



A Study On Rural Women Vulnerable Group And Role Of Government In Enhancing Their Life

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Abstract: This study explores the challenges faced by rural women in India, focusing on their vulnerability as a marginalized group and the role of government initiatives in improving their lives. Rural women, particularly those living below the poverty line, encounter multiple layers of discrimination and disadvantage, shaped by socio-economic, cultural, and geographic factors. The study aims to examine the specific vulnerabilities of these women, including economic dependence, illiteracy, gender-based discrimination, and limited access to healthcare. It also evaluates the effectiveness of various government schemes designed to address these issues and enhance the socio-economic well-being of rural women. Through a mixed-methods research design, combining both quantitative and qualitative approaches, the study provides a comprehensive analysis of the challenges faced by rural women. The research involves 30 participants from the Wagoiya village in Vadodara district, Gujarat, selected through purposive and snowball sampling techniques. Data collection methods include semi-structured interviews, questionnaires, and non-participant observation. Secondary data from government reports and academic sources also contribute to the analysis. The findings highlight the significant barriers to empowerment that rural women face, including economic insecurity, inadequate healthcare, and social stigma. While government schemes show promise, their reach and effectiveness remain limited by issues such as insufficient awareness, implementation gaps, and cultural barriers. This research emphasizes the need for more targeted and inclusive policies that address the specific needs of rural women and promote their active participation in decision-making processes. The study calls for an integrated approach to empowerment, combining economic, educational, and social support systems to improve the lives of rural women in India.

Index Terms: Rural women, Vulnerability, Government schemes, Empowerment, Socio-economic challenges, Gender discrimination, Mixed-methods research.

I. INTRODUCTION

The term "**women**" encompasses a complex interplay of biological, social, cultural, and psychological dimensions, with roles and experiences varying across different societies. Traditionally defined by biological markers, such as reproductive anatomy, the understanding of gender has evolved significantly over time. Today, gender identity is recognized as diverse and not confined to biological markers alone. Thus, the term "women" includes not only cisgender individuals, whose gender identity aligns with the sex assigned at birth, but also transgender women who identify as female despite being assigned a different sex at birth. This broader definition emphasizes inclusivity and respect, acknowledging the varied experiences and identities of individuals who identify as women.

Historically, societal roles for women have primarily revolved around caregiving, child-rearing, and household management. However, as more women have entered diverse fields such as politics, education, business, and the arts, these traditional roles are undergoing significant transformation. This evolving understanding of women's roles challenges outdated stereotypes and opens up new opportunities for empowerment and gender equality. Feminist movements worldwide have advocated for gender equality, striving to dismantle barriers and promote women's autonomy in all aspects of life.

The intersectionality of rural women's challenges—comprising overlapping factors of gender, economic status, culture, and geography—renders them particularly vulnerable. This vulnerability is heightened by gender-based discrimination, limited financial empowerment, and systemic barriers that restrict their participation in economic and social decision-making. These women often remain marginalized due to entrenched patriarchal structures and societal expectations that limit their personal development and access to opportunities.

Given these challenges, government policies and interventions are crucial for improving the lives of rural women. However, the effectiveness of these initiatives remains questionable, with significant gaps in awareness, implementation, and accessibility. This study aims to assess the vulnerabilities of rural women, particularly those living below the poverty line, and to evaluate the role of government schemes in addressing these vulnerabilities. By examining the socio-cultural, economic, and political barriers faced by rural women, this research seeks to contribute to a deeper understanding of the intersectional nature of gender inequality and propose actionable solutions for enhancing their quality of life.

This study will employ a mixed-methods approach, combining quantitative and qualitative data collection strategies to provide a comprehensive view of rural women's lives. By focusing on a specific village in Gujarat, India, the research aims to highlight the systemic issues at play while exploring how targeted government interventions can better support rural women's empowerment. The findings from this research will help inform policies, programs, and interventions that can positively impact the lives of these women, fostering gender equality and social justice in rural India.

Defining Vulnerability

Vulnerability refers to the increased susceptibility of specific groups within society to negative outcomes due to social, economic, and health inequalities. This susceptibility stems from various factors, including personal characteristics, social conditions, and systemic barriers that restrict access to resources and hinder the ability to cope with challenges. Vulnerable groups often face multiple forms of discrimination and exclusion due to intersecting factors such as gender, socioeconomic status, ethnicity, caste, disability, and age.

According to the WHO, vulnerability is defined as: "the characteristics determined by physical, social, economic, and environmental factors or processes which increase the susceptibility of an individual, a community, assets, or systems to the impacts of hazards" (UNDRR Terminology, 2017).

Vulnerable groups often face overlapping risk factors such as poverty, discrimination, social exclusion, and limited access to education and healthcare. These factors, along with age, gender, disability, and geographic location, contribute to disparities in health outcomes and social participation. Vulnerability is dynamic and intersectional, with individuals from multiple marginalized groups facing compounded disadvantages. Addressing these challenges through improved access to education, healthcare, housing, and economic opportunities is essential for promoting equity, social justice, and building more inclusive communities.

Key programs for rural women include the National Rural Livelihoods Mission (NRLM), Mahila E-Haat (for women entrepreneurs), Beti Bachao Beti Padhao (BBBP), and Pradhan Mantri Awas Yojana (PMAY), which aim to address their unique challenges, including economic empowerment, healthcare, education, and housing.

The government also supports advocacy campaigns and research initiatives, such as the National Family Health Survey, to inform policies that promote gender equality and challenge harmful norms.

Gaps in Government Programs

Despite numerous government initiatives aimed at supporting rural women, significant gaps persist in their effectiveness. Issues such as inadequate outreach, bureaucratic inefficiencies, and deeply rooted societal norms often undermine these efforts. Many rural women remain unaware of their eligibility for vital programs like the Maternity Benefit Program and health insurance. Even when they have this knowledge, cultural barriers frequently prevent them from accessing these crucial benefits. Furthermore, the monitoring and evaluation systems for these programs are alarmingly weak, suffering from a lack of sufficient data and thorough analysis.

Promoting Sustainable Development

Empowering rural women transcends the realm of social justice; it is a fundamental pillar of sustainable development. Women are indispensable to rural economies, contributing significantly through agriculture, household management, and community building. By enhancing their skills and capacities, we can achieve improved health outcomes, increased economic productivity, and a fairer, more inclusive society.

Contribution to Policy Practice

This study is poised to fill a critical information void by examining the real-life experiences of rural women with government programs. It aims to provide policymakers and practitioners with valuable insights into effective interventions, ensuring that government resources are delivered to those who need them most. Additionally, the study will investigate how public-private partnerships can further enhance the effectiveness of these programs, creating a holistic approach to support.

Need for the Study

Research focused on vulnerable rural women is crucial for fostering gender equality, championing social justice, and driving inclusive development. It uncovers systemic barriers, identifies opportunities for targeted interventions, and raises awareness of the unique challenges these women face. Ultimately, this study will inform policies and interventions designed to elevate health standards, expand economic opportunities, and enhance overall well-being, ensuring that no one is left behind in the journey toward equitable development.

LITERATURE REVIEW

1. Inadequate Access to Complete Medical Services

Access to healthcare remains one of the most significant barriers to improving the health outcomes of rural women. Although India has made some strides through initiatives like the National Rural Health Mission (NRHM), rural areas continue to suffer from a lack of qualified healthcare professionals, inadequate infrastructure, and cultural barriers that prevent women from seeking care (Vora et al., 2017). This inadequacy leads to significant health disparities, with maternal health, malnutrition, and reproductive health being the most affected areas. Rural women often face delayed access to medical services, which exacerbates maternal mortality rates and leads to poor health outcomes (Vora et al., 2017).

The **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)**, aimed at providing free prenatal care to pregnant women, has shown promise but suffers from accessibility issues, particularly in remote rural areas (Vora et al., 2017). Research by **Vora et al. (2017)** underscores the shortage of healthcare professionals in rural areas, contributing to delayed care for reproductive health needs. A more holistic healthcare model is required, one that blends hospitals, local clinics, and mobile health services. The **Grameen Bank's health programs in Bangladesh** provide an exemplary model for improving healthcare access by training community health workers. A similar approach in India could empower rural women to become health ambassadors, facilitating access to medical care.

2. Laws to Protect Against Sexual Violence

While India has enacted various laws to protect women against sexual violence, such as the **Criminal Law (Amendment) Act** and the **Protection of Women from Domestic Violence Act**, the implementation of these laws in rural areas has been inconsistent (Kabeer, 2003). Social stigma, a lack of legal awareness, and fear of retaliation often prevent rural women from reporting sexual violence, which results in low conviction rates and a lack of justice (Kabeer, 2003). This issue is compounded by the under-preparedness of local law enforcement agencies in rural areas to handle sexual violence cases (Kabeer, 2003).

Research by **Kabeer (2003)** critiques the enforcement of these legal provisions, highlighting the role of patriarchal norms, economic dependence on abusers, and institutional biases as major obstacles to justice. The low levels of legal awareness and social exclusion often deter women from reporting abuse, leaving them vulnerable to ongoing violence. To improve responses to sexual assault, establishing **One-Stop Crisis Centers (OSCCs)** in rural areas could offer immediate legal, medical, and psychological support to survivors. Training for law enforcement officials and local courts is also necessary to strengthen their capacity to handle such cases effectively. Drawing from successful international models, such as those in **Mexico**, where survivors receive comprehensive support, could guide India's efforts in better addressing sexual violence (Sharma, 2019).

3. Exclusion of Marginalized Women

One of the most significant challenges in the empowerment of rural women is the exclusion of marginalized groups, such as women from **Scheduled Castes (SC)**, **Scheduled Tribes (ST)**, and migrant workers, from government welfare schemes. Despite the introduction of programs like **MGNREGA** and the **National Rural Livelihoods Mission (NRLM)**, these groups often face additional barriers, such as caste-based discrimination, lack of mobility, and limited access to financial resources (Mishra & Sinha, 2021).

Mishra and Sinha (2021) argue that caste-based discrimination prevents Dalit and Tribal women from fully participating in **Self-Help Groups (SHGs)** and other skill development programs. Even though these women are technically eligible for benefits, social stigma and systemic exclusion often hinder their participation. To address this, **targeted initiatives** with provisions to combat caste-based discrimination should be established. Affirmative action in SHGs and creating dedicated spaces for marginalized women in local governance could help improve their participation. **Skill-building workshops** and financial literacy programs tailored to Dalit and Tribal women can help empower them economically (Mishra & Sinha, 2021).

Migrant women, especially those engaged in seasonal labor or working in informal sectors, also face significant challenges in accessing government schemes. Their mobility complicates tracking for welfare programs, and they often lack the necessary documentation to access benefits like MGNREGA or NRLM, making them vulnerable to exploitation (ILO, 2014). **ILO (2014)** highlights the exclusion of migrant women from formal labour markets and their lack of social security, which limits their access to services such as healthcare, education, and legal protection. A more **mobile and portable policy** framework is needed to ensure that migrant women can access benefits regardless of their location. Additionally, establishing **state-level and national registries** for migrant workers would facilitate access to essential services (ILO, 2014).

4. Challenges with Government Interference and Implementation

Despite the existence of numerous government schemes, their effectiveness is often hampered by systemic issues such as **corruption** and **bureaucratic inefficiencies**. According to **Joshi and Aiyar (2004)**, the allocation of funds for women's development initiatives is often misused or diverted due to poor monitoring and accountability mechanisms. This undermines the potential impact of the programs.

Cultural and societal factors also contribute to the ineffectiveness of government programs. As noted by **Kabeer (1999)**, patriarchal norms and restrictive gender roles in rural areas often prevent women from fully benefiting from programs such as MGNREGA or SHGs. In many rural communities, women are still expected to prioritize household duties over public engagement, which limits their participation in community activities and access to economic opportunities (Kabeer, 1999). The success of these programs depends heavily on shifting entrenched gender norms and increasing women's participation in decision-making processes at the community level (Mishra & Sinha, 2021).

In conclusion, the challenges faced by rural women in India in terms of healthcare, protection from sexual violence, and access to social assistance are multifaceted and deeply rooted in social, economic, and cultural structures. While government initiatives have made progress, there are significant gaps in addressing these issues effectively, particularly for marginalized groups such as Dalit, Tribal, and migrant women. There is a need for more inclusive policies that tackle caste-based discrimination, mobility barriers, and social exclusion, while also improving the implementation of existing programs to ensure that resources reach the most vulnerable women. By addressing these critical issues, India can create a more inclusive and effective framework for the empowerment of rural women, ultimately contributing to a more equitable and just society.

RESEARCH METHODOLOGY

Research design

The study will employ a mixed-methods approach, combining quantitative data on healthcare access, and social exclusion with qualitative interviews and focus groups to understand rural women's experiences, aiding in developing effective interventions.

Objectives of the study:

To understand and study the profile and why they considered as of Rural vulnerable group of women.
To identify key vulnerabilities faced by the vulnerable group of Rural women.
To evaluate government schemes in addressing rural women vulnerable life.

Population and Sample Size:

The study will involve 30 respondents, aged 18 and above, from rural areas of Vadodara, Gujarat. Participants will be selected randomly from villages within the Below Poverty Line (BPL) category, ensuring that marginalized rural women, particularly affected by healthcare access, sexual violence, and exclusion from social assistance, are represented.

Data and Sources of Data

This study utilized both primary and secondary data collection tools. Primary data was gathered through research-guided questionnaires, informant interviews, and direct field observations, while secondary data was obtained from published and unpublished materials, including state policies, journals, reports, articles, books, and research paper on vulnerable women. This study collected and analyzed both numerical (quantitative) and descriptive (qualitative) data. The numerical data was processed using SPSS software, where survey responses were entered to calculate frequencies and percentages. The results were then organized and displayed in tables, charts, and graphs using Microsoft Word and Excel. The descriptive data was grouped into themes and analyzed to support the numerical findings. Sometimes, direct quotes from respondents were included to highlight their personal experiences.

Sampling Method:

Non-probabilistic-purposive sampling and Snowball Sampling were used for the study

Research Setting:

The researcher identified Waghodia as the area of the study. The study was conducted in the Waghodia areas. Waghodia Takula of Vadodara district has a total population of 149,914 according to the Population Census (2011, India).

Limitations of the Study:

Studying rural women in India is crucial for understanding their challenges and developing interventions. Challenges include access, sampling bias, social stigma, ethical considerations, language and cultural barriers, and resource constraints. Time management, budget constraints, and language differences can hinder effective communication.

Statistical Tools

Microsoft Word and Excel: Microsoft Word is primarily used for creating and editing documents such, as reports, and essays.

Microsoft Excel is primarily used for organizing and analyzing data using spreadsheets and formulas to create charts, graphs, and diagrams.

Scope

This streamlined approach outlines a clear framework for data collection and analysis, ensuring targeted and meaningful findings to inform policies and interventions for rural women in India.

IV. RESULTS AND DISCUSSION

Table 4.1 Age of the Respondents

Age of the Respondents		
Age	Frequency (F)	Percentage (%)
Below 20	1	3.3
20-30	7	23.3
31-40	8	26.7
41-50	9	30
51 above	5	16.7
	Total 30	Total 100

The Above table shows that 30% (n=9) of the respondents are aged 41 to 51. Meanwhile, the other 26.7% (n=8) of the respondents are between 31 and 40. Additionally, 23.3%(n=7) of the respondents are aged between 20 to 30. Another 16.7% (n=5) of the respondents are aged above 51 and 3.3% (n=1) of the respondents are aged below 20. By this, it can be concluded that the majority of the respondent's age ranges between 41-50 (n=9) and 30%.

Table 4.2 Marital status of the respondent

Marital status	Frequency (F)	Percentage (%)
Single	9	30
Married	17	56.7
Widow	4	13.3
Divorced\Seperated	0	0
	Total 30	Total 100

The above table shows that 56.7%(n=17) of the respondents are married. Whereas 30% (n=9) of the respondents are single. Additionally, 13.3 % (n=4) of the respondents are single. By this, it can be concluded that the majority of the respondents are married (n=17) 56.7%

Table 4.3 Education level of the respondent

Education level	Frequency(f)	Percentage (%)
No formal Education	7	23.3
Primary level	10	33.3
Secondary level	6	20
Higher level	5	16.7
Graduate and above	2	6.7
	Total 30	Total 100

The Above table shows that 33.3%(n=10) of the respondents hold a primary level of education. Whereas 23.3%(n=7) of the respondents are from no formal education. Additionally, 20%(n=6) of the respondents are holding secondary education. While 16.7%(n=5) of the respondents have a higher level of education

and 6.7%(n=2) of the respondents are graduate and above. By this, it can be concluded that the majority of the respondents have having primary education level(n=10)33.3%.

Table 4.4 Type of family structure that the respondent belongs.

Type of the Family Structure	Frequency(f)	Percentage (%)
Single Family	4	13.3
Nuclear Family	14	46.7
Joint Family	11	36.7
Extended Family	1	3.3
	Total 30	Total 100

The above table shows that 46.7%(n=14) of the respondents are from a nuclear family. Whereas 36.7%(n=11) of the respondents are from a joint family. Additionally,13.3%(n=4) of the respondents are from a single family. While 3.3%(n=1) of the respondents are from extended family. By this, it can be concluded that the majority of the respondents belonged to the nuclear type of family(n=14) 46.7%.

Table 4.5 Occupation of the respondents

Occupation	Frequency (f)	Percentage (%)
Wage labour	7	23.3
Employed	4	13.3
Un Employed	12	40
Business	1	3.3
Agriculture	4	13.3
	Total 30	Total 100

The Above table shows that 40%(n=12) of the respondents are unemployed. Where as23.3 %(n=7) of the respondents are involved in wage labour. While others 13.3%(n=4) of the respondents are employed. Additionally, 13.3%(n=4) of the respondents are in the agricultural sector. Whereas 3.3%(n=1) of respondents are into Business. By this, it can be concluded that the majority of the respondents are unemployed (n=40) 40%.

Table 4.6 Approximate Household Income of the respondent

Approximate Household Income	Frequency(f)	Percentage (%)
Less than ₹5,000	6	20
₹5,000 - ₹10,000	8	26.7
₹10,000 - ₹20,000	10	33.3
More than ₹20,000	6	20
	Total 30	Total 100

The above table shows that 33.3%(n=10) of the respondents are from ₹10,000 - ₹20,000 household Income background. Whereas 26.7% (n=8) of the respondents are between ₹5,000 - ₹10,000 of approximate household income. Additionally, 20%(n=6) of the respondents are less than ₹5,000 of approximate. While the other 20%(n=6) of the respondents are from More than ₹20,000 of monthly household approximate income. By this, it can be concluded that the majority of the respondent's Approximate household income ranges between ₹10,000 - ₹20,000 (n=10) 33.3%.

Table 4.7 Independent source of Income by the respondent

Independent source of Income	Frequency(f)	Percentage (%)
Yes	10	33.3
No	20	66.7
	Total 30	Total 100

The above table shows that 66.7%(n=20) of the respondents do not have an independent source of income. Additionally, 33.3%(n=10) of the respondents are having an independent source of income. By this, it can be concluded that the majority of the respondents do not have an independent source of income to support their family. (n=20) 66.7%.

Table 4.8 Facilities which access by the respondent

Access to the following	Frequency(f)	Percentage (%)
Clean Drinking Water	3	10
Proper sanitation	9	30
Electricity facility	7	23.3
Health care facilities	5	16.6
Transportation	2	6.6
Education	4	13.3
	Total 30	Total 100

The above table shows that 30 %(n=9) of the respondents have proper sanitation facility to them. Additionally, 23.3%(n=7) of the respondents have electricity facilities at their home. While 16.6%(n=5) of the respondents have healthcare facilities. However,13.3%(n=4) of the respondents have education facilities for their children. Whereas 10%(n=3) of the respondents have clean drinking water facility to them. Along with it, 6.6 %(n=2) of the respondents are having transportation facility to them. By this, it can be concluded that the majority of the respondents have a good proper sanitation facility available to them compared to their past 30%(n=9).

Table 4.9 Challenges faced by the respondent in their daily life

Challenges faced by the respondent	Frequency(f)	Percentage (%)
Lack of employment	3	10
Gender discrimination	3	10
Domestic violence	2	6.7
Lack of healthcare	5	16.6
Education for children	7	23.3
Social stigma	4	13.3
Financial problems	6	20
	Total 30	Total 100

The above table shows that 23.3% (n=7) of the respondents are facing education for their children as a challenge. Additionally, 20% (n=6) of the respondents are facing financial problems. Whereas 16.6% (n=5) of the respondents are facing health care problems. However, 13.3% (n=4) of the respondents are facing social stigma challenge. While 10% (n=3) of the respondents are facing a lack of employment problems. While the other 10% (n=3) of the respondents are facing gender discrimination problems. Whereas 6.7% (n=2) of the respondents are facing domestic violence as a challenge faced by them. By this, it can be concluded that the majority of the respondents are facing Education as a challenge for their children.

Table 4.10 shows all the schemes aware by the respondent.

Awareness of the schemes	Frequency(f)	Percentage (%)
Mahatma Gandhi National Rural Employment Guarantee Act	4	13.3
Janani Suraksha Yojana – 2005	7	23.3
Pradhan Mantri Ujjwala Yojana	12	40
Sukanya Samridhi Yojana	7	23.3
	Total 30	Total 100

The above table shows that 40% (n=12) of the respondents are aware of Pradhan Mantri Ujjwala Yojana. Whereas 23.3% (n=7) of the respondents are aware of Janani Suraksha Yojana (2005). Additionally, 23.3% (n=7) of the respondents are aware of Sukanya Samridhi Yojana. Among others, 13.3% (n=4) of the respondents are aware of Mahatma Gandhi National Rural Employment Guarantee Act. By this, it can be concluded that the majority of the respondents are aware of Pradhan Mantri Ujjwala Yojana. (n=12) 40%.

Table 4.11 shows How respondents got to know about government schemes.

Awareness	Frequency (f)	Percentage (%)
Village Meetings	7	23.3
Television/ Radio	7	23.3
Friends/ Family Members	13	43.3
Government Officials	3	10
	Total 30	Total 100

The above table shows that 43.3%(n=13) of the respondents got to know about these government schemes through friends and family members. Whereas 23.3%(n=7) of the respondents go to know about government schemes via village meetings and through television/ radio. Additionally, 10%(n=3) of the respondents are going to know about these government schemes through government Officials. By this, it can be concluded that the majority of the respondents became aware of government schemes via their friends and family members.

Table 4.12 Whether respondents benefited from government schemes or not.

Benefit from government schemes	Frequency(f)	Percentage (%)
Yes	18	60
No	12	40
	Total 30	Total 100

The above table shows that 60%(n=18) of the respondents have benefited from government schemes. Whereas 40%(n=12) of the respondents do not benefit from government schemes. By this, it can be concluded that the majority of the respondents benefited from the government schemes(n=18) 60%.

Table 4.13 Shows the Barriers faced by the respondents for not using the government schemes

Reason For not utilizing government schemes	Frequency(f)	Percentage (%)
Lack of Information	7	23.3
Complication process	10	33.3
Corruption	5	16.6
lack of required documents	5	16.6
Not eligible for the scheme	2	6.6
No interest	1	3.3
	Total 30	Total 100

The above table shows that 33.3 %(n=10) of the respondents are not using government schemes due to the complicated process involved while applying for them. Whereas 23.3%(n=7) of the respondents are finding applying for government schemes due to its lack of information. Additionally, 16.6%(n=5) of the respondents are not applying for government schemes due to corruption which involves along lack of required documents. While 6.6%(n=2) of the respondents said that they are not using government schemes due ineligible for the schemes. Whereas 3.3%(n=1) of the respondents do not have an interest in applying for government schemes. By this, it can be concluded that the majority of the respondents are saying the reason for not applying for government schemes is due to its complicated process which involves.

Table 4.14 shows How easy was to apply for Government schemes the respondent.

Application for Government schemes	Frequency(f)	Percentage (%)
Easy	5	16.7
Somewhat Easy	11	36.7
Difficult	11	36.7
Very Difficult	3	10
	Total 30	Total 100

The above table shows that 36.7 % (n=11) of the respondents finding it difficult for applying government schemes. Whereas 36.7% (n=11) of the respondents are finding it somewhat easy for applying government schemes. Additionally, 16.7% (n=5) of the respondents are finding it difficult for to apply foe government schemes. While other 10% (n=3) of the respondents are finding it very difficult in applying for government schemes. By this it can be concluded that majority of the respondents are found it difficult to somewhat easy while applying to the government schemes. (n=11)36.7%

Table 4.15 shows whether respondent household income has changed after the use of this government scheme.

Income grown due to schemes	Frequency(f)	Percentage (%)
Yes	6	20
Slightly	8	26.7
No Change	16	53.3
	Total 30	Total 100

The above table shows that 53.3% (n=16) of the respondents had no change in their household income after usage of government schemes. Whereas 26.7% (n=8) of the respondents had a slight change in their income after usage of government schemes. Additionally, 20% (n=6) of the respondents are saying yes that they found growth in their household income due to these government schemes. By this, it can be concluded that the majority of the respondents stated that there is no income growth due to the usage of government schemes. (n=16) 53.3%.

Table 4.16 Shows that How effectively government schemes are improving respondent life.

Effectiveness of government schemes	Frequency(f)	Percentage (%)
Yes	18	64.3
No	12	35.7
	Total 30	Total 100

above table shows that 64.3 % (n=18) of the respondents said that these government schemes are improving their lives. Whereas 35.7% (n=12) of the respondents are saying no because They didn't find any improvement in their life. By this, it can be concluded that the majority of the respondents are saying YES there is effectiveness due to the usage of government schemes which improve their life (n=18) 64.3%

Table 4.17 shows the Area where government schemes can be Improved \ Supported According to the Respondents.

Additional support\ Improvements from Government schemes	Frequency(f)	Percentage (%)
Better Awareness Programme	5	17.2
Easier Application Process	12	41.4
More Financial support	9	31
More Employment Opportunities	3	10.3
	Total 30	Total 100

The above table shows that 41.4%(n=12) of the respondents suggested improvement in the area of making easy application process while applying for government schemes. Whereas 31%(n=9) of respondents are saying that they want more financial support. Additionally, 17.2 %(n=5) of respondents are saying that they can improve better awareness Programme. While 10.3%(n=3) of the respondents said that it would be good if they improved more employment opportunities. By this, it can be concluded that the majority of the respondents are saying that they should improve in the area of making easier application process while applying for government schemes. (n=12)41.1%.

CONCLUSION

The study emphasizes the need for focused government intervention to address the unique needs of rural women, particularly in the areas of education, employment opportunities, and financial independence. Improving the accessibility and impact of government schemes is essential to ensure that rural women, who often face multiple layers of vulnerability, can benefit fully from these programs. This research provides valuable insights into the challenges and opportunities faced by rural women in India, with a focus on their vulnerabilities and the role of government interventions in improving their quality of life.

The findings highlight several key demographic and socio-economic characteristics of rural women, such as their age distribution, marital status, and educational attainment. A significant proportion of respondents are middle-aged, with many having limited formal education, particularly in higher levels. This underlines the need for targeted government schemes that promote education and skill development, enabling women to improve their socio-economic status.

Family structure and the number of children significantly impact the lives of rural women, with most respondents coming from nuclear families and having two children. This emphasizes the importance of family-centered interventions, especially in areas such as childcare, education, and financial support. Moreover, a large percentage of women remain unemployed, indicating the need for vocational training programs, entrepreneurship support, and greater job opportunities in rural areas.

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