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COMMON PROPERTY RESOURCES (CPRs) AS A LIVELIHOOD STRATEGY: A CASE STUDY AMONG THE CPRs DEPENDENT COMMUNITIES OF DINDIGUL DISTRICT OF TAMILNADU

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ABSTRACT

Common Property Resources (CPRs) accessible to collectively owned/held/managed by an identifiable community and on which no individual has exclusive property rights are called common property resources (Jodha 1986). This results that co-users of the resources are a well-defined group of persons. The proponents of this approach hold that "a resource becomes common property only when the group of people who have the right to its collective use is well defined, and the rules that govern their use of it are set out clearly and followed universally". In general those people who are depending on Farming or doing Labour are more likely to dependent on Common Property Resources as CPR constitute major income source and generated livelihoods in the forms of fuel wood, medicinal plant, use of common grazing land for cattle and pets, getting access to fallow or barren land. Self-employed, business and Govt. employee class of people in general do not depend on CPR for their day to day livelihoods as their economy is largely not depends on it. Occupation of respondents is directly related with CPR use and access. CPR owned or held by an individual or a family or an organization like a company or corporation or co-operative institution is not being considered as CPRs. This study was carried out in 5 blocks namely Oddanchatram, Reddiyarchatram, Dindigul, Sanarapatti and Vadamadurai. These blocks were identified based on the high level of CPR present over there. From each of the above mentioned identified block 5 village Panchayats have been selected. The required data was collected from 1000 rural dependent households with the help of a pre-tested interview schedule prepared exclusively for this purpose. To understand the nature of the data, firstly, frequency tables were prepared, and subsequently the analysis and tabulation have been carried out using research techniques based on the requirement.

KEYWORDS: Common Property Resources, Community, access, Livelihoods.

1.INTRODUCTION

The Common Property Resources are the singular source of human sustenance in the households that constitute a large section of rural India. CPRs are integral part of the social and institutional arrangements made to meet the day to day requirement of the rural poor. The rural poor, especially the landless, are highly dependent on the CPRs for their subsistence. Earlier studies have also suggested that both the poor and not so poor also depend on the CPRs for their livelihood. CPRs not only act as a buffer during the economic crisis arising due to crop failure but also act as an additional source of income during normal times. In the economically backward region of the state a significant proportion of the population is highly dependent on common property resources specially the common property resources. This

dependency on common property resources is much higher among the poorest people, scheduled castes and scheduled tribes population of the state. Accordingly, the extraction of common property resources has serious implications to rural household income, employment, economic inequalities, poverty and more so to natural environment. The property rights to resources have an important bearing on productivity. The study result reveals that 78 percent of the total sample households are still depending on CPRs for their livelihood. It shows that around 70 percent of the respondents were depends on CPRs due to poor family conditions. It is estimated that around 44 percent of the respondents were depend upon both private and CPRs for their fuel wood requirements. It finds that around 68 percent of the households have used the fuel wood fully for their household purposes. Common property resources have great importance for the poor and women. Traditionally there is third type of property as common property resources(CPRs)andrightsaswellinTamil Nadusociety. These common property rights are abundle of entitlements defining both the rights and obligations in the use of CPRs. They include the rights of access to resources, the right to exclude other potential users, right tomanage them and right tosell the resource base (Topal, et al. 2000)... The CPRs in Tamil Nadusociety generally are the natural resources and cultural heritages. In rural environment of Tamil Nadu both ecological and socio economic sustainability are largely determined by the status of CPRs available in the community. The socioeconomic characteristics, community's capability, incentive and sense of ownership are important components of understanding there sources utilization and management. The study therefore, attempts to explore the contribution and existing practices related to CPRs in the study area and discusses the factors behind both success and failures in the utilization and management of CPRs.

The collections of common property resources not only helps to sustain their livelihood, but also helps to generate additional income. Collection of common property resources by the rural poor have therefore helped to mitigate poverty to large extent. Poverty is often associated with environmental degradation. Roughly half of the Word's poor live in highly degraded environment. The CPRs form the main thrust of the rural economics and the absence of these resources could mean the difference between life and death to members of the rural communities. The CPRs contribute a lot to the village economies, the rural poor, particularly, survive on these resources to a greater extent (Olubukola, 1996). This is because CPRs are used on a daily basis for food, medicine, shelter and financial income. The Word Commission on Environment and Development (Brundtland Commission 1987) 'poverty is a major cause and effect of global environmental problems. It's therefore futile to attempt to deal with environmental problems without a broader perspective that encompasses the factors underlying world poverty'. United Nations estimates indicate that up to 70 per cent of the world's poor are female; women in developing countries constitute the majority of the labour force, playing a key role in managing community resources and helping to protect the environment. In recent times, there has been increasing recognition that the relationship between poverty and environment is complex and is strongly influenced by economic, social, local demographic, institutional and cultural factors. Rural poor are heavily dependent on forest. The labour allocation decisions and extraction of forest products are dictated by various socio-economic and demographic variables. Environmental degradation deepens today's poverty, whereas today's poverty makes it extremely difficult to care for or restore the agricultural base, to find alternates to be deforestation and control soil erosion.

OBJECTIVES

- 1. To assess the extent of dependency of rural poor people on CPRs
- 2. To examine the impact of CPRs collections on income, employment and poverty.

2. METHODSANDMATERIALS

This study was carried out in 5 blocks namely Oddanchatram, Reddiyarchatram, Dindigul, Sanarapatti and Vadamadurai. These blocks were identified based on the high level of CPR present over there. From each of the above mentioned identified block 5 village Panchayats have been selected. The required data was collected from 1000 rural dependents households with the help of a pre-tested interview schedule prepared exclusively for this purpose. Thedataand information are obtained from both primary and

secondary sources. The primary data and evidences presented in this paper are based on the field study in the study area. Data collection was carried out through different methods that included structured survey, physical verification, recording of oral histories and focus group discussion with users.

3. REVIEW OF LITERATURES

Pandey, A.K. et.al (2016) had attempted to sketch the outline extent, reliance ratio and livelihood importance of NTFPs for forest reliant communities and to suggest solutions for their sustainable progress and use. The Indian NTFPs are part of the livelihoods, socio-economic and cultural life of the rural forest reliant societies residing in the wide ecological and geographical conditions across the nation. It is estimated that around 275 million Indian poor rural people are dependent on NTFPs for at least a part of their daily subsistence and cash incomes. In spite of all these positives the shrinkage of NTFPs resources has been evident due to the undue exploitation, forest degradation and deforestation which is a major challenge and has adverse effects on the NTFP reliant livelihoods and economies. The impact of NTFPs role on the lives of the rural and urban people in the globe can at no point be undermined.

Sahoo. R, & Swain. M, (2013) Observed that to determine the CPR contributions to the poor rural household income and their fuel and fodder requirements in four villages in Keonjhar district of Odisha. The research observed 200 households of which 120 were poor and 80 were non-poor households consisting of landless agricultural workers, marginal farmers and middle or large farmers from four villages of two varied sample blocks. Encroachment, implementation of various programmes and exploitation resulted in CPR degradation leading to crisis in sustenance of livelihoods for the rural poor. In spite of the degradation and shrinkage of CPRs, it has substantially catered to the total fuel and fodder needs of both the poor and non-poor households. It has been observed that the CPRs have created employment opportunities and income among the poor households which are higher than the non-poor households in the research area though not in absolute terms. But measures are essential to enable retention, regeneration and sustainable use of CPRs for livelihood stability to the CPR reliant poor rural communities.

Beak and Ghosh (2001) analysed the relationship between CPRs and rural poor in India. This study explores that the first insensitive study of CPRs in West Bengal in post independent times showed that CPRs are of crucial importance to poor people's livelihoods even in a region where mostly land is privately owned. At a level similar to the forest and arid regions of India they have been more intensively studied. The study found that CPRs, made up to about 12 percent of poor household's income, fuel and fodder, were the most important CPRs accessed by the poor, access was generated and women and girls are mainly responsible for collection of CPRs. The globalization process of privatization of property and marketization of common goods for the profit of a few are at play here, and the upshot is a relative decline in poor people's livelihoods.Further his studyestimated roughly that the CPRs currently add some US \$ 5 billion a year to the incomes of poor rural households in India, or about 12 % to household income of poor rural households. In Pani (water) panchayats (R.S. Deshpande and Ratna Reddy: 1990), every rural household has an equal share in irrigation and water resources. The water rights are tradable, so that even the landless labourers gain from the irrigation resources generated. Grassroots democracy is used to integrate environmental regeneration and rural development to alleviate poverty.

Parikh and Vijayalaxmi (2000) analysed the various types of uses of CPRs in Indian villages. They showed that approximately in 80 percent of the villages, people share open water sources which are not used for drinking. In 40 per cent of the villages, grazing and pasture lands are available as CPRs. In rural Tamil Nadu bio-fuel is the main source of cooking fuel for about 96 per cent households. Use of dung cake for cooking is not very common in the area, kerosene is mostly used for lighting purpose. In Tamil Nadu, almost 100 per cent villages have been electrified. Most of the literature interprets rural poor mainly using / depending on CPRs, especially for their fuel and fodder collection, however, CPRs give life sustenance to rural people, particularly to poor. In recent years, most of the village commons have degraded into open access situation due to weak property rights relations, institutional arrangements and breakdown of local

authority system (village panchayat). The main causes of this exclusion are agricultural intensification, commoditization of CPRs, environmental degradation and population growth.

4.ANALYSIS AND DISCUSSION

This chapter is devoted for primary data analysis and discussion on the availability, accessibility, composition of household livelihoods, its degradation and impact on sustainable rural livelihoods of Common Property Resources (CPRs) in the study blocks namely Oddanchatram, Reddiyarchatram, Dindigul, Sanarapatti and Vadamadurai of Dindigul district. In consistence with the objectives of the study, the necessary data collected from different sources were analysed and interpreted. This chapter includes sections which includes analysis on socio-economic characteristics, access to common property resources, factors associated with decline of CPRs, consequences of loss of CPRs & its impact on livelihoods and also on management practices of common property resources.

This chapter deals with the results and discussion of the primary data which was obtained from respondent households in the study village during the investigation periods.

TABLE 4.1 SEX WISE DISTRIBUTION OF SAMELE RESPONDENTS					
		SEX	TOTAL		
S. NO.	BLOCK	MALE	FEMALE	TOTAL	
1	Oddanchatram	136 (13.82)	64 (6.18)	60(20)	
2	Reddiyarchatram	125 (11.77)	75 (8.49)	60(20)	
3	Dindigul	138 (14.23)	62(5.80)	60(20)	
4	Sanarpatti	142 (15.07)	58 (5.08)	60(20)	
5	Vadamadurai	128(12.24)	72 (7.83)	60(20)	
	Total	669(67.13)	331(33.38)	300(100)	

TABLE 4.1-SEX-WISE DISTRIBUTION OF SAMPLE RESPONDENTS

Source: Computed from Primary data, N=300

Table 4.1 as shown above gives the sex distribution of sample respondents in the study areas. Sex distribution is an important factor in socio-economic status of the study area, as women also takes parts in the economic development of family which is directly related with access to basic facilities such as education, health, shelter etc. It is clearly evident from the above table that 67 percent of sample respondents are Male and rest 33 percent constitutes of women respondents. It is clear that the ratio of Men is higher in comparison to women is due to various reasons. In two blocks women have comparatively higher in their participation in this survey. Above table clearly shows that women respondents constituted below 9 percent in almost all the five blocks. Whereas among men respondents from Oddanchatram, Dindigul &Sanarpatti Men's participation percentage is around 15 percentages and this indicates that respondents of these three Blocks are highly accessing the CPR items which not only generating their livelihoods but also in day to day uses.

TABLE 4.2-OCCUPATION-WISE DISTRIBUTION OF SAMPLE RESPONDENTS

1			Total			
		Farmer	Labou(coolie,	Self	Govt.	
Sl.No.	Block		Mason)	Employed,	Employed	
				Business		
01.	Oddanchatram	32(22.5)	22(20.8)	1(5)	5(15.6)	60(20)
02.	Reddiyarchatram	23(16.2)	27(25.5)	2(10)	8(25)	60(20)
03.	Dindigul	26(18.3)	24(22.6)	4(20)	6(18.8)	60(20)

04.	Sanarpatti	33(23.2)	13(12.3)	8(40)	6(18.8)	60(20)
05.	Vadamadurai	28(19.7)	20(18.9)	5(25)	7(21.9)	60(20)
	Total	142(100)	106(100)	20(100)	32(100)	300(100)

Source: Computed from Primary Data, N-300

From the above table it is clearly revealed that among the surveyed respondents with 47% farmers constituted highest, followed by labour in which coolie and mason workers are 35%, next being Govt. Employees with 11% and self-employed and Business class constituted 7%. Among block wise distribution of farmers from Oddanchatram constituted 32%, Vadamadurai 28%, Sanarapatti 33% and Dindigul & Reddiyarchatram accounted for 26 and 23% respectively. Labour constitutes at an average of 20% from all surveyed self-employed, Business and Govt employed respondents constituted an average of 8%.

TABLE 4.3 DISTRIBUTION OF SAMPLE HOUSEHOLDS ACCORDING TO THEIR ACCESS TO CPR

	BLOCK	HAVING ACCESS	TOTAL		
S. NO.	BLUCK	NO	YES	TOTAL	
1	Oddanchatram	101(9.98)	99(10.22)	200 🖉	
2	Reddiyarchatram	99(9.59)	101(10.64)	200	
3	Dindigul	110(11.72)	90(8.36)	200	
4	Sanarpatti	113(12.48)	87(7.90)	200	
5	Vadamadurai	93(8.47)	107(11.93)	200	
	Total	516(51.6)	484(48.4)	1000	

Source: Primary data

Access to common property resources has become a very complex matter due to various land reform act and forest protection policies. Many forest which were the basis of livelihoods for the local inhabitants now has became fully protected area due to illegal activities which started to smuggle forest goods and illegal hunting of animals. From the above table 4.2 it is found that 51.6 percent of sample respondents stated that they have no access to common resources and 48.4 percent of them reported that they had access to common resources in the study areas. The access to these resources are on the basis of mutual understanding on the ground that minor forest products collectors from forest will not take any endanger species as per Government rules and regulation. It appears that they will have limited collection daily basis and during seasons. Further predictors of access to CPRs in the study areas were analyzed with binary logistic regression. It shows that among all the independent variable such as sex, occupation, marital status and blocks playing a major role and it becomes significant at one percent level. Female respondents were comparatively lower access to CPRs 38 percent lesser. Illiterate respondents have lower access to CPR to other categories. Farmers have 50 to 70 percent of access to CPR than those who engaged in self employed, laborers. Vadamadurai respondents have 10 percent higher than CPRs access to other blocks. The other variables were not associated with the CPR access.-2 Loglikely hood value was Log likehood11039.765a , which also prove the analysis were statistically proved what revealed in tables.

SI.No Block		Who collect MFP/CPR items in your family			Total
31.140	DIOCK	Women	Men	Both as per time	
		67	63	70	200
01.	Oddanchatram	(7.34)	(5.36)	(7.08)	200
		60	75	65	200
02.	Reddiyarchatram	(5.80)	(7.57)	(6.83)	200

TABLE-4.4 SHOWING THE PERSONS ENGAGED IN COLLECTION OF CPR ITEMS IN THE SAMPLE HOUSEHOLD

	Total				
	Total	(31.0)	(37.6)	(31.4)	1000
		310	376	314	1000
05.	Vadamadurai	(3.95)	(10.65)	(6.12)	200
		49	89	62	200
04.	Sanarpatti	(8.71)	(7.18)	(4.64)	200
		73	73	54	200
03.	Dindigul	(6.1)	(7.68)	(6.42)	200
		61	76	63	200

Source: Primary data

The CPRs have been an integral part of the economy and ecology of local communities in India from time immemorial, but they could not attract the attention they deserved. In many villages livelihood traditionally depends on the collection of forest products. It is estimated that CPR-product collection is worth between approximately 19 to 29 per cent of the poorest households' income. Research studies revealed that fuel wood collection from CPR meets more than 2/3rds of the total energy requirements of household and more than 50 per cent of the total fodder requirements of the households as met through the CPRs.

It is noticed from the above table that both men and women have been engaged in collection of CPR items in the study areas. However, in the case of men engaged in such activities constituted 6 percent more that of women. Among the study villages, it is found that more men were engaged in CPR items collection than women in Vadamadurai block.

Sl.No.	Block	How often you go far collection				Total	
		Daily	Weekly	Monthly	Seasonal	Occasional	1
		86	54	16	28	16	200
01.	Oddanchatram	(9.40)	(4.64)	(1.25)	(2.96)	(2.16)	200
		85	59	25	20	11	200
02.	Reddiyarchatram	(9.30)	(5.63)	(3.18)	(1.51)	(1.11)	200
		84	58	19	28	11	200
03.	Dindigul	(8.97)	(5.35)	(1.86)	(2.96)	(1.11)	200
		69	75	20	25	11	200
04.	Sanarpatti	(6.14)	(9.07)	(1.96)	(2.46)	(1.11)	200
		69	68	22	31	10	200
05.	Vadamadurai	(6.14)	(7.36)	(2.37)	(3.75)	(0.84)	200
		393	314	102	132	59	1000
	Total	(39.3)	(31.4)	(10.2)	(13.2)	(5.9)	1000

TABLE 4.5 SHOWING THE FREQUENCY OF CPR COLLECTION BY THE SAMPLE HOUSEHOLDS

Source: Primary data

The reduced products and income generation options, following degradation of CPRs, imply increased scarcity, and stress for those who depend on CPRs. The longer time and distance involved in collection of the same or lesser quantities of CPR products and the reduced effective period of sustained grazing offered by CPRs today, as compared to the past are just two of the several examples of this phenomenon. The frequency of visiting the forest depends on the availability of CPRs in the given location. It is found from the above table that a large majority of sample households have collected CPRs on daily (39.3 percent) and weekly (31.4 percent) basis. Another 10.2 percent of them have collected CPRs on monthly

basis. Further, seasonal collection of CPRs was reported by 13.2 percent of them and occasional collection was done by 5.9 percent.

		Why you collect	MFP		Total
SI.No.	Block	Personal use	To sell	Both	
		56	46	98	200
01.	Oddanchatram	(4.88)	(4.72)	(10.55)	200
		72	49	79	200
02.	Reddiyarchatram	(8.07)	(5.46)	(6.94)	200
		66	41	93	200
03.	Dindigul	(6.78)	(3.84)	(9.60)	200
		68	41	91	200
04.	Sanarpatti	(7.20)	(3.84)	(9.2)	200
		59	47	94	200
05.	Vadamadurai	(5.51)	(5.03)	(9.70)	200
		321	224	455	1000
	Total	(32.1)	(22.4)	(45.5)	1000

TABLE 4.6 SHOWING THE REASONS AS CITED BY SAMPLE RESPONDENTS FOR COLLECTION OF MFP

Source: Primary data

Forests and village commons have been important sources of supplementary livelihoods and basic necessities for rural households in many parts of the world. More than 1.6 billion people depend to varying degrees on forests for their livelihoods. About 60 million indigenous people are almost wholly dependent on forests. In developing countries, about 1.2 billion poor people rely on forest resources for their livelihood, and 80 percent of the people depend on non-wood forest products, such as fruits and herbs, for their primary health and nutritional needs". In South Asia the CPRs have provided fodder, small timber and various non-timber products. Firewood is still the single most important source of rural domestic energy in South Asia, and is still largely gathered, and not bought from outside. The above table clearly shows that 45.5 percent of sample households have collected CPRs for personal use and also for selling of the same. In the case of 32.1 percent of them it was reported that they collected for personal use only and 22.4 per cent stated sales as the reasons for collection of CPRs.

	TO DEPENDEN		3			
Block	De	Dependency Level on CPR				
	Low	Moderate	High			
Oddanchatram	15	29	16	60		
	(25.0)	(48.3)	(26.7)	(20.0)		
Reddiyarchatram	19	30	11	60		
	(31.7)	(50.0)	(18.3)	(20.0)		
Dindigul	17	26	17	60		
\mathbb{Y}	(28.3)	(43.3)	(28.3)	(20.0)		
Sanarapatti	8	35	17	60		
	(13.3)	(58.3)	(28.3)	(20.0)		
Vadamadurai	28	26	6	60		
	(46.7)	(43.3)	(10.0)	(20.0)		
Total	87	146	67	300		
	(29.0)	(48.7)	(22.3)	(100.0)		

TABLE 4.7 PERCENTAGE DISTRIBUTION OF SAMPLE RESPONDENTS ACCORDING TO DEPENDENCY LEVEL ON CPRS

Source: computed from primary sources

Table no 4.7 shows the association between he blocks and dependency level on CPR among the respondents in the study area. From the analysis it was observed 46% of the respondents of Vadamadurai reported as they had a low dependency level on CPR and this proportion was high in Sanarapatti and Dindigul. It was also noticed that the respondents of Sanarapatti followed by Reddiyarchatram reported their dependency level on CPR with the proportion of around 58.3% and 50.0% respectively. Above data reflect that on an average the availability of CPRs in study area is moderate. The statistical analysis also proved that the dependent variable and independent variable also were significantly associated at 0.05 percent level of significance. As the Dindigul district is one of the largest district in Tamilnadu and selected blocks have different levels of availability of CPR, the dependency level on CPRs is also different. In order to make it simple to understand the dependency levels three categories has been made as low, medium & high. Chi-square test has been used for finding the significance level of the tested variables.

		How much you earn	How much you earn from MFP monthly		
SI.No	Block	Rs.1000-2000	Rs. 2001-4000	Rs.5000 and above	
01.	Oddanchatram	120 (11.19)	57 (6.48)	23 (2.70)	200
02.	Reddiyarchatram	140 (15.24)	43 (3.70)	17 (1.5)	200
03.	Dindigul	128 (12.74)	59 (6.94)	13 (0.89)	200
04.	Sanarpatti	135 (14.27)	42 (3.45)	23 (2.70)	200
05.	Vadamadurai	120 (11.19)	54 (5.71)	26 (3.31)	200
	Total	643 (64.3)	255 (25.5)	102 (10.2)	1000

	COLLECTION BY SAMPLE HOUSEHOLDS

Source: Primary data

The people were free to collect MFP and they were dependent on MFP for their livelihood and they felt that it was a legal right. But during the British period, tribal people were restricted to collect MFP, because Britishers established the Forest Department in 1864 to check the deforestation and to have monopoly over the forest. Even though small, though the income from the MFPs does supplement the income from agriculture and wage labour such that the people put a premium on their dependence on the MFPs. They have some limitations on the produce they may collect from the forests. It is a man's job as well, not that women do not try their hands at its, they do, and some are habitual and good collectors of MFP. Fruits and roots, dead wood, soapberry and other such MFPs are not difficult to collect but are becoming short of their supply because of increasing number of collectors and increasing restrictions on their collection, more so, with the declaration of certain areas of the forests as wild life sanctuaries and forest reserves for regeneration. The above table shows that majority (64.3 percent) of sample households have earned Rs.1000-2000 from MFP per month and 25.5 percent of them reported that they obtained income from MFP in the range of Rs.2001-4000 per month. In the case of 10.2 of sample households, it was reported that they could earn above Rs. 5000 per month from MFP.

5. FINDINGS AND CONCLUSION

The independent variable such as sex, occupation, marital status and blocks playing a major role and it becomes significant at one percent level. Female respondents were comparatively lower access to CPRs 38

percent lesser. Illiterate respondents have lower access to CPR to other categories. Farmers have 50 to 70 percent of access to CPR than those who engaged in self employed, laborers. Vadamadurai respondents have 10 percent higher than CPRs access to other blocks. The other variables were not associated with the CPR access. -2 Loglikelyhood value was 11039.765a, which also prove the analysis were statistically proved what revealed in tables.

It is clearly evident from the above table that 67 percent of sample respondents are Male and rest 33 percent constitutes of women respondents. who are above 50 years of age only constitutes 3 percent, young adults respondent's between the age groups of 33-42 are highest in number with 61 percentage. Below them is youth in the age group of 23-32 with 30 percent. 41 percent of sample respondents have studied up to secondary level and 20 percent of them reported to have studied beyond higher secondary level. In the case of respondents who have studied only up to primary level constituted 24 percent. The table also clearly indicates that 15 percent of them are illiterate across the sample villages. surveyed respondents with 48 percentage farmers constituted highest, followed by labour in which coolie and mason workers are 32 percentages next is Govt. Employee with 11 percentage and self-employed and Business class constituted 9 percentages. Among block wise distribution of farmers from Oddanchantram constituted 12 percentage, Vadamadurai 10 percentage, Sanarpatti 95 percentage and Dindigul and Reddiyarchatram accounted for 93 and 88 percentages respectively. the occupation-wise distribution of sample respondents. CPRs accessible to collectively owned/held/managed by an identifiable community and on which no individual has exclusive property rights are called common property resources. This study was carried out in 5 blocks namely Oddanchatram, Reddiyarchatrm, Dindigul, Sanarpatti and Vadamadurai. These blocks were identified based on the high level of CPR present over there and partially in terms of CPR Index as available. From each of the above mentioned identified block 5 village panchayats have been selected. the sex distribution of sample respondents in the study areas. Sex distribution is an important factor in socio-economic status of the study area, as women also takes parts in the economic development of family which is directly related with access to basic facilities such as education, health, shelter etc. Occupation of respondents is directly related with CPR use and access. In general those people who are depending on Farming or doing Labour are more likely to dependent on Common Property Resources as CPR constitute major income source and generated livelihoods in the forms of fuel wood, medicinal plant, use of common grazing land for cattle and pets, getting access to fallow or barren land. Self-employed, business and Govt. employee class of people in general do not depend on CPR for their day to day livelihoods as their economy is largely not depends on it.

CONCLUSION

The Common Property Resources are the important sources of natural resources and it is play the additional sources of employment and income of the rural peoples. The Sempatti revenue village is one of the backward socio economic conditions of the areas and their livelihood strategy is very low as compared to other revenue villages. Majority of the people depended on CPRs but the past few decades CPRs quantity and quality is continuously declined due to the population growth, industrialization, free land schemes, number of encroachment and etc. It will lead to crisis in the rural sustenance of the rural economy. The present study finds that 78 percent of people depended on CPRs for their source of livelihood like fuel wood fodder, medicines and cereals etc. However, 22 percent of the people do not depend on CPRs. An important implication of the study is that as long as public interventions are a key factor affecting CPRs, a reorientation of the former should be emphasized to rehabilitate CPRs. A restriction on further privatization of CPRs, introduction of use regulations supported by some element of user cost, and fiscal incentives to village councils should form part of CPR strategies for the future.

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