

Process Documentation for GPDP

Experiences of Well Performing GPs of Jharkhand

A collaborative effort between PRADAN and WHH.



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मंत्री

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I am delighted to note the initiative "Process Documentation of GPDP – Experiences of best Practicing Gram Panchayats across Jharkhand", prepared by PRADAN in collaboration With Welthungerhilfe. By capturing field-tested practices, this document provides practical insights to strengthen planning, convergence, and implementation of Gram Panchayat Development Plan. I am confident it will serve as a valuable guide to deepen decentralized governance, enhance inclusiveness, and ensure that development reaches the last mile across Jharkhand.

Ms. Deepika Pandey Singh
Minister, Rural Development, Rural Works
And Panchayati Raj Department
Government of Jharkhand



Message

Gram Panchayat Development Plan (GPDP) which is now a decade old has come to stay. Its framework is well defined and its processes are clear. But there is a long way to go before it achieves good performance and becomes a self-sustaining engine of local development.

The best way to move forward is by studying the real experience and learning lessons. PRADAN has done well to prepare the process documentation of GPDP from nine best performing Gram Panchayats (GPs) of Jharkhand.

The processes have been well documented with clear analysis by ANODE Governance Lab. The Project is part of the larger programme supported by Welt Hunger Hilfe (WHH) running across 60 Blocks in 14 Districts. The document shows what works and what are the challenges and also lists out best practices. It shows that if support from facilitating agencies especially from the civil society is obtained, the quality and depth of the Plan can be improved, evidenced by the interesting comparison between the Plans of 2024-25 and 2025-26 of Bari GP.

The best practices are well brought out like focus on poorest of the poor, Mahila Sabha and Bal Sabha, setting up of citizen support centres (sahayata kendras), mentoring by experienced peers, beneficiary committees in implementation and use of simple techniques of GIS.

What the document reveals is that where every elected representative is interested participation is easier and training becomes more effective leading to better Plans and even implementation. Though capacity building has been streamlined, it is weak in areas like Localizing SDGs and in identification of Low-Cost No-Cost activities as part of the Plan. Also VPRP needs a lot of improvement as it is not a "real" Plan now. Convergence is a major challenge and probably the best way to address it is to activate different GP level departmental committees and make them an integral part of preparation of GPDP. Also implementation requires strengthening which calls for greater attention from Block and District level officials.

The document concludes with a suggested process which is eminently doable. It is recommended that PRADAN through the Panchayati Raj Department of Jharkhand rolls this out in a large number of GPs with the help of departmental officials, SHG leaders and civil society organizations. Also the SIRDPR could be persuaded to incorporate the learning in its capacity building programme and the department of Panchayat Raj could issue detailed circulars based on the experience from below.

Let me congratulate PRADAN, ANODE Governance Lab and Welt Hunger Hilfe for this significant contribution.

S.M. Vijayanand
Chairman, PRADAN
(Former Secretary, Ministry of
Panchayati Raj, Government of India,
Former Chief Secretary, Kerala)



GPDP is the cornerstone of planning in Gram Panchayats. Far more than a planning tool, GPDP weaves together the dreams and needs of local people, uniting stakeholders—from farmers to local leaders—to shape a brighter, sustainable future. At the core of the Panchayati Raj Department's mission is a bold commitment to supercharge GPDP, empowering villages to thrive through inclusive and dynamic planning.

PRADAN's initiative of **"Process Documentation of GPDP – Experiences of best practicing GPs across Jharkhand"** in collaboration with WHH to unleash the potential of this grassroots level planning process towards a people centric development is an urgent need of the hour. This document captures the field-based practices adopted by various GPs to overcome the challenges generally faced during its implementation. In that sense it's a very practical - oriented solution - driven document.

Along with **planning** this document also seeks to strengthen the **implementation** aspects of the Gram Panchayat Development Plan (GPDP) by identifying and amplifying areas of strategic importance which is generally missing in GPDP. Drawing on emerging field-level practices, this document seeks to enhance the effectiveness of GPDP processes, improve inclusiveness in local governance and also to strengthen institutional sustainability. These action steps are intended to deepen decentralized governance and improve the overall planning and delivery framework, ultimately advancing last-mile development outcomes and community wellbeing.

This document has focused on **"Defining responsibility from State to GP level, the idea of realization of plans and thus aiming for streamlined convergence with schemes of line departments through inclusion of department officials and a focus on regular monitoring from the very beginning of GPDP"** as the foundation of its success. Department of Panchayati Raj, Government of Jharkhand is also sincerely extending all its efforts to bring efficiency and effectiveness in GPDP and I hope this document will give a fillip and bring synergy towards the efforts of State Government.

My sincere thanks to the officials of **PRADAN** and **WHH** for bringing out this valuable document.

I am quite confident about this document being beneficial to demystify the learning for effective execution of GPDP.

I wish all the success!

A handwritten signature in blue ink, consisting of a stylized 'R' followed by a flourish.

Rajeshwari B. I.A.S

**Director, Directorate of Panchayat Raj,
Jharkhand, Ranchi.**



Foreword

It is with great pleasure that I introduce the process documentation titled “The Jharkhand Approach to Gram Panchayat Development Planning (GPDP),” a key output of the Zero Hunger Panchayat initiative supported by Welthungerhilfe and the German Federal Ministry for Economic Cooperation and Development (BMZ).

This initiative, which spanned across 80 blocks in Jharkhand, was designed to strengthen decentralized, community-led planning by empowering Panchayats to address food and nutrition security challenges. In partnership with PRADAN, and led by Anode Governance Lab, this documentation presents valuable insights from the experiences, innovations, and challenges faced by nine high-performing Gram Panchayats in the region.

Beyond simply a study, this report illustrates the transformative power of empowered local governance. It highlights inclusive practices such as Mahila and Bal Sabhas, INRM-based planning, and the creation of Gram Panchayat Coordination Committees (GPCC). It also emphasizes the critical role of women leaders and community institutions in driving change. At the same time, it acknowledges key gaps, including limited understanding of budgeting, weak integration of Localized Sustainable Development Goals (LSDGs), and delays in fund disbursements.

Through a mix of field visits, focus group discussions, and budget analysis, this report offers actionable insights to inform policies, create standard operating procedures (SOPs), and enhance local capacity. It offers a clear roadmap for strengthening Panchayats as engines of equitable, inclusive development.

We are hopeful that this publication will serve as a valuable resource for practitioners, policymakers, and civil society organizations, both in Jharkhand and beyond, who are committed to building effective grassroots governance.

Rakesh Katal
Country Director,
Welthungerhilfe India



Message

The very attempt of capturing the process of the best practices of GPDP in Jharkhand is a noble attempt towards making this process more user friendly for the practitioners. This has become all the more relevant when lot of emphasis is given by MoPR on GPDP by accommodating 17 SDGs into 9 LSDGs.

This document seeks to strengthen not only planning but also its implementation aspects of the Gram Panchayat Development Plan (GPDP) which is a critical gap of this whole process.

This document captures the best practices on various processes adopted by various GPs to address the various challenges generally faced during its implementation. In that sense it's an attempt to address the issues from a practical experience from the field and thus a real time evidence-based attempt.

On the meta level this document seeks to attain an effectiveness of GPDP processes, improve inclusiveness based on institutional sustainability. This document also draws our attention towards "Defining responsibility at various nodes of implementation, pitching the idea of realization of plan through convergence with schemes of departments and a focus on regular monitoring from the very beginning of GPDP" as the foundation of its success. Department of Panchayati Raj, Government of Jharkhand is also sincerely extending all its efforts to bring efficiency and effectiveness in GPDP and I hope this document will give a fillip and bring synergy towards the effort of State Government.

My heartfelt thanks to Welthungerhilfe extending support and providing valuable guidance for bringing out this valuable document. And also, to Anode Governance lab for capturing the process meticulously.

I am quite confident that this document will be immensely helpful to bring GPDP as a vehicle to the ensure well-being of the poor and marginalized.

I wish all the success!

Sukanta Sarkar
Lead, Centre of Excellence (CoE),
Local Governance,
PRADAN



Acknowledgement

Our warmest acknowledgement is collective as it goes to all the PRI members, GP functionaries, SHG representatives and all the villagers for making such commendable work without which this document wouldn't have been seen the light of the day.

The chapters in this document have been co-authored by our valued PRADAN colleagues who have been relentlessly involved in actualizing the envisaged outcome of the Gram Panchayat Development Plan (GPDP). So, we must acknowledge their valuable contribution in making this document practical and relevant in the present development context.

We must extend our heartfelt gratitude to Anode Governance Lab for documenting the entire process so impeccably and making this document so vivid. This document wouldn't have been so meaningful without the advice and overwhelming generosity of Sasmita and Rakesh from "Welthungerhilfe". To make this more attractive and give a decent looking we shouldn't forget the contribution of our design team.

And we must extend out heartfelt thanks to the Block and District officials, The Department of Panchayati Raj, Jharkhand and finally Ministry of Panchayati Raj, Government of India for providing a congenial environment, guidance and unwavering support for the completion of the study and the release of this document.

So, the whole document is a live example of Collaboration, Connect and Catalyze.





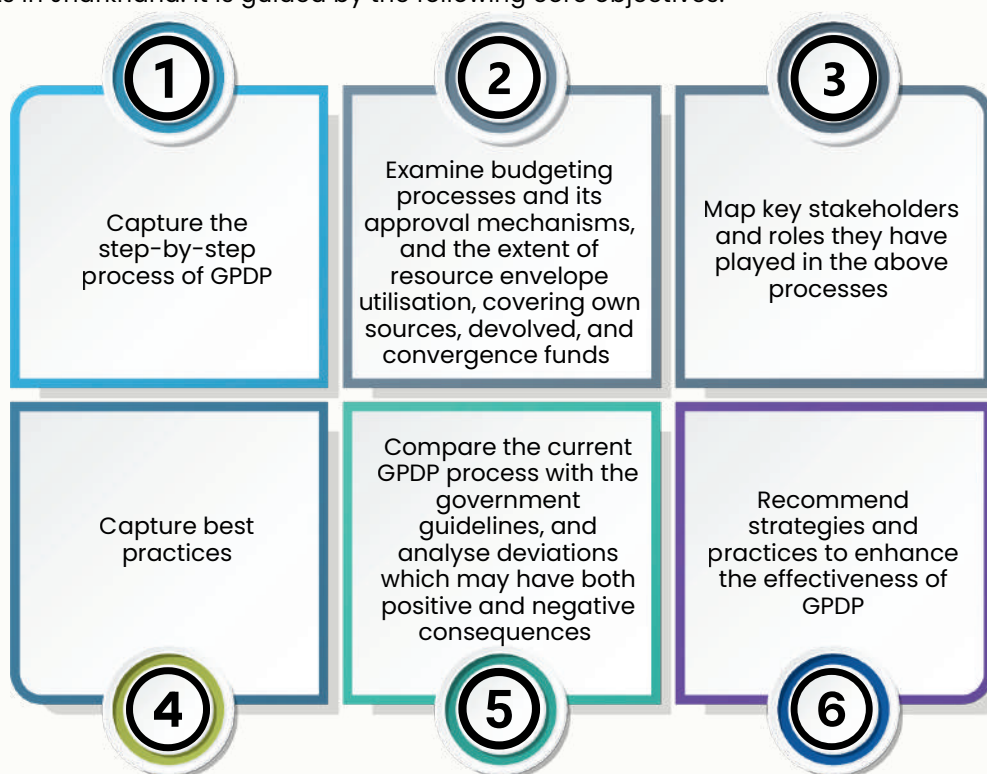
TABLE OF CONTENTS

Executive Summary	04
Chapter 1: Introduction.	07
Chapter 2: Objectives and Methodology of the study	10
Chapter 3: Stage-wise Process Documentation of GPDP	14
Chapter 4: Best Practices	40
Chapter 5: Recommendations for Strengthening Gram Panchayat Planning, Budgeting, and Implementation.	56
Annexures	65



EXECUTIVE SUMMARY

This study was undertaken to document and analyse the participatory planning and implementation of the Gram Panchayat Development Plan (GPDP) across nine well-performing Panchayats in Jharkhand. It is guided by the following core objectives:



Anode Governance Lab conducted field visits across nine districts, with sampling support from PRADAN to ensure representation across the state. These visits aimed to capture how GPDP planning is implemented at the village and Gram Panchayat (GP) levels. The field visits involved focus group discussions with elected representatives, Village Prosperity and Resilience Plan (VPRP) facilitators, citizens, GP secretaries, and MGNREGS mates. In each GP, around 10 to 15 members participated in detailed conversations, followed by debriefing sessions with district teams. A mapping exercise was conducted to assess the implementation of various interventions, while reflecting on governance mechanisms, key drivers, and associated challenges. Secondary research was conducted to analyse fund allocations and budget utilisation, providing further insights into planning and implementation. Deep inroads and significant progress has been made in the GPDP preparation process. Best practices which provide pathways for the future include emergence of growing cadre of women leaders, structured methodology to identify the ultra-poor and enable their access to benefits, prevalence of Mahila and Bal Sabhas to bring in voices and participation of women and children respectively, a mentorship model which can complement classroom training for elected members, usage of technology for Integrated Natural Resource Management (INRM) based planning, efforts to enable convergence with departments through Gram Panchayat Coordination Committee (GPCC) to strengthen the resource envelope of Panchayats, and lastly, demonstration of community leadership through Labhuk Samitis.

Areas which limit the Panchayat institutions, and by extension the GPDP process, are weak engagement of elected members, insufficient understanding of budgeting for planned activities, low understanding of convergence to expand the resource envelope, limited conversion of plans to execution, and lastly, while the Ministry of Panchayati Raj (MoPR) and the Department of Panchayat Raj (DoPR), Jharkhand, have invested in providing training on LSDGs, their understanding is yet to percolate to Panchayats.

Drawing from both the challenges encountered and the innovations observed during the study, recommendations were proposed to strengthen the effectiveness of GPDP planning and implementation, some of which are: Empowering and enhancing engagement with Ward members as governance pillars, where the mentorship model may be utilised; Focus on implementation of plans, even if it calls for revisiting planning cycles; Provide a fillip to the GPCC; Set processes to integrate GPDP with planning at departments; Invest in community structures such as Mahila Sabha and Bal Sabha, and processes to identify the ultra-poor, so as to achieve maximum inclusivity while planning.

The document comprises five chapters. Chapter 1 introduces the study, providing the context of decentralised planning through GPDP and the Localised Sustainable Development Goals (LSDG) framework, highlighting the collaborative efforts of PRADAN and the Government of Jharkhand. Chapter 2 details the objectives and methodology of the study, comprising qualitative research methods such as field visits, stakeholder interviews, and focus group discussions conducted across nine high-performing Panchayats. Field Data across 9 Panchayats, and Annexure 6: Panchayat-wise Analysis of Plans Versus Implementation. Chapter 3 documents the GPDP Process, detailing the institutional structures, planning teams, and operational steps involved in planning and implementation of GPDP at various levels. Emphasis is placed on participatory tools, inclusivity measures, and digital integration. Chapter 4 documents the innovative practices, including institutional reforms introduced at the Panchayat level—such as Mahila and Bal Sabhas, Helpdesks, INRM-based planning, and the emergence of women leaders—that have contributed to more inclusive governance. Chapter 5 consolidates our recommendations and visual representation of the Standard Operating Procedures (SOP) which may be instituted in the state of Jharkhand.

The Annexures provide information for reference, particularly on the guidelines issues by the government. Particular attention may be given to Annexure 4: Consolidated Field Data across 9 Panchayats, and Annexure 6: Panchayat-wise Analysis of Plans Versus Implementation.







CHAPTER 1:

INTRODUCTION

The chapter outlines the evolution of decentralised planning through Panchayati Raj Institutions (PRI), focusing on GPDP as a tool for participatory governance. It highlights the Project Zero Hunger Panchayat in Jharkhand, which integrates local development with SDGs to combat hunger and poverty. Anode, in partnership with PRADAN, is documenting the GPDP process to develop a replicable SOP for strengthening grassroots planning.

The 73rd Constitutional Amendment Act recognised the potential of PRIs, empowering them to prepare and implement plans for economic development and social justice. Over the following decades, various states gradually devolved planning authority to local bodies, with Kerala's People's Plan Campaign in 1996 standing out as an early and influential model of participatory planning. A more structured momentum emerged with the 13th Finance Commission (2010–2015), which increased its allocation to Panchayats towards preparation and implementation of plans. This was further reinforced by the 14th and 15th Finance Commissions, which increased allocation to Gram Panchayats, giving them greater flexibility and responsibility. The Gram Panchayat Development Plan (GPDP) process was launched by the Union Ministry of Panchayat Raj in 2015, which mandated every GP to prepare participatory, need-based, bottom-up plans through the Gram Sabha.

Project Zero Hunger Panchayat is a collaborative initiative between the Government and Civil Society Organisations (CSO) focused on improving access to social security schemes, entitlements, and livelihood opportunities. Its core objective is to eradicate hunger by ensuring all eligible families are covered and no longer susceptible to food insecurity. The Ministry of Panchayati Raj further introduced LSDGs, to enable an effective integration of SDGs within Panchayats in a focused manner. Aligning local efforts with national and global sustainability agendas, the aim of LSDGs is to promote contextualised solutions to address specific local needs, breaking down complex global goals into manageable tasks at the village level—facilitating better issue identification, solution design, and monitoring of interventions. LSDGs also to contribute to building awareness and capacity around sustainable development at the village level.

Project Zero Hunger Panchayat is closely aligned with the vision of the Department of Panchayati Raj, Jharkhand, to empower GPs, with the goal of building "Poverty-Free and Enhanced Livelihood Panchayat", which aims to create self-sufficient, poverty-free villages through a combination of social protection, livelihood enhancement, and an improved quality of life for citizens. Implemented in Jharkhand, India, this initiative is being carried out by a consortium of civil society organisations—PRADAN, PHIA Foundation, and Sampurna Gram Vikas Kendra SGVK—across 60 blocks in 14 districts, with support from Welthungerhilfe (WHH). The project contributes to reducing poverty and hunger by promoting transparency and accountability in public service delivery. At the heart of the initiative is the GPDP, a participatory local governance tool that enables household-level planning and strengthens last-mile service delivery.

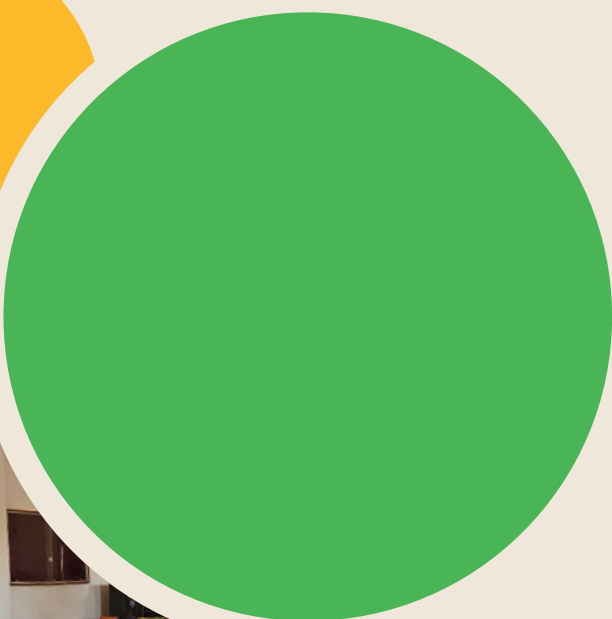
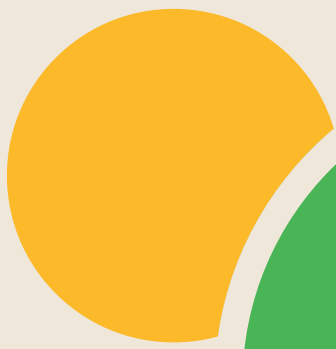
The MoPR has emphasised the importance of LSDGs, particularly LSDG 1 (Zero Hunger and Livelihoods), as a key intervention area. Recognising the need for structured and systematic planning, the DoPR, Jharkhand, has prioritised the documentation of GPDP processes to develop an SOP that can be replicated at scale.

Anode and PRADAN have collaborated since 2015 to strengthen PRIs and improve governance across India, leveraging the Gram Panchayat Organisation Development (GPOD) framework. Their key joint initiatives include strengthening PRIs in Jharkhand and Madhya Pradesh (2015–2019), enhancing GPDP in Jharkhand (2020), documenting COVID-19's impact across seven states (2021), and conducting analysis and summary of reports on Panchayat Development Index and LSDGs for the MoPR (2023). More recently, Anode has conducted research studies on the devolution status and functioning of PRI bodies across three states where PRADAN has initiated engagement with Panchayats: Bihar, Chhattisgarh, and Odisha (2023–2024), further supporting the Bihar team on deploying GPOD framework.

Anode has a deep understanding of GPs and imperatives for strengthening their institutions. Its GPOD framework is included in the National Capacity Building Framework (NCBF), 2022, MoPR. Anode brings its understanding of Panchayats and Organisation Development principles to capture the process, lacunae and strengths of the GPDP process being pursued in Jharkhand.

PRADAN commissioned Anode to document the processes involved in the creation and execution of the GPDP in Jharkhand, to be conducted over four months from February to May 2025. This documentation is to serve as a reference for stakeholders, facilitate capacity building, and support policy formulation. This qualitative and exploratory study, employing a mixed-methods approach, aims to develop an SOP for the entire GPDP planning process and its implementation from a practitioner's perspective. By capturing methodologies, challenges, successes, and lessons learned, the study will contribute to institutionalising best practices and enabling the effective replication of GPDP across Jharkhand.





CHAPTER 2:

OBJECTIVE AND METHODOLOGY OF THE STUDY

This chapter outlines the objectives of the study, which aims to critically examine and document the end-to-end GPDP process in nine high-performing Panchayats identified by PRADAN. Further, it describes the methodology of the study, including its sampling strategy.

2.1. OBJECTIVES OF THE STUDY

This qualitative and exploratory study aims to critically examine the GPDP process as practised by nine high-performing Panchayats in Jharkhand. It also examines the extent to which LSDG themes have guided and strengthened the planning process, with special emphasis on:



The study is guided by the following objectives:

- Capture the step-by-step process of GPDP process (prioritisation, planning, approval and finalisation, entry into eGramSwaraj and implementation, with particular focus on LSDGs1, 4 and 9. References will be drawn from the list of indicators in the Panchayat Development Index keeping in mind the focus areas of PRADAN.
- Examine budgeting processes and its approval mechanisms, extent of resource envelope utilisation, covering own sources, devolved, as well as convergence funds.
- Map the key stakeholders and roles they have played in the above processes.
- Map new initiatives/ interventions and structures developed to enhance the capacity of GP members for effective planning, budgeting, approval, and implementation.
- Compare the current GPDP process with the government guidelines and critically analyse the deviations which may have both positive and negative consequences.
- Recommend strategies and practices based on the study to enhance the effectiveness of GPDP

This study ultimately aims to contribute to the strengthening of decentralised governance by providing evidence-based strategies for enhancing planning processes and ensuring that development efforts are inclusive, equitable, and sustainable.

2.2. METHODOLOGY

The study combined fieldwork with analysis of relevant secondary data to gain a comprehensive understanding of planning and implementation of GPDP.

Primary Data Collection: The study employed multiple qualitative methods, including:

- Focus Group Discussions (FGDs) and semi-structured interviews with stakeholders at three administrative levels—Village, GP, and Block—to capture diverse perspectives on the planning process.
- Case studies to document best practices, innovations, and challenges faced during GPDP formulation and implementation.
- Team reflection sessions with PRADAN field staff to gather practitioner insights and internal observations based on their ongoing field engagement.

Secondary Data Analysis: To complement primary data, secondary research involved:

- Review of relevant government guidelines, circulars, and policy documents related to GPDP.
- Analysis of GPDP implementation status and physical progress reports, sourced from the eGramSwaraj Portal.

Specific methods are listed below:

Research Method/Tool	Proposed Participants	Sample Size	Total
Team reflection to understand process and engagements, and debriefing post the field visit	District PRADAN team	1 per District	9
Interviews at the Block level	Block Coordinator- Panchayati Raj Department, BPRO and DPRO - Panchayati Raj Department, Master Trainer, DMFT- Senior Programme officer	2 Blocks	5
Focus Group Discussions (FGDs)	Panchayat representatives, Sachivs and MIS officers, Citizens, Self Help Group (SHG) representatives, VPRP Facilitators, MGNREGS Mates	1 per GP (10–15 participants each)	9
Focus Group Discussion: Vulnerable Households Inclusivity parameter - to be done by PRADAN professionals	Stratified by gender, caste, class and their intersection	2 GPs	2

Table 1: Methodology for the Study

Sampling Strategy

The study was conducted across five major regions of the state, covering nine districts of Jharkhand, with one GP selected from each district, representing a distinct Block. The districts and their corresponding Blocks covered during the study were: Gumla (Ghagra Block), Khunti (Torpa Block), Lohardaga (Senha Block), West Singhbhum (Sonua Block), Hazaribagh (Tatijhariya Block), Bokaro (Jaridih Block), Ranchi (Lapung Block), Dumka (Shikaripara Block), and Godda (Poriyahat Block).



Table 1: : Sample Panchayats

For additional information, please refer to Annexure 4.

01. Khaira, Tatijhariya
02. Sehal, Ghagra
03. Ugra, Senha
04. Danekera, Lapung
05. Husir, Torpa
06. Bari, Sonua
07. Bargacchya Hariyari, Poriya hat
08. Khuspahari, Shikaripara
09. Chilgora, Jaridih



CHAPTER 3:

STAGE-WISE PROCESS

DOCUMENTATION OF GPDP

The chapter describes the key stages of GPDP planning (Preparation; Planning; Prioritisation, Budgeting and Finalisation; and lastly, Implementation and Monitoring), and the extent to which the process was inclusive and participatory. It presents how existing governance structures were leveraged, and multiple stakeholders engaged, starting with describing PRADAN's engagement with the DoPR, Jharkhand. It explores best practices and innovations developed and followed during the process and further examines both challenges and enablers across different stages of preparation and implementation of GPDP. The chapter also highlights the triggers and barriers that must be addressed to enhance process efficiency. Given the exploratory and qualitative nature of the study, which involved extensive engagement with GP members, Village Organisations (VOs), and local staff through FGDs, the chapter presents an understanding of the on-ground realities

The details of the planning process followed across the nine GPs has been documented in **Annexure 4: Consolidated Field Data Across Nine Panchayats**, mapping the process in accordance with the state guidelines. This documentation will help observe patterns in how the prescribed steps were implemented at the GP level, and the roles played by various governance structures in the process.

Drawing from the central guidelines issued under the People's Plan Campaign for the Preparation of Panchayat Development Plan 2024–25, states are encouraged to contextualise the GPDP process to suit local needs and develop governance structures. In line with this, PRADAN's Centre of Excellence for Local Governance works closely with the DoPR, Jharkhand.



Joint Collaboration between the MoPR, the DoPR, Government of Jharkhand, and PRADAN

To provide impetus to the Ministry's imperative on strengthening planning processes, the DoPR, Jharkhand, has set up a State Programme Management Unit (SPMU), towards deployment of innovative, community-driven interventions developed under the GPDP 2024–25. PRADAN has placed its professionals within this body to support the SPMU. This is facilitated by PRADAN's ongoing engagement, in collaboration with the DoPR, Jharkhand, across 200 GPs to strengthen their planning and implementation processes, with specific focus on LSDGs 1, 4, and 9.

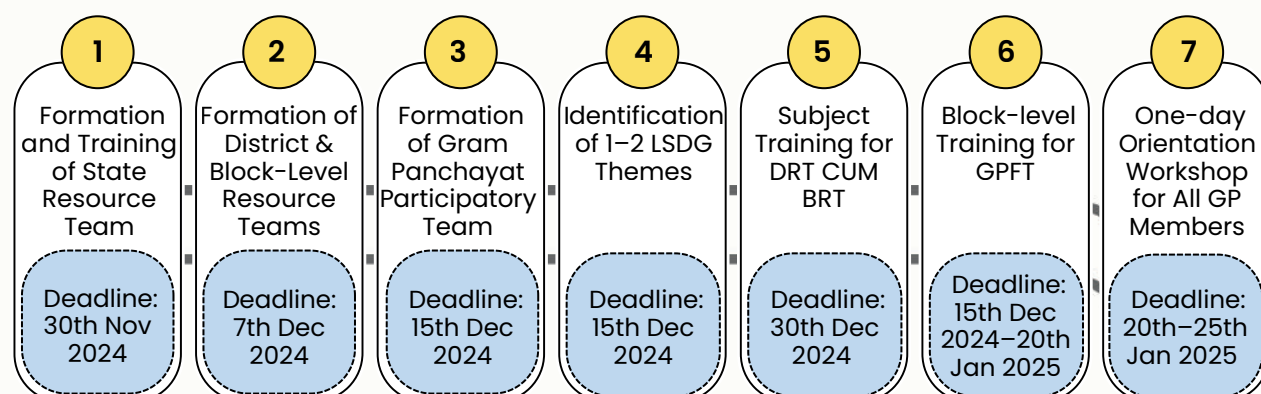
The SPMU has been instrumental in conceptualising and launching several flagship schemes such as the Digital Panchayat Yojana, Panchayat Gyan Kendra, Panchayat Sudrikaran (Renovation), and the Panchayat Help Desk. It has developed detailed concept papers for each initiative, leading to direct budget allocations and improved service delivery at the GP level. With support from Kerala Institute of Local Administration (KILA), the unit has facilitated ISO certification for 31 GPs, helping to standardise service delivery. The SPMU has also supported the formation of Panchayat Secretariats and the deployment of essential personnel, including Panchayat Sahayaks and Gram Sabha Mobilisers, further institutionalising Panchayat Bhavans as hubs of local self-governance.

Towards strengthening the GPDP process, the SPMU has revised the guidelines to promote participatory, inclusive, and SDG-aligned planning. It has actively engaged with CSOs towards revising guidelines, and introduced interactive training modules using role plays, street theatre, and digital tools. Exposure visits and district-level planning workshops were also conducted to build the capacity of the District Resource Team (DRT). The SPMU's aim is to evolve GPDP into a systematic, bottom-up process addressing local priorities like health, nutrition, livelihoods, and child protection. In collaboration with the DoPR, state-specific GPDP guidelines have been developed, outlining roles, responsibilities, timelines, and training frameworks.

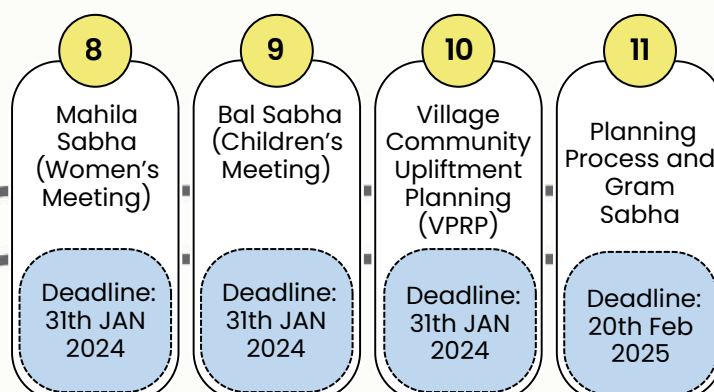


The table below outlines the process and composition of the Gram Panchayat Planning and Facilitation Team (GPPFT) as defined in the state guidelines (dated 12/09/2024)[1]

PREPARATORY PHASE



PLANNING PHASE



PRIORITISATION, BUDGETING AND FINALISATION PHASE

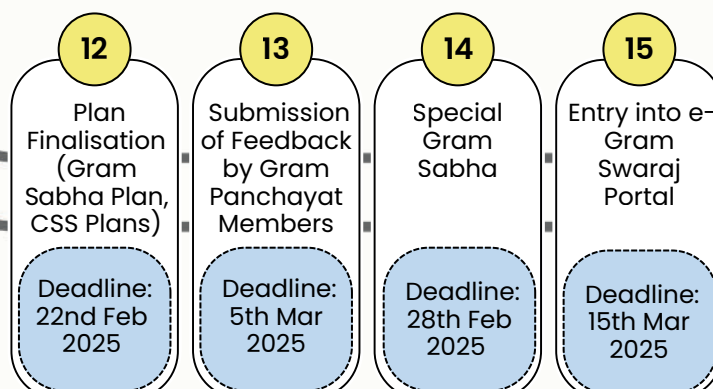


Figure 2: Illustrated based on Jharkhand Guidelines for GPDP, 2024–25 (Source: Annexure no: 4.4)

Key steps followed during each of the above stages are described in the next page.

[1] The GPDP (Gram Panchayat Development Plan) guidelines for the year 2022–23 had a timeline from 15th December 2022 to 31st January 2023, covering a period of approximately 1.5 months. For the year 2023–24, however, the timeline has been extended from 15th November 2024 to 22nd February 2025, spanning about 3.5 months. This extension has been made in consideration of the elections in Jharkhand, along with the need to accommodate training at various levels, departmental engagement, and the deployment of essential resources during the election period.



3.1. PREPARATORY PHASE

3.1.1. Step.1: Support Structures at the State, District, Block, and GP levels:

To ensure effective implementation, **nodal officers have been appointed at every administrative level**, from the state to the GP level. At the state level, the Director of Panchayati Raj serves as the nodal officer, while at the district and block levels, senior officials such as the Additional Development Commissioner and Block Development Officer are designated for this role. At the GP level, the Panchayat Secretary is assigned this role. The role of these officials is to coordinate and monitor the planning campaign, facilitate inter-departmental convergence, and ensure compliance with both central and state guidelines. They are also to provide support to the GPPFT and District Planning Committees, while overseeing all reporting and monitoring activities throughout the campaign cycle.

Under the guidance of the state, the **DRT and Block Resource Team (BRT)** (Refer to Annexure number 5.2) were constituted to support the GPDP process. These teams comprised key stakeholders, including the Block Coordinator (Panchayati Raj), a Livelihood or Social Development Specialist from Jharkhand State Livelihood Promotion Society (JSLPS), representatives from MGNREGS cell (AE/BPO), WDC/PMKSY/JJY-WTD, and the SBM. In addition, the teams included master trainers and resource persons from CSOs with expertise in INRM, livelihoods, or health, with the elected Mukhiya being the lead community representative.

The primary responsibility of the DRTs and BRTs was to oversee all aspects of GPDP formulation, support the development of **thematic and integrated plans**, ensure adherence to planning procedures, and provide hands-on training and guidance to the GPPFT at the village level.

Another additional structure for providing support towards GPDP this year was the **Village Level Entrepreneurs (VLEs)** to support GPs in uploading the GPDP to the eGram Swaraj Portal (Refer to Annexure number 5.7). In the previous years, this responsibility was handled by Block-level officials, but the process encountered several challenges across the state. These included delays in the finalisation of plans by GPs, limited understanding of the planning process, and inadequate budget allocations. As a result, many GPDPs—particularly sections under flagship programme and the VPRP—ended up being largely replicas, lacking clarity and proper budgeting.

Additional issues such as insufficient human resource at the Block level, poor internet connectivity, and weak coordination between GP functionaries and Block staff further hampered the process. These difficulties often led to delayed or incomplete uploads, negatively impacting the quality and timeliness of the planning effort.

To overcome these challenges, the state government issued a directive this year to engage VLEs through Common Service Centres (CSCs) at the GP level. VLEs were trained by District authorities, and the districts closely monitored the uploading process to ensure accuracy and timely completion. This change has led to several positive outcomes: the process is more decentralised and efficient, local-level ownership has increased, and the involvement of digitally skilled VLEs has helped bridge the technology gap in rural areas. With the involvement of VLEs, coordination has improved significantly, as they can now sit together with GP members to review and understand the plans before uploading them. This collaborative approach has reduced the scope for errors considerably. GP members can

now access the eGramSwaraj Portal directly from their own GPs. This increased involvement with the technological aspects of the planning process is also helping them become more comfortable and confident in using digital tools. Most importantly, GPs can now actively monitor the status of their plan uploads in real time and exercise better quality control.

3.1.2. STEP 2: FORMATION OF THE GPPFT

The GPPFT is designed as a seven-member facilitation team to be formed at each GP to support the GPDP process. According to the guidelines, the GPPFT should include:

S. No	Member Description	Number
1	Panchayat Secretary/ Employment Assistant (Team Coordinator)	1
2	VPRP Facilitator (NRLM)	1
3	Ward members of GP-level Theme-based Standing Committees (subject-specific)	2
4	Frontline Worker (subject-specific)	1
5	Representatives from CSOs or Community Based Organisation (CBOs)	2
Total		7

Table 2: Composition of GPPFT, refer to Annexure number 5.3

This composition is to ensure representation from elected bodies, functionaries, thematic experts, and community organisations. With the mandatory presence of a CSO representative, a PRADAN professional or Community Resource Person (CRP) could be a part of each GPPFT. GPs were to discuss and finalise the GPPFT composition during their monthly meetings and subsequently share the list with Block and District-level Panchayati Raj authorities. As per the GPDP guidelines, the formation of the GPPFT was envisaged to be theme-wise. This approach is intended to build capacities around the LSDG themes chosen by each GP for themselves.

Prior to the selection of the GPPFT, one-day theme identification workshops were conducted at Block level, for the Mukhiyas and Secretaries of GPs. The objective of these workshops was to build their understanding of the nine LSDG themes. The participants were to conduct similar workshops in their GPs, and facilitate the process of identifying thematic areas where their GPs are lagging and develop the GPDPs accordingly. Based on the theme identified, the GPPFT selection was to ensure that it comprises members who possess some understanding of those themes and can contribute meaningfully to the planning process. However, as there was almost a 2 month gap between the Block level training and the GPPFT selection at GPs, there was little recall of themes during the selection process. Going forward, with better understanding of LSDG themes, the subsequent GPPFT selection can be more aligned.

Case of Urga GP – Leveraging the GPCC for Formation of GPPFT

Context

Urga GP is located in the Senha Block of Lohardaga District and comprises six villages under its jurisdiction. Urga GP fosters a well-coordinated and participatory environment, with strong alignment among the Mukhiya (Sarpanch), Ward members, Secretary, and VPRP facilitators. The current Mukhiya is experienced in Panchayati Raj governance and recognises the importance of collaboration among key stakeholders. Upon receiving an official directive from the Block administration to form the GPPFT, Urga GP adopted a participatory approach to the GPDP. Recognising the need for early and inclusive planning, the GP chose to utilise the existing GPCC platform. The GPCC, which convenes regularly and includes frontline workers, departmental representatives, and Block-level officials, served as an ideal forum for integrated and collaborative decision-making.

Problem Statement

The key challenge faced by the GP was to form the GPPFT in a way that ensured broad-based inclusion, transparency, and meaningful community engagement. Relying on the Gram Panchayat Executive Committee (GPEC), which includes elected representatives and Panchayat staff, risked narrowing the process and excluding critical voices from various departments and service providers. The GP needed a method that not only ensured convergence of different stakeholders but also generated local ownership of the planning process, while empowering the GPPFT members to perform their roles effectively and visibly within the community.

Steps Taken

In response, Urga GP convened a GPCC meeting shortly after receiving the directive. The meeting provided a space for open discussion with all relevant stakeholders and focused on forming the GPPFT through a participatory and transparent process. The Panchayat stressed the importance of selecting individuals who had demonstrated interest in development work, had prior training or experience in mobilisation, exhibited leadership qualities, and were available and willing to actively support the GPDP process. Each prospective member's ability to contribute meaningfully to the intervention was carefully considered.

During the meeting, the roles and responsibilities of GPPFT members were outlined, and community members were encouraged to engage with and support the process. A key outcome of the meeting was raising awareness within the larger community about the GPPFT— its composition, purpose, and the role of each member. This helped ensure accountability and gave members a strong sense of ownership and clarity about their responsibilities. The use of the GPCC platform, rather than limiting the discussion to the GPEC, proved to be instrumental in broadening participation and building trust early in the planning phase.



Name: From right to left. Basanti Devi Mukhiya -Ugra Gram Panchayat, Durgawi Devi- VO Adhikashya, Basanti Devi-VPRP facilitator

Results

Urga's decision to engage the GPCC in the formation of the GPPFT resulted in a participatory, transparent, and community-driven planning process. The inclusive method enhanced early community engagement in the GPDP, fostered alignment among various stakeholders, and created strong momentum for collaborative planning. The GPPFT members, having been selected thoughtfully and with inputs from the community, were well-prepared, accountable, and committed to their roles. The process also promoted institutional convergence, allowing different departments to align their efforts and resources with actual ground-level needs. As a result, Urga GP's approach has been recognised as a best practice, offering a replicable model for other GPs aiming to strengthen inclusive governance, ensure effective community mobilisation, and develop integrated local development plans.



3.1.3. EMBEDDING LSDG THEMES IN DECENTRALISED PLANNING

As a recap to the reader, the MoPR has taken a significant step toward aligning decentralised governance with the 17 SDGs by consolidating them into nine thematic areas, widely known as the LSDG themes. This alignment is to serve to make the global SDG framework more understandable and actionable at the village level. Grouping the 17 goals into nine broader themes is to aid GPs to reflect on different categories of development challenges based on the LSDGs, prioritise based on local realities, and thereby channel their planning efforts toward these themes. LSDGs are to serve as instruments for integrating the SDGs into the GPDP.

The 9 LSDG themes are:

1. Poverty-Free and Enhanced Livelihoods Village
2. Healthy Village
3. Child-Friendly Village
4. Water-Sufficient Village
5. Clean and Green Village
6. Village with Self-Sufficient Infrastructure
7. Socially Just and Socially Secured Village
8. Village with Good Governance
9. Women-Friendly Village



Based on the training provided to the Mukhiyas and Secretaries (Section 3.12), GPs were to identify 1-2 LSDGs themes as priorities, as basis for preparation of plans. PRADAN, working in close coordination with the state, has been strategically focused on three key LSDG themes: 1, 4 and 9.

Under LSDG 1, PRADAN has, among other actions, supported GPs in the **identification of ultra-poor** households, linking them to appropriate **social security schemes**, and enabling asset-based livelihood development through livestock, small enterprises, and skill-building. The objective is to transition these households from extreme vulnerability to socio-economic inclusion and long-term resilience.

LSDG 4 emphasises water sufficiency through INRM. PRADAN facilitated planning and construction of water harvesting and conservation structures under MGNREGS, which simultaneously promote ecological balance. The emphasis is on holistic watershed-level planning, ensuring access to water for agriculture as well as domestic use, and sustainable livelihoods.

LSDG 9, a cross-cutting theme, seeks to create women-friendly villages by mainstreaming gender into local governance. PRADAN's interventions focus on strengthening women's leadership, particularly supporting women Mukhiyas, empowering VO Adhyakshas, and establishing GP Help Desks. These efforts aim to amplify women's voices in planning, implementation, and decision-making, towards inclusive and gender-sensitive governance.

While PRADAN's emphasis is on the three themes and plans have been implemented accordingly, the concept of LSDGs is yet to seep into the local parlance and understanding. Field visits revealed that most elected representatives have limited recall or awareness of the LSDG themes, and the integration of themes into GPDPs is often inconsistent. In many instances, GPs have mostly carried forward last year's themes without reassessing their relevance to current needs. As one Mukhiya noted, "We have just started to understand these things. We need more time to embed them properly into our planning."



Figure 3. Training of DRTs and BRTs

The LSDGs present an empowering opportunity to reflect on development goals, paradigms on discrimination on caste, class, gender and other socio-economic barriers. However, to do so, it is imperative that GPs understand the spirit behind LSDGs and exercise their freedom to decide what they want to focus on. This will, however, require time.

It is hoped that GPs focus on the same themes for two to three years to ensure enhanced understanding, improvement and consolidation.

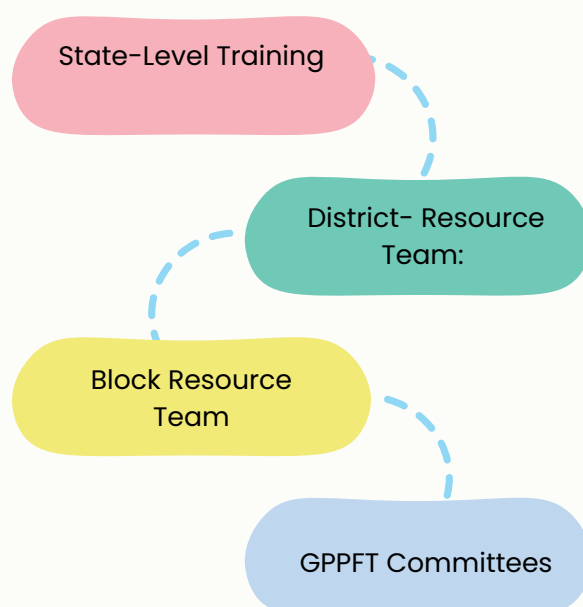
3.1.4. STEP 3: TRAINING OF THE GPPFT MEMBERS

Training of GPPFT members was planned to help them support the GPDP process. This training initiative was executed through a cascade training model, involving the formation of dedicated support teams at multiple administrative levels, namely, the State Resource Team (SRT), DRTs, and BRTs.

Members from the DoPR, JSPLS, SBM, and PRADAN collaborated to design and conceptualise the training modules.

Training Cascade Structure:

- **State-Level Training:** A four-day training programme was organised for the SRT.
- **Division-Level Training:** The trained SRT conducted a four-day training programme for the DRTs at the Divisional level.
- **District-Level Training:** DRT further conducted a three-day training programme for the BRTs at the District level.
- **Block-Level Training:** Finally, the trained BRTs conducted a three-day training session for the GPPFTs at the Block level.



Through this cascade model, 596 individuals from DRT and BRT teams were trained to support the preparation of the GPDP.

For GPPFTs, participation in this training was crucial, as it allowed its members to immerse themselves in the planning process and build the necessary skills to facilitate it within their communities. The SRT, constituted to support and oversee the entire GPDP formulation process, was to guide thematic planning, ensuring smooth implementation, apart from training district and block-level resource teams. The SRT included representatives from the Department of Panchayati Raj (SPMU/SPRC), experts from CSOs in key areas such as INRM, livelihoods, health, and women and child development, along with representatives from JSPLS, MGNREGS, SBM, and JSWM. The DRT and BRT team included Master Trainers and Lead Master Trainers and CSO professionals. The team also included Master Trainers and Lead Master Trainers from the Panchayati Raj Department. Their work involved regular monitoring and reporting to the State Coordination Committee, capacity-building of resource teams at various levels, and creating systems for tracking progress.

Training to GPPFT focused on fostering a participatory planning environment at the revenue village level, utilising tools such as social and resource mapping and INRM planning to facilitate both individual and community-based asset creation. Special emphasis was placed on activating inclusive platforms like the Mahila Gram Sabha and Bal Sabha to ensure that the specific needs of women and children were identified and meaningfully integrated into the planning process.



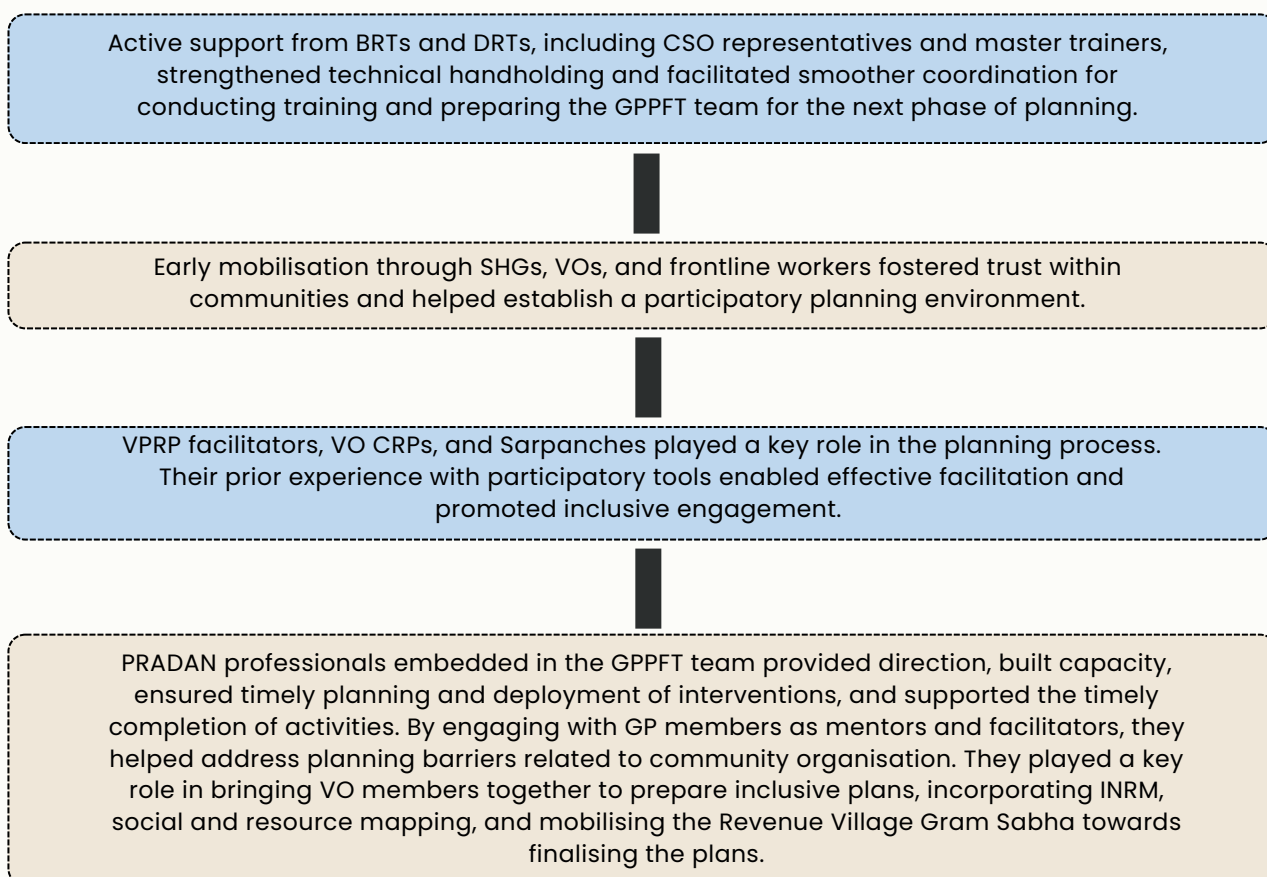
The training evoked a departure from primarily construction-oriented planning approaches by encouraging discussions on complex social issues and promoting inclusive, need-based development. A variety of participatory methods and interactive games were incorporated, creating an immersive and engaging learning environment. These hands-on activities enabled GPPFT members to internalise key concepts, understand the essence of community-led planning, and gain the confidence to implement these practices effectively in their respective GPs. This comprehensive training process was to lay a strong foundation for inclusive, bottom-up planning across the state.

In most GPs, however, not all GPPFT members were able to attend all three days of the training workshop. Many Ward members expressed hesitation and frustration as other participants—such as government staff or salaried representatives—received honorariums or compensation for their time, while Ward members were not provided any incentives. As a result, attendance at the Block-level training averaged around 50–60% across most GPs.

Exceptions like Urga, Kushpahari and Bari stood out, where all GPPFT members participated in the full training programme. In our conversations with these GPs, we understand that this participation in trainings was brought up at the time of GPPFT formation during discussions within the GPCC. It was clearly communicated that any member wishing to be part of the GPPFT must commit to attending all days of the training. This proactive stance reflected the need for enrolment from the outset to ensure that GPPFT members have the necessary time, resources, and willingness to engage. This approach highlights an essential governance mechanism—ensuring that the structures, support, and motivation are aligned.

As per our observations in the nine sample GPs, some of the challenges and enablers during the preparatory phase are listed below.

Enablers:



Existing Gaps:

Understanding of LSDG themes, at present, is limited among GPs. The linkage of plans to LSDG themes, therefore, is presently not an organic process.

GPPFT members, especially elected Ward members, often participated without receiving any honorarium, unlike other salaried stakeholders. This disparity contributed to reduced participation, particularly during the three-day training sessions.

Linked to the above, on an average, only 50% of GPPFT members attended the training, resulting in a limited pool of fully trained resources at the GP level. Additionally, the percentage of members who attended all three days was even lower, leading to inconsistencies in the training levels among GPPFT members.



3.2. PLANNING PHASE

3.2.1. Step 1: Preparation for Planning Process

Following the initial training, the GPs initiated discussions during the GPEC meeting to roll out the participatory planning process across its revenue villages. The goal was to organise a three-day planning exercise in each revenue village to engage with the community and gather their inputs, which was to be conducted by the members of GPPFTs.

However, some challenges were identified at this stage. A major concern was the limited timeframe available to conduct the three-day planning process in each village. Additionally, there were varying levels of leadership capacity among the GPPFT members, to independently lead and facilitate these sessions effectively. Ensuring active community engagement and maintaining a participatory environment required strong facilitation skills and commitment.

A significant support emerged from the VO groups and Gram Pradhans (in PESA areas), who played an important role in mobilising the community and assisting in logistical arrangements. Their involvement added strength to the planning process.

To manage the implementation efficiently, a roster was developed to assign specific team members of GPPFTs to conduct the three-day planning exercises across different villages. This allowed the GPPFT teams to effectively cover all revenue villages and ensure that even the hamlets (smaller habitations) within each revenue village were included in the process.

While the process was conducted in all revenue villages, the quality and consistency of implementation varied, due to varying levels of capacities among GPPFT members, or where the village was very remote. Further, participation of the community was low where the ward member was not engaged, and VO members were not actively involved.

3.2.2. STEP 2: IMPLEMENTATION OF THE 3-DAY PLANNING PROCESS IN EACH REVENUE VILLAGE

Public announcements were made in villages prior to the planning process to mobilise communities. In many instances, SHGs discussed the agenda in their respective meetings to further engage and prepare residents for the upcoming three-day planning process. This contributed significantly to community mobilisation across different levels and instances.

Day 1: Introduction to GPDP Planning and Co-designing Social and Resource Mapping

The first day focused on introducing the GPDP. Community members were sensitised about the significance of the planning process, their roles, and the importance of inclusive participation. This laid the foundation for collective ownership and active involvement.

Participatory social and resource mapping were conducted with the community members. Together, they developed a detailed village map that included all households, roads, water structures, schools, and Anganwadi centres. Each household was numbered to ensure complete coverage and to prevent any exclusion.

Social Map: Community members engaged in discussions about the social structure and the availability of government resources in the village. This resulted in a 'Social Map' that illustrated the village layout and highlighted the socio-economic composition of the village- ultra-poor households, ST/SC, primary economic activities of the villagers.

Resource Map: This was created using the village revenue map, identifying land types, water sources, and forest areas. Every piece of land in the village was marked, using colour codes for clarity—green for fertile land, yellow for residential areas, and blue for water bodies.



Figure 4. Social and Resource Maps of the Bargachaha Hriyari Gram Panchayat

Day 2: Transect Walk and INRM Plan Identification

On the second day, resource mapping assessed the status of existing assets and services, identifying infrastructure gaps, unmet household needs, and opportunities for alignment with government schemes facilitated by GPPFT members and ward-members. It also supported INRM by highlighting available assets and guiding future interventions. The Activity Map documented past water-related projects by other departments, mapping the locations of ponds, tanks, and other water structures, which helped inform new planning. A transect walk was conducted by

villagers, covering streams, hills, fields, forests, and gardens, where they discussed potential constructions and livelihood opportunities specific to each area. Based on the terrain, various interventions were proposed, such as plantation in sloped areas, levelling rocky areas, deepening old ponds, and creating trenches in forests. This entire process was carried out using Participatory Rural Appraisal (PRA) tools.

Day 3: Finalisation and Documentation of Plans

The third day was dedicated to consolidating and finalising the plans developed over the previous two days. These plans were reviewed by the community and formally documented in the meeting minutes and captured in a map. During the final Plan Map discussion in the village meeting, area-specific plans were outlined and visually presented. Final approval was given by the Gram Sabha of the respective revenue village, to enable validation and transparency.



Case of Husir GP, INRM-based Planning

Context

Husir GP, located in the Torpa Block of Jharkhand, consists of five revenue villages: Husir, Gopla, Latauli, Ronhe, and Kumang. With a population of 5,753 and approximately 1,729.2 hectares of arable land, the GP is in a region that holds significant potential for agricultural development and natural resource management. However, challenges such as water scarcity, poor land use planning, and insufficient community awareness about sustainable practices have hindered the effective utilisation of its resources. Recognising the need for a holistic approach, the GP adopted INRM as a key component under the GPDP to improve local livelihoods and ecological sustainability.

Problem Statement

In Husir, the absence of an integrated planning approach has significantly hindered the quality of life. Unregulated use of natural resources—particularly land and water—has led to environmental degradation, declining agricultural productivity, and unreliable access to water for both irrigation and domestic needs, especially in remote hamlets.

While multiple government schemes were in operation, their implementation remained fragmented and lacked convergence. Community engagement in the planning process was also minimal. GPEC meetings were irregular or merely symbolic, and the perspectives of marginalised groups—such as women, tribal communities, and landless households—were often excluded. This limited participation not only weakened local ownership and transparency but also led to asset creation in silos, reducing the long-term impact.

Steps Taken

Following specialised training conducted by the BRT, the GPPFT returned to their respective GPs to lead a structured, three-day village-level planning exercise focused on INRM. This participatory process actively engaged villagers in creating detailed social, resource, and activity maps to analyse the village layout, natural assets, and existing infrastructure gaps. Field visits were conducted to assess various land types and identify site-specific interventions such as deepening ponds, constructing trenches in forested areas, and initiating plantations on sloped terrain.

Armed with the tools and techniques acquired during the training, GPPFT members facilitated community orientation sessions to promote informed and inclusive grassroots planning. Each plan was categorised by the concerned implementing department.

Most plans were to be implemented under MGNREGS. These consolidated village development plans were formally submitted to the relevant departments for implementation. In total, 202 plans were developed during FY 2025–26, all under the MGNREGS framework, covering four villages. Of these, 166 plans focused on INRM-related interventions such as construction of check dams, bunding, pond rejuvenation, and land levelling. Additionally, 34 plans targeted the creation of water-holding structures, including wells, ponds, and small dams, while two plans focused on horticulture plantations.

Results

There was a significant increase in community awareness and ownership around INRM. The community actively contributed to planning and implementing both community and individual-level structures like farm bunds, trenches, compost pits, and small irrigation channels. The successful mango plantations on private and common lands became a model for combining ecological restoration with livelihood enhancement. Inclusion of women and children ensured broader participation, while leveraging MGNREGS supported effective implementation and long-term sustainability.



Photo includes Mukhiya -Pradeep Gurial along with the Ward members; Savitri Gudia, Ward member

Name: From right to left. Basanti Devi Mukhiya -Ugra Gram Panchayat, Durgawi Devi- VO Adhikashya, Basanti Devi-VPRP facilitator

3.2.3. Step 3. Mahila Gram Sabha

States like Maharashtra and Odisha^[2] have amended their respective Panchayati Raj Acts to mandate the formation of Mahila Gram Sabhas (Women's Village Meetings). These reforms aim to enhance women's participation in local governance by institutionalising dedicated forums where women can collectively discuss and prioritise their concerns.

Typically held before the main Gram Sabha, Mahila Gram Sabhas provide women a safe and inclusive space to raise issues that directly affect them, ensuring that their voices are represented when broader community decisions are made. These amendments are part of a wider movement toward gender-inclusive governance and the empowerment of women at the grassroots level.

Mahila Gram Sabhas and SHGs serve distinct but complementary purposes in advancing women's empowerment. SHGs are informal collectives focused on economic advancement through savings, microcredit, and livelihood initiatives. They foster financial independence and community-based support for income generation.

In contrast, Mahila Gram Sabhas are formal, often legally mandated platforms under the Panchayati Raj framework, bringing together all women voters of a GP to deliberate on critical issues such as health, education, social justice, and gender-based violence. While SHGs function outside the formal governance structures and focus on capacity building from below, Mahila Gram Sabhas serve as institutional mechanisms to facilitate women's direct participation in governance and decision-making. Together, these two platforms address both the economic and political dimensions of empowerment.

The GPDP guidelines specify that Mahila Sabhas should be conducted at the GP level (Refer to Annexure number 5.6). In Jharkhand, this guideline was implemented for the second time by the State's Panchayati Raj Department. The move was significant as it formally recognised a governance space exclusively for women within the Panchayat structure. However, this inclusion also exposed underlying inequities in how governance spaces are accessed and used. Organising Mahila Sabhas provided a structured environment for discussing complex and often stigmatised issues such as sexual and reproductive health, early child marriage, and the deeply entrenched practice of witch-branding (Dayan Pratha).

These are issues that require deliberate, sensitive dialogue and an understanding of the socio-cultural narratives that perpetuate them, rather than one-time solutions focused only on visible symptoms.

In several GPs, Mahila Gram Sabhas were conducted at the GP level as prescribed by the guidelines. These gatherings saw the participation of around 50 to 70 women, who came together to discuss a range of issues affecting their lives. For many women, this was the first time they experienced a formal space within the local governance structure where their voices were not only heard but taken seriously. This marked a significant shift—moving beyond the confines of SHG spaces to an official governance platform actively promoting women's participation.

This contributed to a sense of belonging among women and recognition in local governance—not as passive beneficiaries but as contributors shaping public decisions. This transition signifies an important move from informal women-centric spaces to more institutionalised forums where women's voices influence planning. GPs such as Urga, Chilgora, and Bari effectively utilised this space for gender-focused planning. The initiative introduced Mahila Gram Sabhas as inclusive platforms, creating safe and participatory environments for women to deliberate on critical and often overlooked issues.

^[2] Maharashtra – Meetings of Gram Sabha (Section 7, Point 5): The meeting of the women members of the Gram Sabha shall be held before every regular meeting of the Gram Sabha. Odisha: Similar initiatives have been introduced or promoted through state-level amendments and executive orders.



“Mahila Gram Sabha was a great chance for all women—even those who are not in SHGs yet—to come together, speak up, and share issues about poverty, livelihood, and things that affect their daily lives. It shouldn’t just happen during planning time. If Mahila Sabha becomes regular, more women will join in and actually start to understand what is happening in the Gram Panchayat,” says a VO Leader from Kushpahari GP.

Several key topics emerged during these discussions:

- **Health and Menstrual Hygiene:** Women shared their challenges related to access to sanitary napkins, their proper usage, and safe disposal. There was a strong call for reducing the cost of sanitary products, installing vending machines for easy access, and setting up proper disposal mechanisms.
- **Alcoholism and Domestic Violence:** The Sabhas allowed women to openly discuss the damaging effects of alcoholism and domestic abuse on families and communities. These forums also helped women understand how to seek support and, when necessary, register complaints with the police.
- **Migration and Youth Issues:** An important observation was the increasing dropout rates among boys compared to girls, attributed largely to seasonal migration and rising substance abuse. This trend was highlighted as an emerging concern for community well-being and youth development.
- **Early Pregnancy and Nutrition:** A few cases of early pregnancy among minor girls were reported. Although such cases fall outside the formal scope of Integrated Child Development Services (ICDS), families were counselled and supported through VOs on matters of adolescent nutrition, pregnancy care, and effective communication.
- **Support for Ultra-Poor Women-Headed Households:** Women-headed ultra-poor households were identified for targeted interventions. Programmes like the Phoolo Jano Yojana played a pivotal role by offering seed funding for small business ventures. In some cases, this support helped women transition out of alcohol-related livelihoods, offering more sustainable and dignified income sources.

These discussions reflect the transformative potential of Mahila Gram Sabhas—not just as planning mechanisms but as ongoing platforms for social change, dialogue, and accountability. They illustrate how, when given the space, women can actively shape local development priorities, ensuring governance becomes more inclusive and responsive.

3.2.4. Step 4: Bal Sabha

Bal Sabha was a significant initiative introduced for the first time during the GPDP planning process in Jharkhand (Refer to Annexure number 5.6). GPs worked closely with school headmasters to mobilise students for the sessions. Efforts were made to ensure that Bal Sabhas did not disrupt the regular school routine. In some GPs, sessions were conducted during lunch breaks. Few GPs arranged transportation for younger children, while older students used their bicycles to attend.

During Block-level training, interactive games such as on the Constitution of India: Preamble, Snakes and Ladders and other participatory activities were used to promote active engagement among the children. The successful implementation of Bal Sabhas required close coordination between the GP and the local schools.



Key concerns raised by children during the Bal Sabha included:

Water and Sanitation:

Children highlighted issues related to:

- Lack of access to clean drinking water; absence of RO (Reverse Osmosis) filtered water in schools
- Non-functional or insufficient toilet facilities
- Inadequate boundary walls, raising safety concerns for younger students

Mid-Day Meals:

Children and parents assessed the mid-day meal scheme, noting concerns around the quality, quantity, and compliance with government guidelines.

Quality of Education and Teacher-Student Ratio:

A key concern was the poor pupil-teacher ratio. As per the Right to Education (RTE) Act, 2009, the ideal ratio for primary classes (Grades 1-5) is 30:1. However, many schools had only one teacher managing all grades, often occupied with administrative duties. This has led to a shift towards private schooling, reflecting concerns over the declining standards in public education.

School Infrastructure and Access:

- Increasing dropout rates among adolescent boys, particularly due to low grades or failing in the exams
- Concerns about the safety and accessibility of school premises, including the need for boundary walls
- Need for functional and hygienic toilets, especially for girls

3.2.5. Step 5: VPRP Integration

The VPRP process was facilitated by the VPRP Resource Person, who visited each SHG within the GP. The primary focus of these plans was to discuss livelihood opportunities and access to entitlement schemes. Each member of SHG had to develop its own plan based on discussions with CRPs.

These SHG-level plans were then consolidated by the CRP into VO-wise plans. At the VO level, the plans were presented, discussed, and prioritised by VO members. Following this, the consolidated and prioritised VO plans were submitted and presented in the Gram Sabha.

The entire VPRP exercise was carried out at the Panchayat level, and the finalised VPRP plan was to be formally integrated into the Gram Sabha discussions and planning process.



Enablers:

Mahila Sabhas and Bal Sabhas provided structured and inclusive platforms to surface gender-specific and child-focused concerns. These forums helped integrate critical priorities like menstrual hygiene, school safety, and early marriage prevention into village plans.

The participatory three-day planning process at the revenue village level helped identify ultra-poor and vulnerable households. Effective convergence with line departments (e.g., Animal Husbandry) and PRADAN-supported initiatives enabled targeted support through livelihood linkages such as the distribution of goats, hens, pigs, etc.

While time taking, the technology-enabled Composite Landscape Assessment and Restoration Tool (CLART) introduced by FES helped streamline INRM data collection and visualisation, improving efficiency despite time constraints.

Existing Gaps:

The INRM planning tool, the CLART tool developed by FES, although effective, was time-intensive, requiring 15–20 minutes per individual plan. This made it challenging to conduct comprehensive INRM planning within the allocated three days. In many cases, planning had to be extended over a week to ensure full coverage.

The annual integration of the VPRPs at times is perceived as repetitive, yielding limited tangible improvements for marginalised groups. This perception stems largely from the weak implementation and lack of visibility of these plans. Although significant efforts go into planning, the implementation of VPRP activities is neither systematically recorded nor made publicly accessible. Typically, the plans remain confined to the GPs in physical registers. Further, there is no regular tracking mechanism to compare planned versus implemented actions. It remains unclear who is responsible for maintaining implementation status, identifying bottlenecks, and ensuring follow-up.

Limited trained resources at the GP level impacted the consistency and quality of planning across revenue villages. Variations in the capacity of planning teams led to uneven plan quality between villages.

The three-day planning window was insufficient to ensure meaningful engagement across all revenue villages. With each GP comprising six to seven revenue villages, the time constraint limited deeper consultations and plan finalisation.

Ward members were often disengaged, particularly when they were not included in the training programme. Many lacked clarity about their roles and responsibilities in the planning process. During FGDs, several ward members were unable to recall key planning activities and were largely absent from the overall process.

3.3. Prioritisation, Budgeting, and Finalisation Phase

3.3.1. Step 1: Consolidation of Plan and Budget by the GPEC

Post the approval of individual and community-level plans in the Gram Sabhas at the revenue village level, these plans were brought together for review and discussion in the GPEC meeting. Some of our observations are noted here:

- The GPEC meeting served as a platform to ensure alignment and avoid duplication.
- In several GPs, this process extended over two days to allow sufficient time for deliberation.
- GP functionaries and staff provided support towards preparing a coherent and unified GPDP.
- In many instances, there is a lack of clarity among GP members regarding the budgeting process, specifically in understanding how to allocate resources to meet specific goals. While plans are being generated and finalised, members are still largely unaware of the total budget available, which goals are being prioritised for budget allocation, and quantum of funds being allocated to different plans. These decisions remain in the domain of the GP Secretary and the Mukhiya.
- Although there is clarity on the mandate of 60% of the 15th Finance Commission allocation for water and sanitation, the mandated allocation of 25% of the budget to the selected theme was found to be negligible.
- In practice, GP members tend to rely on the GP Secretary and Mukhiya for budgeting decisions. A general norm observed is to increase the previous year's budget by 10–20% and plan activities for the current year accordingly. However, this results in a mismatch between the allocated budget and the planned outlay.

3.3.2. Step 2: Special Gram Sabha – Approval of the Final Plan

Post the finalisation of plans at the respective revenue village level, and further the consolidation at the GP level, a Special Gram Sabha was organised at the GP level to ensure that all plans originating from the revenue villages were appropriately incorporated into the GPDP. The Special Gram Sabha is to ensure representation from each revenue village, with citizens, VO leaders, and active ward members in attendance.





3.3.3. Step 3: GPCC Meeting – Identifying Scope for Convergence

Following consolidation in the Special Gram Sabha, some proactive Panchayats held meetings with the GPCC to further identify opportunities for convergence and budgets for implementation of the planned activities.

- These meetings aimed to explore convergence opportunities with various line departments such as Agriculture, Rural Development, Soil and Conservation and Animal husbandry.
- Line department representatives were invited to understand where their schemes or funds could complement the proposed GPDP activities.

This also enabled better inter-departmental collaboration and maximised resource utilisation.

To make any changes to the final plan, the GP must submit a request to the District Panchayati Raj Officer for approval of the revised plans. The request is then forwarded to the DDC for final approval. Once approved, the revised plans are uploaded to the eGramSwaraj portal and incorporated into the GPDP, making them publicly visible. However, such changes are permitted only twice a year. For the current year (2025–26), this provision has been put on hold. There are ongoing discussions about whether it should be reinstated, as many citizens and GP Ward members were unaware of the new or supplementary plans. This lack of awareness has led to reduced transparency in the collective planning process.

3.3.4. Step 4: Uploading the Plan on the eGramSwaraj Portal

During the study period, there was confusion regarding the allocation of the budget for PESA GPs. It was initially proposed that funds be divided among each revenue village and that plans be uploaded village-wise. This approach caused delays in the final uploading of the documents. However, after considerable deliberation with the department, this decision was revised. The village-wise allocation approach was removed, and the finalised plans approved in the Special Gram Sabha were uploaded.

Currently, 4,337 GPDPs have been uploaded. A key factor contributing to the efficient uploading of these plans has been the role of the VLE. These VLEs are well-trained and equipped with the necessary resources such as internet connectivity, computers, and electricity. Moreover, their proximity and close coordination with the GP Mukhiya and Secretary have further facilitated the process. A well-trained VLE typically requires a maximum of two working days to upload the complete GPDP.

In the previous year, the GPDPs were uploaded to the eGramSwaraj portal by Block-level officials. However, this centralised approach encountered several challenges, including delays in coordination, limited availability of final plans, reliance on hard copies, and difficulty in understanding specific activities. One-on-one cross-checking and confirmation with individual GPs were not feasible. As a result, many uploaded plans were either incomplete or incorrect, leading to inconsistencies, duplication, confusion, and reduced ownership of the plans by the GP bodies. To address these issues, the strategy was revised this year by decentralising the upload process. The task was assigned to VLEs from the Community Service Centres (CSCs), operating directly at the panchayat level. This change was aimed at improving accuracy, increasing community involvement, and ensuring timely data entry. On a related matter, comprehensive GPDP is not to be limited to plans under 15th Finance Commission, clearly elucidated in the concept of 'Resource envelope' in the GPDP guidelines. Although several plans such as MGNREGS related plans are typically maintained on their own department portals, visibility on eGramSwaraj will provide a unified and comprehensive view of all developmental efforts at the GP level.

Making the full plan visible on a single platform will allow all stakeholders, including GP members, department officials, and citizens, to track the status of planning and implementation.

The design of the eGramSwaraj portal is intended to capture all plans. Accordingly, it comprises two primary sections: First, which records activities planned under the 15th Finance Commission, and second, which captures flagship programmes and convergence activities with various government departments. These convergence efforts include integration with schemes like MGNREGS, Social Security (Pensions), Integrated Child Development Services (ICDS), Public Health, and others. Despite this digital platform, it has been observed that many components of the final GPDP, particularly those involving INRM under MGNREGS and inter-departmental convergence activities, are not fully uploaded or updated on the eGramSwaraj portal. Often, plans related to MGNREGS or other schemes remain confined to physical documents like the Minutes of Meeting registers, which do not provide the required information, limiting accessibility and transparency.

Enablers:

Deployment of VLEs for uploading the GPDP plans (refer to Annexure 5.7), has enabled timely, accurate, and context-specific GPDP uploads.

Special Gram Sabhas convened for final plan approval fostered transparency and enhanced accountability.

In proactive Panchayats, the GPCC meetings provided a platform for collective review of consolidated plans and helped identify opportunities for convergence with departmental schemes.

Existing Gaps:

Limited understanding of budgeting among GPPFT members, particularly concerning the 15th Finance Commission allocations, restricted their effective participation. Budget preparation was often led solely by the Mukhiya and Secretary, reducing transparency and collective ownership.

Weak alignment between plan prioritisation and actual budgeting was evident. Although INRM and MGNREGS-based planning—especially for individual and community assets—was relatively strong, budget allocations were handled separately and were not clearly reflected in the final GPDP.



Discussions around tied and untied funds were often lacking. While tied grants were generally understood to support water and sanitation initiatives, untied grants—despite their flexibility—were poorly understood and rarely featured in budget allocations. In many GPs, even key stakeholders such as GPPFT members, lacked clarity on the total available budget.

3.3.5. Key Outputs and Shifts in Planning: FY 2024–25 vs. 2025–26

The planning process for FY 2025–26 was significantly more extensive and participatory compared to previous years. A comparison between the 2024–25 and 2025–26 plans highlights several improvements and emerging outputs across multiple dimensions.

This section presents a comparative analysis of the GPDP of Bari GP.

Comparative Analysis: Bari GP's GPDP of 2024–25 vs 2025–26

Component	2024–25	2025–26	Remarks
LSDG Focus of 15th FC Plan	3 – Child-Friendly Village	4 – Water-Sufficient	
LSDG Themes	Child-friendly, Water Sufficiency, Clean and Green Village	Water Sufficiency, Self-sufficient Infrastructure	
Total Number of Activities	34	23	
Primary Focus Sectors	Health, Education, WCD, Awareness Programmes	Drinking water, sanitation, community infrastructure	2024–25: Social services; 2025–26: Physical assets and infra.
New Infrastructure Work	PCC paths, chabutra construction, handwashing stations	Jalminar repairs/construction, bathing ghats, roads	Significant shift towards construction of water and sanitation infrastructure.
Budget Allocation	Although GP doesn't have own source of revenue, budget allocation has been done for construction-related work	Budget allocated with the estimated budget under FC	
Total Number of Convergence Activities	24	77	Detailed plans emerged for convergence
Plan encompassing	Under the flagship programme the focus was mainly of Child-Friendly Village	A comprehensive plan encompassing six themes under the flagship (Poverty-Free and Livelihoods, Healthy Village, Child-Friendly Village, Clean and Green Social Justice and Security)	
Sector-Wise Activities	Women and Child Development- 17 Technical Training and Vocational – 1 Education 4 Health – 2	Agriculture- 21, Drinking water – 4, Education – 3, Health – 4, Poverty alleviation – 28 (MGNREGS) Rural electrification – 1, Social- welfare- 6, Fuel and fodder- 2, Land improvement- 1, Rural Housing- 7	
Community Participation	Gram Sabha involvement, VPRP flagged activities	Feedback reviews, school enrolment drives, Beti Bachao Beti Padhao campaigns	2025–26 planning is more participatory and review-based.

Table 3: Comparative Analysis: Bari plans 2024–25 vs 2025–26

Source: eGramSwaraj Portal, as of June 2025- <https://egramswaraj.gov.in/>

In 2024–25, the planning was primarily focused on Theme 3 – Child-Friendly Village. Activities centred around improving sanitation and health awareness, constructing chabutras, building PCC roads, and conducting campaigns on hygiene practices. The implementation relied mainly on core 15th Finance Commission funds, with minimal convergence with other schemes or departments.

In contrast, the 2025–26 cycle different themes, included low cost activities albeit with impact on social and cultural aspects, and convergence with multiple central sector schemes and line department. While continuing work under Theme 3, it incorporated Theme 4 – Water-Sufficient Village, Theme 5 – Clean and Green Village, and Theme 6 – Self-Sufficient Infrastructure.

This broader coverage led to the inclusion of different physical assets such as community bathing and washing ghats, solar-powered jalminars, rural roads, sanitary complexes, and soak pits, reflecting focus on long-term WASH infrastructure and durable community asset creation. Convergence with Jal Jeevan Mission was evident through the installation of jalminars, while SBM (Gramin) supported soak pit and sanitation complex construction.

The National Health Mission and Poshan Abhiyaan were integrated through initiatives like Nutri Gardens and low cost but impactful initiatives such as school-based health inspections. Additionally, child protection efforts such as Beti Bachao Beti Padhao, addressing school dropouts, and drug abuse prevention – aligned with the Protection of Children from Sexual Offences (POCSO) Act – have been included in the GPDP.



Compared to the previous year, the 2025–26 planning documents displayed much greater thematic depth and operational clarity. While the 2024–25 plan included useful activity-level details, it was largely limited to basic infrastructure and awareness campaigns. In contrast, the newer plan offered comprehensive sectoral coverage with clearly specified activities, cost estimates, funding sources, and beneficiary feedback mechanisms. Examples such as soak pit construction in Bari GP or the repair of a jalminar at Jhaliyamara school were documented with precise location and financial details, underscoring the role of VLEs in ensuring systematic documentation.

The scope of convergence also evolved further. While 2024–25 saw basic programmatic links with schemes like MGNREGS and ICDS, the 2025–26 cycle brought in a wider array of departments and schemes, including PMAY, NHM, JJM, and POCSO. This expansion contributed to a more holistic planning approach.

Moreover, the number of documented plans increased significantly in 2025–26, with at least 77 distinct plans developed. This was driven by a more granular identification of needs and active community participation through Mahila Sabha and Gram Sabha platforms.

The 2025–26 cycle covered a diverse range of interventions, combining physical infrastructure like roads, jalminars, soak pits, and boundary walls with social development initiatives such as child marriage prevention, school enrolment drives, vocational training, and feedback systems on Gram Sabha resolutions. Health system reviews and educational monitoring added further depth.

Although the LSDGs have started to emerge in the planning process, their thematic integration and recall remain limited. However, CSOs like PRADAN have played a pivotal role in supporting GPs by strengthening planning capacities, promoting thematic alignment, and enhancing the overall quality and reach of the development agenda.

3.4. Implementation and Monitoring Phase

3.4.1 Implementation of Plans under 15th Finance Funds:

The following table has been compiled to compare plan versus completion related to 15th Finance Commission, in terms of activities as well as outlay, across the 9 GPs visited.

Planned vs. Completed Activities and Fund Utilisation for year 2024–2025 (as per eGramSwaraj Portal)

15th Finance (2024–25)							
S.N.	Name of the Panchayat	Number of Activities Planned	Number of Activities Completed (as per e gram swaraj portal)	Planned Outlay (As per e gram swaraj portal)	Planned Outlay (As per e gram swaraj portal)	% of Completed Activities (As per e gram swaraj portal)	% of Expenditure showed by e-GS vs Planned outlay
1	Khaira	33	3	2,463,750	722,038	9.1	29.3
2	Danekera	30	10	2,940,010	1,042,839	33.3	35.5
3	Ugra	35	2	2,511,081	391,820	5.7	15.6
4	Sehal	14	6	2,531,600	1,225,987	42.9	48.4
5	Husir	22	7	2,950,100	1,291,933	31.8	43.8
6	Bari	34	8	4,049,389	1,242,907	23.5	30.7
7	Kushpahari	16	2	2,259,900	464,141	12.5	20.5
8	Chigadda	33	4	2,214,270	685,000	12.1	30.9
9	Bargachhya Hriyari	21	6	2,260,100	1,135,687	28.6	59.9

Table 4: Implementation of activities and budget utilised

For details, please refer to Annexure number 6 which details Panchayat wise status of Plan versus Implementation across nine GPs.

The 15th Finance Commission (2024–25) data reveals significant disparities in both implementation and fund utilisation across the listed panchayats. In terms of completion of planned activities, Ugra has performed the lowest, with only 2 out of 35 planned activities completed (5.7%), followed by Khaira with 3 out of 33 activities completed (9.1%). Chigadda and Kushpahari also have low completion rates at 12.1% and 12.5% respectively. These figures indicate a significant lag in physical implementation across several panchayats. Demonstrating better conversion, Sehal and Danekera leads with the highest completion rate of 42.9% (6 out of 14) and 33.3% (10 out of 30), followed by Husir at 31.8% (7 out of 22) and Bargachchha Hariyari at 28.6% (6 out of 21). Bari also shows relatively better progress with 8 out of 34 activities completed (23.5%). In terms of expenditure, Bargachhya Hriyari stands out with the highest budget utilisation at 59.9%, despite having completed less than a third of its activities. Sehal follows with 48.4%, Husir with 43.8%, and Danekera with 35.5%.

Basis our conversations, we understand that once funds are released, GPs tend to prioritise high-cost activities, often large-scale construction, while lower-cost, community-prioritised works may be delayed or overlooked. Sehal and Danekera demonstrate the most balanced and effective performance, having completed 42.9% and 33.3% of its planned activities while utilising 48.4% and 35.5% of its estimated cost respectively.

One of the most critical factors influencing the effective implementation of development plans at the GP level is the availability and timely receipt of financial resources. While planning and prioritisation of activities are done with active community participation, the actual execution on the ground is often hampered due to irregularities in fund flow. The table (5) below provides insights into the pattern of fund allocation and the actual disbursement Timeline. Understanding these trends is crucial not only for improving financial planning and execution at the GP level but also for advocating for a more transparent, accountable, and timely fund disbursement mechanism.

15th Finance Commission: Funds Received and Expenditure Summary for 2023–24 and 2024–25

S.N.	Name of the GP	Total Allocated Budget (15th FC)	Funds Received in FY 24–25 (July and Oct)	July	October	Total Expenditure in FY 24–25 (incl. previous year payments)
1	Khaira	24,63,750	11,62,462.00	4,64,985.00	6,97,477.00	21,42,824.00
2	Danekera	29,40,010	11,69,393.00	4,64,985.00	7,01,636.00	30,33,254.83
3	Ugra	25,11,081	11,13,091.00	4,45,237.00	6,67,854.00	16,58,916.00
4	Sehal	25,31,600	12,65,773.00	5,06,310.00	7,59,463.00	24,42,589.00
5	Husir	29,50,100	12,28,353.00	4,91,341.00	7,37,012.00	17,30,035.00
6	Bari	40,49,389	13,91,642.00	5,56,657.00	8,34,985.00	29,58,348.50
7	Kushpahari	22,59,900	10,37,100.00	4,14,840.00	6,22,260.00	14,13,615.00
8	Chigadda	22,14,270	9,11,278.00	3,64,511.00	5,46,767.00	14,91,712.00
9	Bargachhya Hriyari	22,60,100	9,50,035.00	3,80,014.00	5,70,021.00	21,84,929.00

Table 5: Funds Received and Expenditure Summary for 2023–24 and 2024–25
Source: eGramSwaraj portal as of June 2025 <https://egramswaraj.gov.in/>

The data presented in Table 5 highlights a critical implementation challenge faced by GPs under the 15th Finance Commission. While funds are allocated annually for developmental activities, the actual release of these funds is often delayed. In this case, the GPs have received instalments from the previous financial year (2023–24) only during the current year (2024–25), and the current year's instalment is still pending. This significant delay not only disrupts the planned activities but also forces GPs to revise their plans based on the changing local context and emerging priorities. As a result, the alignment between community planning and execution weakens over time.

The non-timely disbursement of funds to the GPs significantly delays the start of implementation. This delay not only stalls project execution but also hampers the functioning of GPCC meetings. GP members often question the utility of such meetings when funds have not been received and no activities are in motion, leading to critical decisions being deferred until disbursements are made. These delays in fund flow disrupt both planning and execution processes, undermining the effectiveness of decentralised governance.

Moreover, a large portion of the funds received is used to clear previous dues to vendors or contractors who have already completed the work. This leads to a heavy dependency on contractors who are financially capable of executing projects without timely payments.

Consequently, only bigger contractors are able to sustain themselves, while small local contractors are unable to take up or complete projects, limiting community participation in execution. The planning process also suffers; despite yearly participatory planning efforts involving the community, only 20–30% of the planned activities are implemented in a timely manner. This gap between planning and execution not only delays development but also demotivates the community, making the planning process feel futile. Ultimately, these systemic delays undermine the intent of decentralised governance and local development.

3.4.2. Implementation of Plans under MGNREGS:

The following table compares plan versus completion of activities under MGNREGS, both in numbers as well as outlay.

Name of the Panchayat	Number of Activities Planned	Number of Activities Ongoing or Completed	Expenditure Cost	Actual expenditure	Total Person Days	% Ongoing and Completed vs Planned activities	% Actual vs Estimated Expenditure
Khaira	94	60	7,701,412	2,910,127	9961	63.8	37.8
Danekera	335	114	24,866,453	7,354,635	14897	34.0	29.6
Ugra	193	143	38,810,557	6,505,387	21031	74.1	16.8
Sehal*	131	83	15,845,329	2,754,534	9431	63.4	17.4
Husir	156	113	5,932,139	2,908,372	6437	72.4	49.0
Bari*	208	196	8,569,658	6,229,414	22820	94.2	20.8
Kushpahari	199	163	17,253,487	3,583,192	11660	81.9	51.3
Chigadda	53	40	6,560,093	3,362,169	11697	75.5	30.9
Bargachhya Hriyari	260	96	26,255,658	5,221,314	14314	36.9	19.9

Table 6: Panchayat-wise MGNREGS implementation and budget utilised
For details, please refer to Annexure number number 7.



Table 6. reflects disparities in the implementation of MGNREGS across the nine GPs. Kushpahari stands out as the most efficient in executing MGNREGS works, having completed or initiated 94.2% of its 208 planned activities. Other Panchayats such as Chilgadda (81.9%), Sehal (74.1%), and Bargachha Hariyari (75.5%) also demonstrate strong performance in terms of activity execution. These figures indicate effective planning, coordination, and on-ground execution of MGNREGS projects. In contrast, Ugra and Danekera, despite having planned the highest number of activities (335 and 260 respectively), show very low completion rates (34.0% and 36.9%).

One of MGNREGS' core objectives is employment generation through rural public works. GPs like Kushpahari and Sehal have made significant strides in this area, having generated 22,820 and 21,031 person-days respectively. This indicates that the scheme is playing a vital role in supporting livelihoods in these regions. Danekera also reflects a relatively high number of person-days (14,314); however, this appears disproportionate to its low activity completion rate, suggesting possible inefficiencies in implementation.

These outcomes align strongly with Theme 1 – Poverty-Free and Enhanced Livelihoods, demonstrating that these GPs are effectively leveraging MGNREGS to provide employment opportunities. One of the persistent challenges in MGNREGS, as often heard during the study, is the delay in payments, both for wages and materials. These delays lead to a higher dependency on contractors, particularly for procuring and managing materials needed to complete the works.

3.5.3. Case of Danekera: Highest Conversion of Plans to Action under 15th Finance Commission

Danekera demonstrates the most balanced and effective performance among the listed GPs, having completed 33.3% of its planned activities while utilising 35.5% of its estimated budget. This reflects not just effective financial management but also a GP body that understands its core mandate of planning and implementation.

Danekera's emergence as a strong and functional panchayat is not accidental. Just a few years ago, it was considered a dormant panchayat with limited activity and engagement. In 2023, it was selected under the Governance Strengthening Programme, a targeted mentorship initiative aimed at transforming underperforming GPs into model institutions. Under this programme, Danekera received mentorship from Kamakhya Ji, a former Mukhiya of Pinderkone GP and a seasoned Master Trainer under the GPOD initiative.

The transformation journey was far from easy. It involved consistent engagement with ward members, identifying local challenges, and fostering collective dialogue to align the GP's functioning with its intended role as a vibrant unit of local self-governance. Several key initiatives were introduced during this period, focusing on building platforms for engagement and dialogue, developing an understanding roles and responsibilities, and exploring convergence opportunities to enable inclusive planning. These efforts also strengthened internal coordination and ensured that budget utilisation was aligned with the real needs and priorities of the community. Below are listed few key factors that have contributed towards improvement in Danekera.





Active GPEC Meetings:

Internal coordination between elected representatives and officials, and regular GPEC meetings played a crucial role in ensuring effective internal coordination within the Panchayat system. These meetings established a consistent rhythm for monitoring progress, identifying bottlenecks, and keeping elected leaders and GP functionaries—such as the Secretary, MNREGS Mate, and Junior Engineer—aligned and informed. The strength of the GPEC meetings lies in their ability to bridge the gap between decision-making and on-ground execution by openly discussing key topics like the 15th Finance Commission budget, ongoing activities, their status, and the next steps. Notably, around 80% of Ward members regularly attend these meetings, demonstrating active engagement and collective ownership of GP governance.

Regular GPCC Meetings strengthened Convergence and Ownership:

Continuous and regular GPCC meetings were instrumental in Danekera's success, serving as effective convergence platforms that united representatives from various departments and local stakeholders. These meetings fostered a strong sense of institutional ownership, transforming the GP into an active institution, rather than a passive executor of schemes. This ongoing, inclusive dialogue enabled efficient inter-departmental coordination—particularly for complex projects like the construction of percolation tanks—by establishing dedicated bodies such as the Labhuk Samiti for implementation, the Nigrani Samiti for monitoring, and ensuring continuous oversight by the Panchayat itself.

Ward Member Engagement:

One of Danekera's most distinctive strengths was the active participation of its Ward members. Unlike many GPs where Ward members remain inactive or disconnected from the planning and implementation processes, Danekera's Ward members took a hands-on approach driven by a strong sense of ownership. They regularly attended various institutional meetings such as the School Management Committee (SMC) and Village Health Sanitation and Nutrition Committee (VHSNC), and closely monitored ongoing activities in their wards. Some Ward members even went beyond their own responsibilities by supporting other Ward members (peers) and guiding them through the implementation process.

Clarity on Budget and Implementation Process:

A critical enabler of smooth execution in Danekera was the clear understanding among ward members of budget provisions and procedural steps across key schemes such as the 15th Finance Commission (15FC), MGNREGS, and departmental convergence projects like those with the Department of Soil and Water Conservation. This clarity helped prevent administrative confusion and reduced delays, enabling the GP to make informed and timely decisions.

Enablers:

Open discussions within GPCC and GPEC forums about fund flow challenges and work prioritisation enable better preparedness. This also reinforces transparency and participatory decision-making.

If in the event of delay in release of funds, continuing with the list of prioritised activities is key to effective implementation.

Convergence efforts, particularly under MGNREGS, Department of Soil and Water Conservation, Animal Husbandry, are strengthened by regular GPCC meetings at the Gram Panchayat level and coordination meetings at the block level. These platforms ensure that departmental budgets are sanctioned in a timely manner for specific activities at GP and revenue villages. Sustained engagement between stakeholders makes convergence easier.

Existing Gaps:

GPs have often faced significant delays in receiving sanctioned funds of the 15th Finance Commission grant. This has resulted in unpaid dues to vendors, poor-quality or incomplete construction, which further results in deterioration of half-finished structures, requiring additional funds for repairs and completion.

GP members frequently lack clarity on the total funds they will actually receive. This uncertainty hampers accurate budgeting and financial planning, making it difficult to sequence or phase out works efficiently.

The success of activities funded by 15th Finance Commission grant is directly tied to timely fund disbursal. Delays not only slow down implementation but also demoralize stakeholders and reduce trust in the planning process.





CHAPTER 4:

BEST PRACTICES

This chapter presents a series of field-based best practices that are reflective of the evolving landscape of local governance in Jharkhand, particularly through the lens of gender inclusion, participatory planning, and institutional transformation. The cases identified are not isolated anecdotes but based on tangible outcomes of sustained interventions, community mobilisation, and capacity-building efforts. Catalysed by PRADAN's continuous engagement with GPs, as well as decades of work with women collectives, the cases studies presented here are reflective of how local governance, when strengthened through inclusive practices and active engagement of its leaders, can become a powerful vehicle for social equity and responsive development.

From women Mukhiyas challenging patriarchal norms and leading with innovation, to GPs institutionalising participatory processes for the ultra-poor, children, and marginalised women—these case studies emphasise the importance of decentralised planning grounded in lived realities.

Section 4.1 focuses on how women leaders are asserting their voices in Panchayat spaces, driving inclusive development and mentoring peers.

Section 4.2 captures process for identifying and supporting ultra-poor families often excluded from formal welfare structures, and the key role played by the GP Help Desk.

Section 4.4 illustrates how a mentorship-based model can revive dormant GPs, building cohesive governance systems from the ground-up.

Section 4.6 captures how convergence with departments presents a way out of resource constraints.

Each case explores a different facet of transformation:

Section 4.3 reimagines local planning by institutionalising Mahila Sabhas and Bal Sabhas as platforms for inclusion of women and children respectively.

Section 4.5 captures how GIS-based INRM planning integrated into the GDPD process enables GPs to address water scarcity, enhance livelihoods, and ensure inclusive, data-driven development.

Section 4.7 showcases community leadership through the Labhuk Samitis, and their role in project execution and governance.



4.1. Engaged and Empowered: Women in Local Decision-Making

Khaira GP, located in the Tatijhariya Block of Hazaribagh District, comprises seven villages. Kumari Madhuri, the current Mukhiya, is serving her first term. With a strong educational background, Madhuri has emerged as a role model not only within her own Panchayat but also in neighbouring ones. She also serves as a Master Trainer for two other GPs, where she plays a mentoring role, helping build leadership capacities and supporting peer learning. One of her notable achievements is effective networking at the block level, which has enabled her to leverage funds from the District Mineral Foundation Trust (DMFT). Furthermore, under her leadership, one of the villages in the GP has been recognised as an Agri-Smart Village, demonstrating her commitment to sustainable development and agricultural innovation.

In the Kushpahari GP, located in the Sikaripara Block of Dumka District, Cicilia Soren serves as the Mukhiya. This GP comprises 10 villages and is further divided into 11 wards. While Cicilia is a first-time Mukhiya as her husband held the position in the previous term, she has carved out her own identity as a leader. She has effectively ensured convergence of various schemes, particularly focusing on animal husbandry and livelihood support for the most vulnerable families.

Cicilia attributes her success to regular participation in Block-level meetings, which she sees as crucial for understanding government schemes and disseminating this information at the village level. This engagement has strengthened her ability to serve her community and address their specific needs.

In Urga GP, Basanti Devi serves as the Mukhiya and exemplifies strong coordination with the GP Secretary, VO, and SHG members. A notable feature of this GP is the collaboration between the GP Mukhiya, its woman Secretary, Ward members, VPRP facilitators, and VO leaders. One of Basanti Devi's key leadership skills is identifying strengths within her team and capitalising on the existing capacities of community members such as VPRP facilitators and VO members—who have been trained across various platforms under NRLM. This rare and effective coordination has translated into a team-oriented approach, especially visible in planning and implementation activities. Her coordination abilities are exemplified in the successful convergence of Birsa Harit Gram Yojana under MGNREGS for mango plantation projects. Other impactful efforts include ensuring that all girls complete their education and encouraging women to enrol under the Phoolo-Janoo scheme.

In West Singhbhum District, Bari GP, comprising eight villages and 15 wards, has experienced transformative leadership under Sunita Devi, a first-time Mukhiya. During the last GP elections, members of local SHGs encouraged and supported her candidacy, recognising her active participation in SHG meetings and her ability to ask critical questions. Though the seat was reserved, women leaders from the community felt it was crucial for a capable and assertive woman to hold the position. After winning the election, and following an exposure visit to Pinderkone GP, known for its impressive work under Kamakhya Singh, its former Mukhiya, Sunita Devi began implementing best practices she observed during her visit. She has placed strong emphasis on conducting regular meetings of both the GPEC and the GPCC. These meetings provide essential platforms for discussing local issues, promoting collaboration among GP members and frontline workers, and fostering synergy across departments. She also ensures consistent participation in Block-level meetings, either participating herself or delegating attendance to the Up-Mukhiya, or the GP Secretary. For Sunita, effective GP functioning depends on a seamless flow of information, which is critical for creating realistic and actionable development plans.



These examples are not isolated incidents but the result of sustained, multi-level interventions over the years. PRADAN's efforts have focused on strengthening women's SHGs, building women's leadership capacity, which have enabled them to assume diverse roles within local governance structures. As a result, a strong cadre of women leaders is emerging, capable of engaging meaningfully at GP, Block, and District levels. These women are transforming their GPs into inclusive spaces that prioritise the needs and voices of women, becoming role models who inspire others to step into leadership roles.

The series of best practices documented in Sections 4.2 to 4.6 are presented in the form of case studies. These narratives are drawn from experiences discussed during FGDs and serve to provide deeper context to the challenges identified, interventions implemented, and outcomes achieved. Each case study is structured to highlight the problem faced, the steps taken, and the results observed. This approach helps illustrate how participatory planning and grassroots-level engagement can lead to desired outcomes.

4.2. From Exclusion to Inclusion: Identifying the Ultra Poor in Chilgora through GP Help Desk (GPHD) Initiatives

Context

Chilgora is one of the GPs where a GPHD has been established and is actively functioning within the GP office premises. PRADAN initiated its intervention two years ago, focusing on the identification of ultra-poor families and fostering community sensitisation to ensure inclusive planning processes. The goal was to make the planning process equitable by recognising the ultra-poor as key stakeholders and ensuring their voices are represented. The intervention aimed to strengthen community capacities, improve access to welfare schemes (such as pensions and livelihood support), and provide consistent mentoring to help these families enhance their living standards. This approach aligns with the broader objective of promoting social and economic inclusion of the most vulnerable through active local governance and community-based support systems.

Problem Statement

Despite the availability of numerous welfare schemes, many ultra-poor families in Chilgora remained excluded due to a lack of awareness, inadequate documentation, and absence of systematic identification. Often, these families were missed in community-level planning and slipped back into poverty. A key realisation was that ultra-poverty may not always be a static condition—any life-altering event such as an accident-causing disability, a sudden illness, or the death of a family member can push a household into this vulnerable category. Therefore, identification must be treated as a continuous process, not a one-time activity.

This raised an important challenge: how to build community-wide understanding around the need for ongoing identification and ensure that all such families are consistently recognised and prioritised. There was a critical need for a participatory, community-driven model that engages local institutions—such as the GP, SHGs, and the GPHD—to facilitate inclusive planning and ensure these households receive timely and adequate support under existing welfare schemes.



Steps Taken

The intervention began with capacity-building sessions for SHGs and VOs. The GPHD initiative, launched by PRADAN in collaboration with the Azim Premji Foundation, aims to provide poor and vulnerable communities in Jharkhand with easy access to welfare schemes like MGNREGS, PDS, and pensions. Set up across 118 GPs, the help desks work closely with SHG collectives to offer information, support with documentation, and assistance in accessing essential certificates.

Through capacity building, awareness campaigns, and coordination with local governance, GPHDs have improved transparency and ensured that entitlements reach those most in need. A GP Helpdesk was set up inside the GP office, and a CRP from the VO was trained to run it. The focus was on building a shared understanding of the criteria for identifying ultra-poor families and how communities can collectively support them.

Village-level discussions in SHG meetings helped identify vulnerable families, which were further validated in Gram Sabhas and presented at the GPCC meetings. These participatory forums ensured inclusive decision-making and accuracy in identification.

Initially, 159 households across three villages (Chilgadda, Balrampur, Gopalpur) in the GP were identified as 'poor'. After consultations with the GP, discussions in the Gram Sabha, and inputs from SHG members, the list was reviewed and refined. Through this community validation process, 109 families were ultimately confirmed as 'ultra-poor households'.

To gain deeper insights into the vulnerabilities of these households, a Participatory Assessment Tool (PAT) survey was conducted. The survey was facilitated by members of the GPHD, CRPs, and VO members, with the objective of identifying the most marginalised and at-risk families.

Key Characteristics to Categorise Households

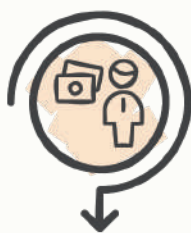
SN	Category	Key Category
1	Poorest / Destitute / Ultra Poor	<ul style="list-style-type: none">- No regular income- Food insecure (often <2 meals/day)- No land or assets- Depend on begging, charity, or migration- Vulnerable groups (e.g., widows, disabled)
2	Poor / Marginally Better-Off Poor	<ul style="list-style-type: none">- Irregular income from daily labour or marginal farming- Basic food security but no diversity- Small or unproductive land- Limited access to credit
3	Middle / Moderately Secure	<ul style="list-style-type: none">- Own land/assets (e.g., livestock, tools)- Regular wage or small business- Generally food secure- Schooling for children- Limited savings
4	Better-Off / Relatively Well-Off	<ul style="list-style-type: none">- Stable income (job/business)- Larger landholdings with irrigation- Full food and housing security- Access to services and credit- May employ laborers

Survey Results



Identity and Housing

- Aadhaar Card: 100% coverage achieved
- Birth Certificates: Applications submitted for 14 families
- Awas Yojana: Applications submitted for 63 families



Livelihood Support

- Livestock Distribution:
 - 32 families received goats
 - 13 families received hens
 - 4 families received pigs
 - 1 family received a sheep
- Kitchen Gardens: Seeds distributed to promote home-based food production



Social Security

- Widow Pensions: Received by 16 families
- Old-Age Pensions: Received by 35 families
- Disability Pensions: Received by 3 families
- Ration Cards: 103 families already had ration cards; 6 new applications submitted for full saturation
- MGNREGS Job Cards: 98 new job card applications submitted



Insurance and Maternity Benefits

- Pradhan Mantri Suraksha Bima Yojana: 52 families covered
- Maiyaan Samaan Yojana (Maternity Scheme): Benefits received by 42 families

Following the baseline survey, applications were submitted across multiple government schemes. As a result, many households have started receiving benefits aimed at improving their living conditions and supporting livelihoods.

The GPHD, GP, VO, and the Nagarik Sahayata Kendra (NSK), played pivotal roles in accelerating access to government schemes. Their coordinated efforts ensured a more inclusive and efficient process, capable of responding to the evolving vulnerabilities of these households in real time. An overview of the Nagarik Sahayata Kendra is provided here.





Nagarik Sahayata Kendra (NSK)

A Nagarik Sahayata Kendra (NSK), or Citizen Help Desk, is a community-based service centre established within the Block administrative structure. It supports citizens in accessing a variety of government schemes, especially those related to social welfare, such as MGNREGS, schemes under the National Food Security Act, and housing schemes.

These centres are staffed by trained volunteers and function as a crucial link between the community and government systems. They assist with:

- Scheme awareness and eligibility checks
- Application submissions
- Documentation support
- Grievance redressal

By simplifying administrative processes and offering real-time support, NSKs enhance inclusion and ensure that even the most marginalised households can access the entitlements they are eligible for.

4.3. Participatory GPDP Planning with Mahila Sabhas and Bal Sabhas in Bari GP – Redefining Participation: A Gender-Responsive and Child-Inclusive GPDP

Context

Bari GB, located in the Sonua Block of West Singhbhum District in Jharkhand, comprises eight revenue villages spread across a hilly and forested landscape. The region suffers from poor transportation infrastructure, with limited road connectivity between villages. This geographical dispersion, combined with entrenched social norms, often hinders the participation of marginalised groups in local governance. Ms. Sunita Singh, a first-time Sarpanch, currently leads the Panchayat and has demonstrated a strong commitment to inclusive and participatory development planning. Recognising the limitations of centralised meetings that often fail to include women and children, especially those who are elderly, single, widowed, or from households without male members, the GPEC sought innovative approaches to make the GPDP process more inclusive and representative.

Problem Statement

Traditionally, the voices of vulnerable groups such as women and children have been overlooked in rural governance. Women face multiple barriers including long travel distances, limited mobility, cultural restrictions, and household responsibilities that prevent them from participating in centralised meetings. Children, despite being critical stakeholders in issues like education, safety, and health, are rarely engaged in development planning. Furthermore, several social issues such as the harmful practice of witch-branding continue to affect community well-being but are not adequately addressed in formal planning. The absence of dedicated, accessible, and safe platforms for these groups has resulted in planning processes that lack inclusivity and fail to reflect the lived experiences of the most affected populations.



Steps Taken

To address these challenges, the GPEC introduced localised Mahila Sabhas and Bal Sabhas as structured and inclusive forums for community engagement. Mahila Sabhas were organised in each individual village to overcome the transportation and mobility barriers that women faced. These decentralised assemblies were supported by SHGs, VOs, and community-based frontline workers.

By holding meetings within the villages, the Panchayat ensured the participation of women who were typically excluded from formal governance spaces—particularly elderly women, widows, single mothers, and those without male family members. The Sabhas provided safe, familiar environments where women could share their daily challenges and identify priority issues. One of the most significant discussions centred around the practice of witch-branding, a harmful patriarchal tradition. Rather than dismissing it as an isolated crime, participants examined its cultural and structural roots, promoting a more meaningful and transformative dialogue. The sessions also facilitated reflection on entrenched gender norms, highlighting the difference between biological sex and socially constructed gender roles. Women openly discussed their lack of access to menstrual hygiene products, the need for sanitary napkin vending machines and disposal systems, and the absence of local employment opportunities that forced many to migrate seasonally under distress.

In parallel, Bal Sabhas were introduced for the first time in the GPDP process to include the voices of children. Conducted in coordination with school headmasters, these sessions were scheduled to avoid disrupting the school routine—often during lunch breaks or with flexible timings. In some cases, transportation was arranged for younger children, while older students used bicycles to attend. The Panchayat used engaging tools like interactive games, including snakes and ladders, to make the process child-friendly and participatory. Through these activities, children identified issues in their schools and communities such as lack of infrastructure, sanitation facilities, gender discrimination, and personal safety concerns. Discussions encouraged students to express aspirations for education and gender equality, helping to instil early awareness of rights, responsibilities, and social justice.

Results

The implementation of decentralised Mahila Sabhas significantly increased the participation of women who were previously excluded from governance processes. These forums not only enabled women to articulate practical needs—such as menstrual hygiene infrastructure and livelihood support—but also empowered them to challenge deeply rooted gender norms and cultural practices like witch-branding. The inclusive and analytical nature of the discussions encouraged a deeper understanding of gender inequality, moving beyond surface-level issues to focus on structural change. Mahila Sabhas thus emerged as vital instruments of participatory planning, demonstrating their value in shaping more equitable and responsive governance. Similarly, Bal Sabhas proved to be an effective strategy for engaging children in planning. By creating a space where students could raise their concerns and offer suggestions, the Panchayat fostered early civic engagement and strengthened the role of young voices in local decision-making. The use of interactive and age-appropriate methods ensured active participation and built awareness among children about governance, equity, and gender sensitivity. As a result, their contributions were not only insightful but also practical—feeding directly into the GPDP and helping address issues often invisible to adult decision-makers.

The integration of these community-led consultations into the GPDP process led to a more holistic and inclusive development plan. Women's and children's voices influenced budget allocation and project prioritisation, particularly in the areas of menstrual hygiene, school safety, local livelihoods, and social awareness campaigns. The initiative also strengthened institutional accountability by fostering collaboration between Panchayat officials, schools, SHGs, and community organisations. In places like Kushpahari village, the impact of regular Mahila Sabhas was especially



pronounced, showing that such platforms are essential—not symbolic—for democratic governance.

The experience of Bari GP illustrates how structured and inclusive platforms such as Mahila Sabhas and Bal Sabhas can bring in different issues to the forefront. By creating safe and accessible spaces for participation, the Panchayat addressed long-standing exclusions based on gender, age, geography, and social norms. These initiatives not only brought new voices into the planning process but also fostered critical reflection on cultural practices and power dynamics, laying the foundation for more responsive governance.

(Please refer to Section 3.2.3 and 3.3.4 for detailed overview on Mahila Sabhas and Bal Sabhas)

4.4. Reviving Local Governance through Mentorship – The Transformation of Danekera GP

Context

Danekera GP is a rural local body situated in Lapung Block under Ranchi District of Jharkhand. It comprises six villages and is administratively divided into ten wards. Like many other GPs, Danekera had struggled with inactive leadership, irregular meetings, poor coordination, and minimal community participation. Recognising these challenges, the GP was selected under the Governance Strengthening Programme, a targeted mentorship initiative aimed at transforming underperforming GP into Model Panchayats. The criteria for selection included backwardness, administrative stagnation, and lack of civic engagement.

Mentorship was provided by Kamakhya Ji, a former Mukhiya of Pinderkone GP and an experienced Master Trainer under the GPOD initiative. Pinderkone itself had once been an intervention GP and was successfully transformed into a model GP under his leadership, gaining recognition at multiple forums. Kamakhya Ji's lived experience as a grassroots leader, along with his capacity to train and mentor other Panchayats, made him a suitable guide for Danekera's revival journey.

Problem Statement

Prior to intervention, Danekera GP exhibited signs of administrative apathy and community disengagement. The GP office was rarely operational, Ward members showed little interest in governance activities, and GPEC and GPCC meetings were either infrequent or non-existent. Citizens, including women and marginalised groups, had minimal involvement in the planning process. This led to persistent challenges such as:

- Weak coordination with line departments.
- Chronic water scarcity due to the rocky plateau terrain.
- Lack of year-round irrigation, leading to distress migration.
- Absence of participatory forums like Gram Sabhas for collective problem-solving.

There was an urgent need to reactivate institutional mechanisms, build leadership capacity, and foster a sense of ownership among stakeholders to reverse this stagnation.

Steps Taken

Kamakhya Ji began the transformation by prioritising relationship-building and trust. He spent the first 3–4 months deeply engaging with the Mukhiya, Ward members, and GP staff—listening to their perspectives, understanding their realities, and gradually nurturing a shared sense of ownership. His foundational principle was clear and compelling: “Know your people and help them realise why their role matters.” Through consistent dialogue, he emphasised that governance is not the burden of a few but a collective responsibility. This phase of emotional and strategic groundwork was crucial—it not only built credibility but also activated a sense of purpose among local leaders, laying the foundation for a more responsive and cohesive GP.

With trust established, Kamakhya Ji facilitated the regularisation of GPEC and GPCC meetings—key institutional forums that had long remained dormant or ineffective. By creating structured platforms for coordination, planning, and decision-making, the GP began to function as a unified body rather than in silos. These forums enabled collective prioritisation of community issues, with water scarcity emerging as a critical concern. Danekera’s rocky, plateaued terrain made water retention difficult, severely impacting agriculture and forcing seasonal migration. Through these collective spaces, the GP could now begin envisioning long-term solutions rooted in local knowledge and cooperation.

A turning point in this journey was the introduction of focused mentoring. Once the GP began coming together, there arose a clear need to sustain and deepen this collective energy. Mentoring played a pivotal role—not just in skill-building but in anchoring the GP’s internal strength and institutional integrity. Mentoring helped leaders reflect on their roles, recognise their strengths, and develop a shared identity as a functioning governance body. Rather than relying solely on external expertise, the GP was gradually empowered to identify problems, plan interventions, and monitor outcomes—marking a critical shift from dependency to ownership.



During the GPCC meetings, the GP raised this issue and explored solutions through convergence with the Department of Soil and Water Conservation. The idea of constructing a percolation tank emerged as a feasible solution. The GP convened a Gram Sabha to discuss the plan with community members. In collaboration with the department staff, the site for the percolation tank was identified and incorporated into the GP's development plan.

This process highlighted the revived role of governance mechanisms—GPEC, GPCC, and Gram Sabha—as tools not just for compliance but for actual community-led development. Coordination between elected representatives, government staff (including the Panchayat Secretary, MGNREGS Mate, and Junior Engineer), and citizens was visibly strengthened.

Results

The transformation of Danekera GP has been both institutional and cultural. What was once a dormant GP is now a functioning and participatory body. During field visits, observers noted a strong sense of unity among the Mukhiya, Up-Mukhiya, Ward members, GP staff, and citizens. Women Ward members were particularly active in meetings and planning sessions, reflecting a broader trend of gender inclusion in local governance.

By 22nd February 2024, the following schemes were approved by the Panchayat Executive Committee:

SN	Schemes	Source of Funds	Expenditure (₹)	Units	Beneficiaries (HHs)	Area Covered
1	MGNREGS Mango Orchard	MGNREGS	10883540	50 Orchards	48	45 acre
2	Irrigation Wells	MGNREGS	11870640	35 Wells	35	65 acre
3	15th Finance Commission Projects	15th Finance Commission	1870000	12 Projects	--	--
4	MGNREGS Anganwadi Centres	MGNREGS	16,00,000	2 Centres	--	--
5	Percolation Tanks	Soil and Water Conservation Department	6450000	15 Projects	180	80 acre
6	Ponds	MGNREGS	6705000	15 Projects	45	25 acre

Progress under MGNREGS:

- 50 farmers benefited from mango orchards, covering 45 acres, with an investment of ₹1.08 crore.
- 30 irrigation wells constructed, benefiting 35 families and irrigating 25 acres, costing ₹1.18 crore.

Soil Conservation Initiatives:

- 15 percolation tanks were constructed, improving water retention for 50 acres and benefiting 150 families.
- 15 ponds initiated, set for completion in FY 2024-25, costing ₹67 lakh.

Infrastructure and Welfare Schemes

- 15th Finance Commission Funds: 12 projects executed, costing ₹18.7 lakh.
- Anganwadi Centres: Two centres under MGNREGS, with an estimated budget of ₹16 lakh.



Key outcomes observed in Danekera include:

- Regular GPEC and GPCC meetings, leading to better planning and stronger convergence with departments.
- The percolation tank project is under development, addressing long-standing water scarcity and enabling year-round farming.
- Distress migration is expected to decline as improved irrigation supports local agriculture and livelihoods.
- Community members now see the Panchayat as a legitimate forum for redressal, collaboration, and development.

Most importantly, there is a noticeable shift in the GP's identity—from passive administration to active self-governance. The mentorship approach, rooted in empathy, experience, and structured support, proved pivotal in reawakening civic consciousness.

Danekera Gp's revival under the Mentorship Programme shows that even the most inactive and neglected GPs can be transformed into vibrant local institutions—when equipped with empathetic leadership, sustained handholding, and structured governance mechanisms. His emphasis on handholding and mentoring is on getting into details of Panchayat operations, not shying away from asking tricky questions on subjects of finance and expenditure, and continually handholding members in their decision making through participating in their meetings as well as interacting with them individually. He visits Gram Panchayat twice a month.

Juxtaposing with classroom training, Kamakhya Ji's mentorship, grounded in local experience and participatory methods, created a ripple effect of accountability and enthusiasm among the elected representatives and the community. The Danekera case is a compelling example of how tailored interventions, combined with local ownership, can catalyse a bottom-up transformation in rural governance.

4.5 GIS-Based INRM Planning Integration in GPDP of Kushpahari GP

Context

Kushpahari GP is located in the hilly region of Shikaripara Block in Dumka District, Jharkhand. It comprises ten revenue villages with a combined population of 5,010 people, spread across 400 hectares. Although the area is officially categorised as irrigated, the challenging terrain and lack of effective water conservation infrastructure have severely limited actual irrigation capacity. Agriculture remains the primary source of livelihood, but due to persistent water scarcity, farmers have struggled to cultivate beyond the kharif season. Only about 30% of agricultural land is utilised during the Rabi and Zaid seasons. Additionally, limited healthcare and educational infrastructure, along with the marginalization of poor households, have further deepened socio-economic vulnerabilities.

Given this context, it was critical to emphasise the development of water structures to support agricultural sustainability. For small farmers, particularly those who migrate in search of higher wages, consistent water availability could reduce dependence on migration by enabling year-round farming. This is especially important for households with young children or elderly members, as migration often leads to children being left in the care of older relatives, where proper care is sometimes lacking. Recognising these challenges, the Kushpahari GP adopted a focused, community-driven approach to address natural resource degradation and seasonal livelihood insecurity by prioritising investments in water conservation and irrigation infrastructure.





Problem Statement

The key issue facing Kushpahari was the acute lack of effective irrigation infrastructure suited to its hilly geography. The terrain caused rapid runoff during the rainy season, preventing adequate water retention for year-round cultivation. This severely restricted agricultural productivity outside the monsoon season, affecting food security and income levels. Moreover, conventional planning methods failed to identify and address the needs of marginalised and vulnerable families, resulting in uneven development outcomes. The absence of a data-driven planning process also hindered optimal resource utilisation and coordination among government schemes.

Steps Taken

To overcome these challenges, Kushpahari GP undertook a strategic initiative to integrate GIS-based INRM planning into its GPDP. The GPCC facilitated the formation of GPPFT, and responsibilities were distributed among elected representatives, village organisations (VOs), and community leaders, including VOCC and Mahila Sabha representatives.

The GP emphasised capacity-building to support this new approach. PRI members and the GP Secretary underwent orientation at the block level, followed by training for GPPFT and ward members at the GP level. Concept-seeding sessions were held in all villages to familiarise residents with the objectives and importance of INRM planning.

Using GIS technology, the GPPFT team developed detailed social, resource, and activity maps of the GP, which were further validated through transect walks. These exercises enabled the identification of optimal sites for water harvesting structures and natural resource interventions. Village-level plans were consolidated and finalised at a GP-level Gram Sabha and were then entered into the eGramSwaraj portal with the help of the VLE.

Through this process, a comprehensive INRM plan was developed with a strong focus on implementation through convergence. The plan proposed the construction of 95 wells, 71 dobhas (farm ponds), 102 Trench cum Bunds (TCBs), and 25 land levelling initiatives across the ten villages. In addition to infrastructure, 92 previously left-out poor households were identified and included in the development plan. Specific convergence strategies were adopted to support these families, including linking five of them to the Pashudhan Vikas Yojana, under which they received four female goats and one male goat each. Other schemes from the Horticulture and Welfare departments were also integrated.

Results:

By effectively integrating spatial technology through CLART, community participation, and convergence with government schemes, the GP has made significant strides in tackling its longstanding water and agricultural challenges. This approach not only fosters environmental resilience but also promotes social inclusion.

Though implementation is still underway—with 208 infrastructure projects are in progress a positive outcomes are already evident. Agricultural productivity has improved, and community confidence is visibly growing.

Socially, the initiative has strengthened inclusive planning. The identification and targeted support of 92 previously overlooked poor households have bridged critical gaps between policy intentions and grassroots needs. These families are now actively engaged in various livelihood programmes, with many having received livestock to enhance their income sources.



4.6. Departmental Convergence: A Way Out of Resource Constraints

Context

All GPs receive fixed allocations under the 15th Finance Commission. However, the development priorities identified through the GPDP consistently surpass these budgetary allocations. Community consultations and Gram Sabha meetings have highlighted that the financial requirements for executing these plans are substantially higher than the funds available through regular Panchayat allocations. This disparity between needs and resources necessitates the mobilisation of additional funding through convergence with other government departments and schemes. Therefore, resource mobilisation from entities such as the District Mineral Foundation (DMF), Animal Husbandry, Soil and Water Conservation, Agriculture, and the District Panchayat is crucial to supplement GP budgets and facilitate comprehensive rural development that reflects local priorities.

Steps Taken

We describe here the process followed by GPs to access funds from different departments. The GPCC plays a key role in identifying convergence opportunities, as functionaries of different departments are members of the GPCC, who are able to provide information on schemes available with respective departments which can be tapped by GPs.

District Mineral Foundation (DMF)

In Chigadda and Khaira GPs, we observed the utilisation of DMFT funds estimated at ₹2 crores for the renovation of schools, digitalisation of Anganwadi centres, and installation of drinking water facilities in both schools and Anganwadis. To better understand the process of accessing and leveraging DMFT funds, we met with Mr. Sudeep Dutta, Senior Consultant and Team Lead at DMFT Dumka. He explained that although DMFT meetings are conducted at the district level. These meetings are chaired by the Block Development Officer (BDO) and attended by the Block Programme Officer (BPRO), along with Mukhiyas.

During these meetings, the DMF team proposes various areas for potential investment. For instance, Dumka DMFT has supported the provision of laptops and printers to all GPs and develop model Anganwadi centres equipped with play equipment, in addition to carrying out school renovations.

Fund allocation is generally divided between direct mining-affected areas and indirect or non-affected areas, with a preference often given to areas directly impacted by mining activities. However, as we understand, while DMF funds are to be planned based on priorities of GPs and its citizens, in most cases, the DMFTs take their own decisions. At the GP level, the process is to begin with GP convening a Gram Sabha, where community needs are discussed, and possible development interventions under DMFT funding are identified. After the Gram Sabha passes a resolution, the proposal is to be formally submitted for consideration of DMF.

These proposals are then to be evaluated and sanctioned in monthly convergence meetings attended by key district authorities. Implementation of sanctioned projects is undertaken exclusively by DMFT-appointed vendors. While the GP members are expected to monitor the progress of the work, the control and decision-making authority largely rests with the DMFT.



Animal Husbandry Department

GPs like Chilgora and Kuspahari successfully collaborated with the Animal Husbandry Department. A needs assessment of ultra-poor families helped identify key issues, one of which was coverage under social security. The GPs proactively worked to ensure these families were included under the social security net and supported in their livelihoods. These matters were discussed in GPCC meetings and block-level coordination committees. Animal Husbandry Department officials shared information on available provisions for livestock such as goats, ducks, and pigs. Families were counselled on how these animals could generate income and how to care for and feed them properly.

The counselling was conducted by Pashu Sakhi (Community Resource Person, PRADAN) and around 200 households across both GPs were reached. Engagement at the Block level and effective village-level planning were critical to this convergence. Access to timely information, proposal submission, and approval processes were also key factors that enabled successful implementation.

Soil and Water Conservation Department

In Danekera GP, in collaboration with the Soil and Water Conservation Department, 15 percolation tanks have been planned, of which 10 have been completed so far, covering approximately 50 acres of land. This convergence initiative began last year when the GP raised concerns about water storage for farmers. Due to rocky terrain and poor water channels, traditional irrigation options were not viable, making it difficult for farmers to grow crops and resulting in migration.

These issues were discussed in GPEC and GPCC meetings, where the construction of percolation tanks was identified as the most effective solution. The tanks help retain water, increase groundwater levels, and support irrigation for small and marginal farmers.

Effective coordination with the Soil and Water Conservation Department at the Block level was key to achieve this convergence. The process involved identifying the needs at the village level and presenting them through multiple platforms, including GPCC and block-level committee meetings.

For a detailed case study on Danekera Gram Panchayat, please refer to Sections 3.5.3 and 4.4.

4.7. Community Grassroots Leadership: Labhuk Samiti's Role in Project Execution and Governance

In the context of Jharkhand's Panchayati Raj system, the Labhuk Samiti (Beneficiary Committee) plays a critical role in the implementation of activities funded mostly under the 15th Finance Commission. Unique to the JPR Act, 2001, these committees are not only instrumental in executing projects but also in strengthening citizen capacity in implementation, as well as in promoting transparency and accountability of GP actions.

Formation Process and Structure

Once the GP finalises its annual development plans and uploads them on the eGramSwaraj portal, and subsequently receives funds under the 15th FC, the GP is required to form a Labhuk Samiti for each activity. Key steps towards formation of Labhuk Samiti include:

- **Constitution in the Gram Sabha:** A Labhuk Samiti is constituted through a Gram Sabha resolution. It typically comprises 7–8 members, who are direct beneficiaries of the proposed work.
- **Selection of Leadership:** An Adhyaksh (Chairperson) and a Sachiv (Secretary) are identified from among the members.
- **Opening of a Bank Account:** A dedicated joint bank account is opened in the name of the Labhuk Samiti to manage the project funds transparently.



Roles and Responsibilities

- Implementation and Supervision by Labhuk Samiti: The Samiti is empowered to implement works up to ₹5 lakhs directly. It is responsible for:
 - Identification and negotiation with vendors
 - Procurement of materials
 - Ensuring the timely and quality execution of the project
- Monitoring by Nigrani Samiti: The Nigrani Samiti, typically composed of remaining members from the community, supports oversight functions including:
 - Monitoring the quality and pace of the work
 - Verifying use of materials
 - Ensuring compliance with technical standards

Impact of Labhuk Samiti

- It distributes ownership among citizens and instils collective responsibility for public assets. It builds the capacity of rural citizens by:
- Involving them in financial and technical decision-making
- Empowering them with responsibilities typically handled by contractors or government departments
- Enabling women and Self-Help Groups (SHGs) to take leadership in governance processes

With direct responsibility towards execution, Labhuk Samitis enable greater transparency and foster local accountability.

Case of Husir GP

Husir GP has demonstrated an innovative and inclusive approach by forming Labhuk Samitis with participation from Self-Help Groups (SHGs). Recognising the strengths of SHGs in community mobilisation and financial discipline, the Panchayat leveraged their capabilities for the implementation of activities under the 15th Finance Commission. The SHG members were not only diligent but also experienced in managing vendor selection, negotiation processes, and ensuring adherence to quality standards. Their exposure to development work and strong organisational structure enabled the smooth execution of projects. As a result, the Panchayat was able to maintain transparency and accountability while empowering women with decision-making roles in local governance, thereby strengthening both community ownership and capacity.

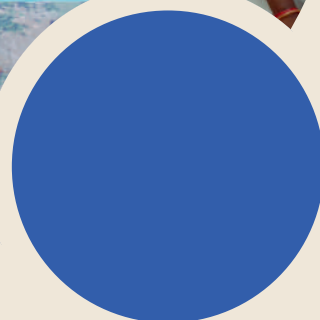
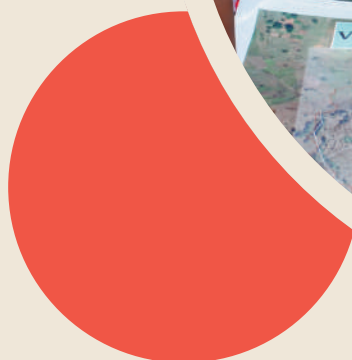


Case of Danekera GP

In Danekera GP, the implementation of all development activities, whether under the 15th Finance Commission or through departmental convergence programmes, is done exclusively through Labhuk Samitis. The Panchayat has institutionalised this approach to promote participatory governance and community accountability.

A notable example is the construction of a percolation tank carried out in convergence with the Soil and Water Conservation Department. The implementation was done by the Labhuk Samiti. The total project cost was ₹4,30,000, of which ₹43,000 (10%) was contributed upfront by the members of Labhuk Samiti and deposited into a jointly operated bank account (Labhuk Samiti and Soil and Water Conservation Department). The remaining ₹3,87,000 was released by the department in phases, based on progress milestones and completion of work. This phased funding approach promotes financial discipline, ensures accountability at each stage of implementation, and encourages active community participation.







CHAPTER 5:

Recommendations for Strengthening Gram Panchayat Planning, Budgeting, and Implementation

This chapter draws on insights from practices documented in earlier sections. The study has highlighted both enablers and challenges across all stages of the GPDP process, from the preparatory to implementation phase. A robust GP institution, with streamlined structures, systems and transparent decision-making processes, is essential for the effective formulation and implementation of the annual GPDP. This chapter highlights the strides made in Jharkhand, as well as some key systemic gaps, and provides recommendations which will improve the inclusiveness and institutional sustainability of the GPDP process. These measures are intended to deepen decentralized governance in spirit and improve last mile development delivery.

The planning process for the year 2025–26 witnessed a significant shift, particularly in terms of greater community involvement in the GPDP. Previously, GPDP planning was largely limited to a few dominant members of the Gram Panchayat and the Secretary. Plans were often uploaded at the block level with minimal awareness in the community regarding the plans or their approved budgets.

In 2025–26, efforts by the DoPR led to the formation of DRTs and BRTs. At the GP level, the GPPFT was formed, which assumed responsibility for designing development plans at the revenue village level. As a result of GPPFT, supplemented by forums such as Mahila Sabhas and Bal Sabhas, community participation increased significantly, and the plans, developed at the revenue level, were approved by the Gram Sabhas at the village level. Subsequent processes of approval in the Special Gram Sabha at the GP level and consolidation in the GPEC meetings aimed at ensuring inclusion of plans from all villages and citizens from different sections of the community. The inclusive process is discussed in detail in Chapters 5 and 6. Further, there are strides in areas of uploading to the eGramSwaraj portal, convergence with line departments and DMFTs, as well as in quality of plans, with shifts from primarily focusing on infrastructure to inclusion of actions leading to social development and maintenance of existing infrastructure.

Despite notable progress in the planning phase, there are a few systemic gaps which need further focus.

Firstly, the low participation of elected ward members of the GPs, especially women ward members. As we have observed during our field visits, involvement of ward members appears to be lower than that of other stakeholders in the GPFT. While they do attend revenue village planning meetings, the extent of





their contribution remains unclear. Several factors may contribute to this issue, such as lack of clarity among ward members regarding their roles, irregular and delayed honorarium payments, especially as compared to other GPFT members who are paid regularly, etc.

During our field visits, FGDs revealed that only about 2% of Ward members actively engaged in the planning discussions—particularly women ward members. The more active participants were Mukhias, VPRP facilitators, VO Adhyakshas, GP staff, MGNREGS mates, and Panchayat Secretaries.

Secondly, while planning has been the primary focus, budgeting and alignment with the 15th Finance Commission grants still pose significant challenges. Decisions related to budgets remain predominantly in the hands of the Mukhia and Secretary, and other members often lack clarity. The untimely release of 15th FC funds creates confusion in budget management. Plans often have to be revised due to shifting priorities when funds finally arrive. With respect to MGNREGS, while planning is relatively clear with well-defined activities and estimated costs, issues persist in fund allocation, especially due to delays in receiving material costs. Labour costs are disbursed, but materials-related payments continue to face bottlenecks.

Thirdly, conversion of plans to execution is low, sometimes as low as 5% (Please refer to the table in Section 3, Table 4). Due to the low percentage of plans being implemented, there is a planning fatigue among elected members as well as the community, especially as the planning exercise is very elaborate and involves several participants, spanning months. Reasons for plans not being implemented need to be studied and concerted efforts need to be made to improve the conversion ratio.

Lastly, selection of LSDGs does not seem to be an organic process during planning. At this point, there is little recall among the GPs and community. LSDGs are required primarily as they are a requirement for uploading plans. Due to this, potential of LSDGs as a transformative instrument remains to be realised.



Processes and best practices observed during the study will contribute to strengthening the planning and implementation processes, which we recommend should continue and be taken to scale. Key recommendations to overcome systemic gaps are highlighted here:

1. Empowering and Enhancing Engagement with Ward Members as Governance Pillars

Ward members serve as the crucial interface between citizens and GPs but are often excluded from meaningful engagement due to limited training, exposure and recognition. Supplementing classroom training with the mentorship-based approach, like the model in Danekera, may be pursued. Steps need to be taken to ensure motivation and recognition of ward members, such as ensuring parity in honorariums, rewards and recognition for outstanding Ward members. etc.

2. Mentorship as a Governance Capacity Strategy

Danekera's transformation illustrates how mentorship by experienced leaders fosters ownership and problem-solving. Towards this, the DoPR may launch a Mentor Panchayat Programme where high-performing ex-Mukhiyas or other resource persons mentor underperforming GPs. The State may create a mentor pool trained in facilitation, planning, implementation and convergence, deployed at block or district levels.

3. Providing a Fillip to the GPCC for Collaboration and Convergence

While the GPEC is mandated under the JPR Act, the GPCC has emerged from efforts from PRADAN to build collaboration among GPs and frontline functionaries, further notified by the State (Annexure number: 5). The GPCC is emerging as an important instrument, not just for collaboration towards problem solving at the village level, but also to secure knowledge of programmes and schemes under different departments, offering opportunities for convergence. The GPCC should be given a fillip and sustained.

4. Building Capacities for Budgeting and Bringing in Transparency

While planning has become more inclusive, budgeting remains opaque and often controlled by a few functionaries. Panchayat functionaries and GPFT members need to be trained to understand the concept of resource envelope, including the tied and untied funds of the 15th Finance Commission, State schemes, and convergence opportunities. Further, to enable accuracy in estimation, members need to understand model estimates, which may themselves need revision. Finally, to enable transparency, Mukhiyas and Sachivs may be asked mandatorily to disclose budgets at GPEC as well as with Gram Sabhas.

5. Bring attention to Implementation: Recommendations based on learnings from Danekera

In our field visits across eight GPs, a common pattern emerged—the ratio of planned to implemented activities remained consistently low, sometimes as low as 5%. Despite well-drafted plans and allocated budgets, the actual ground-level implementation lagged behind. Some GPs such as Danekera demonstrated higher implementation rates. This difference in outcome highlighted that implementation is not just a technical or financial issue, it is deeply institutional and relational. Drawing from Danekera's journey, several key steps have emerged as critical for effective implementation. These learnings can serve as a roadmap for other GPs striving towards meaningful action.

6. Build Understanding of LSDGs in an Organic Manner

While LSDG training was conducted at the Block level, its translation into actionable plans remains weak. The concept of LSDG has potential to facilitate conversations of identifying core priorities and vision of a GP. However, it has not seeped into local parlance. Awareness building on its themes, and helping GPs to link their vision to LSDG themes, rather than the other way round, may be focussed on. Further, if a theme is retained for two to three years, it may lead to better understanding and impact. For further focus on LSDGs, GPs may be allowed to spend a certain percentage of their allocated funds on chosen LSDGs.

7. Mainstreaming Mahila Sabhas and Bal Sabhas

Mahila Sabhas and Bal Sabhas have demonstrated strong potential as inclusive forums for planning and governance. To institutionalise Mahila Sabhas at the revenue village level, and conduct Bal Sabhas biannually in collaboration with schools, operational guidelines may be issued and provision for funds for their facilitation may be earmarked. The Operational guidelines can lay the path for resolutions from these forums to be integrated into GPEC and Gram Sabha discussions.

8. Streamline processes for Convergence, integrate GPDP with planning process at departments

GPs such as Khaira, Danekera, Bari, Kushpahari, and Chigadda have demonstrated effective departmental convergence, particularly with the DMF, Animal Husbandry, Soil and Water Conservation, and Agriculture departments. These have been possible primarily due to active GPCCs with participation of frontline functionaries from different departments and participation of Mukhiyas and Secretaries in block-level departmental forums. A somewhat missing link in convergence is initiatives by the line departments. GPDPs, if integrated with the planning process of line departments, will make their plans more relevant to the GPs and villages, and subsequent funds flow will be directed at priorities set by GPs and their citizens.

9. Focus on identification and enabling access to Ultra Poor

As witnessed in Chilgora GP, PRADAN's initiative to identify ultra poor has revealed that several families get left out from welfare schemes of the government. The present process of arriving at the baseline through the Participatory Assessment Tool, further validated by GPHD's resource persons and members of VOs, may need to be streamlined for adoption by other GPs. Integrating this methodology with the VPRP process will lead to a wider adoption, with Master trainers being trained on such methods and instruments.

10. Strengthening and Integrating Village level Department Committees in the Planning Process

Departmental committees such as the VHSNCs and SMCs are often dormant or underutilised. These committees may well be a bridge between departments and GPs, where they can provide information from departments to GPs, and take up local issues with their respective departments. They may be strengthened to enable further collaboration and convergence.

11. Mechanisms for Peer Learning and Knowledge Management

Such a study has revealed several best practices which should be widely shared. However, rather than a one-time exercise, this should be a continuous process. District and state teams may regularly document innovations, failures, and field adaptations. A GP Learning Portal may be launched to share best practices across the state, featuring case studies like Uрга's participatory GPPFT formation or Bari's decentralised Mahila Sabha model.

12. Revisit frequency of planning

Last, but not the least, perhaps there is a need to revisit the practice of annual planning. While states have provisioned for preparation of 5-year plans which should be revisited annually for some adjustments based on contemporary issues, the practice of elaborate annual planning continues. Starting in October, the planning cycle spans over 4 months, with uploading of plans getting delayed till April or May. With several stakeholders being involved in the exercise, the process of annual planning may be re-engineered to ensure optimal utilisation of time and resources.





In conclusion, we observed that the GPDP process is no longer just an administrative mandate, but has evolved into a vital instrument of grassroots democracy and inclusive development. However, to fully realise its transformative potential, the focus must shift from form to function: strengthening institutions, embedding inclusiveness, aligning budgets to needs, and fostering transparency, and even revisit its frequency. These recommendations offer a roadmap for deepening decentralised governance to make Panchayati Raj truly participatory, accountable, and effective in delivering the development priorities of the citizen.

The GPDP process has evolved beyond a routine administrative requirement; it now stands as a crucial tool for grassroots democracy and inclusive development. Yet, to unlock its full transformative potential, the focus must move from form to function—strengthening institutions, embedding inclusiveness, aligning budgets with actual needs, ensuring transparency, and reconsidering the frequency of the planning cycle.

Equally important is the institutionalisation of peer learning and knowledge-sharing mechanisms, which can foster cross-learning, innovation, and capacity-building across GPs. These recommendations together offer a clear path toward deepening decentralised governance and making Panchayati Raj more participatory, accountable, and effective in meeting the development priorities of citizens.

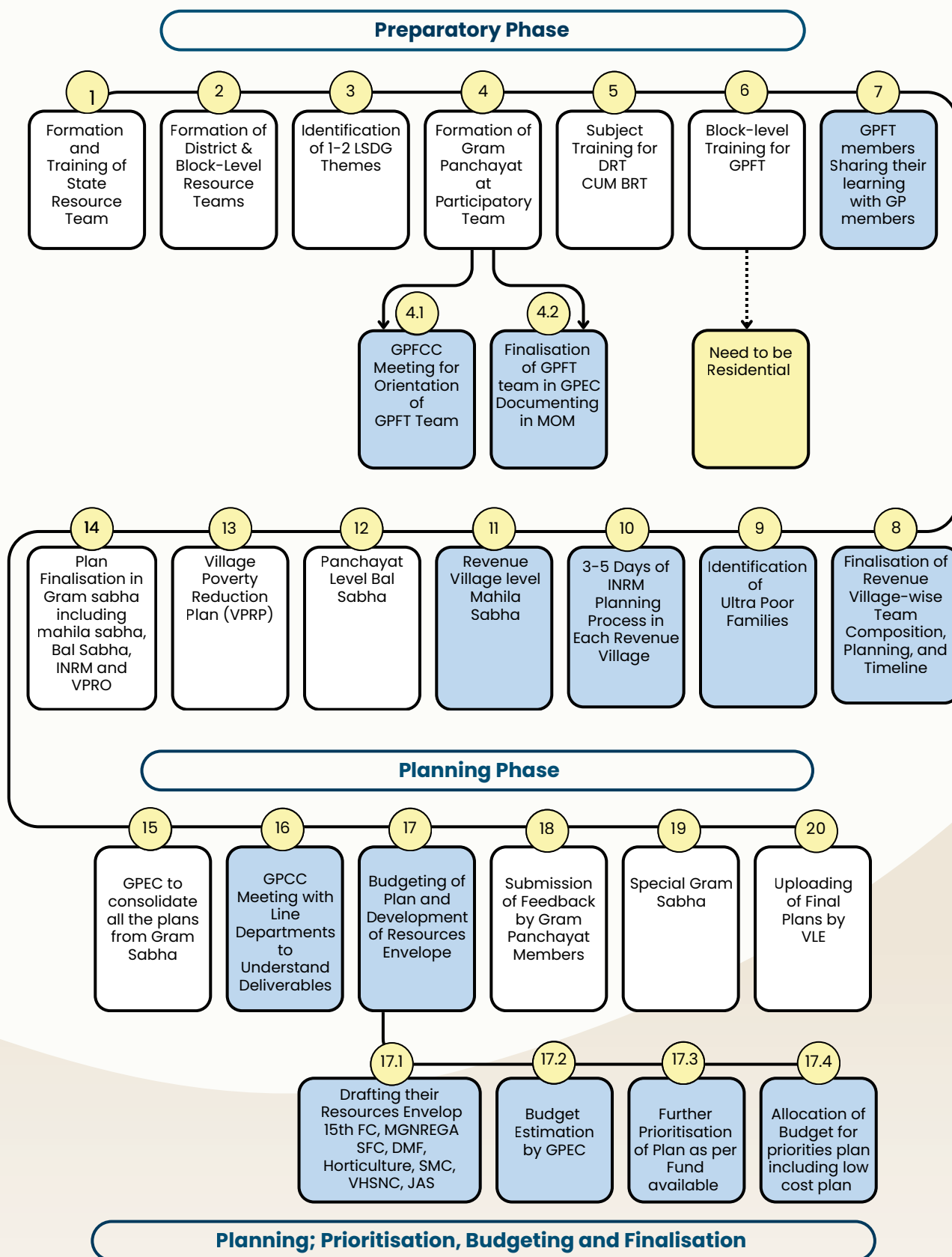
SOP:

The SOP for effective preparation of GPDP has been consolidated in Figure 8, incorporating some of the processes and best practices observed.

Further, Figures 9 and 10 illustrate the process to be followed for execution of plans under two main sources of funds for GPs: Central Finance Commission and MGNREGS. All the SOPs build on the State guidelines.



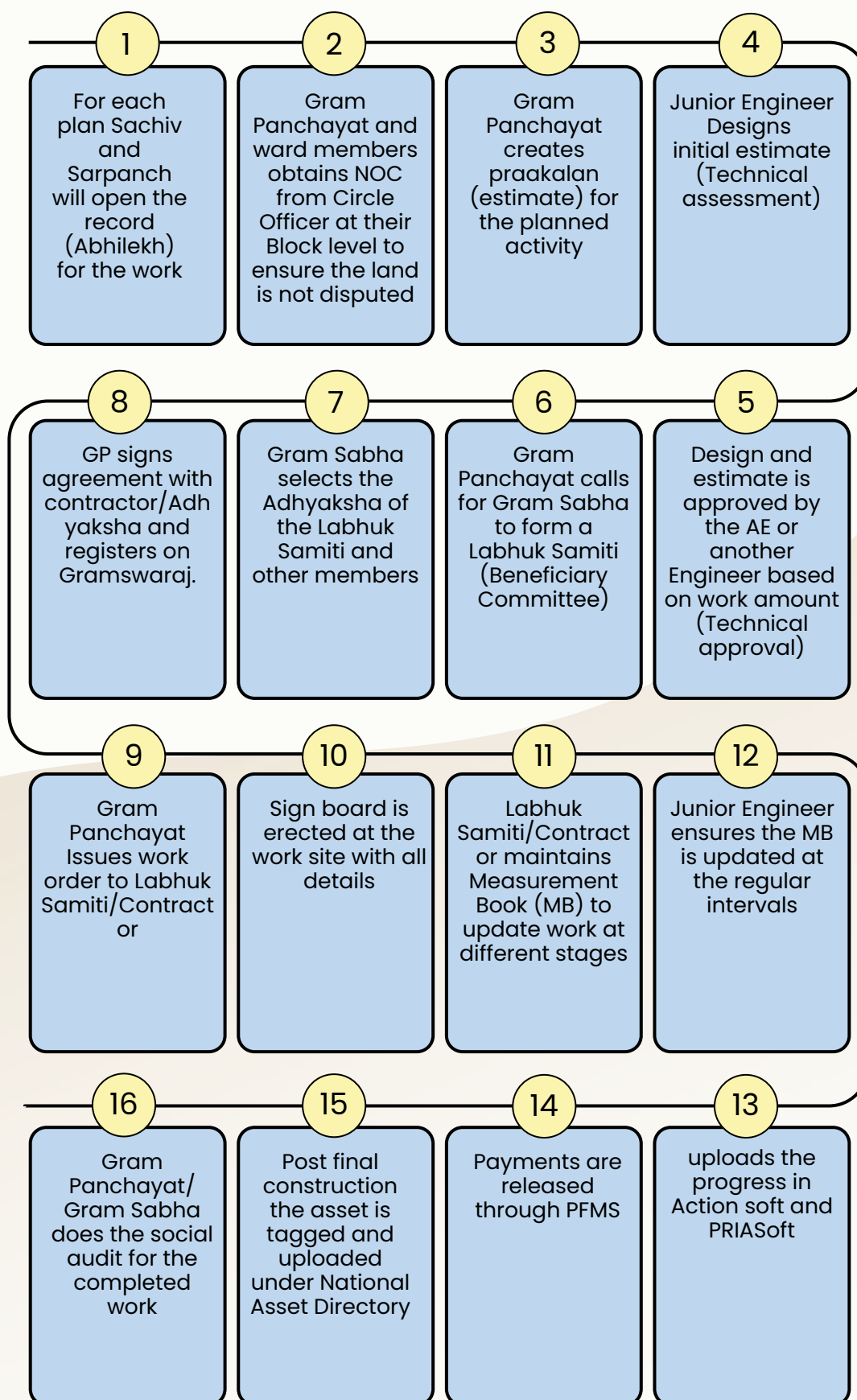
Planning Process



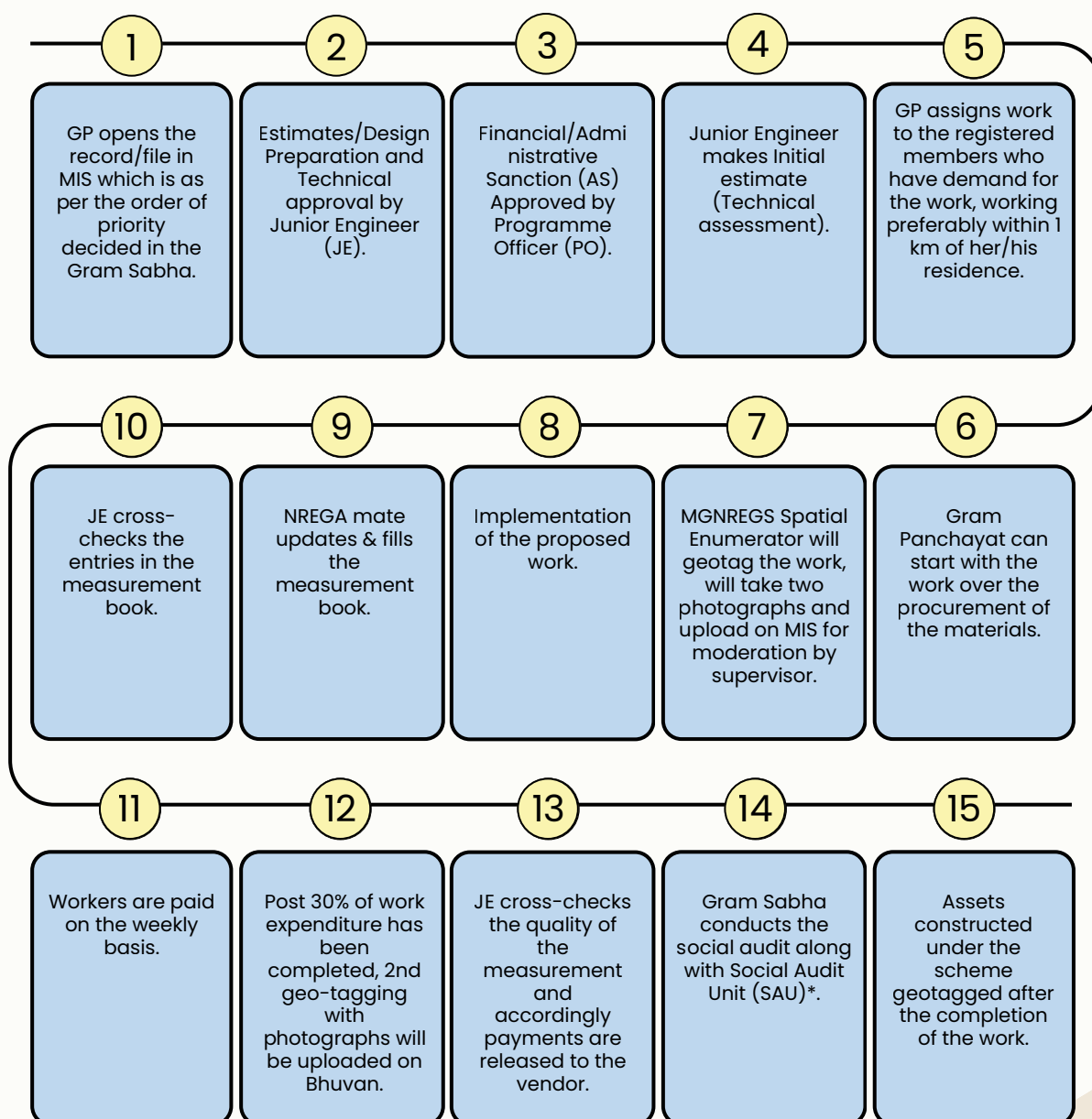
- As per the DoPR's Guidelines
- Recommended new steps
- Highlighted Comments

Implementation Process

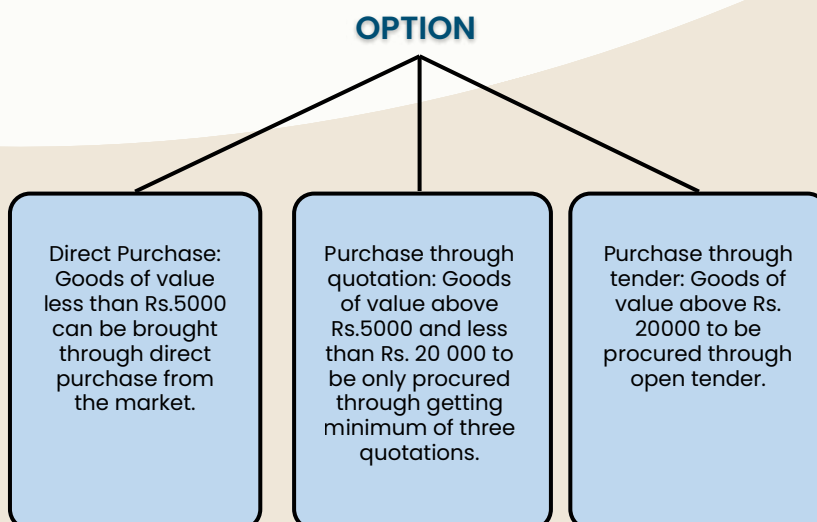
1. IMPLEMENTATION PROCESS FOR CONSTRUCTION PLANS FUNDED SOLELY FROM 15TH FC



2. Implementation process for construction plans funded through convergence (MGNREGS)



3. Plans requiring procurement of goods



Annexures List

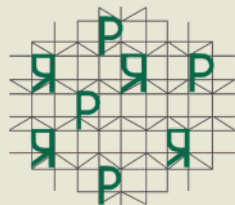
1. Annexure no 1: TOR
2. Annexure no 2: Proposal
3. Annexure no 3: Inception Report
4. Annexure no 4: Field Observation Report
5. Annexure no 5: Government letters and Notifications
 - 5.1: Letter for State Nodal Officer for GPDP
 - 5.2: Selection of DRT and BRT
 - 5.3: Selection of GPPFT members
 - 5.4: Detailed Guideline for the process of GPDP
 - 5.5: Training of GPPFT members
 - 5.6: Detailed process of Bal Sabha and Mahila Sabha
 - 5.7: Identification of VLE and Training
6. Annexure no.6. Plan vis-a-Vis Implementation _ Panchayat



*This booklet aims to support **better planning** and implementation of the **Gram Panchayat Development Plan (GDP)** by highlighting important practices and lessons from the field. It offers simple and practical suggestions to improve how GDP works, ensure that more voices are included in local **decision-making**, and strengthen the role of local institutions. These efforts are meant to make governance more people-centered and sustainable. By sharing these learnings, the document hopes to contribute to **stronger village-level planning**, better use of government schemes, and improved services that can truly reach the last mile and support community wellbeing.*

प्रदान
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