



**IMPACT ASSESSMENT OF
CSR INTERVENTIONS OF
NUMALIGARH REFINERY LIMITED
(FY 2022-2023, 2023-2024 & 2024-2025)**

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LIST OF ABBREVIATIONS

Abbreviation	Full Form
BPHC	Block Primary Health Centre
BPL	Below Poverty Line
CHC	Community Health Centre
CSR	Corporate Social Responsibility
FY	Financial Year
GDSA	Golaghat District Sports Association
H.P.B.	Hemo Prasad Barua
HSS	Higher Secondary School
INR	Indian National Rupee
JDSG	Jawahar Deva Sarani Government
LED	Light Emitting Diode
M.E.	Middle English (Middle School)
MMPA	Million Metric Tonnes Per Annum
MPHC	Mini Primary Health Centre
NRL	Numaligarh Refinery Limited
NGO	Non-Governmental Organisation
OBC	Other Backward Classes
OPD	Out-Patient Department
PHC	Primary Health Centre
SC	Scheduled Caste
ST	Scheduled Tribe
TISS	Tata Institute of Social Sciences
VK	Vivekananda Kendra

EXECUTIVE SUMMARY

This impact assessment report examines the effectiveness, utilization, and outcomes of Corporate Social Responsibility (CSR) interventions implemented by Numaligarh Refinery Limited (NRL) across key sectors including sports, healthcare, education, and rural development. The assessment is based on field observations, stakeholder interactions, and primary data collected from beneficiaries across multiple project sites in Assam. Overall, the findings indicate that NRL's CSR initiatives are well-conceived, largely functional, and effectively utilized at the ground level. Individually, each project is valued above INR 1 crore. Across sectors, there is consistent evidence of infrastructure being operational, actively used, and contributing to improved access, service delivery, and quality of life among beneficiary communities.

In the sports sector, investments such as the NRL Football Academy, flood lighting at GDSA Stadium, and indoor stadiums in educational institutions have enhanced sports infrastructure and increased participation, particularly among youth. Facilities are functional and regularly used, though there remains scope for better maintenance systems and more structured sporting events to maximize potential. The healthcare interventions demonstrate significant impact in improving access to primary and secondary healthcare services. Renovation of health centres has led to increased patient footfall, better service delivery, and reduced out-of-pocket expenditure. The provision of medical equipment and ambulances has strengthened institutional capacity and emergency response systems. Notably, the Mobile Medical Camps under Project Niramoy have emerged as a highly effective outreach model, particularly for marginalized populations. With high levels of accessibility, repeated utilization (77.9% using services four or more times), and strong satisfaction levels (over 55% rating services as excellent), the camps have contributed to early diagnosis, improved health outcomes, and reduced disease burden.

In the education sector, infrastructure development in schools and colleges, along with the operation of the VK NRL School of Nursing, has yielded substantial outcomes. The nursing programme, in particular, demonstrates strong employability results, with over half of graduates employed in government jobs and nearly 70% securing employment within six months. High levels of skill utilization, satisfaction, and economic independence (88.5%) indicate a

transformative impact on beneficiaries' livelihoods and social mobility. The rural development initiatives have contributed to tangible improvements in living conditions. Projects such as solar street lighting, sanitation facilities, rural roads, and community auditoriums have enhanced mobility, safety, hygiene, and social cohesion. These interventions are functional, well-maintained, and integrated into daily community life, reflecting effective planning and execution. Across all interventions, a common strength lies in the visible utilization of assets and the absence of idle infrastructure, indicating efficient financial deployment. However, recurring gaps include the absence of structured maintenance systems, limited formal monitoring mechanisms, and scope for strengthening long-term sustainability planning. In conclusion, NRL's CSR portfolio demonstrates strong relevance, effective implementation, and meaningful impact across sectors. The interventions have significantly improved access to services, strengthened local infrastructure, and contributed to socio-economic development in the region. Sustaining these gains will require continued attention to maintenance, institutional strengthening, and strategic expansion of outreach and capacity-building efforts.

INTRODUCTION

Overview of the Organisation

Numaligarh Refinery Limited (NRL) was established in Numaligarh, located in the Golaghat district of Assam, as a strategic outcome of the provisions outlined in the Assam Accord signed on 15 August 1985. The organisation was conceptualised as a catalyst for accelerating industrial growth and economic development in the region. Formally incorporated on 22 April 1993, NRL operates as a public sector crude oil refinery situated in Morangi, Golaghat district.

The refinery, with an initial capacity of 3 million metric tonnes per annum (MMTPA), was dedicated to the nation on 9 July 1999 by the then Prime Minister of India, Atal Bihari Vajpayee. Since commencing commercial operations in October 2000, NRL has demonstrated consistent operational performance and has emerged as a significant contributor to the socio-economic development of Assam and the broader North-East region. Its products, particularly paraffin wax, are exported to international markets, thereby establishing a global footprint.

Corporate Vision

NRL envisions itself as a dynamic and growth-oriented energy enterprise with national prominence and global recognition. The organisation seeks to build core competencies in refining and marketing petroleum products while maintaining excellence in operational performance, safety standards, environmental stewardship, and customer service. A central element of its vision is to contribute meaningfully to regional development.

Corporate Mission

The mission of NRL is centred on strengthening its capabilities in refining and marketing petroleum products, with a commitment to achieving international benchmarks in safety, quality, and cost efficiency. Additionally, the organisation aims to maximise stakeholder value, foster a skilled and motivated workforce, and actively contribute to the socio-economic development of the region.

Corporate Social Responsibility (CSR)

Corporate Social Responsibility refers to the ethical obligation of business organisations to engage with society in a responsible and sustainable manner. It encompasses the integration of social, economic, and environmental considerations into business operations. CSR extends beyond compliance and involves active engagement with communities to identify their needs and align them with organisational strategies. In this context, CSR represents the broader social accountability of enterprises towards employees, customers, and society at large.

CSR Framework of NRL

CSR Vision

NRL's CSR vision emphasises the pursuit of socially responsible and sustainable initiatives that promote inclusive development and contribute meaningfully to community welfare.

CSR Objectives

The key objectives guiding NRL's CSR initiatives include:

- Establishing a structured three-tier system for planning, implementation, and monitoring of CSR activities.
- Allocating adequate financial resources to support CSR and sustainability initiatives.
- Ensuring efficient and effective utilisation of these resources to maximise impact.

Focus Areas of CSR Activities

NRL's CSR interventions are structured around five major thematic areas:

- Livelihood generation
- Promotion of education and skill development
- Infrastructure development
- Healthcare promotion
- Support for arts, sports, literature, and culture

Scope of Work

1. Review of project objectives, design, implementation strategies, and alignment with CSR policy.
2. Assessment of outcomes of CSR interventions across thematic areas and locations.
3. Use of mixed methods including quantitative surveys and qualitative tools and secondary data review.
4. Analysis of effectiveness, efficiency, relevance, sustainability, and inclusiveness of interventions.
5. Identification of good practices, implementation gaps, and lessons learned.
6. Development of evidence-based recommendations for improving future CSR programming.
7. Submission of inception report, draft impact assessment report, and final report incorporating NRL's comments.

1) SPORTS

1.1) Operation & Maintenance of NRL Football Academy & Feeder Centres, Golaghat.

The visit to the NRL Football Academy and its feeder centres in Golaghat reflects that the facility is active and functioning on a regular basis. The ground was found to be in usable condition with proper markings. Basic facilities such as drinking water and changing areas were available. The overall cleanliness of the premises was satisfactory, and the playing area was being maintained with regular use evident from the condition of the field. It was reported that regular training sessions are organized and players train under professional coaches.



Fig. 1 - NRL Football Academy Ground

From a financial utilization perspective, the visible infrastructure, equipment, and ongoing activities indicate that the allocated resources are being used for operational purposes. There were no signs of idle infrastructure or unused assets within the academy premises.

1.2) Installation of Flood Light at GDSA Stadium, Golaghat, Assam

The visit to GDSA Stadium in Golaghat showed that the flood light system has been installed and is in use. The poles are in place around the ground and the lighting coverage appears adequate for evening play. During the visit, the lights were switched on to check functionality and most of them were working properly, providing clear visibility across the field. There were no major dark patches observed on the playing surface.



Fig. 2 - Flood light at GDSA Stadium, Golaghat

The stadium was active in the evening hours, which indicates that the installation is being used. Local players were seen practicing after sunset, something that would not have been possible earlier. It was shared that the ground is now used more frequently, especially by youth groups and local clubs who come in the evening after school or work.

The overall condition of the installation appears satisfactory. However, there were a few concerns related to maintenance. It was mentioned that occasional issues such as delayed repairs or minor faults do arise, and there is some dependency on external support for fixing them. There was no clearly visible system or display showing regular maintenance schedules or responsible authority for upkeep.

From the usage side, the flood lights have added clear value to the facility. The ground is no longer limited to daytime use. This has increased the time available for sports activities and has

made the stadium more useful for the local community. At the same time, there was limited evidence of organized tournaments or larger events being conducted under the lights, which suggests that the full potential of the facility may not yet be realised.



Fig. 3 Active Flood Lights at GDSA Stadium, Golaghat

In terms of financial utilization, the installation is visible and functional, and there are no signs of neglect or disuse. The infrastructure appears to have been properly set up and is serving its intended purpose of enabling evening sports activity.

1.3) Indoor Stadium at JDSG College, Bokakhat, Assam

The indoor stadium at JDSG College was found to be functional and in use. The structure is in good condition with proper roofing and flooring suitable for indoor sports. The space is well ventilated and provides a comfortable environment for students to engage in activities throughout the day. Courts for indoor games of badminton, and the area is being actively used by students.

The space did not appear restricted or unused and rather it appeared to have become part of the daily routine of students. The stadium has created a place within the campus where students gather, interact, and stay engaged beyond academic hours.

The cleanliness of the facility was satisfactory. The floor and surrounding areas were maintained, and there were no visible signs of neglect. At the same time, there was no clearly displayed system for maintenance or supervision. The presence of dedicated staff or a formal schedule for upkeep was not evident during the visit.



Fig. 4 - Interior of the Indoor Stadium at JDSG College, Bokakhat

Students reported to be comfortable using the facility without hesitation, which indicates accessibility and acceptance within the campus.

From a financial utilization perspective, the infrastructure is complete and in use. There were no signs of the facility being under-utilised. The construction quality appears adequate and aligned with its purpose.

Overall, the indoor stadium has added value to the college environment by providing a dedicated space for sports. It has created an active and positive atmosphere within the campus. With better equipment support and structured maintenance, the impact of the facility can be strengthened further.



Fig. 5 - Exterior of the Indoor Stadium at JDSG College, Bokakhat

2) HEALTH

2.1) Renovation of Barpathar MPHC

The Mini Primary Health Centre at Barpathar shows visible improvement after the renovation support. The building is in better condition with repaired walls, proper roofing and a cleaner environment. The waiting area is functional and patients are able to sit comfortably. Basic facilities are available and in usable condition.

The centre is operational during working hours and caters to patients from nearby villages. Common illnesses such as fever, cough, and seasonal infections, etc are being treated regularly. Availability of basic medicines has improved and patients no longer need to travel long distances for minor treatments. This has reduced both travel time and expenses for families in the surrounding areas.

As reported by the staff, there is a noticeable increase in footfall at the centre. People are more comfortable visiting the centre now due to better infrastructure and cleaner surroundings.

Cleanliness within the premises is maintained at an acceptable level. The consultation room and waiting areas are orderly, and there is visible effort in maintaining hygiene. However, regular monitoring and upkeep will be important to sustain these improvements over time.

The renovation appears to have been utilized for practical improvements rather than only cosmetic changes. The facility is being used and is serving its purpose for the community. Continued support in terms of staffing and medicine supply will further strengthen its impact.

2.2) Renovation of Charingia BPHC

The Block Primary Health Centre at Charingia is functioning as an important healthcare facility for a larger population in the area. The renovation has improved the overall condition of the building, making it more accessible and usable for patients. The OPD area is organized and patient movement is smoother compared to earlier conditions.

The centre is handling a higher number of patients on a daily basis, including cases related to maternal and child health. The presence of designated rooms for different services such as consultation, pharmacy and basic care indicates better utilization of space after renovation.

Patients from nearby villages are visiting the centre not only for general treatment but also for routine checkups.

Travel to the centre has become more worthwhile for the community, as more services are available under one roof. People reported that they are now able to access treatment, basic medicines and advice without immediately depending on private clinics. This has reduced out of pocket expenditure for many families.

The availability of medicines is fairly consistent for common health issues. There is also better awareness among patients regarding prevention of seasonal diseases and the importance of timely treatment. Health workers appear to be engaging with patients and guiding them on basic health practices.

Cleanliness in key areas such as the OPD section and patient areas is maintained. The facility is being actively used and does not appear underutilized. However, continued attention to maintenance and regular supply of medicines will be important to sustain the current level of service.

2.3) Renovation of Ponka Swapta Swahid PHC

The Primary Health Centre at Ponka Swapta Swahid is a smaller facility but plays a crucial role for nearby villages. After renovation, the centre is in better condition and is more approachable for the community. The building is functional, with a usable consultation room, waiting space and basic facilities such as water and toilets.

The PHC is open during working hours and is catering to patients with common health issues. Villagers are visiting the centre for minor illnesses, reducing their need to travel to larger hospitals for basic treatment. This has been particularly helpful for elderly people and women, for whom long travel can be difficult.

Basic medicines are available and are being distributed for routine conditions such as fever, cough and minor infections. Immunization services are also being conducted, and mothers are bringing children to the centre. There is a gradual increase in awareness about the importance of timely treatment and prevention of common diseases.

The environment of the centre is simple but maintained. Cleanliness is at an acceptable level and the space is being used regularly. The presence of health workers during working hours has made the facility more reliable for the community.

The renovation has improved the usability of the PHC rather than just its appearance. The centre is functional and is contributing to primary healthcare access in the area. Continued attention to maintenance and regular supply of medicines will be important to keep it effective.

2.4) Renovation of Sarupathar CHC

The Community Health Centre at Sarupathar is functioning as an important facility for the surrounding population and the renovation support is visible in both the condition of the building and its current use. The structure is in good condition with repaired walls, improved roofing and a more organized layout. The OPD area is active during working hours and the waiting space is being used by patients who visit regularly from nearby villages.

The centre is handling a steady flow of patients, including elderly people, women and children. Common illnesses are being treated at the facility and basic medicines are available for most routine needs. This has reduced the need for people to travel to distant towns for small but frequent health issues. For many households, this has meant saving both time and money.

The labour room and patient wards are functional, and the space is being used rather than remaining idle. The presence of health staff during working hours has contributed to better service delivery. Immunization and basic maternal care services are also being accessed by the community. People in the area are more aware of common diseases such as seasonal fever and infections, and there is a growing tendency to seek early treatment.

Cleanliness is maintained in most parts of the facility. Toilets and water facilities are usable, though continued attention will be needed to maintain hygiene standards. The overall environment is more approachable, and patients appear more comfortable visiting the centre compared to earlier.

The renovation appears to have been utilized in a way that has improved the working condition of the centre. The facility is not only better in appearance but is being actively used. Continued

support in staffing, regular medicine supply and maintenance will help sustain these improvements.

2.5) Renovation of Dergaon CHC

The Community Health Centre at Dergaon is a busy facility serving a large population. The renovation has clearly enhanced its functionality, as reflected in its high level of activity. The OPD section remains well-utilized with a steady flow of patients throughout the day, and the waiting area is consistently occupied. The building is now in better condition with improved service arrangements, allowing smoother patient movement. Consultation and medicine distribution are functioning more efficiently, supported by the regular availability of doctors and staff. Patients visit not only for common illnesses but also for more serious conditions. The centre has reduced many families' dependence on private clinics for initial treatment and basic tests, making healthcare more accessible and affordable for people from nearby villages and semi-urban areas. Routine medicines are generally available, and there is greater awareness among patients about early treatment and prevention. Health workers actively guide patients on precautions during seasonal outbreaks like fever and infections. Despite the case load, cleanliness is reasonably maintained across wards and common areas. The renovation has enabled better space utilization, though the facility continues to face high demand. Overall, the renovation funds have been well utilized, significantly improving the centre's functioning. Continued strengthening of services and maintenance will be essential to sustain its effectiveness.

2.6) Financial Assistance to Jorhat Medical College & Hospital for Procurement of Equipments

The support provided for medical equipment procurement at Jorhat Medical College & Hospital has improved the availability of diagnostic and treatment services. The upgraded equipment has strengthened the hospital's capacity to handle more patients quantitatively and qualitatively. Residents from Golaghat and nearby areas now depend on the hospital for advanced care, reducing the need to travel to distant cities like Guwahati for tests and treatment. Services are

more convenient as patients can access them within the hospital itself. It was reported and confirmed that the equipment is being used regularly, enabling faster diagnosis and timely treatment. In equipped departments, there is noticeable improvement in service flow, with reduced delays for procedures. With the new equipment available at the hospital, these services are now accessible at lower cost within the public system, easing the financial burden on families and encouraging more people to seek treatment here. The equipment is properly maintained and operated smoothly by the staff, with no major signs of non-usage or neglect. The support has been effectively utilized according to the hospital's needs and patient load. Overall, the assistance has significantly enhanced healthcare access in the region, reduced dependence on external facilities, and improved service delivery at the hospital.

2.7) Ambulance Vehicles to Health Centres, NGOs and Institutions

The ambulances provided under the initiative are playing an important role in improving access to healthcare services in the area. The vehicles were found to be present at the respective facilities and in working condition. Basic arrangements such as stretchers and essential support items are available inside the vehicles, and they are being used for patient transport.



Fig. 6 - Ambulance provided to Gauhati University

In many parts of Assam, reaching a health facility in time can be difficult, especially from villages located at a distance. The availability of these ambulances has made it easier for patients

to reach hospitals without delay. This has been particularly useful in emergency situations, including cases related to maternal health, accidents and sudden illness. Families no longer have to depend only on private vehicles or arrange transport at the last moment.

The ambulances are being used for shifting patients from villages to nearby health centres and for referrals to higher facilities when required. Records maintained at the facilities indicate consistent usage. Drivers and staff are available, and the vehicles are accessible when needed. People in the community are aware of the service and are able to contact the facility when there



Fig. 7 - Ambulance provided to Mahuramukh MPHC

is a requirement. With the ambulance service in place, response has improved and patients are able to reach care faster. This has reduced stress during emergencies and has also helped in timely treatment.

The condition of the vehicles is generally maintained, and there were no major signs of neglect. Continued attention to fuel availability, maintenance and coordination will be important to keep the service reliable over time. The support appears to have been utilized effectively, as the ambulances are actively serving the intended purpose. The initiative is contributing to improve access to healthcare by reducing delays in reaching medical facilities and supporting timely treatment.

2.8) Financial Assistance to District Health Department for Medical Equipment, Golaghat

The support provided to the District Health Department for medical equipment has strengthened healthcare services across multiple facilities in Golaghat. The equipment was distributed based on need and was found installed. At the facility level, the equipment is being utilized for diagnostics and treatment, enabling patients to access services closer to home. People from nearby villages can now undergo tests and basic procedures locally, without traveling to larger cities which are far. This has improved accessibility, especially for those facing challenges with transport or additional costs. It is reported that the equipment has enhanced their ability to manage patients at the local level. Many cases that previously required referral to higher centres



Sl. No.	EQUIPMENT	QTY.
1	Refrigerator 182 liter	1
2	Reagent Refrigerator	1
3	Inverter	1
4	Electronic Baby Weighing Machine	1
5	Laboratory Incubator	1
6	Digital B. P. Machine	2
7	DG set 30 Kva	1
8	Nebulizer	2
9	Labour Table with Foam Mattress	2
10	Patient Examination Bed with Foot Step	2
11	Normal Delivery Kit	2
12	Patient Waiting Chair	3
13	Autoclave 30 ltr	1
14	Foot Operated Resuscitator with Suction Pump	1
15	Auto Analyser	1
16	Suction Apparatus	1
17	Foetal Doppler	1
18	Spot Light	1
19	Chest Stand for X-Ray	1
20	Lead Apron for Radiographer	1
21	Instrument Trolley	2
22	Invalid Wheel Chair	1
23	Stretcher on Trolley	1
24	Foot Step Double	2
25	Medicine Rack	2
26	Kidney Tray	4
27	Instrument Tray with Cover	3
28	Electric Sterilizer	2
29	Dressing Drum for Autoclave	2
30	Adult Weighing Scale	1

Fig. 8 - List of Medical Equipment provided to Dergaon CHC

are now being treated within the district, reducing the burden on larger hospitals and ensuring timely care. Patients noted that services are now more readily available. Earlier, they often depended on private facilities for tests, leading to higher costs and delays. With the equipment now in government facilities, waiting times have decreased and expenses are lower, encouraging people to seek early treatment. The equipment is in working condition, handled by trained staff, with no major signs of non-usage or neglect. Basic maintenance is in place, and it has been



Fig. 9 - Hematology Analyser

integrated into regular service delivery. Overall, the assistance has been utilized effectively. It has improved healthcare access across the district, reduced the need for referrals, and supported better patient care at local facilities. Continued focus on maintenance and regular use will help sustain these benefits.

2.9) Financial Assistance to Akshaya Patra Mid-Day Meal Programme

The support extended to the Akshaya Patra Foundation for the mid-day meal programme has strengthened meal delivery and improved access to nutritious food for school children. The preparation and distribution system is well-organized, with meals supplied regularly to the covered schools. At the school level, meals are delivered on time and served during the school day. The food is nutritious and adequate, with good acceptance and consistent quality. Teachers noted that regular meals have reduced the number of children coming to school hungry. The daily meal has made a significant difference for families, particularly those facing challenges in providing nutritious food at home. It has encouraged regular school attendance, as children are assured of at least one proper meal. The serving process is generally clean, with proper hygiene practices followed. Utensils are managed well. Operationally, the support has strengthened the overall system. Meal preparation and distribution are functioning smoothly, with no major gaps



Fig. 10 - Mid-Day Meal support through Akshaya Patra Foundation

in delivery. Overall, the assistance has been utilized meaningfully. It has ensured consistent meal delivery, reduced the burden on families, and contributed to better school attendance and classroom participation.

2.10) Construction/Renovation of Dusutimukh State Dispensary

The state dispensary at Dusutimukh serves as an important point of care for nearby villages. The support provided for its construction and renovation is clearly visible in its present condition. The building is in good shape with a repaired structure, proper roofing, and functional interior spaces. The consultation room and waiting area are usable, and basic facilities such as water and toilets are available for patients. The dispensary remains open during working hours and is regularly used by people from surrounding areas for common health issues like fever, cough, and other routine illnesses. Basic medicines are available, reducing the need for villagers to travel to larger health centres for minor treatment. It's convenient location makes healthcare easily accessible within a short distance. This has been especially beneficial for elderly residents and women, who can now seek treatment without relying on transport. The facility has also encouraged early visits when symptoms appear, rather than delaying care. There is regular patient flow, and the attendance register shows consistent visits. Health workers are present during working hours and attend to patients. The overall environment is simple yet adequate for



Fig. 11 - Newly constructed Dusutimukh State Dispensary

basic healthcare delivery. Cleanliness is maintained at an acceptable level, with the consultation space and premises appearing orderly and free from major signs of neglect. Continued attention to upkeep and regular supply of medicines will be important to sustain the current service levels. The renovation has been utilized practically. The facility is not only improved in appearance but is actively serving the community by making healthcare more accessible locally and reducing the burden of travel for basic treatment.



Fig. 12 - Examination room at Dusutimukh State Dispensary

2.11) Routine Free Mobile Medical Camps under Project 'Niramoy'.

Access to affordable and timely healthcare remains a significant challenge for rural and underserved populations, particularly among economically vulnerable groups. Limited availability of nearby health facilities, high out-of-pocket expenses, and loss of daily wages often discourage individuals from seeking timely medical care.



Fig. 13 - Free Mobile Medical Camp

In this context, the Routine Free Mobile Medical Camps under Project Niramoy has been implemented to bridge critical gaps in healthcare accessibility. By bringing essential medical services directly to communities, the initiative aims to ensure equitable access, promote preventive healthcare, and improve overall health outcomes among marginalised populations. The assessment exercise examined the reach, accessibility, service quality, and impact of the mobile medical camps based on beneficiary responses as well as the service providers like doctors and health staff, with a focus on understanding how effectively the initiative addresses healthcare needs at the grassroots level.

Socio demographic profile

	Count	%
Gender		
Female	72	75.8
Male	23	24.2
Social Category		
General	34	35.8
Other Backward Caste	3	3.2
Scheduled Caste	19	20.0
Scheduled Tribe	23	24.2
Tea Tribe (Adivasi)	16	16.8
Religion		
Christian	22	23.2
Hindu	62	65.3
Muslim	11	11.6

Table 1 - Socio demographic profile (N=95)

A total of 95 beneficiaries (including caregivers and guardians) were surveyed. The gender distribution of respondents indicates a strong participation of women in the mobile medical camps, with 75.8% of beneficiaries being female, compared to 24.2% male respondents. This trend reflects the camp's significant reach among women (and children), who often face greater barriers in accessing formal healthcare services, especially in rural and semi-urban contexts. The higher female participation suggests that the mobile medical camps are effectively addressing gaps in healthcare accessibility for women, particularly those who may otherwise have limited mobility, financial independence, or decision-making power regarding health-seeking behaviour. In terms of social composition, 35.8% of respondents belong to the General category, while a significant proportion of beneficiaries came from marginalised communities, including Scheduled Tribes (24.2%), Scheduled Castes (20.0%), and Tea Tribe/Adivasi communities

(16.8%). The notable participation of Scheduled Tribes and Tea Tribe communities is particularly significant, as these groups often reside in remote areas with limited access to formal healthcare infrastructure. Furthermore, the distribution of respondents by religion indicates that the mobile medical camps are accessed by individuals across different religious communities. A majority of beneficiaries (65.3%) identified as Hindu, followed by 23.2% Christians and 11.6% Muslims. This spread reflects the social diversity of the intervention area and suggests that the services provided through the camps are inclusive and accessible irrespective of religious identity.

	Count	%
Primary Occupation (Patient or Attendant)		
Private job	2	2.1
Daily wage labour	10	10.5
Farming	34	35.8
Govt job	4	4.2
Housewife	3	3.2
Other	4	4.2
Self-employed	29	30.5
Tea Garden labourer	9	9.5
BPL Card Holder		
Yes	90	94.7
No	5	5.3

Table 2 - Socio economic profile (N=95)

Occupationally, a significant proportion is engaged in farming (35.8%) and self-employment (30.5%), followed by daily wage labour (10.5%) and tea garden labour (9.5%). Only a small percentage is employed in government (4.2%) or private sector jobs (2.1%), while a few respondents are housewives (3.2%) or engaged in other forms of work (4.2%).

Finally, the data clearly indicates that a vast majority of beneficiaries (94.7%) possess a Below Poverty Line (BPL) card. This highlights that the mobile medical camps are predominantly serving economically disadvantaged households, who typically face financial constraints that limit their ability to access healthcare services, making them highly dependent on affordable or free medical interventions. Overall, the beneficiary profile highlights that the intervention is well-targeted towards socially and economically disadvantaged groups. Overall, the initiative is successfully penetrating underserved sections of the population, promoting equitable access to healthcare, and addressing existing social and economic disparities in health service delivery.

Access & Utilization of Medical Camp

	Count	%
Distance travelled to access camp		
1–3 km	8	8.4
3.1–5 km	2	2.1
Less than 1 km	85	89.5
Mode of transport		
Bicycle	2	2.1
Public transport	2	2.1
Walking	91	95.8
Ease of Access		
No	94	98.9
Yes	1	1.1
Frequency of utilization		
1 time	8	8.4
2 times	4	4.2
3 times	9	9.5
4 times or more	74	77.9

Table 3 - Access & Utilization of the Medical Camp (N=95)

The data on distance travelled indicates that the mobile medical camps are highly accessible to the majority of beneficiaries. A substantial 89.5% of respondents reported travelling less than 1 km to reach the camp, while only 8.4% travelled between 1–3 km and a very small proportion (2.1%) travelled between 3–5 kms. This distribution highlights the effectiveness of the camp's location strategy, ensuring that services are brought closer to the community rather than requiring beneficiaries to travel long distances. For economically vulnerable populations, particularly those engaged in daily wage labour or informal work, proximity plays a critical role in healthcare access, as it minimizes both travel costs and loss of working hours. Furthermore, an overwhelming 95.8% of beneficiaries reported reaching the camp by walking. This clearly indicates that the camps are located within close proximity to the communities they serve, enabling beneficiaries to access healthcare services without incurring any transportation cost. For economically vulnerable groups, particularly those dependent on daily wages, this ease of access is critical as it reduces both financial burden and time lost from work.



Fig. 14 - Beneficiaries at the Mobile Medical Camp

The utilization pattern of the mobile medical camps indicates a high level of continued engagement and trust among beneficiaries. A significant majority (77.9%) reported accessing the services four times or more. This trend clearly reflects that the camps are not being used as one-time interventions but as a regular and reliable source of healthcare. The high rate of repeated usage suggests that beneficiaries find the services useful, accessible, and relevant to their health

needs. It also indicates sustained demand for such interventions in the community. Overall, the data reflects that the mobile medical camps have been successful in minimizing structural and logistical constraints, thereby ensuring smooth and equitable access to healthcare services.

Service Quality & Beneficiary Satisfaction

	Count	%
Satisfaction with waiting		
30–60 minutes	9	9.5
Less than 30 minutes	86	90.5
Satisfaction with the doctor and staff		
Good	33	34.7
Very good	62	65.3
Availability of medicines		
Always available	84	88.4
Sometimes available	11	11.6
Overall Satisfaction		
Good	42	44.2
Excellent	53	55.8

Table 4 - Service quality & Beneficiary Satisfaction
(N=95)

The data on waiting time reflects a high level of operational efficiency in the delivery of services at the mobile medical camps. A large majority of beneficiaries (90.5%) reported waiting for less than 30 minutes, while only 9.5% experienced a waiting time between 30–60 minutes. This indicates that the camps are well-organized and capable of handling patient flow effectively, ensuring that beneficiaries receive timely medical attention. For individuals engaged in daily wage labour or informal occupations, shorter waiting times are particularly important as they minimize disruption to their work and income.

Regarding the satisfaction with the behaviour of doctors and staff, the responses reflect a very high level of satisfaction. A majority of beneficiaries (65.3%) rated the behaviour as “very good”, while the remaining 34.7% rated it as “good” indicating that the camps are not only delivering medical services but are also ensuring a respectful and supportive interaction with beneficiaries.

Additionally, the availability of medicines at the mobile medical camps appeared to be largely consistent and reliable. A significant majority of beneficiaries (88.4%) reported that medicines were always available. This suggests that the camps are generally well-equipped to meet the immediate treatment needs of beneficiaries, ensuring that consultations are complemented with necessary medication. However, the small proportion reporting occasional unavailability indicates scope for improvement in ensuring uninterrupted supply. Addressing these gaps can further strengthen the effectiveness of the camps and enhance beneficiary satisfaction.

Overall, the findings demonstrate that the initiative is largely successful in providing end-to-end healthcare support, with medicine availability reinforcing the reliability and utility of the services offered. This is in alignment of the overall perception of service quality at the mobile medical camps is highly positive. A majority of beneficiaries (55.8%) rated the services as “excellent”, while the remaining 44.2% rated them as “good”.



Fig. 15 - A child being examined at the Mobile Medical Camp

Perceived Improvement in Health after Treatment

	Count	%
Yes , completely	76	80.0
Yes, to some extent	19	20.0
Total	95	100.0

Table 5 - Perceived Improvement in Health after Treatment

The responses indicate a strong positive outcome of the medical services provided through the mobile camps. A substantial majority of beneficiaries (80.0%) reported that their health completely improved after receiving treatment, while the remaining 20.0% stated that their health improved to some extent. This clearly demonstrates the effectiveness of the treatment provided at the camps in addressing the health concerns of beneficiaries. The presence of partial improvement among some beneficiaries may reflect the nature of certain health conditions that require longer-term care or follow-up, which further underscores the importance of continued access to such services.

Types of Health Issues Addressed

	Count	%
Acute illness and Child health	1	1.1
Acute illness, Child health & General check-up	2	2.1
Acute illness and General check-up	12	12.6
Child health	6	6.3
Child health and General check-up	2	2.1
General check-up	72	75.8
Total	95	100.0

Table 6 - Types of Health Issues Addressed

The data indicates that the mobile medical camps are catering to a mix of preventive and curative healthcare needs, with a strong emphasis on general health monitoring. A large majority of beneficiaries (75.8%) visited the camp for general check-ups, while others sought treatment for acute illnesses and child health-related concerns, either independently or in combination.

The presence of cases related to acute illness, although comparatively smaller, highlights the role of the camps in providing immediate medical attention for common health conditions. Similarly, services related to child health indicate attention to vulnerable groups such as children, ensuring early care and monitoring.

The dominance of general check-ups suggests that the camps are not only addressing existing health issues but are also promoting preventive healthcare practices within the community.

Overall, the findings reflect that the mobile medical camps are functioning as a comprehensive healthcare platform, addressing both routine and immediate health needs while encouraging a culture of preventive care among beneficiaries.

Role of Camps in Early Detection of Diseases

	Count	%
To some extent	6	6.3
Yes	89	93.7
Total	95	100.0

Table 7 - Role of Camps in Early Detection of Diseases

The findings strongly highlight the role of mobile medical camps in promoting early detection of health conditions. A vast majority of beneficiaries (93.7%) reported that the camps helped in early detection of diseases. This indicates that the camps are not limited to providing symptomatic treatment but are also functioning as an important platform for preventive healthcare and timely diagnosis. For economically vulnerable populations, who may otherwise delay seeking medical care due to financial or accessibility constraints, the availability of such services at their doorstep plays a crucial role in identifying health issues at an early stage.

Positive Changes Experienced After the Medical Camp

	Count	%
Early diagnosis	2	2.1
Improved health	20	21.1
Better hygiene practices	2	2.1
Improved health and early diagnosis	17	17.9
Early diagnosis and reduced illness frequency	49	51.6
Improved health and reduced illness frequency	5	5.3
Total	95	100.0

Table 8 - Positive Changes Experienced After the Medical Camp

The responses reflect a range of positive health outcomes experienced by beneficiaries following their interaction with the mobile medical camps. A majority (51.6%) reported a combination of early diagnosis and reduced frequency of illness, indicating both preventive and curative benefits of the intervention. Additionally, 21.1% of beneficiaries experienced improved health, while 17.9% reported both improved health and early diagnosis.

A smaller proportion also highlighted improvements in hygiene practices (2.1%) and standalone early diagnosis (2.1%), suggesting that the camps are also contributing to increased health awareness and behavioural changes, although to a limited extent.

These findings demonstrate that the impact of the camps extends beyond immediate treatment. The reduction in illness frequency suggests better health management over time, while early diagnosis points towards timely medical intervention. Together, these outcomes indicate a shift towards more proactive and informed health-seeking behaviour among beneficiaries.

Overall Contribution of the Mobile Medical Camp to Health Improvement

	Count	%
Combined factors	14	14.7
Entirely due to camp	31	32.6
Mostly due to camp	50	52.6
Total	95	100.0

Table 9 - Overall Contribution of the Mobile Medical Camp to Health Improvement

The responses clearly indicate that the mobile medical camps have played a significant role in improving the health of beneficiaries. A majority (52.6%) reported that their health improvement was mostly due to the camp, while 32.6% stated that it was entirely due to the camp. A smaller proportion (14.7%) attributed their improvement to combined factors, including the camp and other extraneous influences.

These findings highlight the strong contribution of the initiative in driving positive health outcomes within the community. The presence of combined factors suggests that while the camps play a central role, they also complement other health practices and interventions, contributing to a more holistic improvement in well-being. Overall, the data confirms that the mobile medical camps are not only accessible and well-utilized but are also making a substantial and measurable impact on the health status of beneficiaries.

Conclusion

The Routine Free Mobile Medical Camps under Project Niramoy is a highly effective healthcare intervention, particularly for economically and socially vulnerable populations. The initiative demonstrates strong performance across key dimensions, including inclusiveness, accessibility, service quality, and health outcomes. By ensuring (almost) doorstep delivery of healthcare services, the camps have successfully reduced barriers related to distance, cost, and time, enabling beneficiaries to access timely medical care. The high levels of repeated utilization and

satisfaction reflect strong community trust and acceptance. Importantly, the initiative goes beyond curative care by promoting preventive healthcare practices, facilitating early diagnosis, and contributing to sustained improvements in health and well-being. Overall, the mobile medical camps have established themselves as a critical and reliable healthcare support system, playing a significant role in improving health outcomes and enhancing the quality of life among underserved communities.



Fig. 16 - Free health examination at Mobile Medical Camps

3) EDUCATION

3.1) Infrastructure Development at Govt. Bezbaruah HSS, Golaghat

An amount of INR 354.37 lakhs was invested in the development of sports infrastructure at Government Bezbaruah Higher Secondary School. The project has resulted in the construction of a modern sports complex and associated outdoor facilities, aimed at supporting physical education and extracurricular activities. The new sports complex building features contemporary



Fig. 17 - Sports complex at Govt. Bezbaruah HSS, Golaghat

design elements, including large windows and wooden panelling. The entrance area is equipped with a covered porch and decorative elements. A well-maintained football field with standard goalposts forms the central outdoor component. Adjacent to the field is a spacious paved area with red interlocking tiles, suitable for multiple uses including assemblies, training, and events. Spectator seating stairs has also been provided on both sides of the ground. This infrastructure upgrade shall enable regular sports and physical training sessions for students. The availability of dedicated spaces is expected to contribute to improved physical fitness, discipline, and teamwork among the student body. The facilities can also allow the school to host inter-school competitions

and community events, thereby extending the benefits beyond the immediate student population. The project reflects ongoing efforts to strengthen sports infrastructure in government secondary schools. With such an investment, the school now possesses functional amenities that support both curricular and co-curricular objectives. Long-term outcomes are anticipated to include better health indicators among students and increased participation in organised sports. The development provides a foundation for sustained engagement in physical activities and serves as a reference for similar initiatives in comparable educational institutions.



Fig. 18 - Football field at Govt. Bezbaruah HSS Sports Complex, Golaghat

3.2) Library cum Wellness Centre at H. P. B. Girls' College

An investment of INR 118.53 lakhs was made for the establishment of the Library cum Wellness Centre at H.P.B. Girls' College (Autonomous), Golaghat. The facility is housed in a two-storey building and identifies itself as the “Library cum Wellness Centre”. It comprises of a spacious, well-ventilated reading hall equipped with multiple rows of bookshelves. The shelves are stocked with books covering diverse academic disciplines, including education, environmental studies, and general subjects. Adequate lighting, ceiling fans, and tiled flooring create a comfortable environment suitable for extended study sessions and quiet reading. The centre serves as an



Fig. 19 - Library at H.P.B. Girls' College

integrated space that combines traditional library resources with provisions for student wellness. It provides female students of the college with improved access to learning materials while offering a dedicated area that supports both academic pursuits and mental well-being. The availability of a modern library infrastructure is expected to enhance reading habits, support curriculum-based learning, and promote self-directed study among students. This development addresses the long-standing need for upgraded library facilities in the institution. By creating a dedicated, purpose-built space, the project has strengthened the academic ecosystem of the college. Students now have access to organised knowledge resources in a conducive setting, which is likely to contribute to improved academic performance and broader intellectual

engagement. The project demonstrates the positive outcomes of targeted CSR interventions in higher education, particularly in enhancing infrastructural facilities for girls' colleges in the region. It is anticipated that the facility will continue to benefit successive batches of students by fostering a culture of learning and supporting their overall development in a secure and well-equipped environment.



Fig. 20 - Library cum Wellness Centre at H.P.B. Girl's College

3.3) Library cum Wellness Centre at Sarupathar College

An equal investment of INR 118.53 lakhs was utilised for the establishment of the Library cum Wellness Centre at Sarupathar College, Golaghat, as a CSR initiative of NRL. Housed in a two-storeyed building, the facility includes a spacious, well-lit reading hall equipped with books stocked with academic resources across various disciplines. The facility also had magazines,



Fig. 21 - Library cum Wellness Centre under construction at Sarupathar College

newspapers, journals, etc. The infrastructure provides students with a dedicated space for quiet study, reference work, and wellness-related activities. This development shall strengthen the college's academic support system by offering improved access to learning materials in a comfortable environment. It is expected to encourage regular reading habits, support curricular needs, and contribute to the overall intellectual and personal growth of students at this long-established educational institution in Golaghat district.

3.4) Operation & Maintenance of VK NRL School of Nursing at Numaligarh

The Operation and Maintenance of the VK NRL School of Nursing at Numaligarh represents a significant intervention under the healthcare and education initiatives of Numaligarh Refinery Limited (NRL). The program is designed to address the growing demand for skilled healthcare professionals while simultaneously creating access to quality professional education for youth, particularly from nearby and underserved regions.



Fig. 22 - Aerial view of VK NRL School of Nursing campus at Numaligarh

The institution provides a structured learning environment combining theoretical instruction with practical training, supported by well-developed infrastructure including laboratories, hostel facilities, and internship opportunities. By focusing on skill-based education in the healthcare sector, the program enables students to transition from general education into employable roles, thereby strengthening both individual livelihoods and the broader healthcare system.

The initiative holds particular relevance in the regional context, where access to professional nursing education and stable employment opportunities can be limited. By supporting the continuous functioning and quality of the institution, the program contributes to building a trained healthcare workforce while promoting socio-economic mobility among its beneficiaries. A comprehensive survey was conducted with 96 alumni of the school across three batches of 2022, 2023 and 2024.

Year of Completion of Course

	Count	%
2022	46	47.9
2023	28	29.2
2024	22	22.9
Total	96	100.0

Table 10 - Year of Completion of Course

Above table provides the distribution of respondents based on the year of course completion of the course. Out of the total respondents, 47.9% completed the course in 2022, followed by 29.2% in 2023 and 22.9% in 2024.

	Count	%
20-23 years	6	6.2
24 years	14	14.6
25 years	26	27.1
26 years	23	24.0
27 years	12	12.5

28-30 years	9	9.4
31-33 years	6	6.2
Total	96	100.0

Table 11 - Age distribution

The age distribution of respondents indicates that the majority of students fall within the young adult category, reflecting the program's focus on early career entrants. A significant proportion of respondents are in the age group of 25 years (27.1%) and 26 years (24.0%), followed by those aged 24 years (14.6%) and 27 years (12.5%). Smaller proportions are observed in the age ranges of 28–30 years (9.4%). The concentration of respondents in the mid-20s highlights that the nursing program is effectively catering to individuals in their prime employable age, thereby enhancing their potential for long-term career development.

70% respondents reported to be from Golaghat itself followed by Jorhat (9%). The remaining 21% represented other districts of Assam particularly Upper Assam.

	Count	%
General	23	24.0
Other Backward Caste	40	41.7
Scheduled Caste	11	11.5
Scheduled Tribe	14	14.6
Tea Tribe (Adivasi)	8	8.3
Total	96	100.0

Table 12 - Social profile

The distribution of respondents across social categories reflects a diverse and inclusive representation within the VK NRL School of Nursing. A majority of students belong to the Other Backward Classes (OBC) category, accounting for 41.7%, followed by General category students

at 24.0%. This distribution indicates that the program has been successful in reaching socially and economically vulnerable groups, thereby promoting equitable access to professional education. The inclusion of students from diverse backgrounds highlights the initiative's contribution towards reducing social disparities and enabling upward mobility through skill-based education.

Source of Information about the Nursing School

	Count	%
Family/Friends	61	63.6
NRL	17	17.7
Social Media	11	11.5
Alumni	7	7.3
Total	96	100.0

Table 13 - Source of Information about the Nursing School

The data on how respondents learned about the VK NRL School of Nursing indicates that informal community networks play a dominant role in outreach. A majority of students, 63.6%,



Fig. 23 - Classroom of VK NRL School of Nursing, Numaligarh

reported learning about the institution through family and friends. This highlights the strong influence of word-of-mouth communication in promoting the program.

Institutional outreach through NRL accounted for 17.7% of responses, suggesting that direct communication efforts by the organization are also contributing to awareness, though to a lesser extent compared to personal networks. Meanwhile, 11.5% of respondents learned about the school through social media, indicating a growing but still limited role of digital platforms in outreach. Additionally, 7.3% of students were informed through alumni, reflecting the emerging impact of past beneficiaries in influencing new enrolments.

Engagement of Students Before Joining the Program

	Count	%
Not Engaged	9	9.4
Studying	83	86.5
Working	4	4.2
Total	96	100.0

Table 14 - Engagement of Students before Joining the Program

The data on respondents' engagement prior to joining the VK NRL School of Nursing indicates that the majority of students were already in the education system, with 86.5% reporting that they were studying before enrolling in the program.

This distribution highlights that the nursing program primarily functions as a continuation of formal education into specialized vocational training, enabling students to transition from general education into a professional healthcare career. At the same time, the inclusion of individuals who were not engaged or already working reflects the program's role in creating entry points for diverse groups, including those seeking employability or improved career prospects.

Quality of Teaching and Training

	Count	%
Good	23	24.0
Very good	73	76.0
Total	96	100.0

Table 15 - Quality of Teaching and Training

The assessment of teaching and training quality at the VK NRL School of Nursing reflects a high level of satisfaction among students. A majority of respondents, 76.0%, rated the quality as “Very Good”, while the remaining 24.0% rated it as “Good”.

Such positive feedback highlights the institution’s strength in providing a supportive and effective learning environment, which is critical in a field like nursing where both theoretical knowledge and practical competence are essential. Overall, the findings demonstrate that the program has been successful in maintaining high standards of teaching and contributing to skill development in healthcare education.

Adequacy of Practical Training

	Count	%
Adequate	34	35.4
Inadequate	2	2.1
Very adequate	60	62.5
Total	96	100.0

Table 16 - Adequacy of Practical Training

The responses regarding the adequacy of practical training indicate a strong emphasis on hands-on learning within the program. A majority of respondents, 62.5%, rated the practical training as “Very Adequate”, while 35.4% considered it “Adequate”.

The findings highlight that students are being effectively equipped with clinical and applied skills, which are essential for the nursing profession. The results demonstrate that the program maintains a strong balance between theoretical instruction and practical application, thereby strengthening the employability and professional competence of its graduates.

Adequacy of Internship during Training

	Count	%
Adequate	29	30.2
Inadequate	1	1.0
Very adequate	66	68.8
Total	96	100.0

Table 17 - Adequacy of Internship

The above table shows a high level of adequacy and effectiveness in practical field training (through internship with hospitals). A majority of respondents, 68.8%, rated the internship as “Very Adequate”, while 30.2% considered it “Adequate”. This strong feedback highlights the program’s effectiveness in integrating structured internship opportunities with academic learning, enabling students to gain hands-on experience in clinical environments. Such exposure is critical in nursing education, as it helps students develop practical skills, confidence, and professional readiness.

Relevance of the Training

	Count	%
Highly relevant	66	68.8
Moderately relevant	16	16.7
No response	14	14.6
Total	96	100.0

Table 18 - Relevance of the Training

The responses on training relevance reveal that the program is largely aligned with the requirements of the healthcare sector. A majority of respondents, 68.8%, rated the training as “Highly Relevant”, and 16.7% considered it “Moderately Relevant”. A notable 14.6% of respondents did not provide a response, which may indicate uncertainty or limited exposure at the time of the survey, particularly among more recent graduates. The high proportion of respondents rating the training as highly relevant suggests that the curriculum and practical components are effectively designed to meet industry needs and job requirements. This alignment is crucial in ensuring that students are not only trained but also prepared for real-world healthcare roles.

Utilization of Skills Acquired during Training

	Count	%
Fully	71	74.0
Not using	7	7.3
Partially	18	18.8
Total	96	100.0

Table 19 - Utilisation of skills

The findings on skill utilization indicate that the majority of respondents are actively applying the competencies acquired during their training. A significant 74.0% of respondents reported that they are fully utilizing their skills, while 18.8% indicated partial utilization. 7.3% of respondents reported that they are not using the skills learned, which may be attributed to factors such as job role mismatch, delayed employment, or engagement in unrelated fields.

The high level of full utilization reflects the practical relevance and applicability of the training, suggesting that the program effectively equips students with skills that are directly aligned with workplace requirements. The results demonstrate that the program has been successful in ensuring that skills acquired during training are translated into real-world application, reinforcing its effectiveness in enhancing employability and professional competence in the healthcare sector.

Lab Facilities

	Count	%
Average	1	1.0
Good	31	32.3
Very good	64	66.7
Total	96	100.0

Table 20 - Lab facilities

The assessment of laboratory facilities indicates a high level of satisfaction among respondents, reflecting the adequacy of infrastructure supporting practical learning. A majority of respondents, 66.7%, rated the lab facilities as “Very Good”, while 32.3% rated them as “Good”. The positive feedback indicates that the institution has been successful in providing adequate infrastructure to complement theoretical and practical training.

Training School Infrastructure: Equipment for Training

	Count	%
Average	1	1.0
Good	32	33.3
Very good	63	65.6
Total	96	100.0

Table 21 - Equipment for training

The responses regarding the quality of training equipment reflect a high level of adequacy and effectiveness in supporting practical learning. A majority of respondents, 65.6%, rated the equipment as “Very Good”, while 33.3% considered it “Good”.

The positive feedback suggests that students are able to practice procedures effectively, which enhances their confidence and readiness for real-world healthcare settings.

Training School Infrastructure: Hostel Residential Facilities

	Count	%
Good	33	34.4
Very good	63	65.6
Total	96	100.0

Table 22 - Hostel residential facilities

A majority of respondents, 65.6%, rated the hostel facilities as “Very Good”, while 34.4% rated them as “Good”. The absence of negative or average ratings suggests that the hostel infrastructure is well-maintained and adequately meets the needs of the students. The availability

of quality hostel facilities contributes to a stable and conducive learning environment, allowing students to focus on their studies and training without additional logistical challenges. It also enhances accessibility for students coming from different districts, thereby supporting inclusivity.

Current Employment Status

	Count	%
Government job	51	53.1
Home nursing	1	1.0
Nursing home	1	1.0
Private hospital	26	27.1
Self-employed	3	3.1
Unemployed	14	14.6
Total	96	100.0

Table 23 - Employment Status

As per the findings from the above table, it is seen that the majority of respondents, 53.1%, are employed in government jobs, which reflects a significant achievement given the competitiveness and stability associated with such positions.

Additionally, 27.1% of respondents are employed in private hospitals, demonstrating the program's effectiveness in enabling placements across both public and private healthcare sectors. 14.6% of respondents reported being unemployed, which may include recent graduates who are still in the process of securing employment or individuals facing transitional challenges. The high proportion of government employment highlights the quality of training and competitiveness of students, reinforcing the program's effectiveness in enhancing employability and career opportunities in the healthcare sector.

Time Taken to Secure First Job

	Count	%
Within 1 month	34	35.4
1–6 months	33	34.4
More than 6 months	22	22.9
No response	7	7.3
Total	96	100.0

Table 24 - Time taken to secure first job

The data on the time taken by respondents to secure their first job after course completion indicates a relatively quick transition from training to employment. A significant proportion of respondents, 35.4%, secured employment within one month, and another 34.4% obtained jobs within one to six months. This means that nearly 70% of the respondents were able to enter the workforce within six months of completing the course, reflecting strong employability outcomes and effective placement readiness. Another 23% of respondents took more than six months to secure employment, which may be influenced by factors such as job availability, location preferences, or individual circumstances.

Monthly Income of Respondents

	Count	%
₹10,000	2	2.1
₹10,001–20,000	17	17.7
₹20,001–30,000	16	16.7
₹30,001–40,000	44	45.8
More than ₹40,000	2	2.1
No response	15	15.6

Total	96	100.0
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Table 25 - Monthly income

The distribution of monthly income among respondents reflects positive earning outcomes following completion of the training program. A substantial proportion, 45.8% of respondents, reported earning between ₹30,001–40,000 per month, indicating a strong presence of alumni in relatively stable and well-paying roles. Besides, around 18% of respondents earn between ₹10,001–20,000, while 17% fall within the ₹20,001–30,000 range, suggesting that a considerable number of graduated alumni are earning moderate incomes, particularly in the early stages of their careers. It is also noted that 15.6% of respondents did not provide income details, which may include individuals who are currently not working.

Career Progression (Promotions Received)

	Count	%
No	68	70.8
Yes	28	29.2
Total	96	100.0

Table 26 - Career progression

The data on career progression indicates that 29.2% of respondents have received promotions after entering the workforce. This reflects early signs of career growth and upward mobility, indicating that the training has equipped students with competencies that are recognized in the workplace.

Impact on Beneficiaries: Economic Independence

	Count	%
No	11	11.5
Yes	85	88.5
Total	96	100.0

Table 27 - Economic independence

The data on economic independence reflects that significant majority of respondents (88.5%) are economically independent. It suggests that the program has been successful in enabling students to secure livelihoods and support themselves financially after completing their training. It also indicates a transition from dependency to self-reliance, which is a key outcome of skill-based and professional education initiatives.



Fig. 24 Entrance of VK NRL School of Nursing

Impact on Beneficiaries: Perceived Positive Change

	Count	%
All	40	41.7
Most	42	43.8
Some	11	11.5
Very little	2	2.1
None	1	1.0
Total	96	100.0

Table 28 - Perceived positive change

The responses on perceived positive change indicate a strong overall impact of the program on the lives of beneficiaries. This distribution clearly shows that more than 85% of respondents experienced significant positive transformation, highlighting the effectiveness of the program in improving various aspects of their lives. These changes may include improvements in employment, income, confidence, skills, and overall quality of life.

Impact on Beneficiaries: Access to Alternative Opportunities

	Count	%
Yes	21	21.9
No	33	34.4
Cannot Say	42	43.8
Total	96	100.0

Table 29 - Access to alternative opportunities

The responses regarding access to similar opportunities in the absence of this program highlight the critical role played by the VK NRL School of Nursing in enabling access to professional education and employment pathways. A significant proportion of respondents, 34.4%, reported that they would not have been able to access similar opportunities, underscoring the program's importance in bridging gaps in accessibility. Overall, the data highlights the program's role in expanding access to education and employment opportunities, especially for individuals who might otherwise face constraints due to geographical, financial, or informational barriers.

Perception of Opportunity: Alternatives Before Joining the Program

	Count	%
No	42	43.8
Yes, left a job	5	5.2
Yes, left another education course	48	50.0
Yes, left family responsibility	1	1.0
Total	96	100.0

Table 30 - Alternatives before joining the program

The responses regarding alternative opportunities prior to joining the VK NRL School of Nursing reflect the significance and priority given to this program by the beneficiaries. Half of the respondents, 50.0%, reported that they left another education course to join this program, indicating a strong preference for nursing as a career pathway.

Another 44% of respondents stated that they did not have any alternative opportunity, suggesting that for a substantial proportion, this program served as a primary entry point into professional education and skill development. These findings highlight that the program is not only accessible but also perceived as a valuable and desirable opportunity, capable of attracting individuals even when they have other options available.

Perception of Sustainability: Continuity of Benefits

	Count	%
Yes	92	95.8
No	1	1.0
Cannot say	3	3.1
Total	96	100.0

Table 31 - Continuity of benefits

The responses regarding the continuity of benefits from the training indicate a very high level of confidence among beneficiaries in the long-term value of the program. A significant majority, 95.8% of respondents, believe that the benefits of the training will continue in the future.

Overall Satisfaction with the Program

	Count	%
Neutral	2	2.1
Satisfied	37	38.5
Very satisfied	57	59.4
Total	96	100.0

Table 32 - Overall satisfaction

The overall satisfaction levels reported by respondents indicate a high degree of positive perception towards the program with 59.4% respondents reported being “Very Satisfied”, while 38.5% stated that they were “Satisfied” with the course.

The high levels of satisfaction suggest that the program has been successful in meeting the expectations of students in terms of training quality, infrastructure, and career outcomes. It also reinforces earlier findings related to teaching quality, practical exposure, and employment opportunities.

Conclusion:

The assessment findings reveal that the VK NRL School of Nursing has generated substantial multi-dimensional impact across education, employment, and socio-economic empowerment. The program has demonstrated strong employment outcomes, with a majority of alumni successfully placed in government and private healthcare institutions. The short transition period from course completion to employment reflects the program’s effectiveness in preparing students for the job market. Graduates have secured financially stable positions, leading to improved economic conditions for many beneficiaries. A significant outcome is the high level of economic independence achieved by participants, with many transitioning from dependency to financial self-reliance and sustainable livelihoods. The training has shown strong relevance and utilization,

as most respondents are actively applying their acquired skills in their current roles, indicating clear alignment with healthcare sector requirements. Beyond economic benefits, the program has produced notable social impact, including increased confidence, improved quality of life, and enhanced career aspirations. The high proportion of respondents reporting transformative positive change underscores the initiative's overall effectiveness.



Fig. 25 - Students at VK NRL School of Nursing

Recommendation

- Although placement outcomes are strong, further support through career guidance, advanced training, and specialization pathways would enhance long-term career growth and promotion prospects.
- Given the current reliance on informal networks, strengthening digital and institutional outreach strategies could broaden access to a wider population.
- Introducing refresher courses, advanced certifications, and specialized training modules would help graduates remain competitive and adapt to evolving healthcare sector demands.
- Establishing a robust alumni tracking system would provide valuable insights into career progression, income trends, and sustained impact.

- Targeted interventions, including placement drives, mentorship, and job linkage support, could effectively address the small proportion of graduates who remain unemployed.

4. RURAL DEVELOPMENT

4.1) Installation of solar street lights

An investment of INR 126 lakhs was made for the installation of LED solar street lights across selected villages and community places in Golaghat district. The project aimed to improve rural infrastructure, enhance public safety, and extend usable hours after sunset through renewable energy-based lighting.



Fig. 26 - LED solar street lights

Field observations confirmed that the lights are functioning effectively. During daytime inspections, solar panels were found intact and properly positioned, with poles firmly installed. Evening visits revealed consistent illumination along pathways, internal roads, junctions, and areas near community gathering points, with no visible dark patches or flickering in the covered stretches. The intervention has brought measurable changes to daily rural life. Pathways

connecting homes, small shops, and community spaces now remain lit, enabling greater mobility after dusk. The improved visibility has also reduced concerns related to uneven paths.

Community feedback indicated regular nightly operation of the lights with minimal maintenance issues so far. Physical verification during the field visit showed full functionality in the observed area, with no signs of damage or neglect. Overall, the installation of LED solar street lights has been implemented effectively. With an expenditure of INR 126 lakhs, the project has enhanced safety, mobility, and quality of life in the beneficiary villages in a sustainable manner. It serves as a practical example of using renewable energy solutions to address basic rural infrastructure needs.



Fig. 27 - Installation of solar street lights

4.2) Toilets

An investment of INR 300.93 lakhs was made for the construction of toilet facilities in different educational institutes and community places under Project Parichannata in Golaghat. The initiative focused on improving sanitation infrastructure in schools and public areas to promote hygiene, dignity, and better health practices. Field observations confirmed that the constructed toilet blocks are complete and functional. The structures feature proper roofing, ventilation, doors, and clear signage indicating separate facilities for male and female. Interiors were clean and well-maintained, with adequate space and basic amenities in place. Water availability was noted through nearby sources, supporting regular use. The project has brought a noticeable shift



Fig. 28 - Toilets constructed at Khakandaguri M.E. School

in sanitation practices. In educational institutes such as Nakkati Tini Chuki M.E. School and Khakandaguri M.E. School, the new toilet blocks have replaced inadequate or absent facilities. Students and staff now have convenient access to hygienic sanitation within the school premises. Similar improvements were observed in community places, where the facilities are integrated into the local environment and show signs of regular maintenance. The availability of these

facilities has enhanced comfort and privacy, particularly for female students and women in the community. Earlier dependence on open or distant areas has reduced, leading to improved hygiene behaviour and a greater sense of safety and dignity. The sense of ownership is evident, as schools and communities take responsibility for upkeep. No major maintenance issues were reported, and the structures appeared well-integrated into their respective settings. Physical verification during the visit showed active usage, with no signs of abandonment or under-utilisation in the observed locations.



Fig. 29 - Toilets constructed under Project Parichannata

4.3) Rural road construction

A total sum of INR 1891.76 lakhs was allocated for the construction and development of rural roads in Golaghat district under the NRL CSR-supported initiative. The project aimed to enhance rural connectivity, improve access to essential services, and support overall rural development by providing all-weather road infrastructure. Field observations during the visit confirmed that the constructed roads are in good condition. The surfaces were even, with interlocking paver blocks



Fig. 30 - Rural roads construction at Rongbong

laid uniformly and no visible potholes or major cracks. Drainage features along the sides appeared functional, preventing water accumulation. The roads effectively connect residential areas, markets, schools, and nearby main roads, serving as important links within the villages. Usage of the roads was found to be regular and steady. Two-wheelers, small vehicles, and occasional goods carriers moved smoothly along the stretches. Even after light rainfall, the roads remained fully usable without water-logging or surface damage, indicating sound construction quality and attention to site-specific requirements. The improved connectivity has also reduced the earlier sense of isolation in some village pockets. Accessibility during the rainy season was particularly appreciated, as the roads continue to support movement when earlier mud tracks would become difficult. The roads are actively integrated into daily village life and show no signs of early deterioration or frequent repairs. This reflects effective planning and execution.

4.4) Open air auditorium at Sarupathar

INR 290 lakhs was spent for the construction of an open air auditorium at Sarupathar. The facility was developed to provide a dedicated community space for cultural programmes, public meetings, and social gatherings in the area. Field observations confirmed that the auditorium is complete and fully functional. The structure features a large covered stage with brick pillars, a

robust metal roof framework, and adequate seating capacity arranged in rows of chairs. The stage is equipped with proper lighting, ceiling fans, and provisions for sound systems. The surrounding paved area and access pathways are well maintained, ensuring easy movement for visitors. The visits showed the facility to be clean, with no signs of structural damage or neglect. It is reported that the space is used regularly for cultural events, festivals, community meetings, and other



Fig. 31 - Open air auditorium constructed at Sarupathar

public functions. Earlier, such gatherings often required temporary arrangements or relocation to other venues. The availability of this dedicated open air facility has simplified organisation and increased participation. The stage and seating area show visible signs of frequent use, indicating sustained community engagement throughout the year. The well-lit environment in the evenings has enhanced comfort and safety. The open design allows clear visibility from all sides and supports events of varying sizes. Management of the facility appears to be handled informally by the community, with shared responsibility for upkeep.

4.5) Open air auditorium at Sri Sri Uttar Kamalabari Xatra, Majuli

A similar investment of INR 290 lakhs was made for the construction of an open air auditorium at Sri Sri Uttar Kamalabari Xatra in Majuli. The facility was developed to provide a dedicated space for cultural performances, religious gatherings, and community events within the satra premises, in keeping with its spiritual and cultural traditions. The on-site observations during the visit confirmed that the auditorium is complete and functional. The structure features a large

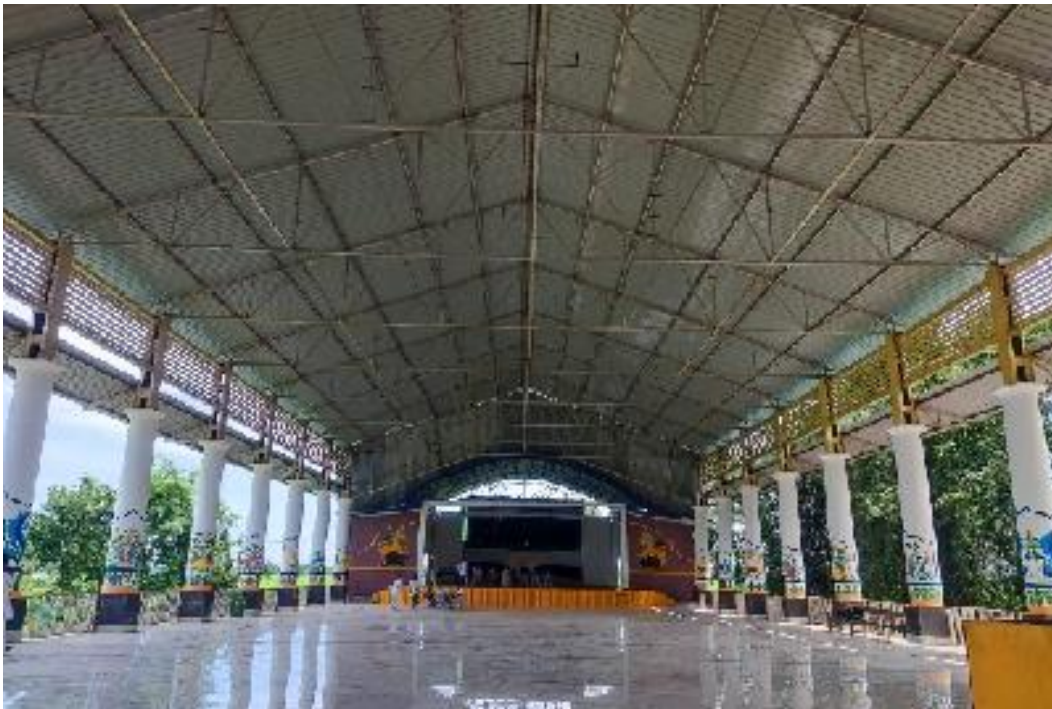


Fig. 32 - Auditorium constructed at Sri Sri Uttar Kamalabari Xatra, Majuli

covered stage with a smooth surface, supported by concrete pillars with traditional decorative paintings. The spacious open seating area has a polished floor and adequate capacity for audiences. The roof is supported by a sturdy metal framework with proper ventilation, while the overall design maintains harmony with the surrounding natural and cultural environment. Electrical fittings, lighting, and provisions for sound systems are in place and appear adequate for evening programmes. The auditorium shows clear signs of regular use. Light marks on the stage and the orderly arrangement of the space indicate frequent activity. The facility was found

to be clean and well maintained, with no visible damage or neglect. Pathways leading to the auditorium are accessible, and the open design allows natural integration with the satra's surroundings. The facility is viewed not as a separate structure but as an integral part of the satra's cultural and spiritual life. As reported the usage is particularly high during festivals and important occasions, reflecting its role in supporting continuity of traditions.

4.6) Open air auditorium at Bokakhat Town

The open-air auditorium in Bokakhat town was constructed with an investment of INR 290 lakhs to provide a dedicated space for cultural programmes, public meetings, and social gatherings in this semi-urban area. Field observations confirm that the facility is complete, functional, and well maintained. The structure includes a covered stage with a smooth surface and a spacious seating



Fig. 33 Auditorium constructed at Bokakhat Town

area with polished flooring. Supported by brick pillars and a metal roof, the design ensures adequate ventilation and clear visibility. Lighting, electrical fittings, and sound system provisions are in place, making it suitable for events, including those held in the evening. Surrounding

pathways are paved, with proper drainage and no signs of water-logging. The auditorium shows regular use, as indicated by minor wear on the stage and the overall cleanliness of the space. Its layout accommodates gatherings of different sizes while maintaining accessibility and comfort. Community feedback highlights that the facility is actively used throughout the year for cultural and public events. The availability of this permanent space has eased event organisation and increased participation. The open design and adequate lighting enhance safety during events, while local management reflects shared community responsibility.



Fig. 34 Interior of the auditorium constructed at Bokakhat Town