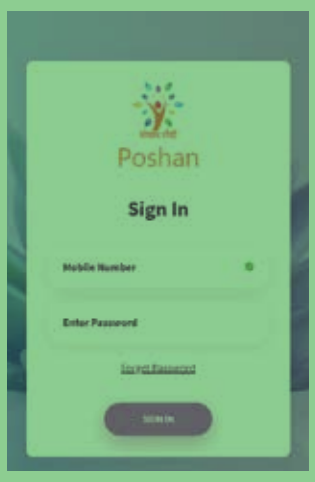
Table 2: Evaluation criteria

Criteria	Objectives and themes
Relevance	This examines the relevance of the Aspirational Districts Programme in line with the vision set forth by the Prime Minister and NITI Aayog. It also examines the current context, sectoral programmes and interventions being implemented by districts.
Coherence	This criterion evaluates the extent to which the means justify the outcome. In particular, efficiency in resource (financial and human) allocation. Of other considerations are the quality, timeliness of the results, partnership strategies, resource mobilization, use of programming and partnership modalities conducive to the delivery of programme outputs, adequate oversight and monitoring mechanisms.
Effectiveness	Assesses to what extent do strategic partnerships exist with other national and sub national institutions, CSO/NGOs, UN agencies, CSR agencies, knowledge partners or development partners to sustain the attained results and to what extent have partners committed to providing continuing support.
Impact	This analyses to what extent the Aspirational Districts Programme has achieved output results and evidence of their contribution to the outcomes over the last 3 years.
Sustainability	This examines the extent to which districts have established mechanisms under the ADP to ensure the sustainability of the results attained/to be attained.

The Aspirational Districts Programme (ADP) aims to instil a culture of change through competition, collaboration and convergence in some of the most deprived parts of the country. In order to evaluate the programme, it is essential to develop a clear understanding of the current trends for the different sectors and indicators in these districts. While districts are ranked on their delta performance on a monthly basis on the Champions of Change dashboard, this evaluation aims to delve deeper and study the progress made by these districts since the beginning of the programme. This evaluation also highlights the best practices implemented by some districts which can be replicated in other districts.

The quantitative analysis for this assessment consists of two parts. In the first, districts are ranked on the basis of their performance since the beginning of the programme and in the second, a comparison of aspirational and non-aspirational districts is made using a difference in difference approach. The qualitative component involves semi-structured interviews and thematic analysis. Details for each component are provided in the following sections.

Quantitative Data Collection and Analysis



4

Quantitative Data Collection and Analysis

The quantitative analysis for this evaluation comprises of two components:

i) Net Resilience Index; and

ii) Difference in Difference Analysis

4.1. Net Resilience Index

4.1.1. Methodology:

This exercise throws light on the overall performance of Aspirational Districts since the inception of the programme. It also aims to highlight the most and least improved districts since March 2018 till March 2020[19]. 60 data points[20] (for 111 districts) from the Champions of Change dashboard are used for this exercise and are divided into two broad categories: **resilience and vulnerability.**

Resilience is measured by a set of positive indicators which reflects factors that bolster the development capacity of the districts. Data points were taken from 5 sectors[21] as monitored by the ADP. A few examples of data points included are as follows: Percentage of area under micro-irrigation **(Agriculture)**, Tuberculosis (TB) case notification rate (Public and Private Institutions) as against estimated cases **(Health and Nutrition)**, Percentage of elementary schools complying with RTE specified Pupil Teacher Ratio **(Education)**, Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY): number of enrolments per 1 lakh population **(Financial Inclusion)**, Percentage of certified youth employed to number of youth trained under short term or long term training **(Skill Development)**, Percentage of gram panchayats with internet connection **(Basic Infrastructure)** etc.

Vulnerability, on the other hand, is measured by a set of negative indicators. An increase in the vulnerability indicators hinders districts' ability to attain their development goals. All vulnerability indicators are taken from the Health and Nutrition Sector. Few examples of data points included as measures of vulnerability are as follows: Percentage of low birth weight babies (less than 2500g), Percentage of Severe Acute Malnourishment (SAM) in children under 6 years to total children under 6 years etc.

To ensure comparability across indicators and districts, data points for every indicator and district were standardized using the min-max formula and a simple average was used to calculate resilience and vulnerability score for each district.

A higher resilience score represents positive overall status, and sustainable impact of the work undertaken. A higher vulnerability score on the other hand highlights the need for further attention and scope for improvement.

Equation 1: Standardization Formulae

$$S = \frac{(x\text{-}min)}{(max\text{-}min)}$$

Where:

- **s** is the standardized score for each data point. It takes values between 0 and 1,
- **x** is the value of data point being standardized,
- **min** is the minimum value of the data point being standardized across all districts,
- **max** is the maximum value of the data point being standardized across all districts.

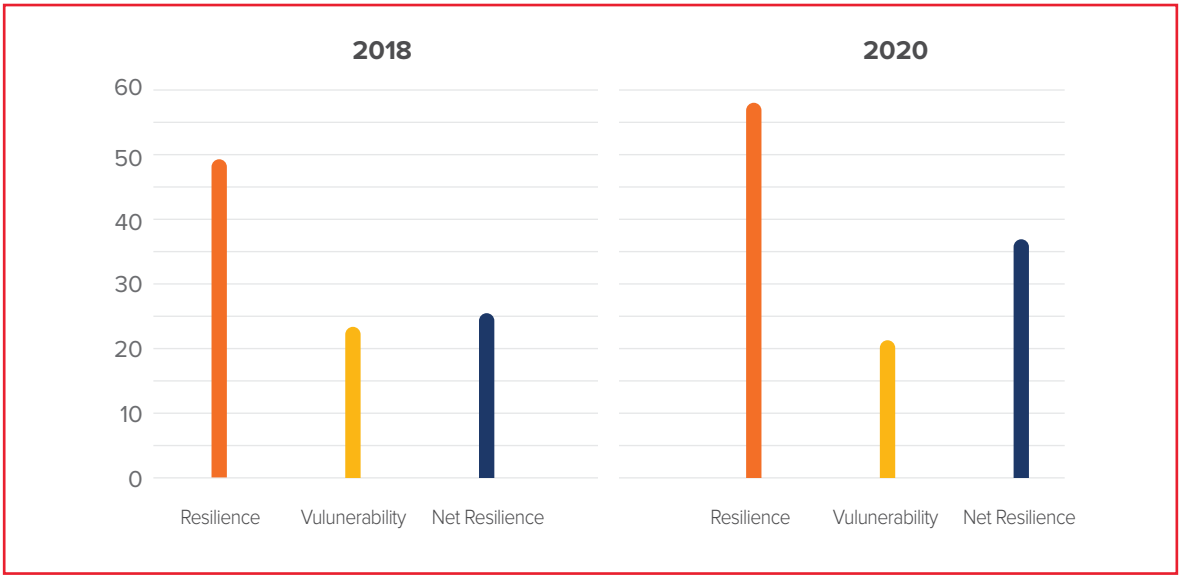
Here, a higher resilience score represents more resilience - and similarly for vulnerability – for any given district. Finally, resilience and vulnerability scores in isolation do not provide a holistic picture of the performance of aspirational districts. To address this, we use the difference between resilience and vulnerability scores to arrive at a measure of net resilience.

4.1.2. Findings

Figure 1[22] shows the average resilience, average vulnerability and net resilience scores across all districts for March 2018 and March 2020. From the figure, it is evident that the Aspirational Districts have shown an overall increase in resilience, a corresponding reduction

[19] Data from March 2020 is used so as to avoid capturing the impact of the pandemic. The pandemic would lead to a general decline in performance in all indicators leading to absolute and relative fall in outcomes, thereby inculcating a bias.
[20] Based on the availability of data for the two time periods. Full list of data points used to calculate Net Resilience Index is provided in Appendix A.1.
[21] The 5 sectors are: 1) Agriculture, 2) Health and Nutrition,3) Education, 4) Financial Inclusion and Skill Development and 5) Basic Infrastructure.
[22] The scores on the y-axis have been multiplied by 100 for ease of visual interpretation

Figure 1: Comparison of resilience and vulnerability among districts since inception (2018) of ADP



in vulnerabilities and therefore an overall rise in net resilience. These results are suggestive of the success of the programme in improving development outcomes in some of the most disadvantaged areas of the country. However, this aggregate picture leaves out essential differences among districts. In order to look at the district wise difference, the districts which have improved the most in terms of net resilience between 2018 and 2020 are illustrated in Figure 2.

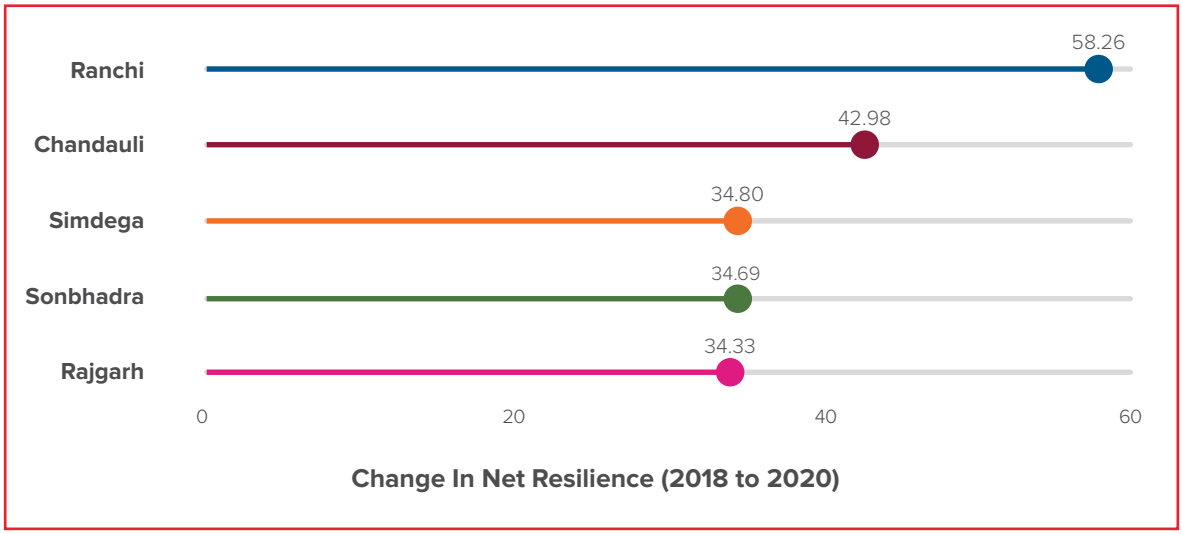
Table 3: Summary Statistics for Net Resilience exercise - 2018 and 2020

	Average Resilience Score (2018)	Average Vulnerability Score (2018)	Net Resilience Score (2018)	Average Resilience Score (2020)	Average Vulnerability Score (2020)	Net Resilience Score (2020)	Difference in Net Resilien ce Score
Mean	49.58	23.89	25.68	58.28	21.88	36.40	10.72
Median	48.97	23.15	27.47	57.97	21.12	36.98	11.17
Min	36.11	0.09	-23.29	37.11	0.88	-18.67	-58.05
Max	63.82	59.99	61.15	70.71	67.04	61.83	58.26
Std Dev	5.97	12.49	15.19	6.27	13.68	15.63	14.16

- **Top and low performing districts**

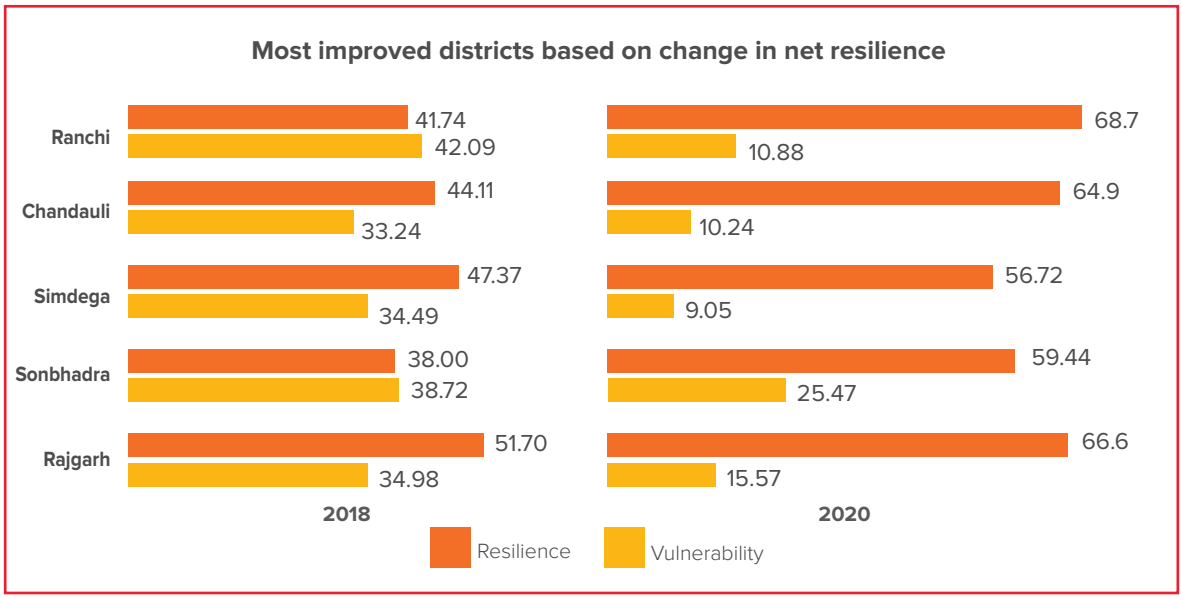
  Insights pertaining to the implementation of successful programmes and best practices can be drawn from districts that have improved the most since the programme began. Figure 2 shows the districts that achieved the largest increases in net resilience between March 2018 and March 2020.

Figure 2: Top 5 districts with maximum change in net resilience since 2018

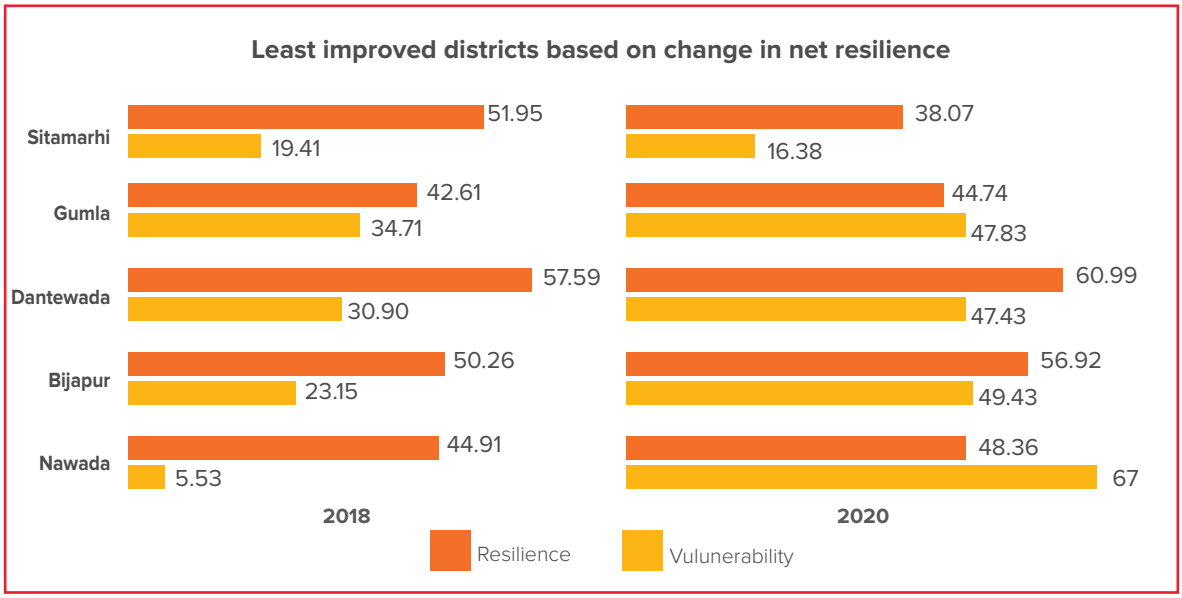


To gain a deeper understanding of changes in resilience and vulnerabilities over time, Figure 3 shows the average resilience and vulnerability scores for the most improved as well as least improved districts (in terms of net resilience). Figure 3 indicates that for the most improved districts, average resilience increased while average vulnerabilities reduced from 2018 to 2020. However, the narrative is different for the least improved districts. Except Sitamarhi (Bihar), these districts have witnessed large increases in vulnerabilities which has pulled down the net resilience.

Figure 3: Comparison of top 5 and bottom 5 districts based on performance in net resilience and net vulnerability index.



[22] The scores on the y-axis have been multiplied by 100 for ease of visual interpretation



Overall, findings from the Net Resilience Index indicate that the Aspirational Districts, on average, have been on an upward trajectory since the inception of the programme. A closer look at the best performers indicates an improvement in resilience along with a corresponding reduction in vulnerabilities. On the other hand, the least improved districts have seen significant increases in vulnerabilities. The latter calls for focused attention on specific sectors where these districts have underperformed. Replicating successful programs and learnings from top performers might form the basis of the inclusive growth among the Aspirational Districts.

Note on data collection and filling missing values: Data points in the ADP programme are reported at different frequencies (yearly, half yearly, quarterly and monthly). For 2018, yearly data was obtained from March 2018, half yearly data from September 2018, quarterly data from June 2018 and monthly data from April 2018. For 2020, data points for all frequencies were obtained from March 2020. Missing values for half yearly data were imputed from September 2019, missing values for quarterly data were imputed from December 2019 and missing data for monthly data were imputed from February 2020[24]. Finally, the ranking also excludes Kiphire and Khammam since net resilience could not be calculated due to missing values in average vulnerability in 2020 for Khammam and in 2018 for Kiphire. Therefore, the final ranking includes 111 districts[25].

4.2. Difference in Difference Method:

4.2.1. Methodology:

The Difference-in-Difference (DiD) framework for impact evaluation is a widely used technique that teases out the actual impact of an intervention from extraneous factors such as that of natural growth over time. The framework requires the existence of two sets of groups – the treatment group which is made up of entities that received the intervention and the control group that serves as the counterfactual – and data on both these groups for the selected indicators on (at least) two time periods. The DiD method – by comparing the average change over time in the outcome variable for the treatment group to that of the control group – teases out the 'true' impact of events and interventions.

This framework is used on two sectors of the Aspirational Districts Programme: Health & Nutrition (H&N) and Financial Inclusion (FI). For the H&N indicators, data from the Heath Management Information System (HMIS) – a digital initiative under the National Health Mission, Ministry of Health and Family Welfare, Government of India is used. DFS (Department of Financial Services, Government of India) data is used for the FI indicators. While the former is a portal gateway to a wealth of information related to health indicators at state and district level (directly uploaded by the States/ UTs), the latter is a government entity that monitors the indicators related to FI for the Aspirational Districts Programme

Data: Two sets of data are taken from these sources: for March 2018 (which serves as the baseline) and the same for March 2020 (which is the most recent available data for pre-Covid period). Since indicators for Health and Nutrition in Aspirational Districts Programme form a subset of the indicators reported by the HMIS, an indicator matching exercise was performed in order to observe the overlap between the two data sources. The table below represents this exercise for those indicators that were found to be either directly or derivatively matching between the two data sources:

[24] Full list of indicators is provided in Appendix Table A.1

[25] Full list of rankings based on Net Resilience scores is provided in Appendix Table A.2

Table 4: CoC and HMIS Data Matching for H&N Indicators

S. No.	NITI Aayog Performance Indicator Number (CoC)	Indicator Detail from the Champions of Change (CoC) Dashboard	Type of matching for H&N Indicators	HMIS Indicator Serial Number	Indicator Detail
1	1.1	Percentage of Pregnant Women receiving four or more antenatal care check-ups against total ANC registrations	Derived (exact match)	4 divided by 1	4 – Number of pregnant women receiving 4 or more ANC check ups 1 – Total number of pregnant women Registered for ANC
2	1.2	Percentage of ANC registered within the first trimester against total ANC registrations	Direct	3	% 1st Trimester registration to Total ANC Registrations
3	3.1	Percentage of Pregnant women having severe anaemia treated against Pregnant women having severe anaemia tested cases	Direct	13	% Pregnant women having severe anaemia (Hb<7) treated at institution to women having hb level<7
4	4.1	Sex Ratio at birth	Direct	52	Sex Ratio at birth (Female Live Births/ Male Live Births *1000)
5	4.2	Percentage of institutional deliveries out of total estimated deliveries	Direct (but not an exact match)	28	% Institutional deliveries to Total Reported Deliveries
6	5	Percentage of home deliveries attended by an SBA (Skilled Birth Attendance) trained health worker out of total home deliveries	Direct	18	% SBA attended home deliveries to Total Reported Home Deliveries
7	6.1	Percentage of new-borns breastfed within one hour of birth	Direct	51	% New-borns breast fed within 1 hour of birth to Total live birth
8	6.2	Percentage of low birth weight babies (Less than 2500 grams)	Direct	49	% New-borns having weight less than 2.5 kg to New-borns weighed at birth
9	6.3	Proportion of live babies weighed at birth	Direct	47	% New-borns weighed at birth to live birth
10	8.2	Percentage of children with Diarrhoea treated with ORS	Derived (but not an exact match)	158 divided by 157	158 – Diarrhoea treated in Inpatients in Children 0-5 Years of Age 157 – Diarrhoea in Children 0-5 Years of Age

There are two important points to be noted. First, indicator 8.2 from the CoC Dashboard is matched to a derived version of two indicators (number 158 and 157) from the HMIS data. This is not an exact match since the CoC indicator focuses only on treatment of diarrhoea in children through ORS whereas the latter is a more general version of the same. While this prevents a one-on-one matching, it allows for a broader measure to be included in the exercise. Second, all indicators except number 6.2 (Percentage of low birth weights babies) are positive in nature, i.e., a higher value of an indicator indicates an improvement in the H&N outcome of the district. Indicator number 6.2, on the other hand – is a negative indicator implying that an increase in its value signifies a deterioration of H&N outcome.

For the indicators under the FI sector, the CoC Dashboard reports values directly from the data of Department of Financial Services (DFS). Hence, all indicators received from the DFS matched directly to those in the CoC Dashboard except one[26] (which has been left out of this analysis).

The districts on which data was obtained were segregated into the treatment and the control group. The treatment group comprised of all districts that are a part of the Aspirational Districts Programme. Therefore, the treatment group for the H&N exercise consists of 113[27] ADs while that for the FI exercise consists of 112[28] ADs. The creation of the control group, however, is more nuanced.

In economic theory, a control group is a set of observations that are exactly similar to their counterparts in the treatment group except for one crucial aspect: that those in the treatment group received the treatment and those in the control group did not receive that treatment. This 'almost' similar control group is often referred to as the counterfactual: a group that mimics the characteristics of the treatment group except for the treatment itself.

For the purpose of this evaluation, this means that control group – in order to be as close to a theoretical counterfactual – had to consist of non-ADs were matched with ADs from the same states. More precisely, out of the remaining districts (after the separation of ADs), the control group must have consisted of same number of non-AD's that display similar characteristics as the AD's. A weighted proportional method was employed to construct the control group.

For all non-ADs, data from March 2018 was first normalized. This was then used to create an index by multiplying the respective indicators with proportional[29] weights (as used in the H&N and FI Index by NITI Aayog). A district wise ranking was created next. Starting from the bottom of the ranking[30], non-ADs were matched with ADs from the same states[31]. For example, if Andhra Pradesh has 3 districts in the ADP, then the bottom 3 non-ADs from Andhra Pradesh were inserted in the control group (and similarly for other states). However, since Jharkhand has 19 ADs (as opposed to a total of 23 districts), the state-wise matching could not be strictly fulfilled. To overcome this issue, the remaining 14 non-AD districts

[26] Indicator titled: "Total Disbursement of Mudra loan (in rupees) per 1 Lakh population" has not been used since data on this indicator was not recieved.

[27] 117 districts were selected for Aspirational Districts Programme by NITI Aayog. However, 5 districts of West Bengal never joined the programme. Also, Khammam in Telangana was replaced by Bhadradri Kothagudem as an Aspirational District. For the purpose of this exercise, both the districts have been kept in the treatment group making total number of districts as 113.

[28] Since data on Bhadradri Kothagudem was missing from the FI data, it was dropped therefore making the total number of treatment districts 112.

[29] The proportional weightage takes into account missing values and weights the available data based on a proportionate scale so that the individual weights for each data points are preserved along with the overall weightage.

[30] The selection of the AD's was such that districts performing poorly on socio-economic indicators were selected for the programme as compared to relatively better performing districts. In order to maintain the same spirit and consistency, the selection process for the control group is started from the bottom.. This also ensures that the most accurate comparison group possible is being captured.

[31] Using proxy districts that share the same boundary or belong to the same state is a common practice in literature because it is more likely that a boundary sharing district better resembles a particular AD – along several characteristics – as compared to districts that do not share a boundary or do not belong to the same state.

(to be mapped to Jharkhand) were selected - using the same method - from states that share similar data characteristics[32] (such as Uttar Pradesh, Chattisgarh and Odisha)[33]. This ensured that the control group consisted of 113 non-AD's for the H&N exercise and 112 non-ADs for the FI exercise; those that resemble the ADs as closely as possible on the respective set of indicators[34].

In order to check the validity of this construction, the means of selected variables between the treatment and the control group for both sectors were compared. It was found that the two groups are similar along all indicators (at the baseline) hence strengthening the validity and comparability of our control group35.

With the treatment group and control groups formulated for all selected indicators for the two time periods, the following equation was used for the difference-in-differencea estimate(s):

Equation 2: Difference in Difference Estimation

$$DID\ Estimate_{i,t} = (I_{ADP,\ 2020} - I_{ADP,\ 2018}) - (I_{Non\text{-}ADP,\ 2020} - I_{Non\text{-}ADP,\ 2018})$$

where the left-hand side denotes the difference-in-difference (mean and median) estimate for indicator *i* of type *t*. The right-hand side denotes the difference between the average changes across the two time periods between the treatment and control groups. A positive DID Estimate is – by virtue of the difference-in-difference framework – interpretable as the '*true*' impact of the Aspirational Districts Programme.

4.2.2. Findings

Health and Nutrition (H&N) is a key focus area of the Aspirational Districts Programme which takes up 30% weightage in the overall index used by NITI Aayog. The results - as computed using the aforementioned methodology of the difference in difference framework - indicate that AD's have outperformed non-AD's by virtue of being selected for – and receiving the benefits of – the Aspirational Districts Programme. Table 5 presents the mean and median difference-in-difference estimates for the Health and Nutrition sector. The interpretation of coefficients follows.

Before moving on to indicator specific interpretation, note that all indicators except 4.1 and median estimate for 1.1 are consistent with the hypothesis that AD's have outperformed the control group. All positive indicators – except sex ratio at birth – show positive coefficients as well as the negative indicator (6.2) shows negative coefficient. This broad pattern allows us to interpret – at first glance – that the Aspirational District Programme has indeed helped the chosen districts outperform those that were not selected for this programme[36].

[32] Data characteristics include comparing the state-wise means of select indicators with those of Jharkhand along with demographic and occupational characteristic matching. The states with the closest characteristics were selected and then the same process (as outlined above) was followed to choose the districts that would proxy as a control for the remaining districts from Jharkhand.

[33] To maintain consistency, the last three chosen districts from Uttar Pradesh, Odisha and Chhattisgarh are again compared and the two districts with lowest rankings are included.

[34] Following from footnote 30, it can be observed that the selection of the counterfactual group is such that the districts within this group are the 'immediate' competitors of the AD's.

[35] The details are attached as tables in the appendix.

[36] In order to compensate for the positive bias shown by HMIS data during its initial years, check mechanisms – such as third part surveying and continuous review by officials and Central Prabhari Officers – was put in place for Aspirational Districts. This a) ensured that the data was reflective of the ground realities and b) that – by means of continual review – the quality of data was regularly improving for the Aspirational Districts. However, the same check mechanism was not ensured for non-Aspirational Districts therefore leading to a positive bias in the latter's performance. Therefore, it is likely that the difference-in-difference results reported are under-estimates for the actual improvement.

Table 5: Difference-in-difference results for H&N

CoC Indicator Matching	Indicator	Mean Estimate	Median Estimate
1.1	Percentage of Pregnant Women receiving four or more antenatal care check-ups against total ANC registrations	0.23	-1.77
1.2	Percentage of ANC registered within the first trimester against total ANC registrations	4.55	5.80
3.1	Percentage of Pregnant women having severe anaemia treated against PW having severe anaemia tested cases	5.82	20.60
4.1	Sex Ratio at birth (Female Live Births/ Male Live Births *1000)	-3.39	-7.00
4.2	Percentage of institutional deliveries out of total estimated deliveries	0.65	0.50
5	Percentage of home deliveries attended by an SBA (Skilled Birth Attendance) trained health worker out of total home deliveries	9.63	14.90
6.1	Percentage of new-borns breastfed within one hour of birth	0.85	0.10
6.2	Percentage of low birth weight babies (Less than 2500 grams)	-0.29	-1.20
6.3	Proportion of live babies weighed at birth	0.80	0.80
8.2	Percentage of children with Diarrhoea treated	4.80	1.79

Owing to the construction of the coefficient estimates according to the difference-in-difference methodology, each of them is interpretable as the average impact that being in the ADP provides while taking into account the natural growth over time in comparison to non-ADP districts. For example, being in the Aspirational District Programme has provided – on average across the sample – an additional 4.5 percentage increase in 1st trimester registration to total ANC registrations to the AD's as compared to the control group. Other coefficients can be interpreted in a similar manner. Among the noteworthy increases are that of indicators 1.2, 3.1, 5 and 8.2. The negative coefficients (-0.29 and -1.20) on indicator 6.2 - percentage of new-borns having weight less than 2.5 kg to new-borns weighed at birth – also imply that being in the ADP has resulted in an improvement in this outcome.

Similar to the Health and Nutrition results, the estimates for the **Financial Inclusion Sector** also indicate that ADP has had a positive impact on the chosen indicators. The following table presents the mean and median difference-in-difference estimates for the FI sector:

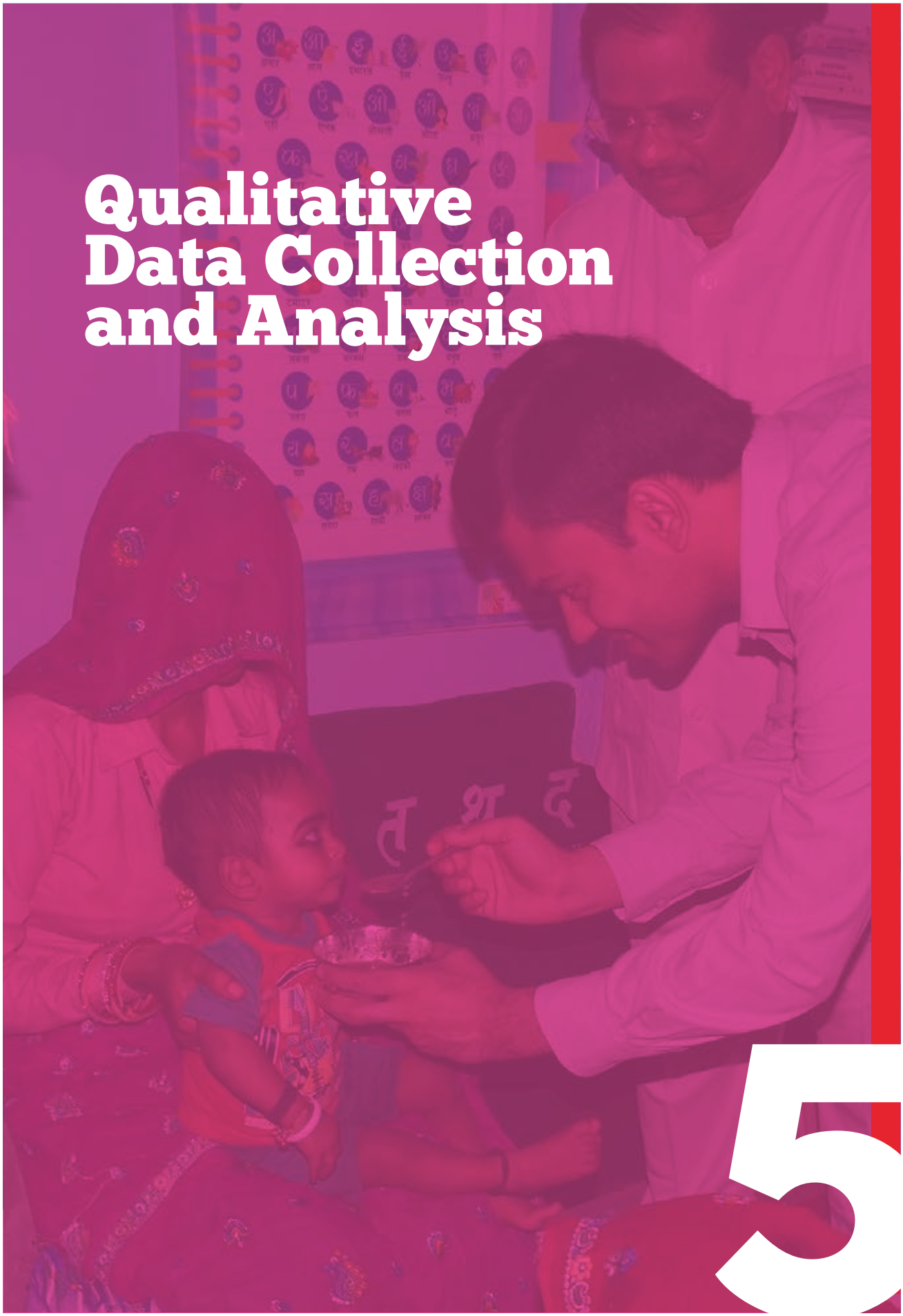
Table 6: Difference-in-difference results for FI

Indicator Number	Indicator	Mean Estimate	Median Estimate
2	PMJJBY enrolments per 1 Lakh population	406.48	411.20
3	PMSBY enrolments per 1 Lakh population	847.45	715.36
4	APY beneficiaries per 1 Lakh population	48.53	105.37
5	% of accounts seeded with Aadhaar	-0.61	-1.70
6	PMJDY Accounts opened per lakh of population	1580.48	2482.00

The interpretation for the DiD coefficients for FI slightly differs from those of Health and Nutrition. The coefficient on indicator number 2 (in the FI table) indicates that being in the Aspirational District Programme has provided an additional 406.48 people per lakh PMJJBY enrolments – on average across the sample – in the ADs as compared to the control group. All indicators except indicator 5 – percentage of accounts seeded with Aadhaar – attest to the success of the Aspirational Districts Programme.

Overall, after preforming a Difference-in-Difference analysis on select H&N and FI indicators using appropriately constructed counterfactuals, the results indicate that ADs have outperformed non-ADs by the virtue of being selected for – and receiving the benefits of – the Aspirational Districts Programme by substantial margins within the Health & Nutrition and Financial Inclusion domain. These results not only quantify the significant progress made by districts under the Aspirational Districts Programme, but also highlight the various uses of data collection mechanisms under the Aspirational District Programme that make this analysis possible.

Qualitative Data Collection and Analysis



5

Qualitative Data Collection and Analysis

Semi- structured interviews were conducted with District Magistrates or District Collectors, Prabhari officers, knowledge partners, development partners, and Aspirational District Fellows (ADFs) and UN Volunteers (UNVs) working in these districts. A few interviews were also conducted with district magistrates of non-ADs so as to gain useful insights for facilitating comparisons of best practices in these districts. For each interview, the following approach was adopted:

Table 7: Framework for qualitative analysis

Programmatic Level	Each qualitative interview aimed to: • Document the interventions in the 5 core sectors of ADP and their programme model. • Identify best practices deployed by the programmes, including intervention models, local partnerships, stakeholder engagement, and community participation. • Capture challenges encountered in programme life cycle and how they were resolved. • Assess the scalability and replicability of the programme across the country/other districts.
Administrative Level *(Implementation level)*	These qualitative interview sought to: • Understand which interventions are being implemented, and how they align with ADP's goals, objectives and vision. • Explore the rationale behind undertaking specific interventions or their processes. • Capture details about internal capacities, strengths, limitation, with regards to implementation and funding of the programme. • Understand how administrative capacities plan to improve their work in the core areas • Determine the scope of further engagement opportunities with central and state level organizations, NITI Aayog and knowledge partners.

All information obtained from the interviews was thematically analyzed and fed into content analysis framework using the OECD-DAC criteria and the key research questions. Thematic coding was employed for the analysis, as it was deemed most suitable for this evaluation to identify and group information into themes or ideas. Since our aim for this evaluation was to identify patterns across districts, some of the major themes used were successes, challenges, knowledge gaps, support required, replicability and acceptability of interventions, administration capacities, and governance approaches.

5.1. Respondents and Sampling for Qualitative Data Collection

As the study focuses on district level implementation, the stakeholders for this evaluation comprised of district level officials, such as district magistrates, district collectors, or district commissioners who are in charge of the overall functioning of the district and hence responsible for the effective administration of these programmes and have in-depth knowledge of the revenue and funding processes for the states. Similarly, we also interviewed Prabhari officers who serve as a key point of contacts and facilitators between district and the centre. In addition to this, DMs from non-aspirational districts were added to the sample to provide comparative insights on the functioning of ADP. Non-governmental stakeholders included knowledge partners, development partners, UN volunteers, and ADFs working in these districts. The sampling frame mentioned in Table 8, was adopted to provide a thorough understanding of the ADP along with on ground examples and case studies for our evaluation.

Table 8: Sampling used for qualitative interviews

Respondent	Number of stakeholders participated*	Rationale / Areas of Focus or Inquiry
District Magistrates (DMs) / District Collectors/ District Commissioners(DC) of Aspirational Districts	11	• DMs/DCs/DOs are crucial to the functioning of any programme in the districts as they are responsible for decision making and overall administration of the districts. • Interviews focused on inquiring about the district's administrative and internal capacities, support required, themes and programmes being focused on currently. They also inquired about the strengths, weaknesses, and areas of improvements required.
District Magistrates (DMs)/ District Collectors (DCs) of non-ADs	2	• The aim of conducting interviews with government officials from non-ADP districts was to inquire about the processes and focus on what sets non-ADs in a more favorable position over ADs. • We also inquired about successful interventions and governance approaches that could be borrowed from the non-ADs .
Prabhari Officers (POs)	4	• As a key feature of the ADP is the supervision and support provided by Prabhari Officers, these interviews were helpful to inquire about their perceptions of ADs, especially regarding sustainability and replicability of the programme. • We also inquired about state and district capabilities and the support required to drive change.
Knowledge Partners and Development partners	10	• Knowledge Partners and Development Partners are important as they work at the grassroots level and possess a good understanding of the requirements and perception for implementation of programmes. Therefore, interviews focused on understanding the role of civil society organizations in supporting ADP goals and visions. We also inquired about the ease of coordinating with different levels of government and support received or challenges encountered while working in the ADs. • As these organizations work in multiple districts, group interviews were conducted for some organizations with members of different teams and field offices participating in each interview.
Aspirational District Fellows (ADFs) and United Nations Volunteers (UNVs)	20	• Interviews with ADFs and UNVs focused on implementation of the ADP at the grassroots level. Focus was also laid on understanding the capacities and requirements of the districts. • Group interviews were conducted for ADFs and written forms submitted from UNVs of different districts.
Total	**47***	**A total of 47stakeholders provided their insights and experiences on working with the programme.**

5.2. Findings

A majority of the work undertaken across the sectors has been in the areas of Health and Nutrition, Education, and Agriculture and Water Conservation. Almost all districts officials interviewed mentioned a number of programmes and activities implemented across these three sectors and identified them as better performing areas or strengths in some cases. They are also the three largest sectors within the Aspirational districts programme, and together constitute 80% of the programme weightage. Therefore, improvements in these sectors may be viewed as a positive indication of meeting the programme's targets of development.

However, while most districts have mentioned that a majority of their efforts were focused across the sectors of Health and Nutrition, Education, and even Agriculture and Water resources, the sectors of Skill Development and Financial Inclusion require immediate prioritisation among the ADs to reach their full goals. This trend in sectoral disparity was observed across all the districts interviewed. As per the findings of the interviews, stakeholders mentioned a number of initiatives in the sector of Basic Infrastructure indicating significant improvements. However, there is still scope for further improvement in the sector. This is especially the case with the more remote districts among the Aspirational districts, and those plagued with the double burden of countering LWE activities. Districts located in more favourable geographic areas, such as proximity to national highways or cities have been able to reap more benefits and implement more infrastructural projects than those in very remote areas.

5.2.1. Mapping Sector-wise growth

Health and Nutrition:

Findings of the qualitative interviews indicate that significant improvements have been made in the sector. In fact, almost all the district officials interviewed, mentioned some of the major programmes implemented over the last three years to have been in the area of Healthcare and Nutrition. The most common achievements among these initiatives involve setting up model anaganwadi centres, efforts to increase the number of institutional deliveries, reduction in Severe Acute Malnutrition (SAM) among infants and children, improving ANC coverage for pregnant women and improving service delivery in PHCs in remote areas. For instance, a common example given by district officials during the interviews was improvements in the method of measuring and recording infants' weight and height using standardised index and protocol at Anganwadi centres rather than staff using their own judgement to determine if infants were malnourished or underweight .This change according to the district officials has come about due to two reasons; first, better monitoring of these indicators as required by the Aspirational districts programme and; second, the prioritization of these sectors has led to better identification of gaps and requirements such as training for staff or better medical equipment at the centres.

Additionally, the fact that some of the districts admitted to coping better with the COVID-19 situation due to better healthcare infrastructure introduced through ADP, is also an indication that Aspirational Districts Programme is contributing to strengthening of healthcare and nutrition services. For instance, the district of Malkangiri in Odisha, which is located in close proximity to both neighbouring states of Chhattisgarh and Andhra Pradesh, became an entry point for several migrant workers returning back to the state during the initial phases of lockdown in India. The district official in this case, claimed to have used their new infrastructure facilities (both in healthcare and otherwise) to serve as institutional quarantine centres for the migrants. Other districts such as Goalpara in Assam saw more pro-active and synchronised efforts of different departments due to existing foundations of convergence model laid by the programme. A similar example was provided by a development partner, Piramal Health which works across 25 Aspirational districts in the area of Healthcare and Nutrition. While the development partner faced severe setbacks in projects during the initial 30-40 days of the pandemic (mainly during the nationwide lockdown), they soon leveraged their prior engagement with District Commissioners, panchayats, and community leaders to build a strong COVID-19 response and cope with the challenges of the pandemic. The development partner especially credited the role played by religious leaders within the community in contributing towards creating better awareness and understanding of health issues over the last three years.

Education:

The Education sector has also experienced substantial improvement among the aspirational districts. The credit lies in the initiatives taken by several districts to adapt and innovate, leading to the development of bespoke programmes best suited for their district's requirement. A suitable example of this is the development of Gyanodaya app and Rath in Godda district of Jharkhand. Inspired by the award winning Unanyan Banka App[37] developed in Banka district of Bihar, the Gyanodaya app aims to promote digital learning by converting the Jharkhand Academic Council (JAC) Board's approved syllabus into smart classes format for over 260 schools and covering over 70,000 students. According to the officials, this initiative was the chief reason for the

[37]Unnayan Banka' is an initiative that envisages 'quality education for all', using latest technologies. It is a multi-platform model, where students receive educational content on various technology platforms like LCD/LED TVs, projectors, laptops and especially on mobile phones. The initiative won the Commonwealth Association for Public Administration and Management Award (CAPAM) in 2018.

significant improvement in the district's performance in the delta rankings. Another example of technology and innovation includes the 'HamaraVidhyalaya' in Namsai district of Arunachal Pradesh, which is adapted from the HamaraVidhyalaya model developed in Ahmedabad. As per the initiative, a school prabhari is appointed for each school in the district to ensure monitoring, performance assessment, and guidance for the school. As a result of this initiative, the district witnessed tremendous improvements in the learning outcomes and overall teaching practices. Both these initiatives are examples of successful use of technology and innovation. More importantly, it is also an example of replication of best practices across districts, which is a key tenet of the Aspirational Districts Programme.

Agriculture and Water Resources:
Given that most of the rural areas depend on agriculture for income, it is no surprise that many districts have been making considerable efforts to improve services and infrastructure within this sector. Interviews with district officials provided a varied range of initiatives being undertaken. For instance, while districts like Washim have collaborated with private organisations to develop cost effective methods of better irrigation and water resources such as recharge pits, others like Chanduali (Uttar Pradesh), Simdega (Jharkhand) and Godda (Jharkhand) have used their unique topographic features to harvest crops best suited for their regions. Many of these are high value crops that can be exported or used in different industries, such as the production of lemongrass in Godda. Still other districts such as Goalpara in Assam, have used technology to develop a digital platform, called 'Goalmart' for local producers to sell their products online instead of being confined to physical market spaces.

However, while district officials may have mentioned an impressive set of initiatives, development partners as well as findings from other studies[38] highlight the scope for further improvement in the sector. An interesting suggestion received from development partners was that the sector of Agriculture and Water sanitation, should be allotted the same amount of weightage as Health and Education under the ADP. Reason given for this, was that agriculture directly impacts socio-economic conditions of beneficiaries which in-turn, leads to higher investments in education, or increased health and nutrition priorities of households. Another suggestion by development partners was collaboration among the different development partners in providing services across sectors, while specialising in one area, much like the convergence model being used for district administration.

Basic Infrastructure:
Although this sector has lesser weightage within the ADP, it has nevertheless witnessed substantial focus. In fact, interviews with district officials of remote areas suggested that basic infrastructure is a priority as it is essential for improving connectivity in their districts. For instance, districts such as Bijapur (Chhattisgarh) and Malkangiri (Odisha) have improved their roadways and infrastructure projects as an attempt to reduce LWE activities. Other districts such as Goalpara (Assam) have significantly improved their roadways in the last 3 years, resulting in an addition of 234 kms of new roads which coincidently is the same number of roads constructed in last 18 years.

This is a clear indication of the impact of Aspirational Districts in bringing about swift and effective sector wise growth. Similarly, the district of Namsai (Arunachal Pradesh) has achieved 100% household electricity and 90% road connectivity under the PMGSY scheme. Instances such as these, indicate towards the increased focus on sectors such as basic infrastructure in remote areas, which may have been neglected previously. However, according to district officials the challenges for this sector lie with the fact that infrastructure projects especially for districts with forest reserves require additional approvals and clearance procedures. This was cited as one of the reasons for delays in a number of projects implemented in the sector. Another potential challenge is the lack of sufficient technical capacity leading to complete reliance on the state for all the

[38] Haque, T., & Joshi, P. K. (2018). Comparative analysis of districts in Bihar: agricultural transformation in aspirational districts of India. Economic and Political Weekly, 53(51).

development work. For districts that may not be technically strong or lack human resource capacity, this absence of development or CSR partners poses more difficulties.

Financial Inclusion and Skill Development:

Among the Aspirational Districts, the sectors of Financial Inclusion and Skill Development require more focus. Although the two sectors comprise only 10% of weightage under the Aspirational Districts Programme, development in these sectors is the need for the future. Discussions with Prabhari officers, knowledge partners and development partners provided useful insights for the potential lag in these sectors. One of the chief reasons highlighted for the sectors progressing at a slower pace has been the lack of dedicated departments for the two sectors at the district level, unlike in the case of all other sectors. This implies that activities related to the two sectors must be coordinated with different departments within the district, with no one department to claim ownership for the responsibilities. This lack of coordination at the district level has undoubtedly created a gap or inconsistency in the provision of services. Development partners such as Microsave, mentioned during the interviews that they have tried to resolve this issue by appointing dedicated personnel to coordinate among the different administrative departments. Although the development partner mentioned this has been a successful strategy, they also highlighted the need for a dedicated department at district level as the ideal way forward.

In the case of skill development, feedback from stakeholders points to the lack of supplementary factors such as absence of market demand for skills, or lack of suitable employment opportunities at appropriate industries within a district, despite the training provided. This results in either migration of residents to bigger cites in search of skilled job opportunities, or lesser uptake of the skills training programme due to lack of opportunities. Therefore, indicators developed for skills training must be revised to suit the requirements of each district. The quote below by a previous district commissioner, best explains this situation:

> **"Washim is an agrarian district. So, in this district if we provide training for beauty parlours or IT sector, there is no industry to support those jobs in the district. So, for skill development indicators we need to do much better"**
>
> **-Former District Commissioner of Washim district[39]**

Furthermore, according to stakeholders, sustainable and actual improvements in Financial Inclusion (and not just registration of bank accounts) is linked to socio-economic factors such as low literacy and income levels among many rural households, both of which may require initiatives that bear fruit only after a few years and not in a period of 2-3 years. Additionally, banking services are often sparse in rural and remote areas, which is the case with most Aspirational Districts. More importantly, even if these factors are addressed, a crucial reason highlighted by development partners was the general lack of trust among beneficiaries in availing banking services and the lower priority for availing banking services over other services such as healthcare or education.

There is a need for better outreach programmes on sectors such as financial inclusion and skills training in order for it to gain priority among both beneficiaries and service providers. Development partners such as Microsave seem to be already implementing such strategies by providing counselling services on financial inclusion and establishing a network of bank agents to create awareness and help in accessing the services. Another effective solution could be introducing bespoke programmes based on the needs of each district, just as it has been done in the districts for the sectors of health, education and agriculture.

5.3. Governance, Administration and Capacity building

5.3.1. The 3Cs Approach:

As mentioned earlier, a core ideology of the ADP's is the triple approach of Convergence, Competition, and Collaboration in achieving the targets. Discussion with different stakeholders presented varied insights into the merits of these three approaches:

[39] While the localized nature of skilling programmes cannot be ignored, skilling schemes – such as Deen Dayal Gramin Kaushal Yojana – are relevant for all districts across the country and therefore would require homogenous measurement indicators.

- **Convergence:** Almost all the officials interviewed mentioned that the Convergence approach has been one of the positive effects of the ADP. The approach is said to have bolstered better administration and has helped transition to a synchronised method of working rather than in silos. However, other stakeholders such as development partners, Aspirational District Fellows (ADFs) and United Nations Volunteers (UNVs) working in the districts shared a slightly different viewpoint. Although, these stakeholders acknowledged the improvements in governance through the convergence model, they also highlighted that they continue to face difficulties in navigating through the many administrative and bureaucratic processes. This is especially the case for sectors such as Agriculture and Water Resources, as they comprise an amalgamation of multiple departments (from horticulture to animal husbandry) making coordination among different departments and approval processes time consuming. Another aspect which seemed to pose minor difficulties for both district officials and development partners was the mismatch of priorities or thematic areas of focus set by states and those mandated by the ADP. This mismatch hinders the growth for ADPs, as district officials are required to strike a balance between the two.

  For development partners such mismatch often results in delays for approvals and programme implementation. Overall, in spite of the issues, all stakeholders agreed that the convergence model has been one of the positive contributions of the ADP and must be propagated further.

- **Collaboration:** Although most states stressed on the success of convergence, collaboration was seen as a promising approach moving forward. Districts appreciated the collaborative efforts of different development partners in providing sector specific technical expertise. It should be noted that the list of partners collaborated with do not just include development partners and knowledge partners commissioned by NITI Aayog, but also include local NGOs and CSO organisations. In addition to the expertise offered by different organisations, district administrations especially credited the constant support received from Aspirational Districts Fellows (ADFs) for the programme. In fact, a key suggestion provided by district administrations and development partners was the appointment of dedicated personnel like ADFs in each district to support day to day project implementation activities. Overall, the collaboration model has potential to be explored further under the ADP, as many districts highlighted the need for more partners or Technical Support Unit (TSU) deployed in the district. This finding although consistent among all districts, is more relevant for those located in remote areas as they face larger gaps in human resources capacities. In fact, the engagement of development partners, especially local and smaller CSOs may be a useful method for building capacities among the ADP districts.

Amongst Development Partners, a few of them have been outstanding and stand out in terms of the manpower deployed in Aspirational Districts, like Piramal Foundation deployed its team in 27 Aspirational Districts to support the District Administration in Health, Nutrition, Education and Water Resources Management. Similarly Microsave (through BMGF) placed teams in these Districts for supporting Financial Inclusion. Such collaborations are unique examples of Public Private Partnership (PPP) in the area of core governance.

- **Competition:** This approach seemed to espouse mixed opinions from stakeholders. While all stakeholders were of the belief that competition has increased districts' efforts to perform better and enabled better monitoring mechanisms, it however may not be the best approach in assessing development efforts. This view was consistent among the different stakeholders - district officials, Prabhari officials, knowledge partners, development partners and UNVs.

  One of the chief reasons cited for this was that, despite Aspirational Districts being grouped together on the criteria of lower performance, they nevertheless comprise districts that differ on geographic, political, economic and cultural contexts[40]. These variations may pose several internal challenges such as countering LWE conflicts or even geographic or topographic differences leading to economic or infrastructural challenges. Other concerns raised were around excessive reliance on competition and

[40] While districts are different and state policies also vary, it may be noted that all the KPIs except agriculture are equally relevant in all districts. Furthermore, the delta ranking mechanism has – so far – calculated ranks on the basis of movement in percent points. This automatically favours the lesser developed districts as progress from a lower base appears more striking. However, the matter of incorporation of differential contexts is worth consideration for refinement.
[41] It is, however, important to note that with the possible exception of law and order, the current indicators nevertheless indicate holistic improvement in districts.

rankings leading to improvements centred only on indicators being measured instead of achieving sustainable or holistic growth that may be most relevant to the district[41]. Still others pointed to the possibility of data discrepancies and misreporting caused due to excessive competition. Therefore, several stakeholders suggested that competition be used only to promote monitoring mechanisms and not serve as an indicator of development.

Government of India launched the Externally Aided Programme on Sustainable Development Goals (EAP-SDG) in 2019 for rapid socio-economic transformation of Aspirational Districts. The programme is funded by Official Development Assistance (ODA) from Japan International Cooperation Agency (JICA) for approximately 15 billion Yen. The additional allocation under challenge method is allocated to districts on the basis of rank declared every month on Champions of Change Dashboard. The districts which rank 1 and 2 in the overall ranking get Rs. 10 crores and Rs. 5 crores respectively and districts ranking first in sectoral ranking get Rs. 3 crores each. Organizations such as UNDP and ADB are providing technical support to districts in formulating proposals for this scheme and thereby facilitating access to these funds. By November 2020, proposals from approximately 65 districts have been approved under this allocation window. This has proven to be a successful strategy in incentivising districts to compete and score more in the Key Performance Indicators.

5.3.2. Targeting the low hanging fruits:

In addition to sectoral disparities, there exists significant disparity in strategy adopted by the districts. This is expected in a federal set up where states have significant autonomy in policy choices. The KPIs provide an over-arching but non-prescriptive framework which can facilitate planning and policy prioritization at the implementing level. While one of the reasons for the disparity could be due to the difficulties posed by geographic and socio-political reasons, other potential reasons could be the employment of successful strategies used by some of best performing districts. For instance, a key reason for these significant improvements in the areas of Healthcare, Education and Agriculture among some of the best performing districts can be attributed to the pre-existing schemes and facilities within the sectors, making it possible for the districts to adopt the strategy of "achieving the low hanging fruits" first. Other efficient strategies were constant monitoring and innovation. The quotes below, from officials of some of the best performing districts best illustrate this:

"We have been following a two pronged strategy: one, in terms of setting achievable goals, focusing on low hanging fruits, putting in place Data Driven systematic systemic improvements and the other in terms of Big Bang interventions and innovations".

- District Magistrate, Goalpara (Assam)

"There were a lot of low hanging fruits in the district, which we knew existed but could never be prioritised. The Aspirational Districts Programme has provided a direction to place focus on the low hanging fruits by seamlessly incorporating them into to the programme's indicators especially across the priority sectors of health, nutrition and education which has enabled us to achieve these indicators with work pending in those which require long term structural changes such as RTI Mechanisms in schools"

- Team member of District Magistrate's Team for Ranchi (Jharkhand)

5.3.3. Monitoring and Measurement Methods:

All stakeholders interviewed strongly agreed that monitoring has helped improve and identify internal capacities and activities within the districts. In fact, to quote the District Magistrate of Goalpara, (one of the top performing districts) on the topic, "What gets measured, gets done". Interviews with district officials revealed that constant monitoring and training for measurement methods have been key to improving the indicators. Of importance is also the focus on trainings provided to many stakeholders on measurement and data collection methods as stakeholders faced confusions ADP indicators in the initial stages. In fact, the interviews with the stakeholders highlighted the need for regular training sessions, and most importantly the need for dedicated personnel for the programme. Many district officials mentioned that Aspirational District Fellows have been instrumental in this, providing technical skills and documentation, support for the programme, especially since district officials are likely to change during the course of the entire programme. Given such instances, having a dedicated office or a set of personnel for the ADP was seen as the best way forward.

5.3.4. Capacity building:

There is no doubt that the ADP programme has helped districts improve their internal capacities across sectors and departments. In addition to sectoral improvements mentioned earlier in the report, instances of internal capacity building comprise of examples ranging from training of frontline healthcare workers in using appropriate measurement methods, providing schools with technology enabled interactive platforms to even supporting junior administrative officials in using online project management and data collection tools such as google forms. Additionally, it even includes providing support and guidance to district magistrates from experienced Prabhari officers to facilitate better planning and policy implementation. However, despite these positive contributions, many districts continue to struggle with insufficient human resources to achieve their full potential. This need for capacity building is more prominent among districts located in remote and challenging areas as they lack connectivity and facilities common to urban pockets. This, according to many district officials has been the chief barrier in attracting suitable human resources leading up to 40% vacant posts. Therefore, despite the three-pronged approach of the 3Cs, or successful strategies of achieving the low hanging fruits, most districts continue to stay incapacitated from achieving their full potential. Some suggestions received from different stakeholders in countering this issue are:

- **Dedicated Personnel or unit:** The ADP designates the District Magistrates or District Collectors as directly responsible for their districts' performance. While this is an effective strategy to focus the attention of district administrations on ADP goals, it is also important to note that DMs and DOs are tasked with several other responsibilities. Therefore, this strategy faces the risk of becoming a person-centred approach and poses challenges when official appointments are subject to frequent changes as in the case in India. Hence, appointing a set of dedicated personnel (such as Aspirational District Fellows) or a Technical Support Unit within each district was suggested by many stakeholders as an effective solution to countering both issues of human resources and moving from a person driven model.

- **Flexibility in recruitment policies:** Discussions with many of the officials highlighted the need for relaxing hiring policies so that vacancies can be filled. Officials also suggested the use of better incentives to attract suitable persons for remote districts.

- **Learning programmes for administrative officers and ADP fellows:** Another important suggestion provided by many Prabhari officers and district officials was to introduce learning programmes to share best practices. These could be visits to best performing districts to learn about the successful strategies, best practices and methods.

- **Technical skills trainings:** Officials expressed need for technical training requirements at block and district levels. Some of the skills mentioned are digitalisation, data analysis, bid writing skills, and coordination at the grassroots level. Currently the Aspirational District Fellows and UNVs provide some of the skills, but there is need for further technical expertise and hand holding support. In fact, one of the major capacity building requirements mentioned was bid/proposal development, as traditionally this is not a task executed at the district level.

Hence, appointing a set of dedicated personnel (such as Aspirational District Fellows) or a Technical Support Unit within each district was suggested by many stakeholders as an effective solution to countering both issues of human resources and moving from a person driven model.

5.4. The role of Champions of Change (CoC) Dashboard in data driven decision making

Data driven decision making has been one of the key features of the Aspirational Districts Programme, be it for the purpose of competition or self-monitoring activities.

The Champions of Change (CoC) dashboard was developed solely for the purpose of tracking and measuring growth. Qualitative interviews with stakeholders found that most districts use the portal for both data entry (as mandated under the programme), and also for basic data analysis, as it displays monthly progress on the indicators. The district of Ranchi for instance, has developed its own dashboard enabling a more in-depth data analysis and tracking of indicators at the block level. This is yet another example of how the ADP has successfully brought in a culture of accountability and transparency among the districts. However, this data driven aspect is not without its disadvantages and stakeholders highlighted a few features that may need improvement. These are as follows:

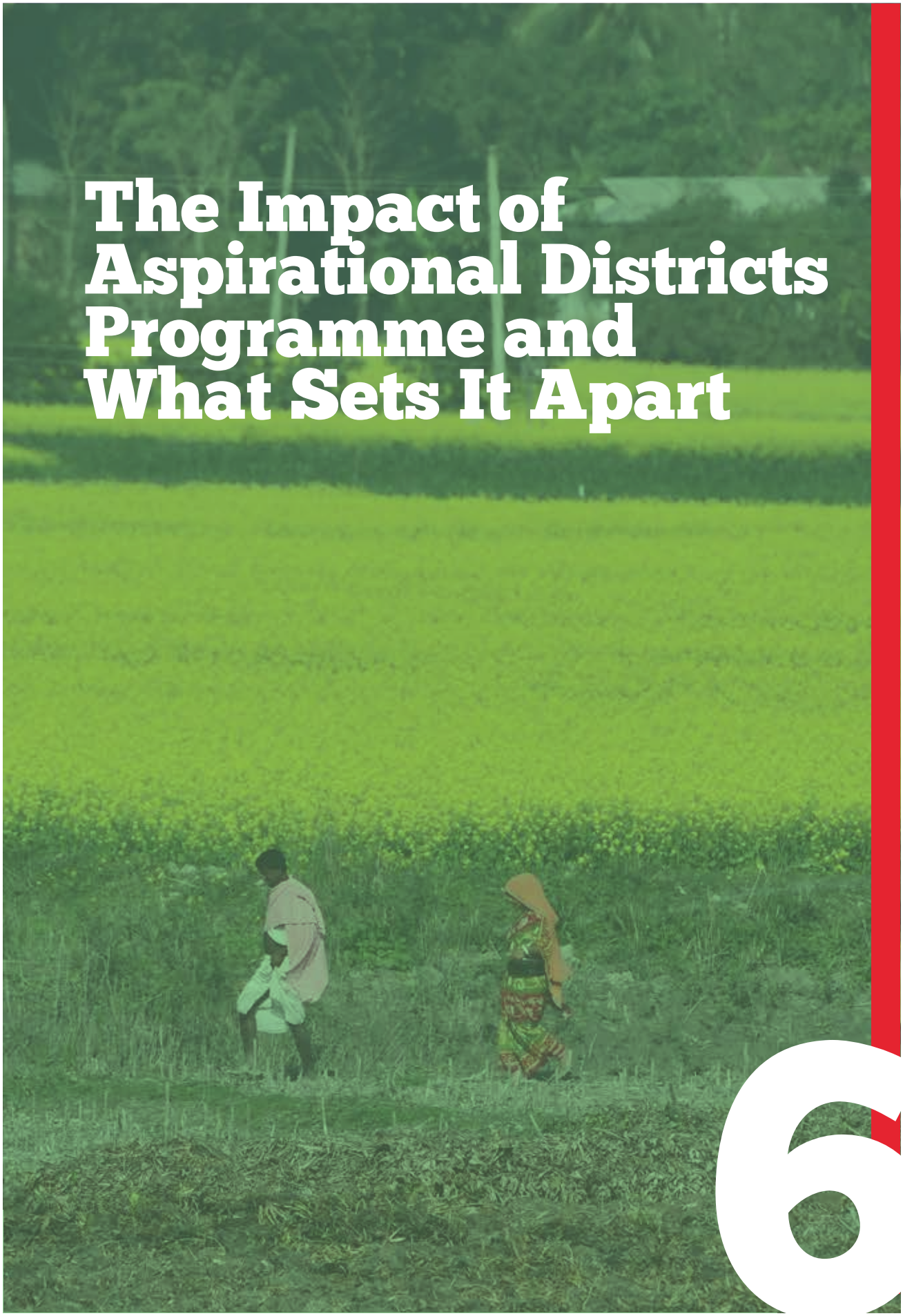
Relevance of Delta rankings: Although most stakeholders admitted to using the Champions of Change (CoC) portal, they also mentioned that their usage of the portal for data analysis had decreased over time. The chief reason cited for this was the frequent and drastic changes in delta rankings leading to inconsistencies. This has led to districts developing their own platforms for data analysis. In line with this, stakeholders suggested that updates be monitored quarterly or bi-annually rather than on a monthly basis as very few improvements can be achieved through 30 days period.

Data analysis and reporting: In addition to the unpredictability of delta rankings, stakeholders mentioned that discrepancies in data existed due to possible misinterpretations or misreporting of indicators. For instance, errors such as annual estimates instead of monthly indicators were entered by many districts in the initial days of the programme. Although the districts have gained better understanding of the indicators over time, some errors and misreporting practices are still reported to exist. A possible solution suggested by stakeholders was frequent training programmes on indicators.

Effectiveness of indicators: Among the issues highlighted by stakeholders, some were regarding the need for revision of some indicators. Development partners suggested the removal of certain indicators that have reached saturation for most districts, such as "electrification of households". Revision maybe required for such indicators and new indicators need to be added to the list. Development partners also highlighted that there is a need to move from input-based indicators to outcome indicators. Within the education sector, stakeholders suggested the inclusion of indicators on girl's education, co-curricular and vocational programmes as they need to be implemented in aspirational districts, and even community engagement in education activities as it is an influencing factor. However, inclusion of such indicators is likely to be affected by practicality and availability of data at the district level on frequent intervals.

Many of the suggestions provided were pertaining to the sector of Agriculture and Water resources. For example, it was highlighted that micro irrigation indicator has an in-built disadvantage for some geographical areas as it is recorded only for locations where irrigated land is available. Therefore, it does not present the ground realities. In line with this issue, one of stakeholders suggested that the "Ideal denominator should be total irrigated land in a district, and then the numerator can be the micro irrigated land of the district".

The Impact of Aspirational Districts Programme and What Sets It Apart



6

The Impact of Aspirational Districts Programme and What Sets It Apart

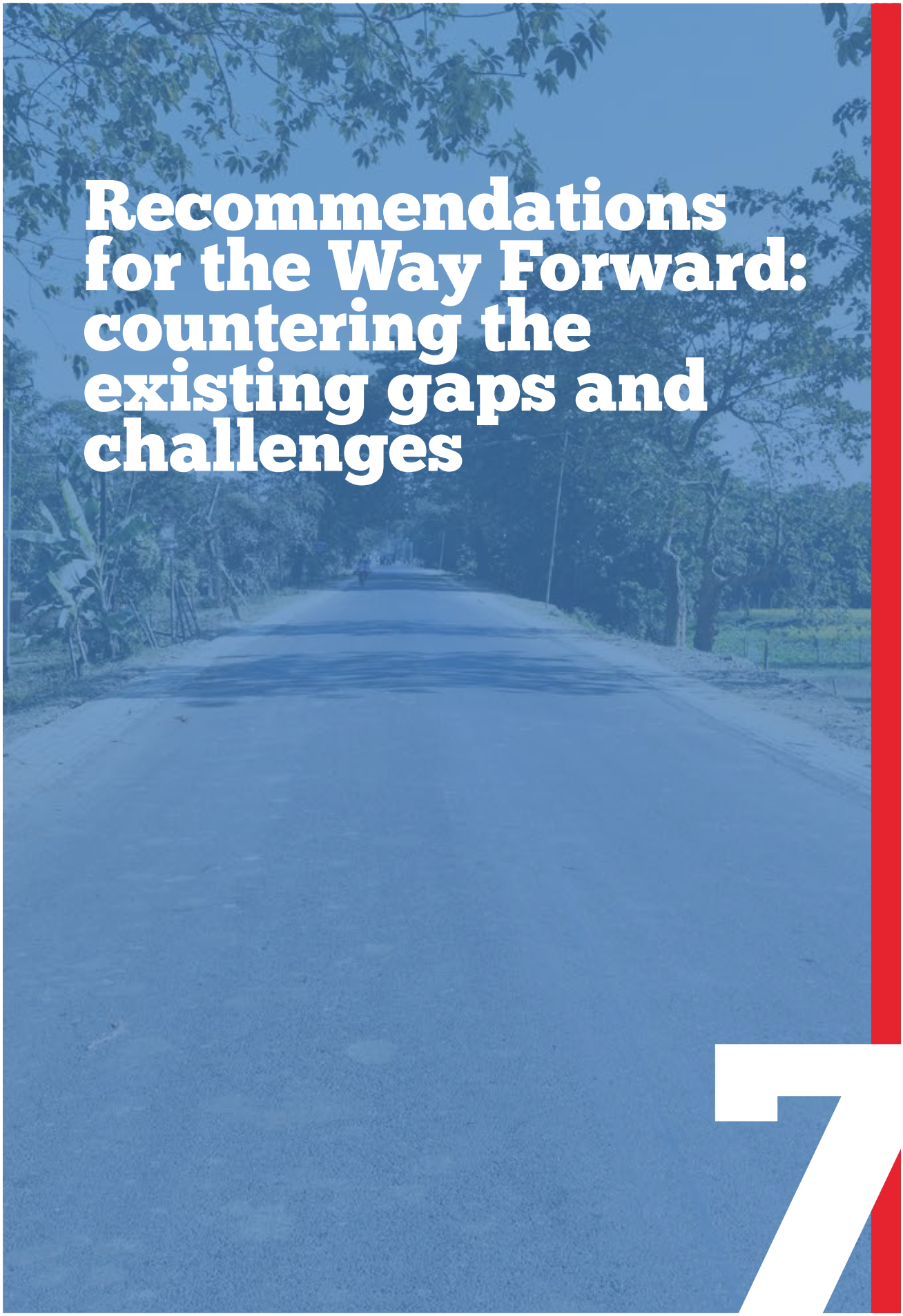
Based on the insights of the different stakeholders, it is evident that Aspirational Districts Programme has resulted in sectoral growth and improvements in governance and administration. Discussions with stakeholders illustrate the fact that a key feature that sets the ADP apart from other development programmes is the framework it provides to the districts through the categorical focus on sectors and a pre-determined set of indicators to be achieved. District administration officials with experience of serving in both aspirational as well non-aspirational districts especially highlighted the fact that the set of pre-determined indicators provided by the programme has helped them focus on specific targets and sectors instead of broad government schemes or new initiatives as in the case of previous programmes.

Furthermore, a chief finding on the difference between Aspirational and non-Aspirational districts programme has been the political salience given to aspirational districts. This could be due to the pressures faced by states and districts to perform well in the ranking system, or simply due to the support provided by different components of the programme. For instance, while certain differences in priorities or focus areas exist among different states and the aspirational districts, overall it was found that the level of political support has increased for the districts as states also face the pressure of displaying better results and do not want their districts to be ranked low. Moreover, discussions with district officials revealed that the appointment of Prabhari officers for districts and regular support from NITI Aayog are beneficial elements that previous programmes and non-Aspirational Districts lack. This was especially highlighted by district officials with experience in serving in both ADP and non-ADP districts.

More importantly, the programme was launched with the objective of reducing inter and intra-state disparities and it is on track of achieving it. The unique features of introducing competition, handholding support from the centre and state and collaboration with various agencies is proving successful in realising the vision of holistic development. This is clearly demonstrated by the Difference-in-Difference methodology adopted in this evaluation. When compared with other districts with similar socio-economic indicators, aspirational districts have fared much better on all development indicators since the launch of the programme.

However, stakeholders such as Prabhari officers and development partners also warned that the momentum gained at the inception of the programme is starting to diminish and efforts must be made to motivate the districts. In fact, as the programme has completed 3 years, it may be advisable to introduce re-training and learning programmes on best practices among the districts to regain momentum and work towards achieving the remaining targets.

District administration officials with experience of serving in both aspirational as well non-aspirational districts especially highlighted the fact that the set of pre-determined indicators provided by the programme has helped them focus on specific targets and sectors instead of broad government schemes or new programmes as in the case of previous initiatives.



Recommendations for the Way Forward: countering the existing gaps and challenges

7

Recommendations for the Way Forward: countering the existing gaps and challenges

While it is evident that the ADP has positively impacted the development targets, it should be noted that there are still some challenges and issues that need to be addressed. While some of the challenges have been mentioned in the sections above, this section provides a compilation of the challenges.

Disparities among sectors

While the Aspirational districts programme has helped strengthen crucial Healthcare and Education sectors, those with lesser weightage need significant focus and improvement. A realignment of sectors and focus is therefore required.

Disparities among districts

As mentioned earlier, one of the disadvantages of the Aspirational Districts has been the disparities among districts which does not facilitate fair competition and comparisons. In order to counter these issues, districts could be further grouped together based on their common characteristics and be supported accordingly.

Data discrepancies and adverse effects of competition

The commencement of ADP brought with it few challenges relating to monitoring and data collection, one of which is the discrepancy in data collected and recorded. Discussions with different stakeholders have highlighted the need for revising indicators, as well as reduced focus on a competitive approach, as they are likely to result in misreporting of data by districts. Apart from this there is also the need for further trainings and learning programmes.

Lack of human resources

One of the major issues highlighted across the districts irrespective of performance has been the lack of human resources and technical capacities at the district and block level. Even though districts have been provided support from the Prabhari officers and NITI Aayog, there is a need for capacity building at the grassroots level. This can be resolved by providing districts with dedicated personnel such as Aspirational District Fellows or representatives of the programme. This would bring in additional accountability and ownership for the programme, while also providing support to DMs and DOs, as they are already tasked with several responsibilities. Adopting more flexible methods of the hiring was also suggested as potential solution for improving capacities.

Scope for collaboration

Given the disparities in sectors, districts and also capacities, furthering collaboration with different organisations may provide the immediate and required support to districts. This can especially be provided for districts located in remote and challenging areas.

Addition of sectors or themes

A useful suggestion from the Aspirational District Fellows (ADFs) who work closely with the programme was to include additional sectors or themes cantered around key topics of environment and gender. This, according to the stakeholders, should not just be targeted for the beneficiaries of the programmes, but also integrated within the governance model as indicators of inclusive and sustainable growth.

Best Practices

8

Best Practices

8.1. Health and Nutrition

Much of the work undertaken under the Aspirational districts programme has been focused on the Healthcare and Nutrition sector. Initiatives range from improving infrastructure at Anganwadi centers to ensuring the availability of ambulance services in remote areas, designating specific days for work on VHSND (Village Health Sanitation and Nutrition Day) or ensuring an increase in institutional deliveries. Some districts have even developed apps for tracking progress in the nutrition sector. The best practices listed in this report are only a selected few and the ones that show potential for scalability and replicability. There are other initiatives as well which have performed well.

1. **Ensuring community well-being though the 'Malaria Mukt Bastar Abhiyan'** - *Bijapur and Dantewada districts (Chhattisgarh)*

Given that approximately 72% of all malaria cases in the country are diagnosed in the Bastar region, this large-scale project and its successful implementation was mentioned during two of our interviews

The Malaria Mukt Bastar Abhiyan is a program implemented by the National Health Mission and covers all the districts of Bastar, Kanker and Kondagaon regions. Given that approximately 72% of all malaria cases in the country are diagnosed in the Bastar region[42], this large-scale project and its successful implementation was mentioned during our interviews with two districts' DMs – Bijapur and Dantewada. It should be noted that both Bijapur and Dantewada are located in remote areas and are severely affected by Left Wing Extremist (LWE) activities. Needless to say, such factors make programme implementation more challenging, especially if using door to door campaigning as required under the programme. However, despite these challenges and the Covid-19 pandemic, health workers covered 100% of the area, which involves 6,000 villages to conduct malaria tests. As asymptomatic malaria is known to cause anaemia and malnutrition, testing is a crucial method for early diagnosis and treatment. As a result of the programme, the region saw a 65% year-on-year decline in the total cases of malaria recorded[43], and by the final phase of testing, malaria incidences in Bijapur had been reported to reduce by 71.3% and 54% in Dantewada.

2. **Model Anganwadis for holistic child development** -- *West Singhbhum district (Jharkhand)*

While several Anganwadis among the Aspirational districts have seen improvement under the programme, the district of West Singhbhum was among the first to focus on the improvement of Anganwadis for health and nutrition activities of children and mothers. One of the key elements of this has been training of Anganwadi Sevikas (staff) which included an 80-hour training module regarding holistic development of each and every child[44]. Salaries of staff were also increased to serve as an incentive. Currently, 650 anganwadi centres have been improved in the West Singhbhum district and include features such as a mobile science laboratory, digital literacy, digital literacy workshops and increased number of healthcare centres. Students have also been provided with textbooks stationery, learning toys and classroom accessories. The goal of the initiative is to reach 1000 Anaganwadis.

[42] Figures citied by Health Department in article by ANI, January 2020. https://www.aninews.in/news/national/general-news/malaria-prevention-to-help-in-alleviation-of-malnutrition-anaemia-bhupesh-baghel20200125230939/
[43] Article in The Print, titled 'While Covid raged, Chhattisgarh covered over 6,000 villages under 'Malaria MuktBastar' project', November 2020.
[44] Article in The New Indian Express on 3rd May 2020 ,titled, 'This Jharkhand man is changing the face of primary education with innovative ideas'.

3. **Tracking nutrition outcomes through the Poshan App** - *Ranchi district (Jharkhand)*

   While many districts have focussed on improving their anaganwadi centres under the Poshan Abhiyan, the district of Ranchi has been a step ahead. The Poshan App was introduced in Ranchi with the aim of optimizing the resources at Malnourishment Treatment Centres (MTCs). Keeping with the Aspirational district programme's ideology of monitoring progress, the Poshan App is a comprehensive real-time data analytics digital platform which monitors the bed occupancy, child growth charts and the inventory of each and every MTC centre in the district. This app also tracks the attendance of the MTC staff and doctors' visits are also tagged to the MTCs. The introduction of the app has led to the bed occupancy levels increasing over 90% at healthcare centres, and the inventory being tracked and managed better.

Keeping with the ADP's approach of monitoring progress, the Poshan App is a comprehensive real-time data analytics digital platform which monitors the bed occupancy, child growth charts, and the inventory of each and every MTC centre

8.2. Education

While the Healthcare sector may have seen an increase in the number of success stories, it is the education sector where the most innovative practices have been implemented. Districts have improved their performance in this sector by utilizing both technology and monitoring methods. Examples of the most innovative practices are mentioned below:

With key features like a dashboard to constantly monitor schools' progress, the Hamara Vidyalaya Program comprises all the features of the ADP, and in a way, is the implementation of the ADP programme itself within the education sector of the district.

1. **Encouraging better school performance through Hamara Vidyalaya Programmme** - *Namsai District (Arunachal Pradesh)*

   The Hamara Vidyalaya Programme of the Namsai district in Arunachal Pradesh has been a game changer programme for a district that was previously plagued with huge school infrastructure gap, high dropout rates amongst the lowest socio-economic groups, high teacher absenteeism, low parent-teacher coordination and ranked amongst the lowest three performing districts in learning outcomes according to NAS. Recognizing these issues, the district administration initiated this programme with key features of the Aspirational district programme itself, i.e. use of a dashboard to constantly monitor progress among the schools, provide regular mentoring for schools by an appointed school Prabhari officer and rank schools based on their performance. Using monitoring and mentoring, the program aimed to improve teacher and student absenteeism, increase parent's engagement in school management meetings, and encourage students by identifying good performers for School Olympiad to be conducted at block level and district level.

   Moreover, the program makes use of an online platform, named "Yathasarvam", developed by technology partner–Eckovation, and is linked to a Mobile app for data entry pertaining to assessment data, attendance of teachers & students, and the learning outcome marks by the School Prabhari on a quarterly basis during the "Hamara Vidyalaya Week". The data is then automatically analysed by the platform and brief reports generated on each criterion, similar to the Champions of Change dashboard.

2. **Improving education through interactive learning methods by GyanodayaGodda App** - *Godda district (Jharkhand)*

The key belief of the programme is that teaching alone is not sufficient to ensure that students have grasped the concept, hence teaching must be supplemented with assessments and feedback to improve learning outcomes.

Inspired by the Unnayan Banka Project in Bihar, the district administration of Godda implemented the Gyanodaya Project in the District of Godda to improve the quality of education. The App provides an attractive digital learning platform as per Jharkhand Academic Council (JAC) Board syllabus for grades 6 to 12. It also involves audio-visual lessons with animated and contextualized lectures followed by daily assessments to provide quality education. This was undertaken to increase students' access to education material, as well as improve the performance of students. The key belief of the programme is that

teaching alone is not sufficient to ensure that students have grasped the concept well, and hence it must be supplemented with assessments and feedback to improve learning outcomes. As a result, daily assessments are completed by students to gain feedback on improving their learning gap. In fact, based on the data points generated by the App, students are provided with AI based recommendations to help them strengthen their weak topics. The AI built into the app analyses each student's performance while mapping it to the course curriculum and also benchmarking it with not just that district, but with the country wide data on the same curriculum. Further, the AI system generates unique actionable feedback for each and every student. Currently the app caters to over 70,000 students across 260 schools for Maths, Science, Social Science and Linguistic subjects. The programme also involves "The Gyanodaya Rath" which identifies 200 best performing girls and boys from 10th grade in the district. These students are provided with residential school facilities and additional preparatory classes in the last two months leading to the 10th grade board examinations.

3. **ANNIE Smart Classes for visually impaired students**– *Ranchi district (Jharkhand)*

While most districts have focused on improving their

learning outcomes, teaching methods or infrastructure facilities in schools, the district of Ranchi adopted a truly inclusive approach by focusing on improving the quality of education for differently abled students as well. The district administration with support from private foundation, Thinkerbell labs installed the first smart class for the visually impaired at the Government School for visually impaired in Ranchi city. The initiative utilised the District Innovation Fund, and since the installation it has seen a drastic rise in the learning outcomes of students in the school as it enabled Class 5 students to also write in Braille, which was previously taught only to Class 10 students. The braille devices installed are enabled with both Hindi and English as the medium of instruction and also comes with gamified content for students' self-learning.

8.3. Agriculture and Water Resources

Agriculture and Water resources is a sector that is fast gaining importance among the Aspirational districts. Innovative practices and initiatives among ADs range from improving irrigation facilities, farmer education, and to improving yield. Among the many practices mentioned by the stakeholders, this report has highlighted case studies from districts have adopted specific initiatives to counter their challenges or improve on their strengths. Although these initiatives may be too specific to a region to replicate or scale up among other aspirational districts, they must nevertheless be applauded for their innovation.

1. **Promoting local products through e-commerce portal** - *Goalpara district (Assam)*

The GoalMart initiative is an e-commerce portal introduced to promote ethnic and agrarian products of the district in the national and global markets.

Similar to the technological initiatives in the education and healthcare sectors, the GoalMart initiative is an e-commerce portal set up by the district administration

of Goalpara in Assam. The GoalMart initiative was introduced to promote rural, ethnic and agrarian products of the district and to provide a platform for farmers and retailers to venture into the national and global markets. The aim is to boost economic growth of the district. The initiative has been particularly helpful in Covid 19 times as it relieves the farmers and retailers from being dependent on a physical marketplace to sell their products and instead increase their reach throughout the country or globally. For instance, Goalpara is one of the districts producing black rice, which is profitable and in high demand for exporting in the international market. While the GoalMart initiative is gaining popularity, it is definitely a step in the right direction to improve access to agricultural markets and opportunities within the district.

2. **Improving irrigation facilities through recharge pits** - *Washim district (Maharashtra)*

Although the concept of recharge pits is not new, it is a noteworthy initiative in the case of Washim as it optimizes the use of resources.

As part of improving irrigation facilities and water conservation efforts, the district administration of Washim in collaboration with private partners employed a large number of recharge pits in the district. A 'recharge pit' is a closed well like structure, covered by stones and other material when land is dug to make pits. Although the concept of recharge pits is not new, it is a noteworthy initiative in the case of Washim as it optimizes the use of resources. An increase in infrastructure development, especially construction of roadways and highways in the district led to the opportunity to create recharge pits as a suitable option for water conservation. The initiative has proved to be of low cost as well, with approximately INR 30,000 per structure as they were constructed by private partners already engaged in infrastructure development. Given the issues of water scarcity and cost of developing irrigation facilities, the concept of recharge pits is proving to be an effective solution for the district.

3. **Enhancing agricultural productivity through high profit products** - *Chandauli district (Uttar Pradesh)*

With the success of the initiative, high quality black rice produced in the district is now ready to be exported to Australia and New Zealand; therefore, bringing in double the profit gained from normal rice production.

The district of Chanduali is known as the 'rice bowl' of eastern Uttar Pradesh and has a large section of the population dependent on agriculture for their livelihood. Therefore, in order to improve agricultural returns for farmers, the district encouraged farmers to produce high quality black rice as it provides high profits. Black rice as such is not native to the area and is actually produced in high quantities in Manipur. However, given the increasing demand for the product in the global markets, the district administration promoted the product among a small group of 300 farmers. According to district officials interviewed, per kg of the product is priced at approximately INR 200, which is double that of normal rice sold in the local markets. With the success of the initiative, high quality black rice produced in the district is now ready to be exported to Australia and New Zealand and will soon be exported to other countries as well.

8.4. Basic Infrastructure

Although Basic Infrastructure comprises only 10% weightage in the ADP, it is nevertheless a crucial facilitator of development in the districts, and one which is interlinked to all other sectors. Best practices in this sector range from improving connectivity for socio-economic activities to even ensuring security and safety within the district. The examples mentioned in this report highlight these aspects.

1. **Utilization of green technologies for better connectivity** – *Goalpara district (Assam)*

The initiative is both unique and environmentally friendly as it is an example of how single use plastic waste can be recycled and used for major productive endeavors such as building roads.

The Goalpara district of Assam has many far-flung places comprising both plains and some areas of undulating terrain along the Assam Meghalaya foothills where rural road connectivity has always been an issue for the public as well as administration. In line with this concern the green technologies initiative is a one-of-a-kind initiative by the district administration of Goalpara to improve basic infrastructure by using plastic waste and eco-friendly methods for the construction work. The initiative is both unique and environmentally friendly as it is an example of how single use plastic waste can be recycled and used for productive endeavors such as building roads. Along with using recycled plastic technology, the initiative made use of green technologies such as cell filled concrete technology, geogrid technology, interlocking concrete pavement blocks, and cold mix technology. In addition to reducing environment pollution, the initiative is also said to reduce the cost of the construction. In fact, Goalpara was the first district in India to construct a 'green road' and has constructed over 183 kms of roads built under environment friendly technology

[45] Government of Goalpara, 2019. 'Implementation of Green Technologies in Road Construction in Goalpara, Assam'

over the last three years thus providing 433 numbers of habitations with access to all weather roads since April 2018[45]. The roads have been built under the scheme State-Owned Priority Development (SOPD), a part of the Pradhan Mantri Gram Sadak Yojana (PMGSY) program.

8.5. Skill Development and Financial Inclusion

1. **Providing skill development and community outreach through the YuvaBPO -** *Dantewada district (Chhattisgarh)*

The Yuva BPO is noteworthy for its multi-pronged approach of providing skill development and employment opportunities for the youth, as well as ensuring community engagement and outreach activities for crucial issues pertaining to health and well-being.

Dantewada district in Bastar Division of Chhattisgarh is a district rich in natural resources and cultural diversity. However, it is also a remote district affected by Left Wing Extremism activities, and not a location that one would expect to find a BPO centre. However, the Yuva BPO initiative which provides skill development and employment opportunities for the youth in the district and also nearby districts is an outstanding initiative for its multi-pronged approach in countering several challenges. While the initiative directly bridges the gaps of skill development and employment for the youth, it is also a good means to prevent youth engagement in LWE activities. However, the most notable feature of the BPO is its role of information dissemination on health issues or community outreach activities.

A key component of the BPO is undertaking healthcare related outreach activities on behalf of the district administration. Currently the BPO houses a separate cell of executives trained to provide information on maternal health services such as institutional delivery facilities within the district, antenatal Care to Immunization activities. The cell was operationalised using the Innovation Fund under National Health Mission. The NHM provides the BPO a list of pregnant women to reach out to for sensitising them on healthy dietary practice, health check-ups, precautions etc. On an average 50 calls are made every day to the pregnant women. In addition, calls are made to the frontline healthcare workers such as Anganwadi Workers, ANM, and PRI representatives to check for any challenges. The BPO cell also coordinates between the different institutions and beneficiaries for improving institutional delivery and care, ensuring high risk cases are given special attention such as counselling on delivery and early childcare, breast feeding etc. In cases where emergency referral transportation is required, the call centre also coordinates with ambulance services. More recently, the BPO was helpful in providing information and surveillance for during the COVID-19 pandemic as well. The district plans to expand these services for other sectors as well, such as education.

2. **Engagement of community members to improve financial inclusion** - *Ranchi district (Jharkhand)*

The initiative found that rural beneficiaries preferred Bank Sakhis to address their banking queries, due to their existing interpersonal relationships in rural areas and due to the local language.

In order to promote financial inclusion and financial literacy among rural households, the district administration of Ranchi deployed women SHGs as 'Bank Sakhis', or banking correspondents. The aim of the initiative was to promote financial literacy. As part of the initiative, a Bank Sakhi is placed at a rural bank branch to assist the local population with their banking requirements and while also educating them on various aspects of banking. The initiative found that rural beneficiaries preferred Bank Sakhis to address their banking queries, due to their existing interpersonal relationships in rural areas and use of the local language. The Bank Sakhis conduct regular evening classes in their villages on financial literacy and on digital banking. The SHGs have conducted

various drives in the village, teaching rural citizens on the use of UPI and the Bhim App. Rural Women SHGs have been deployed as banking correspondents in specifically those villages where banking systems were unable to penetrate effectively.

8.6. Scalability

Aspirational Districts Programme aims to promote the model of cooperative federalism and sharing of best practices and its subsequent replication by other districts form the basis of it. Since these districts are plagued with similar challenges it is not expected that districts reinvent the wheel, rather they learn from each other and find solutions to common problems. Some of these practices are so efficient in achieving their goals, they can be scaled not just in aspirational but other (non-aspirational) districts as well. Dissemination of such practices can also happen through international forums like High Level Political Forum (HLPF) of the United Nations as innovative approach for local area development in developing countries.

Some of these practices are so efficient in achieving their goals, they can be scaled not just in aspirational but other (non-aspirational) districts as well.

Appendix

Table A.1 Data Points Used for Net Resilience index

Note:

- Data points marked with asterisks (*) have been omitted from the index. These include price related indicators in agriculture and caste-subdivision in skill development indicators. These may vary substantially between districts and distort the analysis due to district level idiosyncrasies.

Sector	Total Indicators (87)	Type of Indicator	2018 (67)	2020 (68)
Agriculture	1.1) Percentage of area under micro-irrigation	Positive	1.1. Percentage of area under micro-irrigation	1.1. Percentage of area under micro-irrigation
Agriculture	1.2) No. of water bodies rejuvenated under MGNREGA during this period	Positive	1.2. No. of water bodies rejuvenated under MGNREGA during this period	1.2. No. of water bodies rejuvenated under MGNREGA during this period
Agriculture	10) Number of Soil Health Cards distributed	Positive	10. Number of Soil Health Cards distributed	10. Number of Soil Health Cards distributed
Agriculture	2.1) Crop Insurance-Kharif: Percentage of net sown area under Pradhan Mantri Fasal Bima Yojana (PMFBY)	Positive	2.1. Crop Insurance-Kharif: Percentage of net sown area under Pradhan Mantri Fasal Bima Yojana (PMFBY)	Data not available in March 2020
Agriculture	2.2) Crop Insurance Rabi: Percentage of net sown area in Rabi under Pradhan Mantri Fasal Bima Yojana (PMFBY)	Positive	Data not available in March-Dec 2018	2.2. Crop Insurance Rabi: Percentage of net sown area in Rabi under Pradhan Mantri Fasal BimaYojana (PMFBY)
Agriculture	3.1) Percentage increase in agricultural credit	Positive	3.1. Percentage increase in agricultural credit	3.1. Percentage increase in agricultural credit
Agriculture	3.2) Certified quality seed distribution	Positive	3.2. Certified quality seed distribution	3.2. Certified quality seed distribution
Agriculture	4) Number of Mandis in the District linked to Electronic Market	Positive	4. Number of Mandis in the District linked to Electronic Market	4. Number of Mandis in the District linked to Electronic Market
Agriculture*	5.1) Wheat: Percentage	Positive	5.1. Wheat: Percentage	5.1. Wheat: Percentage change in Price Realization (defined as

	change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))		change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))	the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))
Agriculture*	5.2) Paddy (Common): Percentage change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))	Positive	5.2. Paddy (Common): Percentage change in Price Realization (defined as the difference between Farm Harv est Price (FHP) and Minimum Support Price (MSP))	5.2. Paddy (Common): Percentage change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))
Agriculture*	5.3) Paddy (Grade A): Percentage change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))	Positive	5.3. Paddy (Grade A): Percentage change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimu m Support Price (MSP))	5.3. Paddy (Grade A): Percentage change in Price Realization (defined as the difference between Farm Harvest Price (FHP) and Minimum Support Price (MSP))
Agriculture	6) Percentage share of high value crops to total sown area in district	Positive	Data not available in March-Dec 2018	6. Percentage share of high value crops to total sown area in district
Agriculture	7.1) Agricultural productivity of Major Crop1 in Kharif	Positive	7.1. Agricultural productivity of Major Crop1 in Kharif	Data not available in March 2020
Agriculture	7.2) Agricultural productivity of Major Crop2 in Kharif	Positive	7.2. Agricultural productivity of Major Crop2 in Kharif	Data not available in March 2020
Agriculture	7.3) Agricultural productivity of Major Crop1 in Rabi	Positive	Data not available in March -Dec 2018	7.3. Agricultural productivity of Major Crop1 in Rabi

Agriculture	7.4) Agricultural productivity of Major Crop2 in Rabi	Positive	Data not available in March-Dec 2018	7.4. Agricultural productivity of Major Crop2 in Rabi
Agriculture	8) Percentage of animals vaccinated	Positive	8. Percentage of animals vaccinated	8. Percentage of animals vaccinated
Agriculture	9) Artificial insemination coverage	Positive	9. Artificial insemination coverage	9. Artificial insemination coverage
Basic Infrastructure	1) Percentage of households with electricity connection	Positive	1. Percentage of households with electricity connection	Data not available in March 2020
Basic Infrastructure	2) Percentage of gram panchayats with internet connection	Positive	2. Percentage of gram panchayats with internet connection	2. Percentage of gram panchayats with internet connection
Basic Infrastructure	3.1) Percentage of habitations with access to all weather roads under PMGSY	Positive	3.1. Percentage of habitations with access to all weather roads under PMGSY	3.1. Percentage of habitations with access to all weather roads under PMGSY
Basic Infrastructure	3.2) Cumulative number of kilometers of all-weather road work completed as a percentage of total sanctioned kilometers in the district under PMGSY	Positive	3.2. Cumulative number of kilometers of all-weather road work completed as a percentage of total sanctioned kilometers in the district under PMGSY	3.2. Cumulative number of kilometers of all-weather road work completed as a percentage of total sanctioned kilometers in the district under PMGSY
Basic Infrastructure	4) Percentage of households with individual household latrines	Positive	4. Percentage of households with individual household latrines	4. Percentage of households with individual household latrines
Basic Infrastructure	5) Percentage of rural habitations with access to adequate quantity of potable water (40 lpcd) drinking water	Positive	5. Percentage of rural habitations with access to adequate quantity of potable water (40 lpcd) drinking water	5. Percentage of rural habitations with access to adequate quantity of potable water (40 lpcd) drinking water
Basic Infrastructure	6) Percentage coverage of establishment of Common Service Centres at Gram Panchayat level	Positive	6. Percentage coverage of establishment of Common Service Centres at Gram Panchayat level	6. Percentage coverage of establishment of Common Service Centres at Gram Panchayat level
Basic Infrastructure	7) Percentage of pucca houses	Positive	7. Percentage of pucca houses	7. Percentage of pucca houses constructed for households

	constructed for households that are shelterless or have one room with kuchha wall and roof or have 2 rooms with kuchha wall and roof		constructed for households that are shelterless or have one room with kuchha wall and roof or have 2 rooms with kuchha wall and roof	that are shelterless or have one roo m with kuchha wall and roof or have 2 rooms with kuchha wall and roof
Education	1.1) Transition rate from primary to upper primary school level	Positive	1.1. Transition rate from primary to upper primary school level	Data not available in March 2020
Education	1.2) Transition rate from upper primary to secondary school level	Positive	1.2. Transition rate from upper primary to secondary school level	Data not available in March 2020
Education	2) Toilet access: percentage schools with functional girls' toilets	Positive	2. Toilet access: percentage schools with functional girls' toilets	2. Toilet access: percentage schools with functional girls' toilets
Education	3.1) Mathematics performance in class 3	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	3.2) Language performance in class 3	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	3.3) Mathematics performance in class 5	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	3.4) Language performance in class 5	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	3.5) Mathematics performance in class 8	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	3.6) Language performance in class 8	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	4) Female literacy rate (15+ age group)	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Education	5) Percentage of schools with functional drinking water facility	Positive	5. Percentage of schools with functional drinking water facility	5. Percentage of schools with functional drinking water facility
Education	6) Percentage of schools with functional electricity facility at secondary level	Positive	6. Percentage of schools with functional electricity facility at secondary level	6. Percentage of schools with functional electricity facility at secondary level

Education	7) Percentage of elementary schools complying with RTE specified Pupil Teacher Ratio	Positive	7. Percentage of elementary schools complying with RTE specified Pupil Teacher Ratio	7. Percentage of elementary schools complying with RTE specified Pupil Teacher Ratio
Education	8) Percentage of schools providing textbooks to children within 1 month of start of academic session	Positive	8. Percentage of schools providing textbooks to children within 1 month of start of academic session	8. Percentage of schools providing textbooks to children within 1 month of start of academic session
Financial Inclusion	1) Total disbursement of Mudra loan (in Crore rupees) per 1 lakh population	Positive	Data not available in March -Dec 2018	1. Total disbursement of Mudra loan (in Crore rupees) per 1 lakh population
Financial Inclusion	2) Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY): number of enrolments per 1 lakh population	Positive	2. Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY): number of enrolments per 1 lakh population	2. Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY): number of enrolments per 1 lakh population
Financial Inclusion	3) Pradhan Mantri Suraksha Bima Yojana (PMSBY): number of enrolments per 1 lakh population	Positive	3. Pradhan Mantri Suraksha Bima Yojana (PMSBY): number of enrolments per 1 lakh population	3. Pradhan Mantri Suraksha Bima Yojana (PMSBY): number of enrolments per 1 lakh population
Financial Inclusion	4) Atal Pension Yojana (APY): number of beneficiaries per 1 lakh population	Positive	4. Atal Pension Yojana (APY): number of beneficiaries per 1 lakh population	4. Atal Pension Yojana (APY): number of beneficiaries per 1 lakh population
Financial Inclusion	5) Percentage of accounts seeded with Aadhaar to total bank accounts	Positive	5. Percentage of accounts seeded with Aadhaar to total bank accounts	5. Percentage of accounts seeded with Aadhaar to total bank accounts
Financial Inclusion	6) Number of accounts opened under Pradhan Ma ntri Jan Dhan Yojana per 1 Lakh population	Positive	6. Number of accounts opened under Pradhan Mantri Jan Dhan Yojana per 1 Lakh population	6. Number of accounts opened under Pradhan Mantri Jan Dhan Yojana per 1 Lakh population
Health and Nutrition	1.1) Percentage of pregnant women receiving	Positive	Data not available in March-Dec 2018	1.1. Percentage of pregnant women receiving 4 or more antenatal care check-ups to the

	4 or more antenatal care check-ups to the total no. of pregnant women registered for antenatal care			total no. of pregnant women registered for antenatal care
Health and Nutrition	1.2) Percentage of ANC registered within the first trimester against Total ANC Registration	Positive	1.2. Percentage of ANC registered within the first trimester against Total ANC Registration	1.2. Percentage of ANC registered within the first trimester against Total ANC Registration
Health and Nutrition	1.3) Percentage of pregnant women (PWs) registered for ANCs to total estimated pregnancies	Positive	1.3. Percentage of pregnant women (PWs) registered for ANCs to total estimated pregnancies	1.3. Percentage of pregnant women (PWs) registered for ANCs to total estimated pregnancies
Health and Nutrition	10.1) Percentage of Breastfeeding children receiving adequate diet (6-23 months)	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Health and Nutrition	10.2) Non-breastfeeding children receiving adequate diet-(6-23 months)	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Health and Nutrition	11) Percentage of children fully immunized (9-11 months) (BCG+ DPT3 + OPV3 + Measles1)	Positive	11. Percentage of children fully immunized 9-11 months) (BCG+ DPT3 + OPV3 + Measles1)	11. Percentage of children fully immunized (9-11 months) (BCG+ DPT3 + OPV3 + Measles1)
Health and Nutrition	12.1) Tuberculosis (TB) case notification rate (Public and Private Institutions) as against estimated cases	Positive	12.1. Tuberculosis (TB) case notification rate (Public and Private Institutions) as against estimated cases	12.1. Tuberculosis (TB) case notification rate (Public and Private Institutions) as against estimated cases
Health and Nutrition	12.2. TB treatment success rate among notified TB patients (public and private)	Positive	12.2. TB treatment success rate among notified TB patients (public and private)	12.2. TB treatment success rate among notified TB patients (public and private)
Health and Nutrition	13.1) Proportion of sub-	Positive	13.1. Proportion of sub-	13.1. Proportion of of sub-centers/PHCs converted into

	centers/PHCs converted into Health & Wellness Centers (HWCs)		centers/PHCs converted into Health & Wellness Centers (HWCs)	Health & Wellness Centers (HWCs)
Health and Nutrition	13.2) Percentage of Primary Health Centers compliant to Indian Public Health Standards	Positive	13.2. Percentage of Primary Health Centers compliant to Indian Public Health Standards	13.2. Percentage of Primary Health Centers compliant to Indian Public Health Standards
Health and Nutrition	13.3) Proportion of functional FRUs (First Referral Units) against the norm of 1 per 500,000 population (1 per 300,000 in hilly areas)	Positive	13.3. Proportion of functional FRUs (First Referral Units) against the norm of 1 per 500,000 population (1 per 300,000 in hilly areas)	13.3. Proportion of functional FRUs (First Referral Units) against the norm of 1 per 500,000 population (1 per 300,000 in hilly areas)
Health and Nutrition	13.4) Proportion of specialist services available in district hospitals against IPHS norms	Positive	13.4. Proportion of specialist services available in district hospitals against IPHS norms	13.4. Proportion of specialist services available in district hospitals against IPHS norms
Health and Nutrition	13.5) Percentage of Anganwadis/UPHCs reported to have conducted at least one Village Health Sanitation & Nutrition day / Urban Health Sanitation & Nutrition day outreach in the last one month	Positive	13.5. Percentage of Anganwadis/UPHCs reported to have conducted at least one Village Health Sanitation & Nutrition day / Urban Health Sanitation & Nutrition day outreach in the last one month	13.5. Percentage of Anganwadis/UPHCs reported to have conducted at least one Village Health Sanitation & Nutrition day / Urban Health Sanitation & Nutrition day outreach in the last one month
Health and Nutrition	13.6) Proportion of Anganwadis with own buildings	Positive	13.6. Proportion of Anganwadis with own buildings	13.6. Proportion of Anganwadis with own buildings
Health and Nutrition	13.7) Percentage of First Referral Units (FRU) with labour rooms and obstetrics OT NQAS certified (meet LaQShyaquidelines)	Positive	13.7. Percentage of First Referral Units (FRU) with labour rooms and obstetrics OT NQAS certified (meet LaQShyaquidelines)	13.7. Percentage of First Referral Units (FRU) with labour rooms and obstetrics OT NQAS certified (meet LaQShyaquidelines)

Health and Nutrition	2) Percentage of pregnant women regularly taking Supplementary Nutrition under the ICDS programme	Positive	2. Percentage of pregnant women regularly taking Supplementary Nutrition under the ICDS programme	2. Percentage of pregnant women regularly taking Supplementary Nutrition under the ICDS programme
Health and Nutrition	3.1) Percentage of Pregnant women having severe anemia treated, against PW having severe anemia tested cases	Positive	3.1. Percentage of Pregnant women having severe anemia tr eated, against PW having severe anemia tested cases	3.1. Percentage of Pregnant women having severe anemia treated, against PW having severe anemia tested cases
Health and Nutrition	3.2) Percentage of pregnant women tested for Hemoglobin 4 or more times in respective ANCs to total ANC registration	Positive	Data not available in March-Dec 2018	3.2. Percentage of pregnant women tested for Hemoglobin 4 or more times in respective ANCs to total ANC registration
Health and Nutrition	4.1) Sex Ratio at birth	Positive	4.1. Sex Ratio at birth	4.1. Sex Ratio at birth
Health and Nutrition	4.2) Percentage of institutional deliveries to total estimated deliveries	Positive	4.2. Percentage of institutional deliveries to total estimated deliveries	4.2. Percentage of institutional deliveries to total estimated deliveries
Health and Nutrition	5. Percentage of deliveries at home attended by an SBA (Skilled Birth Attendance) trained health worker to total home deliveries	Positive	5. Percentage of deliveries at home attended by an SBA (Skilled Birth Attendance) trained health worker to total home deliveries	5. Percentage of deliveries at home attended by an SBA (Skilled Birth Attendance) trained health worker to total home deliveries
Health and Nutrition	6.1) Percentage of newborns breastfed within one hour of birth	Positive	6.1. Percentage of newborns breastfed within one hour of birth	6.1. Percentage of newborns breastfed within one hour of birth
Health and Nutrition	6.2) Percentage of low birth weight babies (less than 2500g)	Negative	6.2. Percentage of low birth weight babies (less than 2500g)	6.2. Percentage of low birth weight babies (less than 2500g)
Health and Nutrition	6.3) Percentage of live babies weighed at birth	Positive	6.3. Percentage of live babies weighed at birth	6.3. Percentage of live babies weighed at birth
Health and Nutrition	7. Percentage of underweight children under 6 years	Negative	7. Percentage of underweight children under 6 years	7. Percentage of underweight children under 6 years

Health and Nutrition	8.1) Percentage of stunted children under 6 years	Negative	Data not available in March-Dec 2018	Data not available in March 2020
Health and Nutrition	8.2) Percentage of children under 5 years with Diarrhea treated with ORS	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Health and Nutrition	8.3) Percentage of children under 5 years with Diarrhea treated with Zinc	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Health and Nutrition	8.4) Percentage of children under 5 years with Acute Respiratory Infections (ARI) taken to a health facility in the last 2 weeks	Positive	Data not available in March-Dec 2018	Data not available in March 2020
Health and Nutrition	9.1) Percentage of Severe Acute Malnourishment (SAM) in children under 6 years to total children under 6 years	Negative	9.1. Percentage of Severe Acute Malnourishment (SAM) in children under 6 years to total children under 6 years	9.1. Percentage of Severe Acute Malnourishment (SAM) in children under 6 years to total children under 6 years
Health and Nutrition	9.2) Percentage of Moderate Acute Malnutrition (MAM) in children under 6 years to total children under 6 years	Negative	9.2. Percentage of Moderate Acute Malnutrition (MAM) in children under 6 years to total children under 6 years	9.2. Percentage of Moderate Acute Malnutrition (MAM) in children under 6 years to total children under 6 years
Skill Development	1) Percentage of youth certified in short termor long-term training schemes to no. of youth in district in age group 15-29*	Positive	7. Percentage of youth certified in short term or long -term training schemes to no. of youth in district in age group 15-29*	7. Percentage of youth certified in short term or long-term training schemes to no. of youth in district in age group 15 -29*
Skill Development	2) Percentage of certified youth employed# to no. of youth trained under short term or long-term training	Positive	8. Percentage of certified youth employed# to no. of youth trained under short term or long-term training	8. Percentage of certified youth employed# to no. of youth trained under short term or long-term training

Skill Development	3) Number of apprenticeships completing to total number of trainees registered on the portal	Positive	9. Number of apprenticeships completing to total number of trainees registered on the portal	9. Number of apprenticeships completing to total number of trainees registered on the portal
Skill Development	4) No. of people certified under Recognition of Prior Learning to non-formally skilled workforce	Positive	10. No. of people certified under Recognition of Prior Learning to non-formally skilled workforce	10. No. of people certified under Recognition of Prior Learning to non-formally skilled workforce
Skill Development	5.1) Percentage certified trained: women	Positive	11.1. Percentage certified trained: women	11.1. Percentage certified trained: women
Skill Development*	5.2) Percentage certified trained: SC	Positive	11.2. Percentage certified trained: SC	11.2. Percentage certified trained: SC
Skill Development*	5.3) Percentage certified trained: ST	Positive	11.3. Percentage certified trained: ST	11.3. Percentage certified trained: ST
Skill Development*	5.4) Percentage certified trained: OBC	Positive	11.4. Percentage certified trained: OBC	11.4. Percentage certified trained: OBC
Skill Development*	5.5) Percentage certified trained: minorities	Positive	11.5. Percentage certified trained: minorities	11.5. Percentage certified trained: minorities
Skill Development*	5.6) Percentage certified trained: differently abled	Positive	11.6. Percentage certified trained: differently abled	11.6. Percentage certified trained: differently abled

Table A.2: Ranking of districts based on change in net resilience since March 2018 to March 2020

State	District	Rank
Jharkhand	Ranchi	1
Uttar Pradesh	Chandauli	2
Jharkhand	Simdega	3
Uttar Pradesh	Sonbhadra	4
Madhya Pradesh	Rajgarh	5
Assam	Goalpara	6
Uttar Pradesh	Fatehpur	7
Arunachal Pradesh	Namsai	8
Karnataka	Raichur	9
Jharkhand	Godda	10
Assam	Darrang	11
Bihar	Muzaffarpur	12
Odisha	Nabarangapur	13
Bihar	Araria	14
Bihar	Aurangabad	15
Odisha	Rayagada	16
Odisha	Koraput	17
Madhya Pradesh	Guna	18
Uttar Pradesh	Balrampur	19
Manipur	Chandel	20
Jharkhand	Khunti	21
Bihar	Sheikhpura	22
Telangana	Bhoopalapalli (Warangal)	23
Rajasthan	Karauli	24
Uttar Pradesh	Chitrakoot	25
Uttar Pradesh	Shrawasti	26
Assam	Baksa	27
Jharkhand	Latehar	28
Jharkhand	Lohardaga	29
Jammu & Kashmir	Kupwara	30
Uttarakhand	Hardwar	31
Odisha	Dhenkanal	32
Rajasthan	Sirohi	33
Madhya Pradesh	Vidisha	34
Bihar	Jamui	35
Mizoram	Mamit	36
Tamil Nadu	Virudhunagar	37
Meghalaya	Ribhoi	38
Uttar Pradesh	Siddharthnagar	39
Madhya Pradesh	Singrauli	40
Assam	Dhubri	41

Bihar	Begusarai	42
Jharkhand	Pakur	43
Assam	Hailakandi	44
Jharkhand	Giridih	45
Odisha	Gajapati	46
Madhya Pradesh	Damoh	47
Uttarakhand	Udham Singh Nagar	48
Jharkhand	Chatra	49
Kerala	Wayanad	50
Tamil Nadu	Ramanathapuram	51
Karnataka	Yadgir	52
Jharkhand	Purbi Singhbhum	53
Jammu & Kashmir	Baramula	54
Assam	Barpeta	55
Chhattisgarh	Sukma	56
Jharkhand	Dumka	57
Odisha	Kandhamal	58
Punjab	Moga	59
Jharkhand	Palamu	60
Bihar	Purnia	61
Jharkhand	Bokaro	62
Odisha	Kalahandi	63
Bihar	Banka	64
Assam	Udalguri	65
Haryana	Mewat	66
Jharkhand	Hazaribagh	67
Bihar	Khagaria	68
Chhattisgarh	Rajnandgaon	69
Chhattisgarh	Mahasamund	70
Chhattisgarh	Uttar Bastar Kanker	71
Andhra Pradesh	Visakhapatnam	72
Punjab	Firozpur	73
Bihar	Katihar	74
Odisha	Balangir	75
Odisha	Nuapada	76
Telangana	Bhadradri-Kothagudem	77
Gujarat	Narmada	78
Chhattisgarh	Korba	79
Maharashtra	Osmanabad	80
Uttar Pradesh	Bahraich	81
Andhra Pradesh	Y.S.R.	82
Jharkhand	Garhwa	83

Gujarat	Dohad	84
Himachal Pradesh	Chamba	85
Tripura	Dhalai	86
Sikkim	West District	87
Bihar	Gaya	88
Madhya Pradesh	Barwani	89
Chhattisgarh	Kondagaon	90
Andhra Pradesh	Vizianagaram	91
Chhattisgarh	Narayanpur	92
Rajasthan	Dhaulpur	93
Jharkhand	Ramgarh	94
Chhattisgarh	Bastar	95
Rajasthan	Jaisalmer	96
Maharashtra	Nandurbar	97
Madhya Pradesh	Khandwa (East Nimar)	98
Rajasthan	Baran	99
Jharkhand	Sahibganj	100
Maharashtra	Gadchiroli	101
Telangana	Asifabad (Adilabad)	102
Odisha	Malkangiri	103
Maharashtra	Washim	104
Madhya Pradesh	Chhatarpur	105
Jharkhand	Pashchimi Singhbhum	106
Bihar	Sitamarhi	107
Jharkhand	Gumla	108
Chhattisgarh	Dakshin Bastar Dantewada	109
Chhattisgarh	Bijapur	110
Bihar	Nawada	111

Table A.3: List of Aspirational Districts (Treatment Group for Difference in Difference Evaluation)

S.no	State	District
1	Jammu & Kashmir	Kupwara
2	Jammu & Kashmir	Baramula
3	Himachal Pradesh	Chamba
4	Punjab	Moga
5	Uttarakhand	Udham Singh Nagar
6	Uttarakhand	Haridwar
7	Haryana	Mewat
8	Rajasthan	Dholpur
9	Rajasthan	Karauli
10	Rajasthan	Jaisalmer
11	Rajasthan	Sirohi
12	Rajasthan	Baran
13	Uttar Pradesh	Chitrakoot
14	Uttar Pradesh	Fatehpur
15	Uttar Pradesh	Bahraich
16	Uttar Pradesh	Shrawasti
17	Uttar Pradesh	Balrampur
18	Uttar Pradesh	Siddharthnagar
19	Uttar Pradesh	Chandauli
20	Uttar Pradesh	Sonebhadra
21	Bihar	Sitamarhi
22	Bihar	Araria
23	Bihar	Purnia
24	Bihar	Katihar
25	Bihar	Muzaffarpur
26	Bihar	Begusarai
27	Bihar	Khagaria
28	Bihar	Banka
29	Bihar	Sheikhpura
30	Bihar	Aurangabad
31	Bihar	Gaya
32	Bihar	Nawada
33	Bihar	Jamui
34	Sikkim	West Sikkim
35	Nagaland	Kiphire
36	Manipur	Chandel
37	Mizoram	Mamit
38	Tripura	Dhalai
39	Meghalaya	Ribhoi
40	Assam	Goalpara
41	Assam	Barpeta
42	Assam	Hailakandi
43	Assam	Baksa
44	Assam	Darrang
45	Assam	Udalguri
46	Jharkhand	Garhwa
47	Jharkhand	Chatra
48	Jharkhand	Giridih
49	Jharkhand	Godda
50	Jharkhand	Sahibganj
51	Jharkhand	Pakur
52	Jharkhand	Bokaro
53	Jharkhand	Lohardaga
54	Jharkhand	Purbi Singhbhum
55	Jharkhand	Palamu
56	Jharkhand	Latehar
57	Jharkhand	Hazaribagh
58	Jharkhand	Ramgarh
59	Jharkhand	Dumka
60	Jharkhand	Ranchi
61	Jharkhand	Khunti
62	Jharkhand	Gumla
63	Jharkhand	Simdega
64	Jharkhand	Pashchimi Singhbhum
65	Odisha	Dhenkanal

66	Odisha	Gajapati		90	Gujarat	DAHOD
67	Odisha	Kandhamal		91	Gujarat	Narmada
68	Odisha	Balangir		92	Maharashtra	Nandurbar
69	Odisha	Kalahandi		93	Maharashtra	Washim
70	Odisha	Rayagada		94	Maharashtra	Gadchiroli
71	Odisha	Koraput		95	Maharashtra	Osmanabad
72	Odisha	Malkangiri		96	Andhra Pradesh	Vizianagaram
73	Odisha	Nawarangpur		97	Andhra Pradesh	Visakhapatnam
74	Odisha	Nuapada		98	Andhra Pradesh	Y.S.R. Kadapa
75	Chhattisgarh	Korba		99	Karnataka	Raichur
76	Chhattisgarh	Rajnandgaon		100	Karnataka	Yadgir
77	Chhattisgarh	Mahasamund		101	Kerala	Wayanad
78	Chhattisgarh	Kanker		102	Tamil Nadu	Virudhunagar
79	Chhattisgarh	Narayanpur		103	Tamil Nadu	Ramanathapuram
80	Chhattisgarh	Dantewada		104	Punjab	Firozpur
81	Chhattisgarh	Bijapur		105	Chhattisgarh	Bastar
109	Assam	Dhubri		106	Chhattisgarh	Kondagaon
82	Madhya Pradesh	Chhatarpur		107	Chhattisgarh	Sukma
83	Madhya Pradesh	Damoh		108	Arunachal Pradesh	Namsai
84	Madhya Pradesh	Barwani		89	Madhya Pradesh	Khandwa
85	Madhya Pradesh	Rajgarh		110	Telangana	Asifabad
86	Madhya Pradesh	Vidisha		111	Telangana	Bhopapalli
87	Madhya Pradesh	Guna		112	Telangana	Bhadradri Kothagudem
88	Madhya Pradesh	Singrauli				

Table A.4: Control Group for DiD approach for Health and Nutrition Sector

S.no	State	District
1	Andhra Pradesh	Srikakulam
2	Andhra Pradesh	Prakasam
3	Andhra Pradesh	East Godavari
4	Arunachal Pradesh	Dibang Valley
5	Assam	Chirang
6	Assam	Dima Hasao
7	Assam	Kokrajhar
8	Assam	Karimganj
9	Assam	Sonitpur
10	Assam	Bongaigaon
11	Assam	Marigaon
12	Bihar	Darbhanga
13	Bihar	West Champaran
14	Bihar	Jehanabad
15	Bihar	Saran
16	Bihar	Sheohar
17	Bihar	Supaul
18	Bihar	Saharsa
19	Bihar	Bhagalpur
20	Bihar	Kaimur Bhabua
21	Bihar	East Champaran
22	Bihar	Patna
23	Bihar	Arwal
24	Bihar	Vaishali
25	Chhattisgarh	Surajpur
26	Chhattisgarh	Bemetra
27	Chhattisgarh	Baloda Bazar
28	Chhattisgarh	Kawardha
29	Chhattisgarh	Balod
30	Chhattisgarh	Surguja
31	Chhattisgarh	Balrampur
32	Chhattisgarh	Durg
33	Chhattisgarh	Gariyaband
34	Chhattisgarh	Janjgir Champa
35	Gujarat	Gir Somnath
36	Gujarat	Anand
37	Haryana	Palwal
38	Himachal Pradesh	Kangra
39	Jammu & Kashmir	Doda
40	Jammu & Kashmir	Kishtwar
41	Jharkhand	Dhanbad
42	Jharkhand	Kodarma
43	Jharkhand	Deoghar
44	Jharkhand	Saraikela
45	Jharkhand	Jamtara
46	Karnataka	Bidar
47	Karnataka	Davanagere
48	Kerala	Kannur
49	Madhya Pradesh	Alirajpur
50	Madhya Pradesh	Burhanpur
51	Madhya Pradesh	Jhabua
52	Madhya Pradesh	Sheopur
53	Madhya Pradesh	Morena
54	Madhya Pradesh	Satna
55	Madhya Pradesh	Harda
56	Madhya Pradesh	Betul
57	Maharashtra	Brihan Mumbai
58	Maharashtra	Nashik
59	Maharashtra	Thane
60	Maharashtra	Chandrapur
61	Manipur	Ukhrul
62	Meghalaya	East Jaintia Hills
63	Mizoram	Saiha
64	Nagaland	Tuensang
65	Odisha	Sundargarh

66	Odisha	Cuttack	90	Uttar Pradesh	Kanpur Nagar
67	Odisha	Puri	91	Uttar Pradesh	Ghaziabad
68	Odisha	Khordha	92	Uttar Pradesh	Sambhal
69	Odisha	Sambalpur	93	Uttar Pradesh	Kashi Ram Nagar
70	Odisha	Ganjam	94	Uttar Pradesh	Gonda
71	Odisha	Keonjhar	95	Uttar Pradesh	Barabanki
72	Odisha	Baleshwar	96	Uttar Pradesh	Farrukhabad
73	Odisha	Mayurbhanj	97	Uttar Pradesh	Faizabad
74	Odisha	Nayagarh	98	Uttarakhand	Tehri Garhwal
75	Punjab	Tarn Taran	99	Uttarakhand	Champawat
76	Punjab	Faridkot	100	Uttar Pradesh	Etah
77	Rajasthan	Pratapgarh	101	Uttar Pradesh	Rampur
78	Rajasthan	Udaipur	102	Uttar Pradesh	Hardoi
79	Rajasthan	Jodhpur	103	Uttar Pradesh	Lakhimpur Kheri
80	Rajasthan	Bikaner	104	Uttar Pradesh	Moradabad
81	Rajasthan	Kota	105	Odisha	Jharsuguda
82	Sikkim	East	106	Odisha	Anugul
83	Tamil Nadu	Dharmapuri	107	Odisha	Jagatsinghpur
84	Tamil Nadu	Thiruvarur	108	Odisha	Deogarh
85	Telangana	Medak	109	Odisha	Jajapur
86	Telangana	Hyderabad	110	Chhattisgarh	Bilaspur
87	Telangana	Nalgonda	111	Chhattisgarh	Koriya
88	Telangana	Jogulamba Gadwal	112	Chhattisgarh	Raipur
89	Tripura	North Tripura	113	Chhattisgarh	Jashpur

Table A.5: Control Group for DiD approach for Health and Nutrition Sector

S.no	State	District
1	Andhra Pradesh	Chittoor
2	Andhra Pradesh	Sri Potti Sriramulu Nellore
3	Andhra Pradesh	Kurnool
4	Arunachal Pradesh	East Kameng
5	Assam	Kokrajhar
6	Assam	Karimganj
7	Assam	Bongaigaon
8	Assam	Tinsukia
9	Assam	Dima Hasao
10	Assam	Sonitpur
11	Assam	Nalbari
12	Bihar	Purba Champaran
13	Bihar	Darbhanga
14	Bihar	Siwan
15	Bihar	Madhubani
16	Bihar	Saharsa
17	Bihar	Madhepura
18	Bihar	Jehanabad
19	Bihar	Supaul
20	Bihar	Gopalganj
21	Bihar	Munger
22	Bihar	Kaimur (Bhabua)
23	Bihar	Pashchim Champaran
24	Bihar	Bhagalpur
25	Chhattisgarh	Balrampur
26	Chhattisgarh	Baloda Bazar
27	Chhattisgarh	Bemetara
28	Chhattisgarh	Surajpur
29	Chhattisgarh	Balod
30	Chhattisgarh	Mungeli
31	Chhattisgarh	Jashpur
32	Chhattisgarh	Gariyaband
33	Chhattisgarh	Bilaspur
34	Chhattisgarh	Janjgir - Champa
35	Gujarat	Mahisagar
36	Gujarat Dawarka	Devbhoomi
37	Haryana	Jind
38	Himachal Pradesh	Lahul & Spiti
39	Jammu & Kashmir	Srinagar
40	Jammu & Kashmir	Punch
41	Jharkhand	Dhanbad
42	Jharkhand	Jamtara
43	Jharkhand	Kodarma
44	Jharkhand	Saraikela-Kharsawan
45	Jharkhand	Deoghar
46	Karnataka	Chikkaballapura
47	Karnataka	Bidar
48	Kerala	Malappuram
49	Madhya Pradesh	Bhind
50	Madhya Pradesh	Morena
51	Madhya Pradesh	Sheopur
52	Madhya Pradesh	Tikamgarh
53	Madhya Pradesh	Datia
54	Madhya Pradesh	Agar Malwa
55	Madhya Pradesh	Panna
56	Madhya Pradesh	Shivpuri
57	Maharashtra	Parbhani
58	Maharashtra	Hingoli
59	Maharashtra	Buldana
60	Maharashtra	Bid
61	Manipur	Tamenglong
62	Meghalaya	North Garo Hills
63	Mizoram	Lawngtlai
64	Nagaland	Mon
65	Odisha	Kendrapara

66	Odisha	Ganjam	90	Uttar Pradesh	Kushinagar
67	Odisha	Bargarh	91	Uttar Pradesh	Auraiya
68	Odisha	Mayurbhanj	92	Uttar Pradesh	Moradabad
69	Odisha	Kendujhar	93	Uttar Pradesh	Muzaffarnagar
70	Odisha	Bhadrak	94	Uttar Pradesh	Sambhal
71	Odisha	Nayagarh	95	Uttar Pradesh	Deoria
72	Odisha	Debagarh	96	Uttar Pradesh	Shamli
73	Odisha	Jajapur	97	Uttarakhand	Chamoli
74	Odisha	Baleshwar	98	Uttarakhand	Bageshwar
75	Punjab	Pathankot	99	Uttar Pradesh	Baghpat
76	Punjab	Gurdaspur	100	Uttar Pradesh	Azamgarh
77	Rajasthan	Dausa	101	Uttar Pradesh	Budaun
78	Rajasthan	Bikaner	102	Uttar Pradesh	Sant Kabir Nagar
79	Rajasthan	Churu	103	Uttar Pradesh	Etawah
80	Rajasthan	Nagaur	104	Odisha	Cuttack
81	Rajasthan	Jalor	105	Odisha	Sundargarh
82	Sikkim	North District	106	Odisha	Jagatsinghapur
83	Tamil Nadu	Ariyalur	107	Odisha	Anugul
84	Tamil Nadu	Dharmapuri	108	Odisha	Puri
85	Telangana	Nalgonda	109	Chhattisgarh	Koriya
86	Telangana	Mahbubnagar	110	Chhattisgarh	Surguja
87	Telangana	Medak	111	Chhattisgarh	Raigarh
88	Tripura	Sepahijala	112	Chhattisgarh	Kabeerdham
89	Uttar Pradesh	Hapur			

Table A.6: Comparison of means of treatment and control group for H&N Sector

Indicator	AD (Treatment) 2018	Control 2018
Percentage of Pregnant Women receiving four or more antenatal care check-ups against total ANC registrations	66.86	65.46
Percentage of ANC registered within the first trimester against total ANC registrations	67.46	61.67
Percentage of Pregnant women having severe anaemia treated against PW having severe anaemia tested cases	41.2	29.6
Sex Ratio at birth ((Female Live Births/ Male Live Births) *1000)	35.6	26.4
Percentage of institutional deliveries out of total estimated deliveries	87.2	88.88
Percentage of home deliveries attended by an SBA (Skilled Birth Attendance) trained health worker out of total home deliveries	96.09	94.02
Percentage of new-borns breastfed within one hour of birth	11.47	11.77
Percentage of low birth weight babies (Less than 2500 grams)	93.58	89.22
Proportion of live babies weighed at birth	935.96	925.74
Percentage of children with Diarrhoea treated	18.2	15.1

Table A.7: Comparison of means of treatment and control group for FI Sector

Indicator	AD (Treatment) 2018	Control 2018
PMJJBY enrolments per 1 Lakh population	1790.36	1646.82
PMSBY enrolments per 1 Lakh population	6815.16	6686.75
APY beneficiaries per 1 Lakh population	591.1	588.3
% of Account seeded with Aadhaar	77.07	75.75
PMJDY Accounts opened per lakh of population	31100.5	28371.56

Notes