FINAL REPORT

WITH RECOMMENDATIONS ON PLANNING WITH SOCIAL JUSTICE

Socio-Economic & Other Related Surveys (Package-4)

CLIENT

Preparation of Development Plan for Mehrpur Zilla (MZDP)

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GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Urban Development Directorate (UDD)

Final Report with Recommendations on Planning with Social Justice

on

Package-04 Socio-Economic and Other Related Surveys

under

Preparation of Development Plan for Meherpur Zilla Project.

Submitted to

Senior Planner & Project Director

"Preparation of Development Plan for Meherpur Zilla Project."

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Executive Summary

This report presents the findings of the socio-economic and spatial survey carried out under the Preparation of Development Plan for Meherpur Zilla Project. The study covered all three upazilas: Meherpur Sadar, Gangni, and Mujibnagar, along with their unions and municipal wards, using household-level surveys, GIS mapping, and statistical analysis to capture the district's demographic, social, economic, and infrastructural realities. Over 1,600 households were surveyed through digital tools to ensure accuracy and geospatial integration, making this one of the most comprehensive assessments of Meherpur's development landscape.

The results highlight a predominantly rural population with small but growing urban centers. Literacy levels remain uneven across the district, with some unions falling well below the average, while infant and child health indicators remain critical in several pockets. The Physical Quality of Life Index (PQLI) is lowest in unions such as Matmura, Mahajanpur, and Tentulbaria, reflecting poor education and health conditions. The Cultural Capital Index (CCI) is weakest in Raypur, Kutubpur, Shaharbati, and selected urban wards, where the absence of libraries, cultural clubs, and higher education facilities limits social engagement. The Quality-of-Life Index (QOLI) underscores disparities between rural unions with poor infrastructure and urban wards with inadequate municipal services, while well-performing wards in Meherpur Sadar and Gangni demonstrate the positive impact of strong service delivery and infrastructure.

These findings reveal sharp spatial inequalities within the district, where some areas enjoy relatively high-quality services while others remain deprived across multiple dimensions. Addressing these imbalances is critical to building a socially just and inclusive development framework. The recommendations of this report emphasize expanding education and literacy programs, improving maternal and child health services, strengthening cultural and community institutions, upgrading infrastructure in low-QOLI zones, and embedding climate resilience and sustainable land use practices in future planning.

By integrating household-level data with spatial analysis, this report provides a clear roadmap for reducing disparities and ensuring balanced regional growth. It directly supports national priorities on reducing inequality, improving education and health outcomes, expanding access to water and sanitation, and building sustainable communities. The Meherpur Zilla Project thus lays the foundation for an inclusive, resilient, and forward-looking development pathway that ensures no community is left behind in the district's journey toward equitable growth and sustainable prosperity

Abbreviations

ADP – Annual Development Programme

CCI – Cultural Capital Index

GIS – Geographic Information System

IMR – Infant Mortality Rate

NGO – Non-Governmental Organization

PQLI – Physical Quality of Life Index

PD – Project Director

PRA – Participatory Rural Appraisal

QOLI – Quality of Life Index

SDGs – Sustainable Development Goals

ToR – Terms of Reference

UDD – Urban Development Directorate

RSI – Resilient Space Index

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Chapter 1: Introduction

1.1 Background

Meherpur Zilla, located in the southwestern region of Bangladesh, holds immense historical, cultural, and strategic significance. As the birthplace of the Provisional Government of Bangladesh in 1971, the district is embedded in the national consciousness. Its geographical positioning along the border with India further enhances its economic and geopolitical relevance. Despite its fertile agricultural land, rich cultural heritage, and border trade potential, Meherpur continues to face persistent socio-economic challenges that restrict its development trajectory.

The district, comprising Meherpur Sadar, Gangni, and Mujibnagar upazilas, is characterized by both urban and rural settlements. The local economy is primarily agrarian, supported by small businesses and informal labor. However, infrastructural gaps, limited economic diversification, underdeveloped healthcare and education systems, and regional inequalities continue to impede equitable growth and hinder the district's full potential.

To address these challenges and support sustainable development, the Government of Bangladesh, through the Urban Development Directorate (UDD), has undertaken the "Preparation of Development Plan for Meherpur Zilla Project." A critical component of this initiative is the comprehensive socio-economic survey aimed at generating evidence-based data to support development planning, with particular emphasis on social justice, spatial equity, and sustainable development.

1.2 Overview of the Report

This final report presents an in-depth and comprehensive analysis of the socio-economic profile, spatial characteristics, and development challenges of Meherpur Zilla. It is intended to serve as a foundational resource for planning, policy-making, and the strategic implementation of development initiatives in alignment with both local needs and national development frameworks.

The report outlines the study's objectives, methodological framework, and key findings from extensive socio-economic surveys, geospatial assessments, and community consultations. Using this approach, the report offers vital evidence to support an inclusive, demand-driven development plan that addresses the district's unique opportunities and disparities.

In line with the Terms of Reference (ToR), the socio-economic survey focused on household-level data collection, encompassing a broad spectrum of indicators such as demographic composition (age, gender, household size), religious affiliation, educational attainment at all levels, employment trends (government, private sector, self-employment, agriculture, informal labor), and income distribution categorized by socio-economic strata. The study also integrated community perceptions, aspirations, and development priorities, essential for effective land use planning, infrastructure provision, and resource allocation.

The research methodology incorporated both primary and secondary data sources. Primary data was collected through structured household surveys, interviews, field visits, and geospatial mapping, while secondary data was derived from official statistics, existing reports, and relevant databases. The spatial translation of socio-economic data enables the integration of physical and socio-economic dimensions, providing a robust foundation for evidence-based decision-making.

The report's findings are intended to guide the formulation of an inclusive, socially just, and spatially balanced development plan for Meherpur Zilla, contributing to improved living standards, reduced disparities, and sustainable regional growth.

1.3 Objectives of the Study

The socio-economic component of the study was guided by the following objectives in line with the Terms of Reference (ToR):

a) Assessing the socio-economic condition of the people of different strata and minority groups including tribes, and also identifying people's aspirations, attitudes, and opinions towards the development of the area

b) Identifying of needs and demands of the inhabitants for their development and the project area as a whole.

c) Preparing people-oriented, demand-driven planning and other relevant planning packages for the region.

d) Preparing the physical quality of life index (PQLI) of the inhabitants of the project area.

e) Preparing Socio-economic and other related survey reports containing spatial translation from the output of the survey findings.

1.4 Scope of Work

The survey firm has conducted all necessary socio-economic and other surveys and studies for the project, prepared working papers on the relevant fields under study, and assisted the UDD team members in preparing the final plan and all relevant reports till completion of the project.

At the same time, the firm has extended all necessary assistance, particularly in gathering and procuring all relevant socio-economic and cultural attribute data of each feature within the project area; GIS database operation and management, analysis, and preparation of all maps and reports till completion of the project. The firm also has arranged workshops/seminars on collected data and information, findings, interpretation, and working papers, and conducted other ancillary activities relating to the project activities as directed by the Project Director (PD), wherever necessary. UDD project team has conducted all PRA sessions and the survey firm has extended necessary assistance in communication with the mayor, ward councilors, Union Parishad Chairman, and other stakeholders as directed by Project Director for arranging the PRA sessions and collect all relevant data and information through a digital survey and upload the collected data to the website instantly through an online communication device; at the end of each month submit a report containing all information that has been uploaded to the website and ensure that all data and information are accessible to viewer.

The survey firm has been responsible for the quality of data and information collected, data processing, cleaning and editing, and presentation into tabular form, including preparation of working papers as required by the Project Director (PD). The survey firm has delivered all raw and processed data and working papers containing guidelines for preparing the planning package. It has emphasized the tourism development in and around Meherpur Upazila and the local people's livelihood needs and demands.

1.5 The Project Location

The proposed project adopts a regional development approach that includes all three upazilas within Meherpur District: Meherpur Sadar, Mujibnagar, and Gangni, to ensure comprehensive and balanced growth. Situated in the southwestern region of Bangladesh, Meherpur District lies approximately between 23.60° to 23.90° North latitude and 88.50° to 88.75° East longitude, bordering India to the west. The district is recognized for its historical significance, fertile agricultural land, and strategic border location, which contribute to its socio-economic importance.

- Meherpur Sadar Upazila (approx. 23.7620°N, 88.6316°E) is the administrative center and commercial nucleus of the district. With one Paurashava and seven unions, it represents both urban and peri-urban characteristics, with emerging infrastructure and service delivery improvements.
- Mujibnagar Upazila (approx. 23.7040°N, 88.5895°E) is historically symbolic as the location where the provisional government of Bangladesh was formed in 1971. Despite its national significance, it lags in service infrastructure, education, and healthcare, requiring focused investment.
- Gangni Upazila (approx. 23.8469°N, 88.7452°E) is the largest upazila in area and population. Its economy is predominantly agrarian, supported by extensive farming. However, the area faces acute socio-economic and environmental vulnerabilities, including waterlogging and seasonal flooding.

The integrated planning framework aims to enhance spatial equity, improve connectivity among upazilas, and ensure balanced growth by addressing each area's unique challenges and potential.By integrating all three upazilas into the project scope, the study aims to develop a regionally cohesive and inclusive planning framework. This will enable equitable allocation of

resources, strengthen inter-upazila connectivity, and support sustainable development throughout Meherpur District.

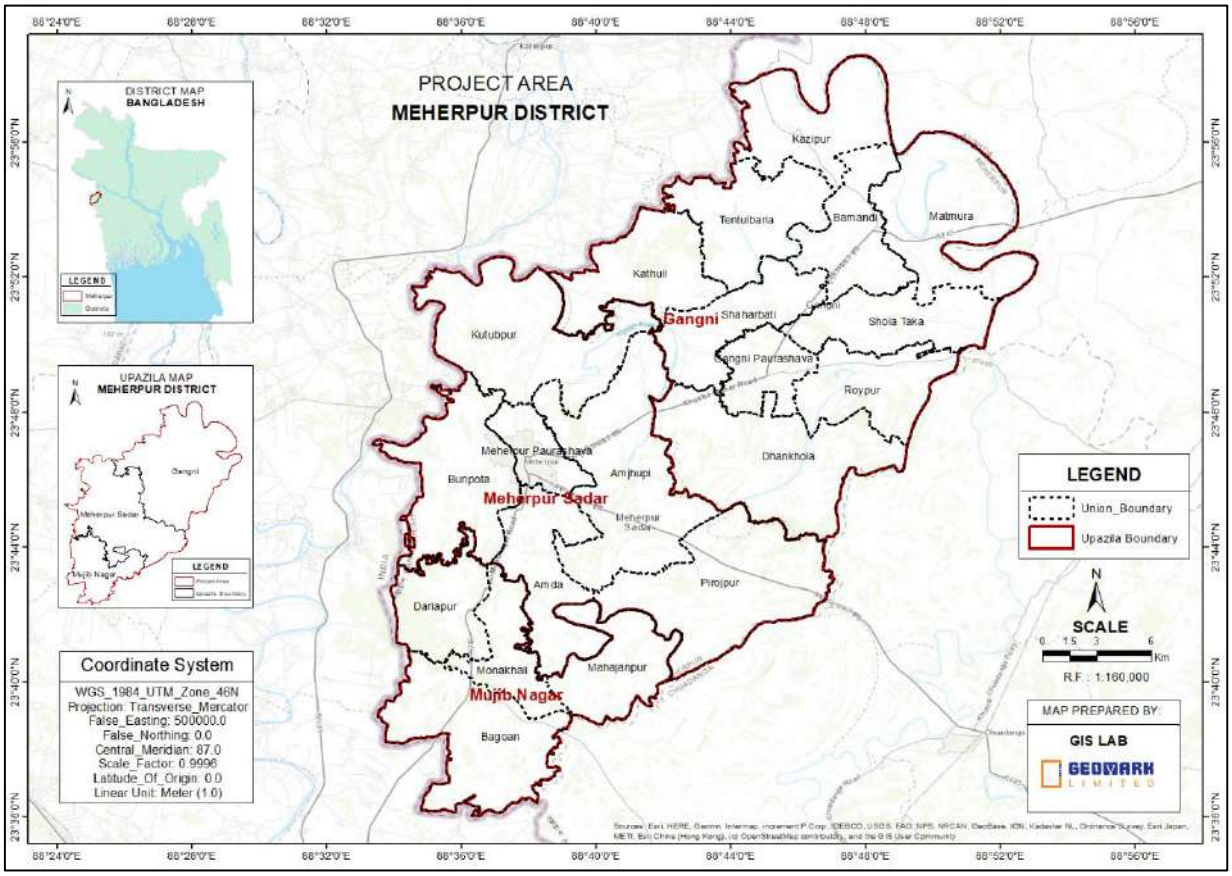


Figure 1: Project Area Location

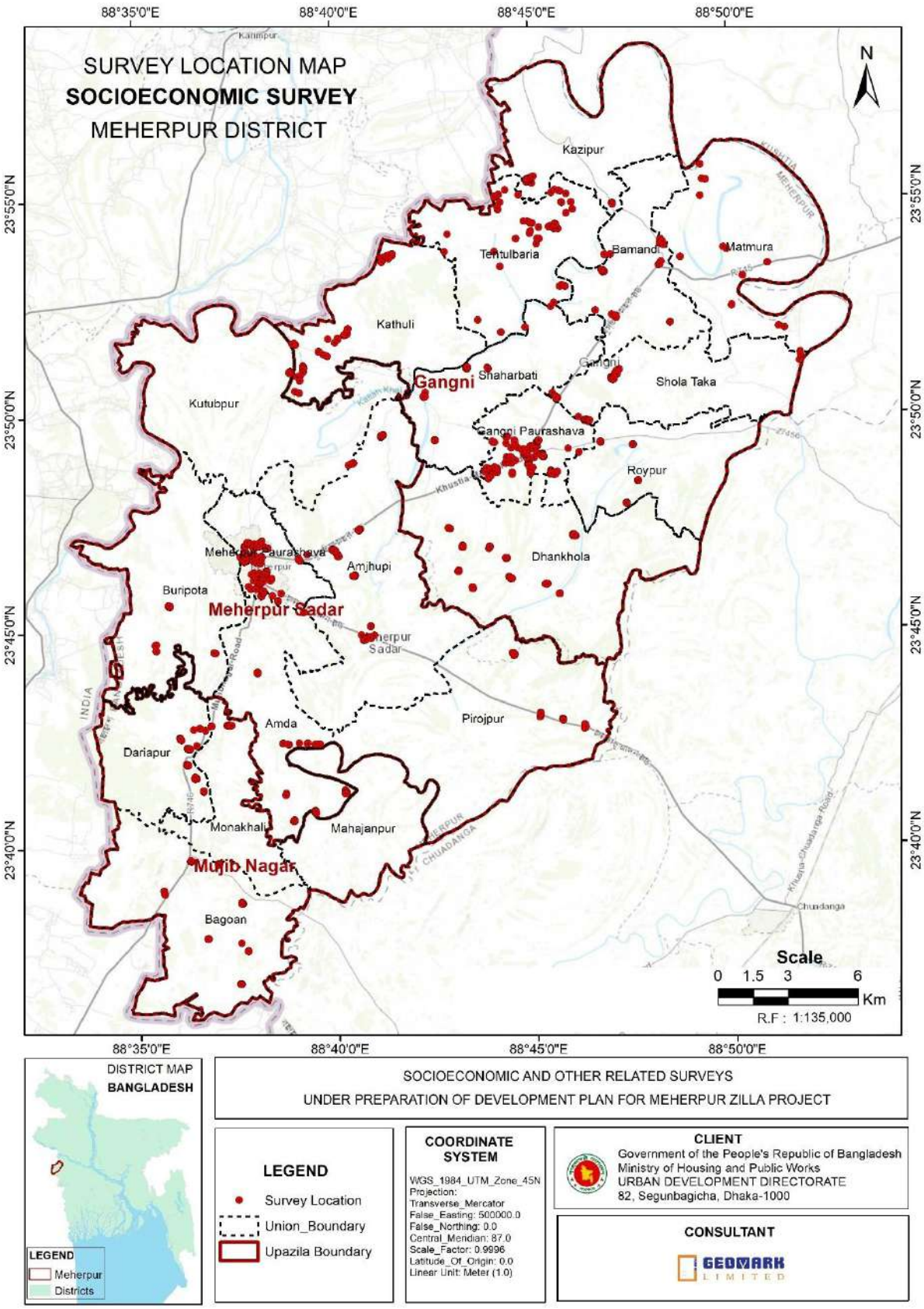


Figure 2: Survey Location Map of the Project Area

Chapter 2: Review of National Plans and Policies

This chapter outlines the alignment of the socio-economic planning activities for Meherpur District with relevant national development plans, strategies, and policy frameworks. The analysis highlights how the objectives and recommendations of this socio-economic survey complement the broader national agenda for sustainable development, social justice, spatial equity, and inclusive economic growth.

2.1 Development Plans

Development plans in Bangladesh are formulated to address key priorities of national progress including poverty alleviation, improved living standards, gender equity, and equitable access to education, health, and basic services. The socio-economic planning activities for Meherpur are anchored in these national directives to ensure consistency, inclusivity, and sustainability.

2.1.1 Delta Plan 2100

The Bangladesh Delta Plan 2100 (BDP 2100) provides a comprehensive and adaptive planning framework that integrates water, land, ecology, and human development. Although originally conceived with an emphasis on climate resilience and water management, the Delta Plan extensively influences socio-economic development by addressing issues of poverty reduction, social inclusion, spatial equity, and livelihood resilience, particularly in climate-vulnerable regions like Meherpur.

a) Major Objectives of the Delta Plan

The major objectives of the BDP 2100 that align with the socio-economic vision of Meherpur District include:

- Strengthening climate and disaster resilience in vulnerable communities through socially inclusive policies.
- Reducing regional poverty by improving access to social services and sustainable livelihoods.
- Promoting inter-sectoral integration between water, land use, agriculture, education, and human development sectors.
- Enhancing institutional capacity at the local level to deliver equitable development, monitor vulnerabilities, and implement adaptive interventions.
- Ensuring food, water, and livelihood security through sustainable and inclusive planning for marginal communities.

In Meherpur, where many residents face environmental and economic vulnerabilities, these objectives directly inform the prioritization of housing quality, income diversification, education access, and women's participation in the economy.

b) Urban Planning

Though Meherpur is predominantly rural, the Delta Plan's urban directives are highly relevant to emerging urban centers such as Meherpur Paurashava and Gangni Paurashava. The urban planning component of BDP 2100 focuses on:

- Enhancing public service delivery (education, healthcare, sanitation) in small towns.
- Reducing environmental and infrastructure stress caused by unplanned urban expansion.
- Ensuring equitable distribution of amenities, especially for low-income and climate-vulnerable households.
- Addressing social exclusion in underserved urban zones through participatory local governance.

In this socio-economic study, such urban vulnerabilities are mapped using the Quality of Life Index (QLI) and Cultural Capital Index (CCI), which reveal gaps in satisfaction with services, education, and community infrastructure. These insights guide planning for resilient, inclusive, and service-efficient urban growth.

c) Sustainable Land Use and Spatial Planning

BDP 2100 emphasizes sustainable land management as a foundation for long-term socio-economic stability. This is especially relevant in districts like Meherpur, where agriculture, settlement, and water management intersect closely. Key provisions relevant to this report include:

- Protecting arable land from informal settlements and flood risks.
- Allocating land for social infrastructure, such as schools, health centers, and cultural spaces.
- Integrating social data with spatial zoning to identify areas of deprivation.
- Promoting land equity, especially for female-headed households and marginalized groups.

- Guiding future settlement patterns to avoid ecological fragility and enhance service delivery.

In the socio-economic survey, GIS-linked data enabled the identification of under-served zones and informed spatial planning for services such as education, health, and housing — supporting spatial justice.

d) Relation of Bangladesh Delta Plan 2100 to Socio-Economic Planning

The Delta Plan is closely tied to the broader socio-economic agenda in several important ways:

1. **Resilient Livelihood Development**:

- Promotes community resilience by supporting diversified, sustainable income sources.
- Encourages vocational and skills training in flood-prone and low-income areas.

2. **Gender Equity and Inclusion**:

- Advocates mainstreaming women in planning and decision-making processes.
- Emphasizes the need for equitable access to resources, employment, and safety.

3. **Climate-Adaptive Settlements**:

- Recommends upgrading housing and infrastructure in high-risk zones.
- Supports relocation or rehabilitation plans based on vulnerability mapping.

4. **Integrated Social Service Delivery**:

- Ensures education, healthcare, and social protection are spatially targeted based on needs.
- Promotes digitization and data-driven planning to bridge access gaps.

5. **Poverty Reduction through Spatial Equity**:

- Guides policy to target spatially disadvantaged areas where Physical Quality of Life Index (PQLI) scores are low.
- Encourages community participation in development planning to reflect local needs and solutions.

2.1.2 Sustainable Development Goals (SDGs)

Allocation

The Government of Bangladesh has aligned the national budget with the SDG framework.

Approximately 21% of the Annual Development Programme (ADP) is tagged with SDG-focused initiatives, particularly on:

- Poverty reduction (SDG 1),
- Quality education (SDG 4),
- Good health and well-being (SDG 3),
- Gender equality (SDG 5),
- Reduced inequalities (SDG 10), and
- Sustainable communities (SDG 11).

Development Initiatives

Several national programs support SDG localization at the district level:

- Expansion of community clinics and universal health coverage programs.
- Education for All and digital literacy initiatives.
- Targeted income support for poor and marginalized communities.
- Institutionalization of local SDG monitoring cells.

The Meherpur socio-economic survey enhances these efforts by:

- Identifying spatial gaps in access to services,
- Providing disaggregated household-level data,
- Recommending localized action for high-need areas.

a) Broad Themes of the SDGs

Promoting Prosperity:

SDG goals such as Decent Work and Economic Growth (SDG 8) and No Poverty (SDG 1) are supported through strategies like:

- Livelihood diversification,
- Vocational training,
- Access to credit and informal sector strengthening.

Fostering Inclusivity:

SDGs emphasize inclusion across all sectors. The survey supports this by:

- Mapping gender disparities in employment and leadership,
- Identifying service gaps for low-income households and marginalized groups.

b) Main Parts

The SDG framework consists of:

- 17 Goals,
- 169 Targets,
- 232 Global Indicators.

This project contributes primarily to SDG 1, 3, 4, 5, 6, 10, and 11, by using GIS-linked indicators (PQLI, QLI, CCI) and localized spatial analysis.

c) Challenges in Implementation of the SDGs

Key obstacles include:

1. Limited capacity of Union and Paurashava-level institutions,
2. Lack of localized, disaggregated data,
3. Resource constraints in low-performing regions like Meherpur,
4. Monitoring difficulties for SDG progress at subnational levels.

The survey mitigates these by:

- Creating a detailed, geo-tagged socio-economic database,
- Providing decision-makers with location-specific development needs,
- Offering a replicable framework for SDG localization.

d) Integration with Planning Projects

- The Meherpur socio-economic planning directly supports SDG implementation through:
- Evidence-based targeting of poor, vulnerable, and underserved areas,
- Providing policy-ready indicators for local SDG dashboards,
- Guiding spatially equitable allocation of infrastructure, services, and resources.

2.1.3 Perspective Plan 2041

The Perspective Plan 2041 (PP2041) is Bangladesh's long-term development blueprint designed to elevate the country to developed-nation status by 2041. The plan aims to transform the economy, reduce inequality, and ensure high standards of living for all. It integrates inclusive growth, technological advancement, and human capital development, all of which are highly relevant to the socio-economic transformation envisioned for Meherpur Zilla.

a) Major Objectives of Perspective Plan 2041

The major goals of the Perspective Plan focus on creating a knowledge-based, inclusive, and innovation-driven society. Key objectives include:

- Achieving zero extreme poverty and reducing inequality.
- Transforming the labor-intensive economy to a skill-based and innovation-oriented one.
- Expanding education, health care, and social protection to all segments of society.
- Enhancing infrastructure and service delivery in rural and semi-urban areas.
- Promoting social justice through fair access to land, housing, and livelihood opportunities.
- Strengthening institutions and governance for participatory and accountable development.

In the context of Meherpur, this means equipping disadvantaged communities — including rural households, female-headed families, and youth — with access to education, employment, health, and secure housing.

b) Urban Planning

Urban planning under PP2041 aims to manage rapid urbanization while ensuring equitable access to services and opportunities across both urban and peri-urban zones. This is highly relevant to Meherpur Paurashava and emerging rural growth centers. Key themes include:

- Promoting compact and inclusive urban development, avoiding unplanned sprawl.
- Strengthening municipal institutions to deliver quality services like water, waste management, and health care.
- Prioritizing urban resilience against climate shocks and poverty.
- Ensuring spatial equity in infrastructure distribution, especially for informal and marginalized communities.

- Supporting interconnected rural-urban linkages to facilitate flow of goods, people, and services.

The Meherpur socio-economic survey has revealed disparities in urban service access particularly in housing, healthcare, and education which are addressed through the planning recommendations aligned with this vision.

c) Sustainable Land Use and Spatial Planning

The Perspective Plan promotes integrated and sustainable land use planning that supports economic productivity and social inclusion. Key policy directions include:

- Protecting agricultural land while enabling space for settlement, education, health, and commerce.
- Establishing zoning regulations to prevent encroachment on wetlands, forests, and culturally significant sites.
- Promoting multi-functional land use to optimize limited space, particularly in rural settlements.
- Ensuring participatory planning that reflects community aspirations and cultural heritage.

In Meherpur, where there is high dependency on agriculture but increasing demand for housing and services, the plan advocates balanced land development through spatially-informed socio-economic indicators as achieved through GIS-linked analysis in this survey.

d) Relation of Bangladesh Perspective Plan 2041 to Socio-Economy

The socio-economic priorities of Meherpur Zilla are deeply interlinked with the goals of Perspective Plan 2041:

- The Plan's poverty eradication goal aligns with targeted strategies for low-income and savings-deficient households.
- Its emphasis on human capital development is reflected in the need to improve education access and literacy levels across upazilas.
- The gender equality agenda supports empowerment of women in Meherpur, especially where disparities in income and employment persist.

- The Plan's call for regional development and spatial equity is directly addressed through localized data (PQLI, QLI, CCI), guiding resource distribution to the most underserved areas.
- It promotes inclusive economic growth, which this project supports by identifying vulnerable economic groups, analyzing income-expenditure gaps, and planning for diversified livelihoods.

Thus, the Meherpur socio-economic survey not only supports PP2041 objectives but operationalizes them at a local scale, using participatory and evidence-based approaches.

Chapter 3: Approach and Methodology

3.1 Introduction

This chapter outlines the approach, methodology, and sequential tasks undertaken to fulfill the objectives and scope of work as specified in the Terms of Reference (ToR). The methodology was designed to ensure rigorous data collection, quality control, spatial integration, and participatory engagement. Before detailing the specific methods, a brief discussion on the project's scope and overall strategic steps is provided.

3.2 Mobilization

Recognizing the project's time-sensitive nature, the survey firm promptly mobilized a multidisciplinary team with relevant technical expertise. Rapid deployment of field personnel, equipment, and digital systems enabled the timely initiation of baseline activities, including reconnaissance surveys and stakeholder consultations.

3.2 Coordination with Project Director (PD)

Multiple consultative meetings were held with the project director and other authorized personnel from the Urban Development Directorate (UDD). These discussions covered methodological planning, questionnaire development, sampling design, software deployment, and quality assurance protocols. Inputs from these meetings shaped the final survey design and digital tools.

3.4 Questionnaire Preparation

The questionnaire was structured around three analytical frameworks:

- **Physical Quality of Life Index (PQLI):**
  Indicators: Life Expectancy, Infant Mortality Rate (IMR), and Literacy Rate.
- **Quality of Life Index (QLI):**
  Comprised of 13 indicators and 41 sub-indicators rated on a 5-point Likert scale:
  1 = Very Satisfied
  2 = Satisfied
  3 = Neither Satisfied nor Dissatisfied
  4 = Dissatisfied
  5 = Strongly Dissatisfied
- **Cultural Capital Index (CCI):**

Measured through binary-response questions (1 = Yes, 2 = No).

The final questionnaire was reviewed and approved by the project director (PD) and is attached in the annexure. Field teams also visited the union and Paurashava offices during preparation.

3.5 Secondary Data Collection

Essential secondary data including population statistics, administrative boundaries, and household numbers were collected from existing reports, government publications, and statistical yearbooks. These were used to triangulate and contextualize primary survey findings

3.6 Reconnaissance survey

A preliminary reconnaissance survey was conducted across all three upazilas to evaluate spatial zoning, infrastructure layout, and service levels. The findings informed the sampling strategy and field logistics. A detailed reconnaissance report has already been submitted to the Urban Development Directorate.

3.7 Survey Execution Plan

A highly qualified group of well-equipped and well-organized staff for the field survey has been hired.

3.7.1 Field Quality Control

- Use of advanced online data collection tools (e.g., Kobo Toolbox),
- Maintain & monitor daily log sheets and level books in the field,
- Daily checking of the field equipment before starting the work,
- Routine check and calibration of the survey equipment,
- Frequent field visits by the joint team comprising the senior staff of consultants and project officials of UDD, and
- Interaction with project officials at the field level

3.7.2 Office Quality Control

- Daily review meeting with survey groups,
- Real-time cross-verification of field data with spatial datasets,
- Daily updating and processing of data and Maps, and
- Continuous engagement with UDD through interim reviews

In addition to those, progress as well as quality control of the survey and data processing work has been reviewed in the progress meeting by the project authority.

3.8 Methodology of Database Preparation

Socioeconomic and other surveys like the formal and informal economy, archeology, Education, Religion, Sports, Recreation, Community, and Socio-Cultural Services/Facilities, etc., have been done according to the ToR and discussed with the project director (PD).

3.8.1 Development of Database and GIS Analysis

One of the project aims is to develop a database for storing attribute data and linking it with spatial data for GIS analysis. A spatial database has been developed using all map features available in the physical features survey and land use survey map. The spatial database comprises the information captured during the digitization of the map.

Various attribute data have been linked with the spatial data for GIS development. A relational database management system has been developed using the dBase environment. The data collected from the secondary source and the primary source through socio-economic survey and inventory of existing infrastructure has been entered and stored in a database file. The structure of the database file has been designed in consultation with the Project Director, UDD. Checking and compilation of data has been carried out simultaneously for quality control.

3.8.2 Linking Attribute Data with Spatial Data

Integration of spatial data and attribute data is essential for GIS analysis. The attribute data database has been linked with the layers of themes to create various GIS analyses and queries using the view and table modules of the most popular ArcGIS software.

3.9 Data Collection

Socio-economic and Other related surveys (Urban and rural economy, social space studies, education, archeology, hotel/motel accommodation survey, etc., as specified in the ToR) collected through smart technology and manpower. Secondary data has been collected from various authentic sources.

3.10 Survey Equipment

Socioeconomic and other data were collected through an online communication device (tablet) in a compatible format (apps) using the Kobo Toolbox, which was developed in consultation with the UDD planner and Project Director (PD).

3.11 Sample Design and Stratification

Meherpur District includes:

- **Upazilas**: Meherpur Sadar, Mujibnagar, Gangni
- **Paurashavas (Urban)** and **20 Unions (Rural)**

Following the ToR, 200 households per urban area and 200 per rural area per upazila were targeted.

A stratified random sampling technique was adopted based on housing type:

- Pucca (permanent)
- Semi-pucca (semi-permanent)
- Kacha (temporary)

Each stratum was randomly sampled to ensure proportional representation. The division into these strata was based on predefined housing characteristics to ensure that all housing types were adequately represented in the sample. Within each stratum, households were selected randomly to minimize selection bias and ensure each household had an equal chance of being included in the sample.

3.12 Sample Size Calculation:

Based on the results of the statistical analysis,

$$n_h = \frac{(z^2)(r)(1-r)(f)(k)}{(p)(\breve{n})(e^2)}$$

n_h = the parameter to be calculated and is the sample size in terms of the number of households to be selected;

z = the statistic that defines the level of confidence desired;

r = an estimate of a key indicator to be measured by the survey;

f = the sample design effect, *deff*, assumed to be 1.2 to 2.0 (default value);

k = a multiplier to account for the anticipated rate of non-response;

p = proportion of the total population accounted for by the target population and upon which the parameter, r, is based;

$\breve{n}$ = average household size (number of persons per household);

e = margin of error to be attained.

Recommended values for some of the parameters are as follows:

The z-statistic to use should be 1.96 for the 95% level of confidence.

r = 0.05,

$f=1.2$,

$k=1.1$,

$p=1$,

$\breve{n} = 4.51$,

$e = 0.12r=0.006$

Therefore,

$$n_h = \frac{(1.96^2)(0.05)(0.95)(1.2)(1.1)}{(p)(\breve{n})(e^2)}$$

$$=1484$$

So, the study could be significant if the minimum sample size is 1484

3.13 Data Processing and Analysis

Data were uploaded daily to local servers and the data contains the location of the household for the physical feature map and links the household survey data with that of the spatial database in ArcGIS for spatial mapping.

Index Calculations:

For Physical Quality of Life Index

- Life Expectancy
- Infant Mortality Rate
- Literacy Rate

$$\text{Literacy Rate} = \frac{\text{Number of Literate Individuals 18 +years}}{\text{The total number of Surveyed}} \text{ x } 100$$

$$\text{Life expectancy} = \frac{\text{Life Expectancy from BBS} - \text{Minimum value from question}}{\text{Maximum From Question} - \text{Minimum from Question}} \text{ x } 100$$

$$\text{Infant Mortality Rate} = \frac{\text{Number of Infant Deaths}}{\text{Number of Live Births total number of Surveyed}} \text{ x } 100$$

$$\text{PQLI} = \frac{\text{Literacy Rate + Infant Mortality Rate + Life Expectancy}}{3}$$

Quality of Life Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale = [Maximum Score= Indicators x 5 = 50]

$$\text{QLI} = \frac{\text{The sum of all the scores of the level of Satisfaction}}{50} \text{ x } 100$$

Cultural Capital Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale

$$\text{CCI} = \frac{\text{Sum of scores}}{\text{Number of questions}} \text{ x } 100$$

3.14 Final Submission

Upon completion of all field surveys and ensuring full integration of attribute data with the spatial database, the survey firm has submitted the comprehensive socio-economic survey report for Meherpur Zilla. This report clearly outlines the actual methodology followed,

including detailed descriptions of the procedures adopted during the fieldwork, challenges encountered, and the measures taken to overcome those challenges. The report also explains the process of interlinking the socio-economic database with other surveys, such as physical features, land use, and topographical surveys, to ensure consistency and accuracy.

The submission includes all relevant raw datasets, GIS maps, completed questionnaires, photographic documentation, and the fully spatially integrated database. Prior to this, the mobilization and inception reports were submitted as part of the project deliverables.

Additionally, an interim report was submitted, which focused on the technical aspects of linking the socio-economic database with the main GIS database, uploading the data to the central system, spatial analysis, and the interpretation of existing conditions based on the integrated datasets.

This current submission constitutes the final socio-economic survey report, incorporating all required elements, and provides essential inputs for development planning with recommendations on planning with social justice. Following this, a comprehensive Final Report has been prepared, including specific recommendations for development strategies that promote equity, inclusion, and Social Justice in Meherpur Zilla.

Chapter 4: Data Collection

4.1 Final Sample Size Distribution by Administrative Unit

The socio-economic survey of Meherpur District required a comprehensive, systematic, and participatory data collection process to ensure that the findings accurately reflect the realities of the district's rural and urban communities. High-quality data serves as the foundation for evidence-based planning, policy formulation, and the design of socially just interventions aligned with the Eighth Five-Year Plan (8FYP), Delta Plan 2100, Sustainable Development Goals (SDGs), and Perspective Plan 2041.

The data collection process for this project was designed to capture the multi-dimensional aspects of human development across all three upazilas: Meherpur Sadar, Gangni, and Mujibnagar, including all unions and municipal wards. Both quantitative and qualitative approaches were employed to provide a comprehensive understanding of the district's demographic, social, economic, cultural, and infrastructural characteristics.

Table 1: Final Sample Size

Upazila	Area	Administrative Unit	No. of Units	Households per Unit	Total Households
Meherpur Sadar	Urban	Wards in Paurashava	9	24	216
	Rural	Unions	7	60	420
	Subtotal (Meherpur Sadar)				636
Mujibnagar	Rural	Unions	4	60	240
	Subtotal (Mujibnagar)				240
Gangni	Urban	Wards in Paurashava	9	24	216
	Rural	Unions	9	60	540
	Subtotal (Gangni)				756
Total (Zila)	Urban & Rural	All Paurashavas & Unions			**1632**

So, over 1632+ household surveys were successfully conducted across Meherpur Zilla, adhering strictly to the methodology outlined in the approved Terms of Reference. The data collection process employed structured, tablet-based questionnaires to ensure accuracy,

consistency, and real-time geospatial integration. All collected data has been securely uploaded to the central database and can be accessed through the following online portals for further review and analysis:

https://kf.kobotoolbox.org/#/forms/aj5Zp2X7ngXTWfpMmH7Lip/data/table

Chapter 5: Socio-Economic Profile Findings

5.1 Livelihood Context & Demographics of Meherpur District

5.1.1 Demographis

The demographic profile of Meherpur District reflects a moderately youthful population with signs of gradual demographic transition. The population pyramid indicates that about 37% of residents are under 20, 47% are in the 20–44 working-age group, and 6% are elderly (60+), suggesting declining fertility and increasing life expectancy.

Household leadership is predominantly male (93%), while female-headed households (7%) often arise from migration, widowhood, or social change. Most household heads are married (96.2%), and the average head age is 47 years, concentrated between 35–60 years, indicating a mature base of household leadership.

Family structure is overwhelmingly nuclear (98%), with very few joint families, reflecting modernization and land fragmentation trends. These characteristics highlight the need for targeted education, health services, and community-based support systems to ensure socially just and sustainable development in line with SDGs and Perspective Plan 2041.

5.1.1.1 Population Pyramid

The population pyramid for Meherpur District, as illustrated in the figure, exhibits a relatively symmetrical and moderately expansive shape. Approximately 37% of the population is under 20 years of age, with the 20–44 age group comprising about 47%, and an estimated 6% in the 60+ category. The figure suggests that the age structure of the population is gradually transitioning as fertility declines and longevity increases.

The largest cohort is found in the 30–34 age group, followed closely by the 20–24 and 25–29 brackets. These three adjacent groups collectively account for a substantial portion of the total population. The population in the 0–4 and 5–9 age groups is significantly lower, indicating a declining trend in birth rates. The narrowing of the base compared to the middle segments highlights this trend.

The gender distribution is largely balanced throughout most age groups. However, a marginal female predominance appears in the elderly categories (70+), reflecting the national trend of higher female life expectancy. The population pyramid indicates continued pressure on educational and labor systems, but also signals the onset of aging in the coming decades.

The overall sex ratio remains within the national average. Strategic interventions are necessary to harness the potential of the working-age population, while simultaneously preparing health and social systems to accommodate an aging demographic. The district, while still largely youthful, requires integrated policies on education, employment, healthcare, and social protection to ensure equitable and sustainable development.

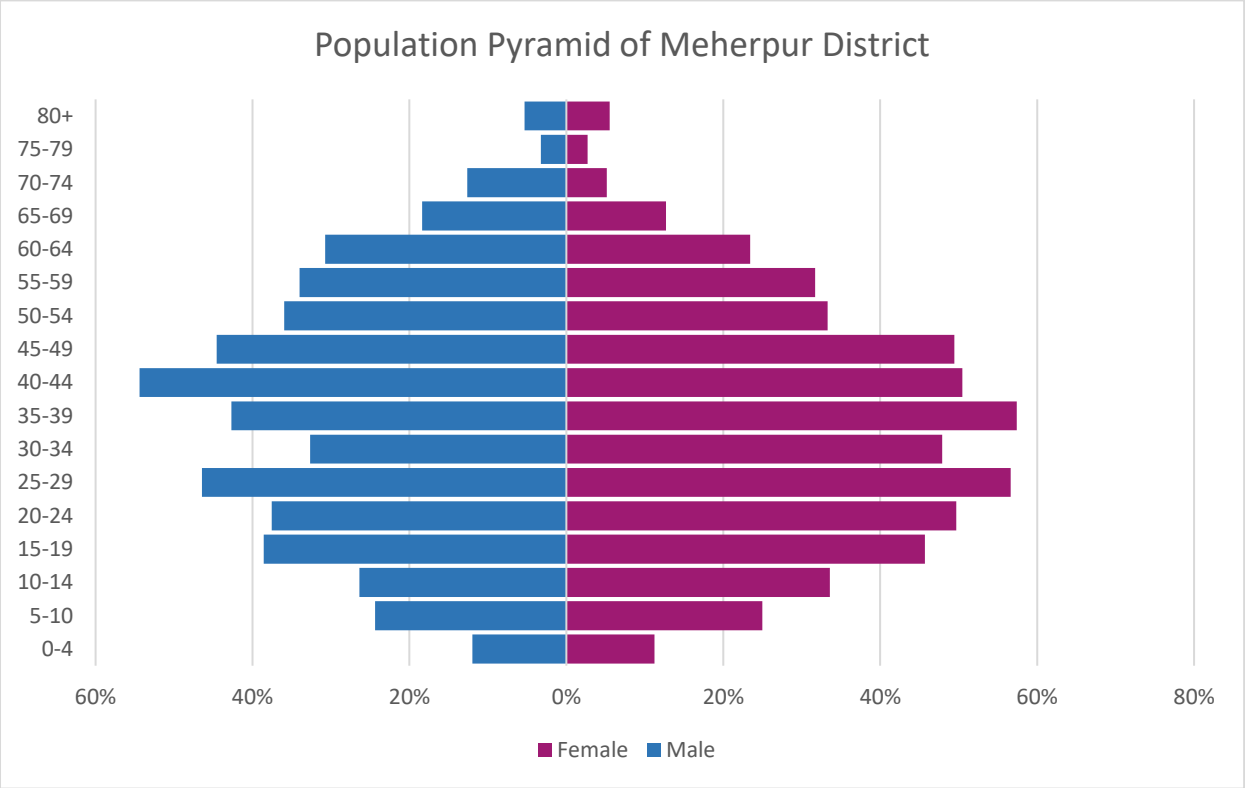


Figure 3: Population Pyramid of Meherpur District

5.1.1.2 Household Heads

The distribution of household heads by sex in Meherpur District reveals that 93% of households are headed by males, while only 7% are headed by females. This reflects a predominantly patriarchal household structure, typical of rural and semi-urban Bangladesh. Although the number of female-headed households is relatively small, their presence indicates the growing role of women in managing family responsibilities, possibly due to male out-migration, widowhood, or shifting social roles. Planning for these households should consider targeted support programs that enhance livelihood security, access to services, and decision-making capacity for female heads.

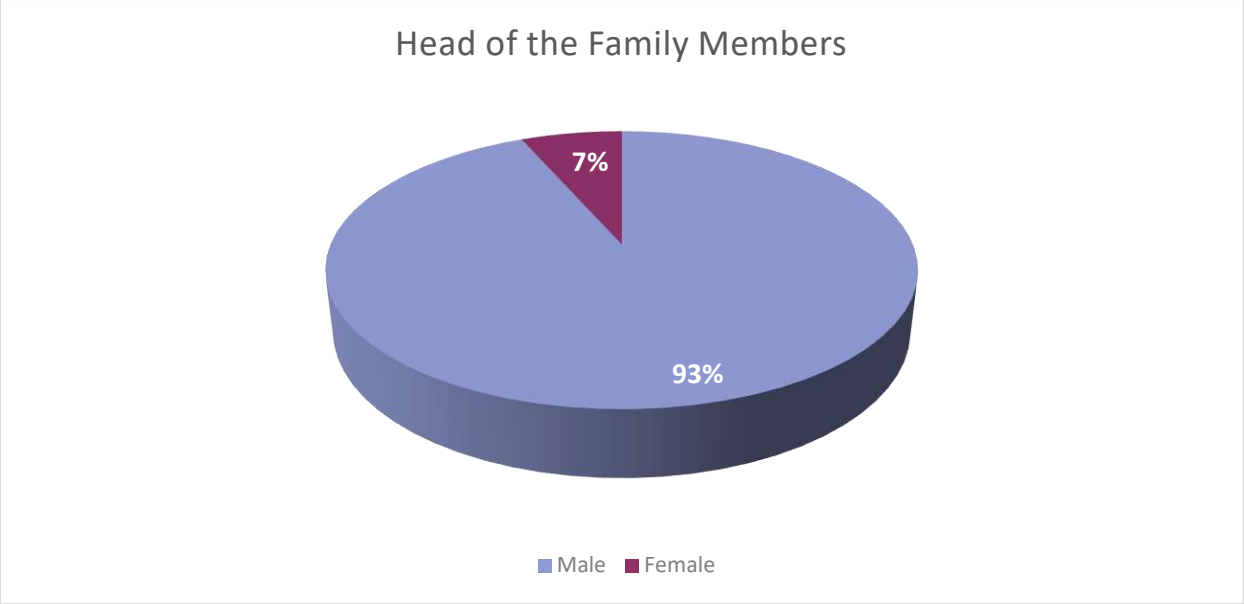


Figure 4: Sex of Household Head of Meherpur District

Table 2: Sex of Household Head of Meherpur District

Categories	N	%
Male	1555	93%
Female	110	7%
Total	1665	100.0

The marital composition of the surveyed population indicates that the vast majority (96.2%) are married, which reflects a high prevalence of formal unions within the adult population. Unmarried individuals constitute only 2.2%, and the widowed represent 1.5%, suggesting relatively low proportions of single and post-marital states. Divorce is negligible (0.1%), indicating strong cultural or social norms around marital permanence. These figures are consistent with traditional rural marital patterns in Bangladesh.

Table 3: Marital Status of Household Head of Meherpur District

Categories	N	%
Unmarried	36	2.2
Married	1602	96.2
Widowed	25	1.5
Divorced	2	0.1
Total	1665	100.0

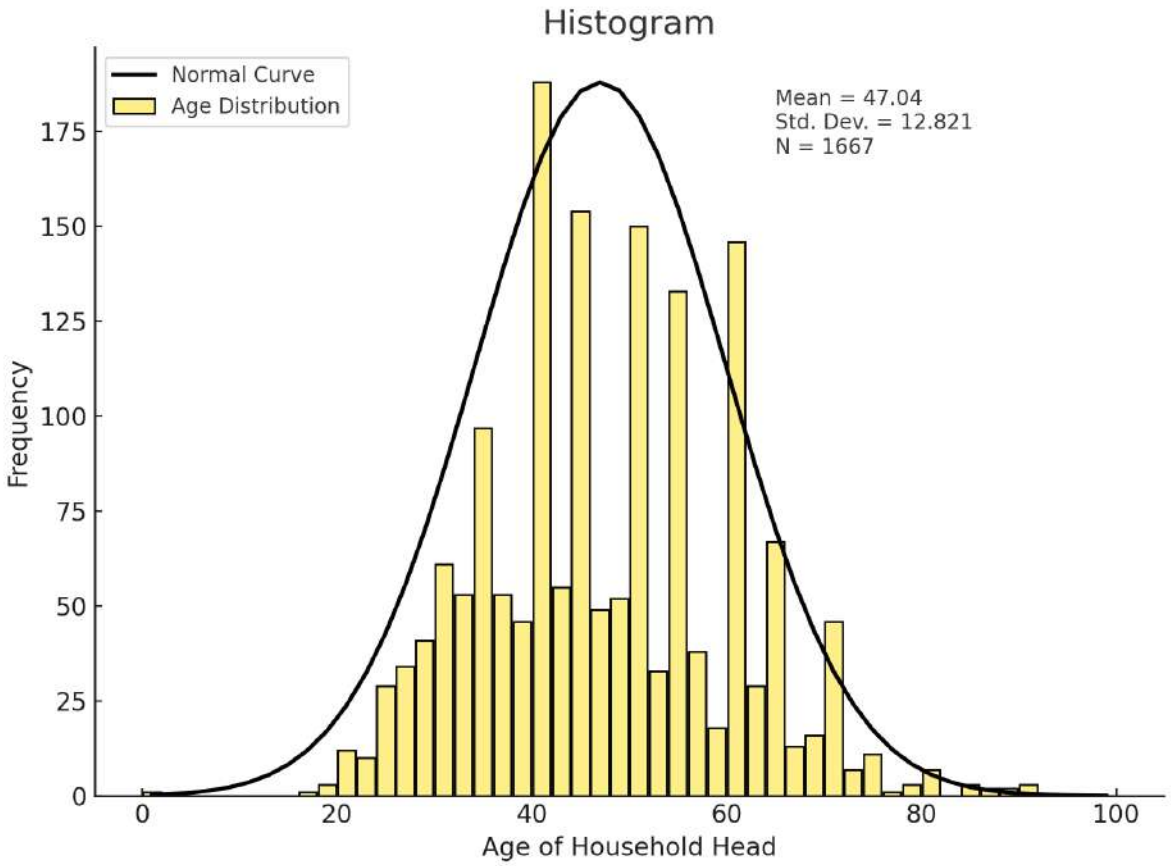


Figure 5: Age distribution of household heads

The age distribution of household heads in Meherpur District is approximately normally distributed, with a mean age of 47.04 years and a standard deviation of 12.82. The histogram shows that the majority of household heads fall within the age range of 35 to 60 years, indicating a mature and experienced base of household leadership. The distribution is slightly left-skewed, suggesting a smaller proportion of younger household heads below age 30, and a gradual decline in numbers beyond age 65.

This pattern reflects the tendency for older, more experienced individuals to assume household leadership roles. The presence of household heads across a broad age spectrum also highlights the need for age-sensitive programming in health, social security, and livelihood planning—particularly in addressing the needs of both younger households initiating economic activity and older ones approaching or within retirement age.

5.1.1.3 Family Structure

Single-Family:

A single-family household, often referred to as a nuclear family, consists of a married couple and their dependent children living together in one dwelling unit, excluding other relatives such as grandparents or uncles (Goode, W. J. (1963). *World Revolution and Family Patterns)*

Joint-Family:

A joint family, or extended family, refers to a household where multiple generations or collateral relatives (such as parents, children, grandparents, uncles, aunts, and cousins) live together, usually sharing a common kitchen and economic resources (Shah, A. M. (1998). *The Family in India: Critical Essays*).

The family type distribution in Meherpur District reveals that the majority of households (87%) are single-family units, while 13% of households reported being joint families. Compared to the predominance of nuclear families observed in many urbanizing areas, the presence of a relatively higher proportion of joint families in this dataset reflects the continued importance of extended family arrangements within the district.

This distribution highlights a transitional stage in household organization, where socio-economic modernization and lifestyle changes are promoting nuclear households, yet cultural traditions, intergenerational support systems, and economic considerations (such as shared land, housing, and caregiving responsibilities) still sustain joint families to a significant degree.

The implications of this mixed structure are noteworthy. Single-family households often generate greater demand for independent housing units, land subdivision, and modern urban services, while joint families contribute to collective caregiving, social cohesion, and resilience against economic vulnerabilities. From a planning perspective, understanding this balance between nuclear and joint households is crucial for designing housing policies, community facilities, and social welfare interventions that adequately address both individual and collective household needs.

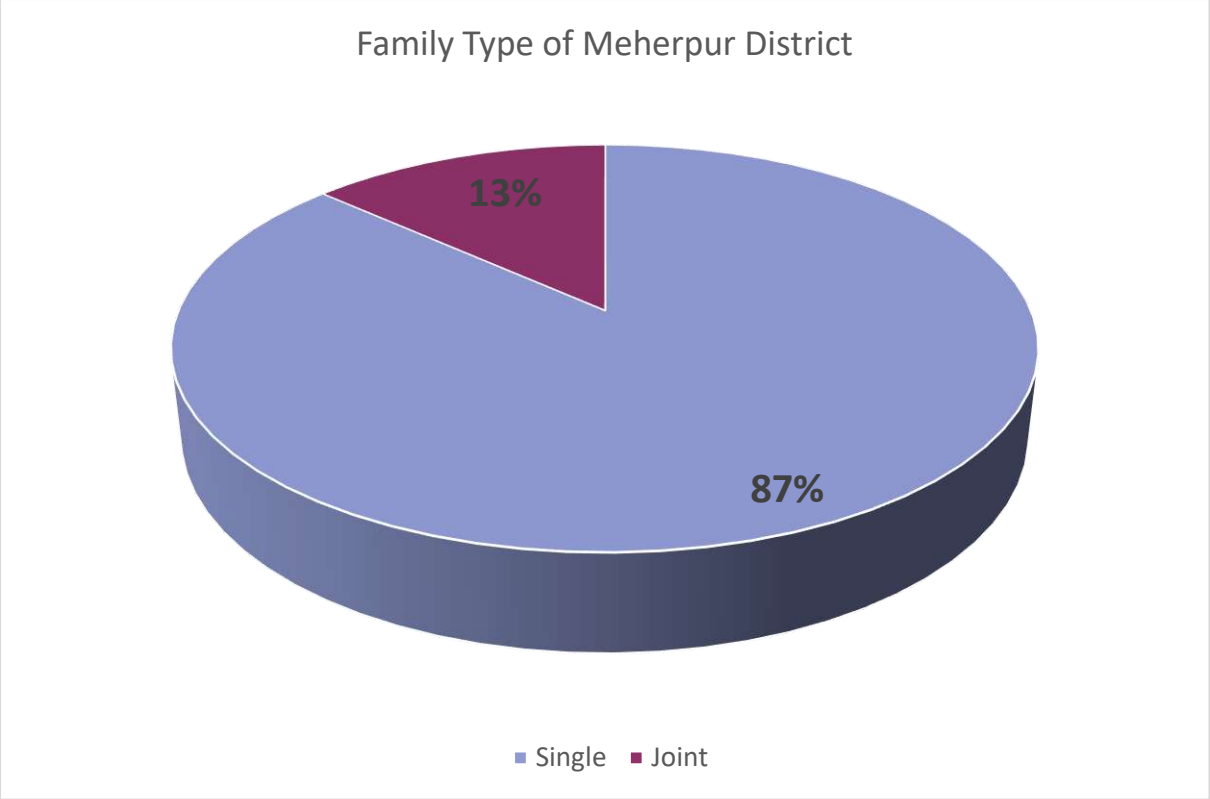


Figure 6: Family Type of Meherpur District

Table 4: Family Type of Meherpur District

Categories	N	%
Single	1447	87
Joint	223	13
Total	1670	100.0

5.1.1.5 Religious Affiliation

The religious composition of Meherpur District, as shown in Figure 7 and Table 5, indicates that Muslims comprise the overwhelming majority at 97.8% of the population. Hindus account for 0.5%, Buddhists 0.1%, and Christians 1.6%.

This demographic profile reflects a high degree of religious homogeneity, with Islam as the dominant faith. However, the presence of minority communities, although relatively small in proportion, underscores the need for inclusive planning and equitable access to religious facilities, cultural activities, and social services for all groups.

To promote long-term community cohesion, development initiatives in Meherpur District should ensure that the cultural and religious needs of minorities are addressed alongside those of the majority population, fostering an environment of mutual respect and representation in local governance.

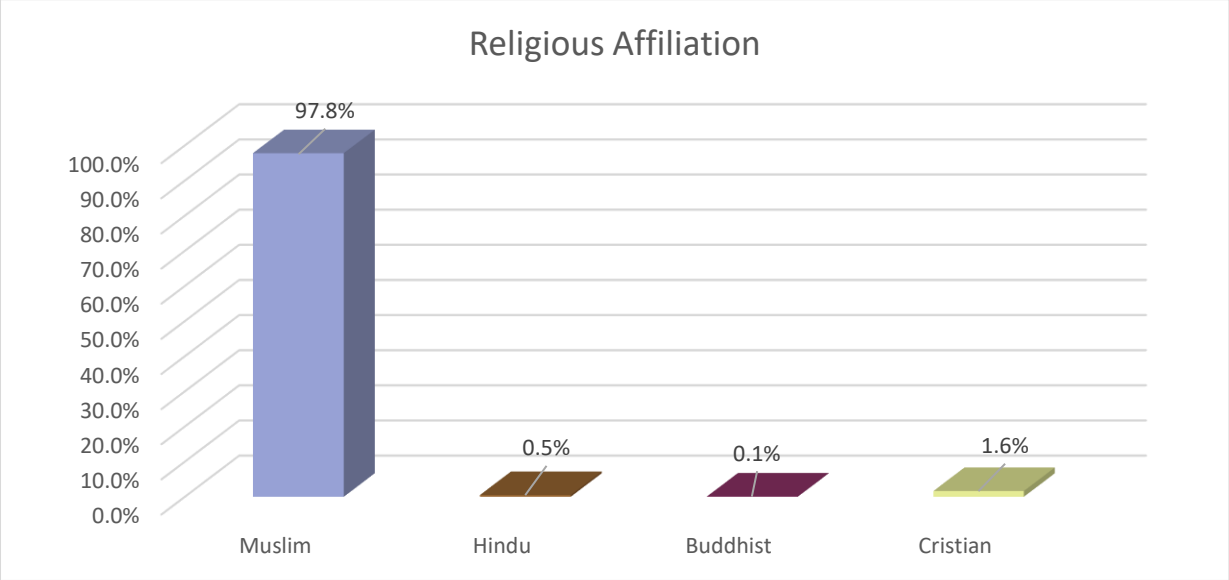


Figure 7: Religious Affiliation of Meherpur District

Table 5: Religious Affiliation of Meherpur District

Categories	N	%
Muslim	1193	97.8
Hindu	6	0.5
Buddhist	1	0.1
Cristian	20	1.6
Total	1665	100.0

5.1.1.6 Occupational Transition

In Gangni Sholataka, fishing in ponds was once more than a livelihood, it was a way of life. For generations, families depended solely on these still waters, casting nets at dawn and returning with baskets full of fish. The ponds were their pride, their security, and their heritage.

Shahabul Islam grew up in this tradition. As a full-time pond fisherman, he spent his days feeding fish, repairing nets, and tending to the water passed down through generations. But over the years, the ponds began to change. The water level started decreasing day by day, shrinking the habitat and reducing the fish population.

His catches grew smaller, his earnings weaker. Month after month, the pond that had once sustained his family could no longer meet even their basic needs. Across Gangni Sholataka, fellow fishermen faced the same fate.

“They had no choice,” Shahabul informed “Most of our fisherman community has shifted their occupation. They’ve sold their nets and started driving vans, pulling rickshaws, or operating nosimons. Some even work as day laborers now. Fishing was our life, but the water is not like before.”

Shahabul himself could not let go of fishing completely, it was in his blood. But survival demanded more. Now, he splits his days: a driver in the morning, a fisherman in the afternoon. His driving brings in the steady cash his pond can’t provide alone, while his fishing work keeps alive the last thread of his ancestral identity.

For Shahabul Islam, this is the new reality, a life balanced between two worlds. For his community, it is a warning that without urgent action to restore the ponds of Gangni the old way of life will slip away, one fisherman at a time.

5.1.2 Education

The educational profile of adult (18+) household members in Meherpur District indicates that nearly half of the adult population (49.81%) has completed the secondary level (Category 2), making it the most common level of educational attainment. Primary education (Category 1) follows with 17.67%, while 16.42% have achieved higher secondary level (Category 3). A small proportion (9.36%) reported graduation-level education (Category 4), and only 1.31% and 0.31% attained postgraduate and professional qualifications (Categories 5 and 6), respectively.

Notably, 5.12% of adults reported no formal education (Category 0), highlighting pockets of educational deprivation that may require targeted adult literacy and foundational education programs. The overall distribution suggests a moderately educated population with room for improvement in tertiary and vocational education.

The data underscores the importance of expanding access to post-secondary and technical education, particularly for younger cohorts transitioning from the secondary level. Investments in education should focus not only on increasing enrollment and retention at early levels but also on strengthening pathways to higher education and employable skills development.

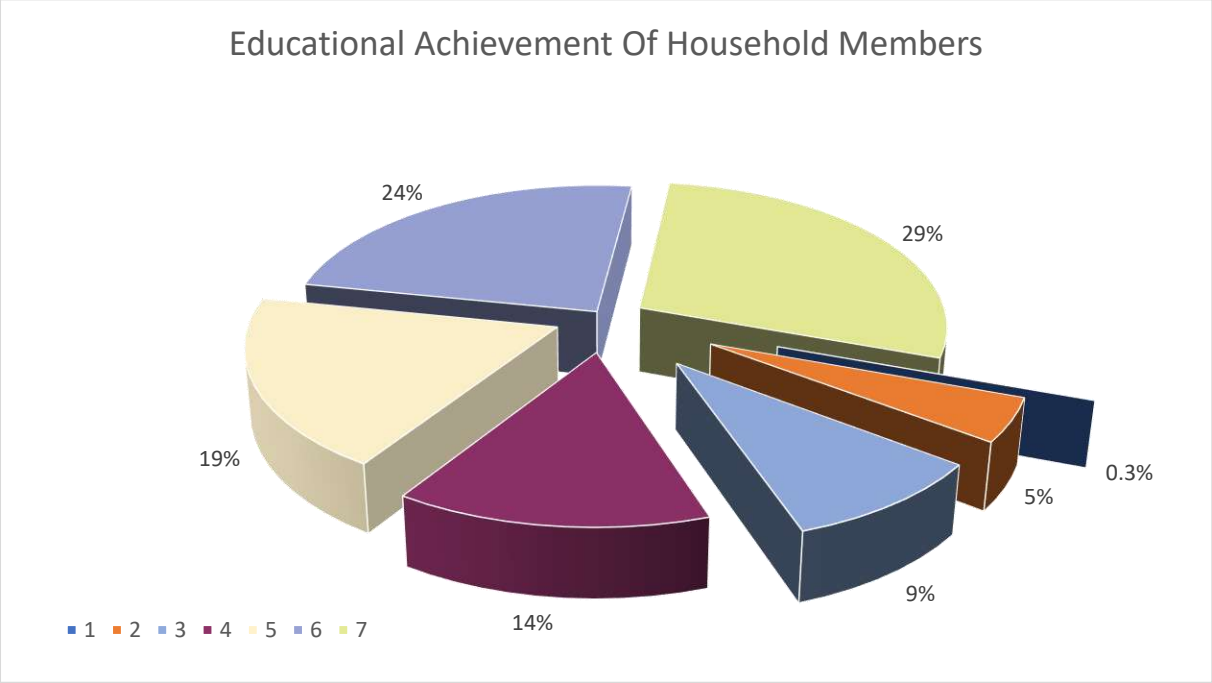


Figure 8: Educational Achievement of Adult (18+) Household Members

Table 6: Educational Achievement of Adult (18+) Household Members

Categories	N	%
0	82	5.12
1	283	17.67
2	798	49.81
3	263	16.42
4	150	9.36
5	21	1.31
6	5	0.31
Total	1602	100.0

5.1.3 Health

The availability of health services across Meherpur District exhibits notable spatial variation by upazila, particularly in terms of access to community clinics, hospitals, and maternity centers.

As shown in the bar chart access to community clinics is highest in Mujibnagar, where 53% of households reported proximity to such facilities. In Gangni, 43% of households reported availability, while Meherpur Sadar lags behind with 30%. The relatively high access in Mujibnagar suggests successful outreach of primary healthcare infrastructure in remote rural areas.

In contrast, hospital services are most frequently accessible to households in Gangni (39%) and Meherpur Sadar (38%), whereas only 9% of Mujibnagar households reported similar access. This suggests that more specialized or secondary healthcare facilities are concentrated in or near urban centers, leaving remote areas underserved in this regard.

Regarding maternity centers, Meherpur Sadar exhibits significantly better access, with 37% of households reporting availability. This is likely due to the urbanized nature of the upazila and presence of central health institutions. Gangni shows limited access (8%), and Mujibnagar displays the lowest coverage, with only 2% of households reporting nearby maternity centers.

The findings point to geographic disparities in healthcare infrastructure, emphasizing the need to enhance maternal and secondary care facilities in rural upazilas like Mujibnagar. While community-level services are relatively well distributed, especially in Mujibnagar, investments in hospital and maternal care expansion remain a critical priority for ensuring equitable health service access across the district.

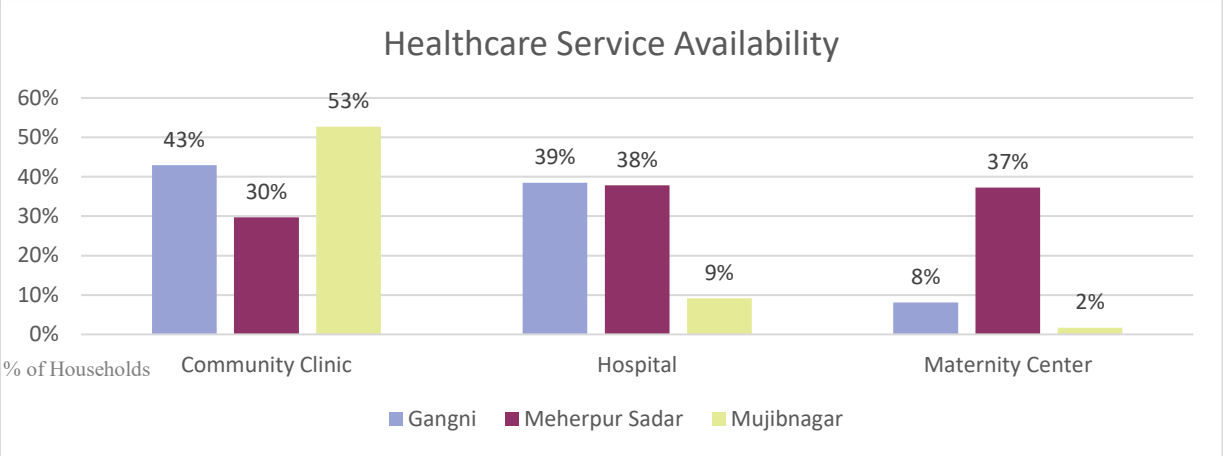


Figure 9: Healthcare Service Availability by Upazila

The health awareness indicators associated with the COVID-19 pandemic provide insights into behavioral adaptations, access to information, and health outcomes across the district.

Across all sub-regions of Meherpur, awareness of baby hygiene and primary healthcare practices remains high. Urban Meherpur Sadar leads with 94.3% awareness in both areas, followed by urban Gangni (92.27% and 92.73% respectively), and rural Meherpur Sadar (89.74% and 78.28%). Gangni rural and Mujibnagar also report high awareness, ranging from 83% to 86% across indicators. These figures reflect extensive public health outreach and awareness programming during the pandemic period.

However, the incidence of COVID-19 infection remains relatively low across all locations. Urban Meherpur Sadar recorded the highest reported infection rate (4.39%), followed by urban Gangni (5.0%) and rural Mujibnagar (6.58%). In contrast, rural Gangni (2.67%) and rural Meherpur Sadar (1.67%) reported even lower rates, which may reflect either lower transmission or under-reporting in remote areas.

The proportion of respondents who reported any form of post-COVID lifestyle change is minimal across all areas. The highest reported behavioral adjustment was in rural Mujibnagar (6.17%) and urban Gangni (6.36%), suggesting that despite high awareness levels, long-term behavioral change remains limited.

The overall findings suggest that while awareness of basic hygiene and health services is commendably high, actual behavioral transformation in response to COVID-19 remains limited. Continued investment in risk communication, community engagement, and localized behavioral change strategies is essential to build resilience against future health emergencies.

Furthermore, special attention is required in rural regions to strengthen surveillance and ensure accurate reporting of pandemic-related impacts.

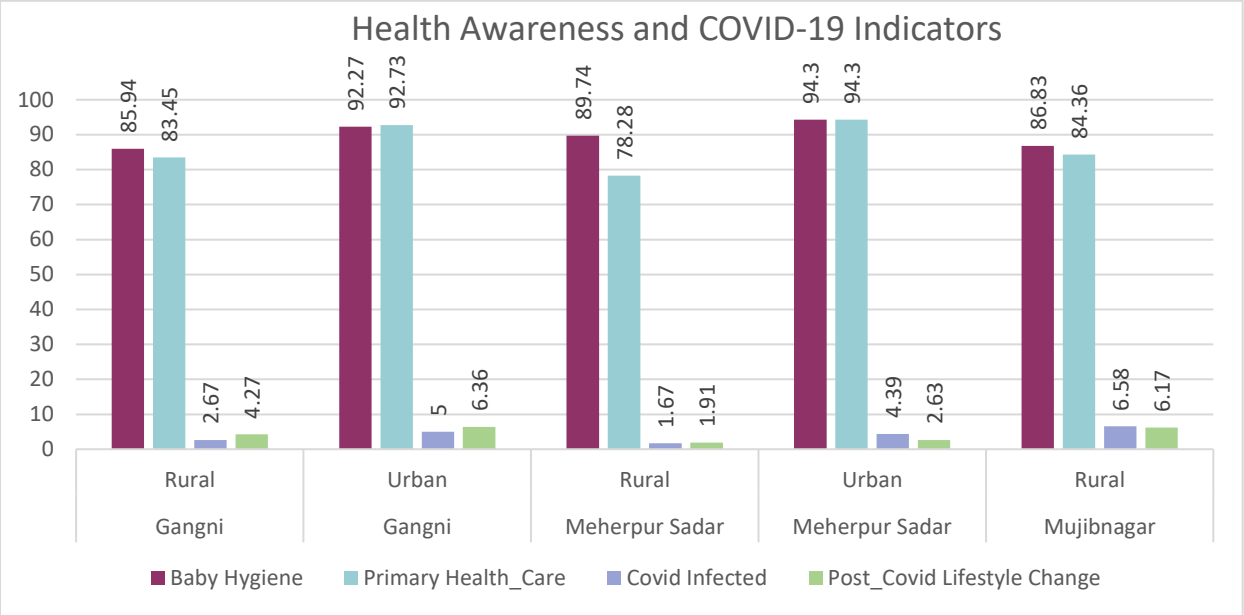


Figure 10: Health Awareness and COVID-19 Indicators of Meherpur District

5.1.4 Physical Capital

5.1.4.1 Housing

The recent survey findings (Figure 1) show that Pucca houses make up 51% of the housing stock, which is a substantial increase from the 20.0% reported in the BBS 2011 Census. This indicates significant progress in permanent housing construction over the past decade, reflecting improvements in household income levels, access to construction materials, and infrastructure development initiatives.

Semi-Pucca houses now account for 29%, which is notably lower than the 33.4% in 2011. This decline suggests that a portion of semi-permanent structures has been upgraded to fully permanent Pucca houses.

On the other hand, Kacha houses have decreased sharply from 43.4% in 2011 to just 20% in the present survey. This reduction points to a substantial decline in structurally vulnerable dwellings made from temporary materials, likely due to housing improvement programs and socio-economic growth in the district.

Overall, compared to the BBS 2011 benchmark, the district has experienced a marked transition towards more durable housing, with Pucca dwellings more than doubling in proportion, Semi-Pucca houses slightly decreasing, and Kacha houses reducing by more than half. This trend reflects both infrastructural development and improving socio-economic conditions in Meherpur District.

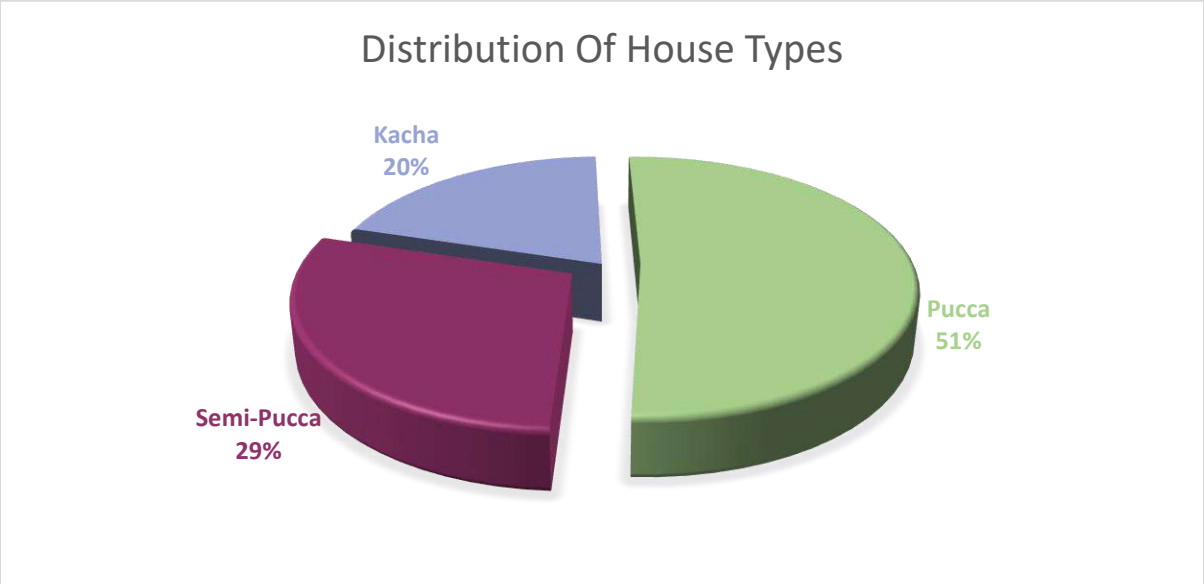


Figure 11: Distribution of House Types in Meherpur District

5.1.4.2 House Ownership

In Meherpur District, homeownership is overwhelmingly dominant. As illustrated in Figure 11, 97% of surveyed households report owning their homes, while only 3% live in rented dwellings.

This high rate of ownership reflects a strong tradition of property possession, likely influenced by intergenerational land transfers, ample rural land availability, and a cultural preference for long-term settlement. The minimal presence of rental housing suggests limited market dependency for accommodation and indicates a community with deep-rooted attachment to place, stable residency, and potentially lower migration or housing insecurity.

While such ownership patterns can be viewed as a strength, fostering social cohesion and long-term community stability, they also highlight a limited rental market. This could restrict housing accessibility for transient workers, new residents, or landless populations who may depend on rental accommodation.

The findings suggest that although housing stability is high, parallel investments in social infrastructure, such as education, healthcare, and livelihood opportunities, are essential to ensure balanced community development. Targeted measures to diversify housing options, while preserving the benefits of widespread ownership, could strengthen resilience and inclusivity across Meherpur District.

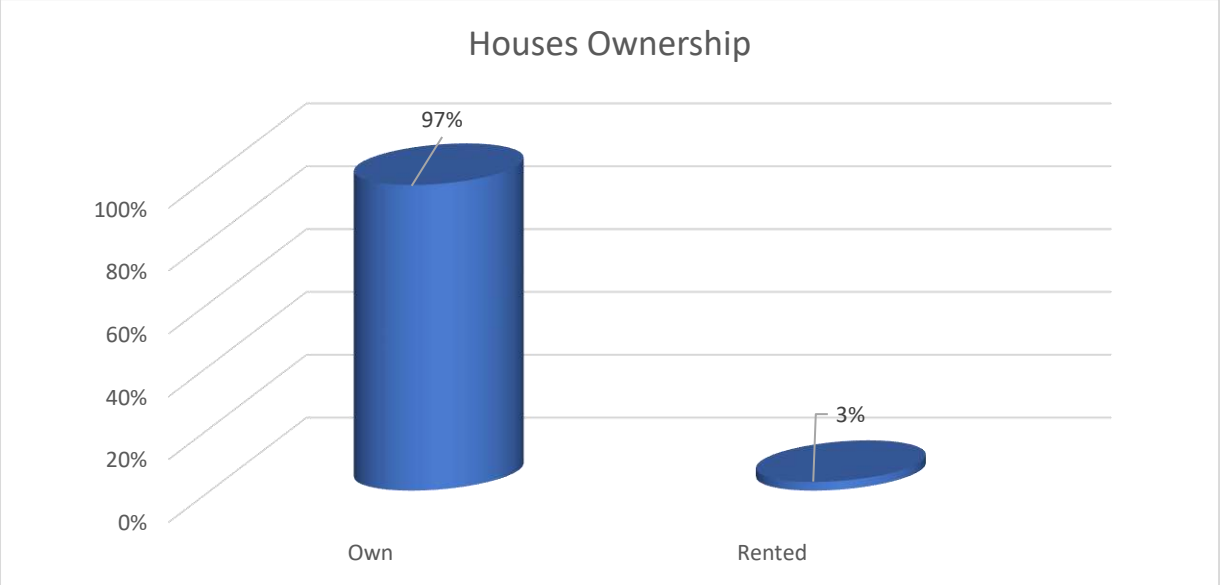


Figure 12: Ownership of Houses of Meherpur District

5.1.4.3 Access to Water

The bar chart on water sources in Meherpur District reveals critical insights into household water security and the institutional landscape of water provision. The vast majority of households rely on private sources, accounting for 70.30% for drinking water and 69.39% for daily use. This overwhelming dependence on private provisions underscores the limited reach or reliability of public and non-governmental water infrastructure in the district.

Government water sources serve a modest share of households, supporting 6.05% for drinking and 6.62% for other daily uses. While these figures indicate some level of public sector involvement, they also suggest substantial room for expansion in state-supported water access, especially in underserved or remote areas. Water sourced from NGO interventions appears almost negligible, with only 0.25% of households depending on NGOs for drinking water and 0.19% for daily use. This limited footprint points to either a lack of NGO presence or a potential disconnects between NGO efforts and household adoption of their water services. The category of 'Other' (private) water sources accounts for a significant 23.39% of drinking water and 23.80% of daily use. This suggests that a considerable segment of the population may be sourcing water from informal or unconventional means, such as neighbors' supplies, ponds, or unregulated vendors, raising potential concerns over water safety, quality, and sustainability.

The data emphasizes a strong reliance on private infrastructure for water access, while highlighting an urgent need to diversify and institutionalize secure, equitable, and quality-controlled water provisioning across the district. Targeted public investment, coupled with strategic partnerships with NGOs, could reduce dependency on unregulated or informal water sources and improve water resilience for all households.

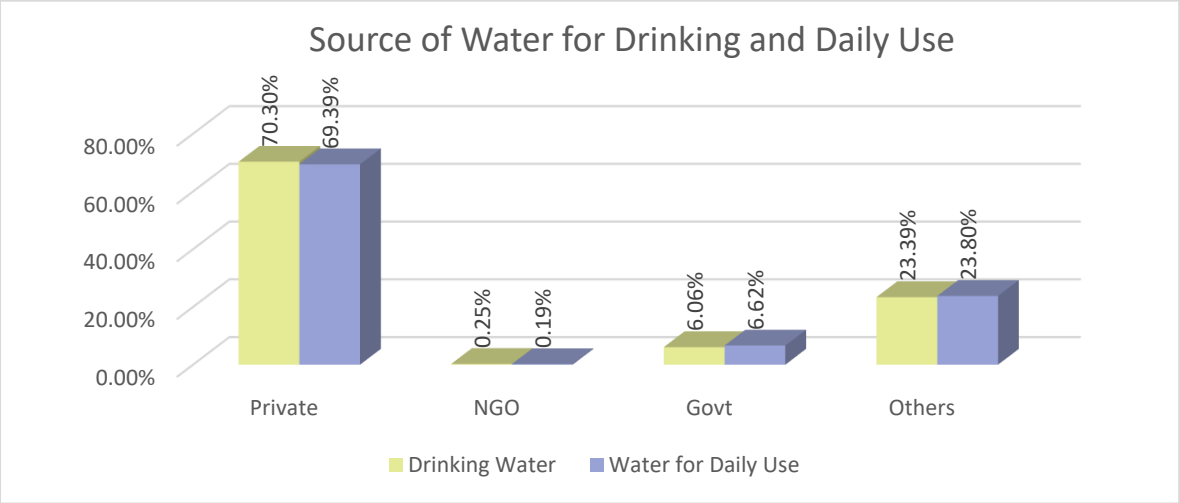


Figure 13: Source of Water for Drinking and Daily Use in Meherpur District

5.1.4.4 Access to Electricity

The analysis of electricity sources in Meherpur District highlights a near-universal coverage of grid-based electricity, with 98% of households accessing power through the Rural Electrification Service. This high level of electrification indicates substantial progress in infrastructure development and connectivity under national rural electrification initiatives.

In contrast, solar electricity remains a marginal contributor, with only 4% of households using solar power. The remaining 96% of households reported non-availability of solar electricity, suggesting that renewable off-grid solutions have not yet gained traction or been adequately supported through policy or local implementation frameworks.

Furthermore, only 2% of households lack access to the Rural Electrification Service, reflecting a minor but important gap in last-mile connectivity, potentially in remote or disadvantaged areas.

These findings underscore a significant reliance on conventional grid-based electricity and limited diversification into renewable alternatives. To enhance energy resilience and reduce dependence on fossil-fuel-based grid systems, there is a strategic need to promote decentralized solar energy solutions, especially in isolated settlements or disaster-prone areas. Expanding access to clean and sustainable energy will not only support household needs but also improve livelihoods, health, and educational outcomes across the district.

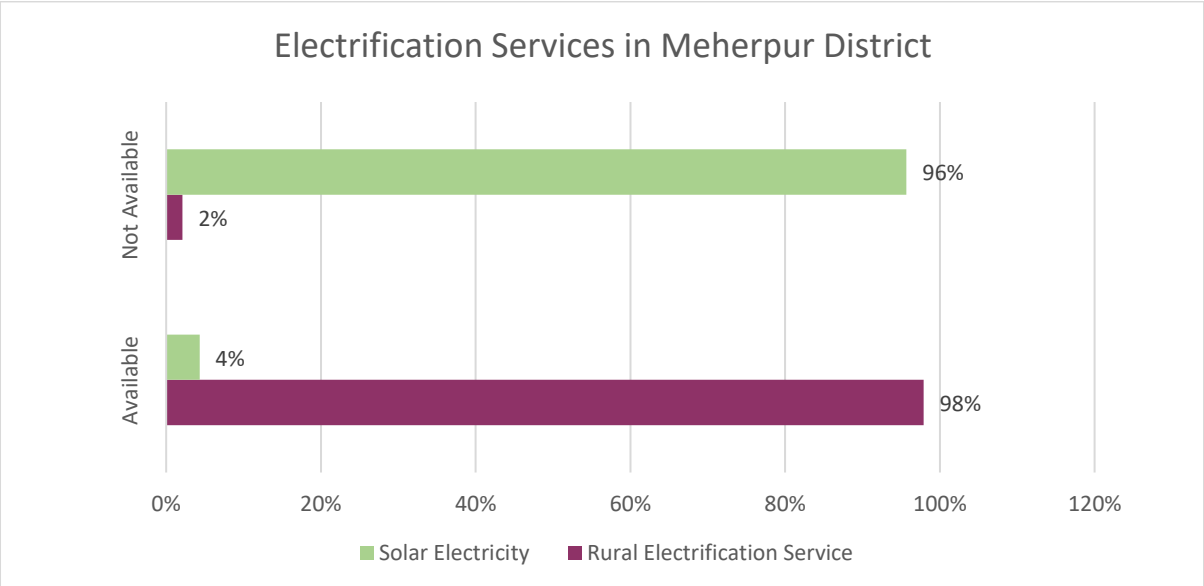


Figure 14: Availability of Solar and Rural Electrification Services in Meherpur District

5.1.4.5 Sanitation Practice

Access to basic sanitation infrastructure is a critical determinant of public health and environmental safety. The figure reveals that only 747% of households have access to a sewerage system, while a substantial 26% lack such facilities. This highlights a critical infrastructural gap, particularly in peri-urban and rural areas, where poor sanitation can directly impact public health, water quality, and environmental hygiene. The high proportion of households without sewerage coverage aligns with the broader rural sanitation challenges in Bangladesh.

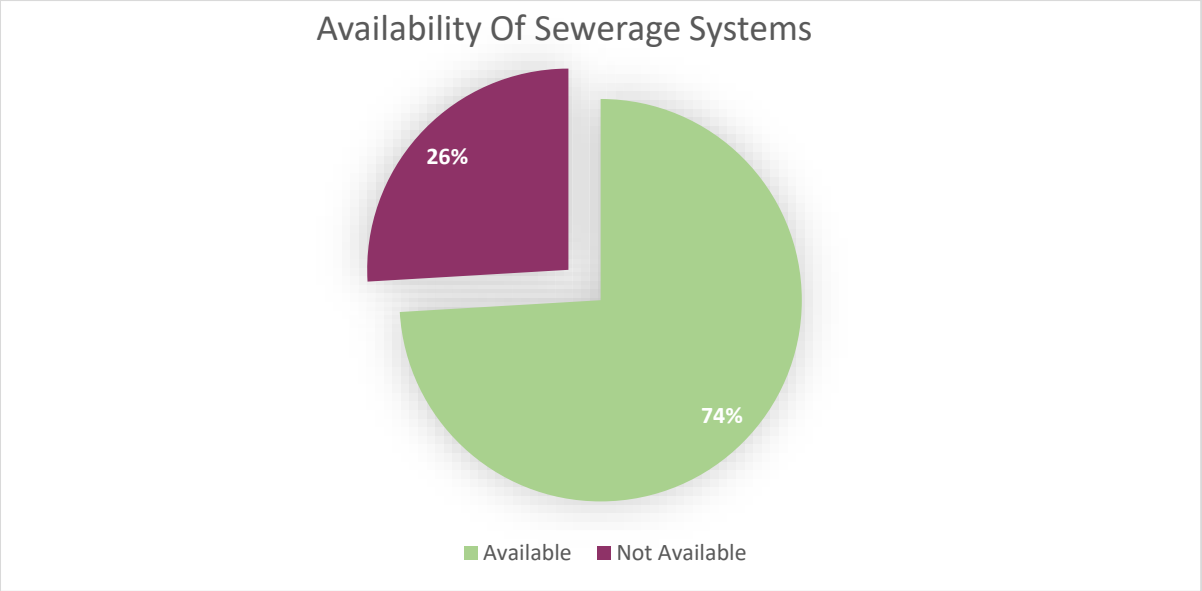


Figure 15: Availability of Sewerage Systems in Meherpur District

Sewage Service Providers

Among the households with some form of sewage service, the distribution of providers demonstrates a dominant role of the private sector (57%), followed by government-managed services (25%) and other providers (18%), which may include community-based or informal arrangements. This reliance on private sewage services reflects both the absence of comprehensive public infrastructure and the growing role of market-based solutions in service delivery. However, the fragmented nature of service provision raises concerns about quality, regulation, and environmental compliance.

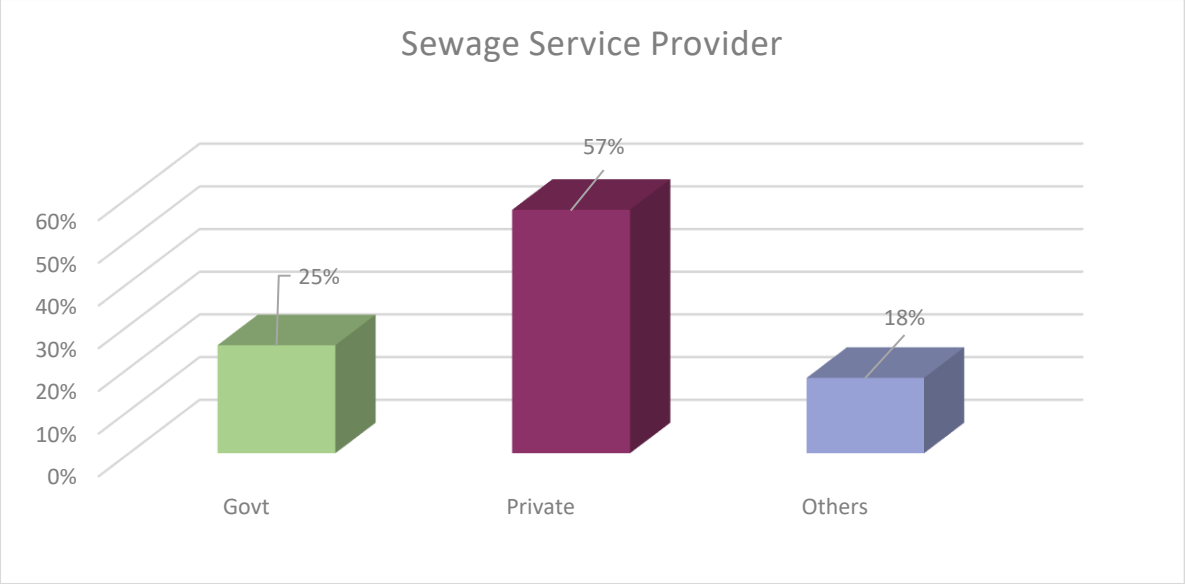


Figure 16: Distribution of Service Providers in Meherpur District

5.1.4.6 Sources of Cooking Fuel

The survey of household energy use in Meherpur District highlights a clear reliance on traditional biomass fuels for cooking. Fuel wood emerges as the predominant source, with 1,337 households reporting usage, representing the most accessible and widely used fuel type across the district. This dependence on fuel wood reflects both cultural practices and economic considerations, particularly in rural areas where alternative fuels are less accessible or cost-prohibitive.

Among modern fuels, cylinder gas (LPG) shows moderate penetration, used by 986 households, indicating gradual adoption of cleaner cooking solutions among better-off or urban households. Kerosene remains a minor but notable source, with 226 households relying on it, typically as a supplementary or fallback fuel.

Pipe gas and biogas are virtually absent, each reported by only 4 households, underscoring the limited infrastructure for modern and sustainable fuel alternatives in the district.

The overall distribution demonstrates a dominance of traditional biomass over clean fuels, which has implications for household air quality, health, and environmental sustainability. While the data does not analyze solution pathways, the prevalence of fuel wood indicates the importance of household energy interventions in any long-term development strategy.

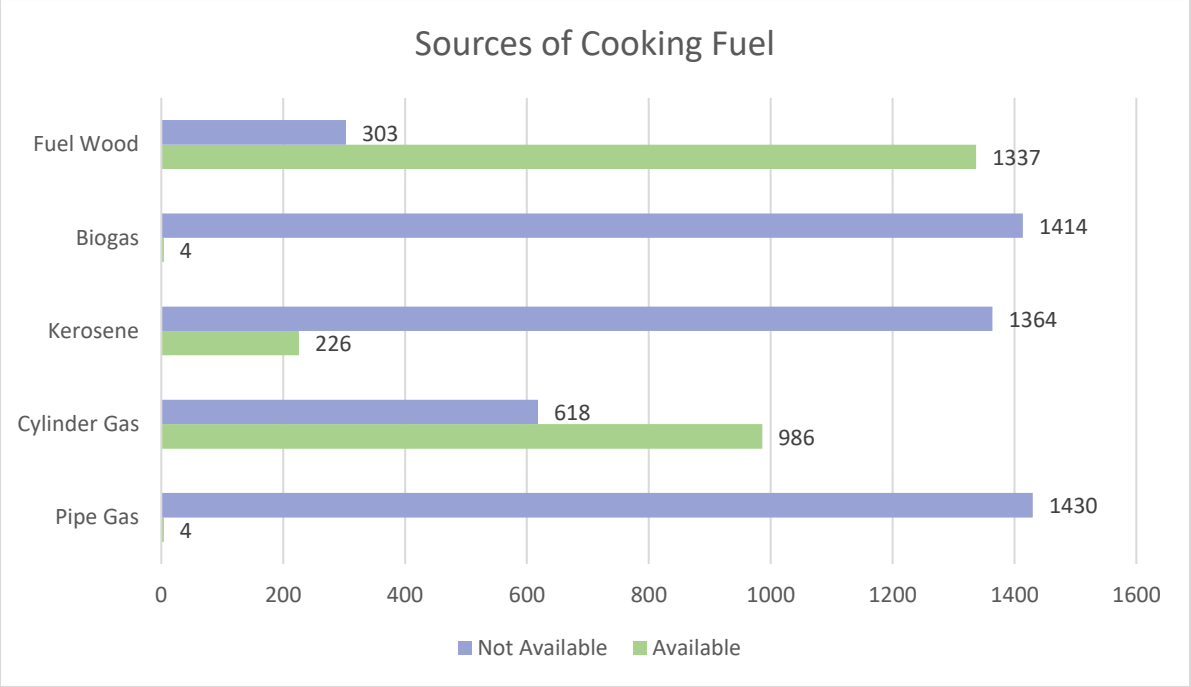


Figure 17: Sources of Cooking Fuel in in Meherpur District

Table 7: Sources of Cooking Fuel in in Meherpur District

Categories	N				
	Pipe Gas	Cylinder Gas	Kerosene	Biogas	Fuel Wood
Available	4	986	226	4	1337
Not Available	1430	618	1364	1414	303
Total	1434	1604	1590	1418	1640

5.1.4.7 Waste Management

The assessment of household waste management in Meherpur District reveals limited-service coverage, with only 30% of households reporting access to any waste management system, while the majority, 70%, lack formal or organized waste disposal services. This gap highlights a significant challenge for environmental health and public hygiene across the district, particularly in rural areas.

Among households with waste management services, the largest share is provided by government authorities (45%), reflecting the primary role of municipal and local government entities in organized waste collection and disposal. Private providers account for 30%,

indicating a growing but still supplementary role in managing household waste. NGOs are minimally involved (0.2%), and other informal arrangements contribute 25%, likely representing community or self-organized efforts in the absence of formal services.

The data highlights the predominance of informal and self-managed waste disposal practices in most areas, which may contribute to environmental contamination, open dumping, and public health risks. Although the figures indicate some degree of service diversification, the overall low coverage underlines the need for more robust and systematic waste management strategies to support clean and healthy communities.

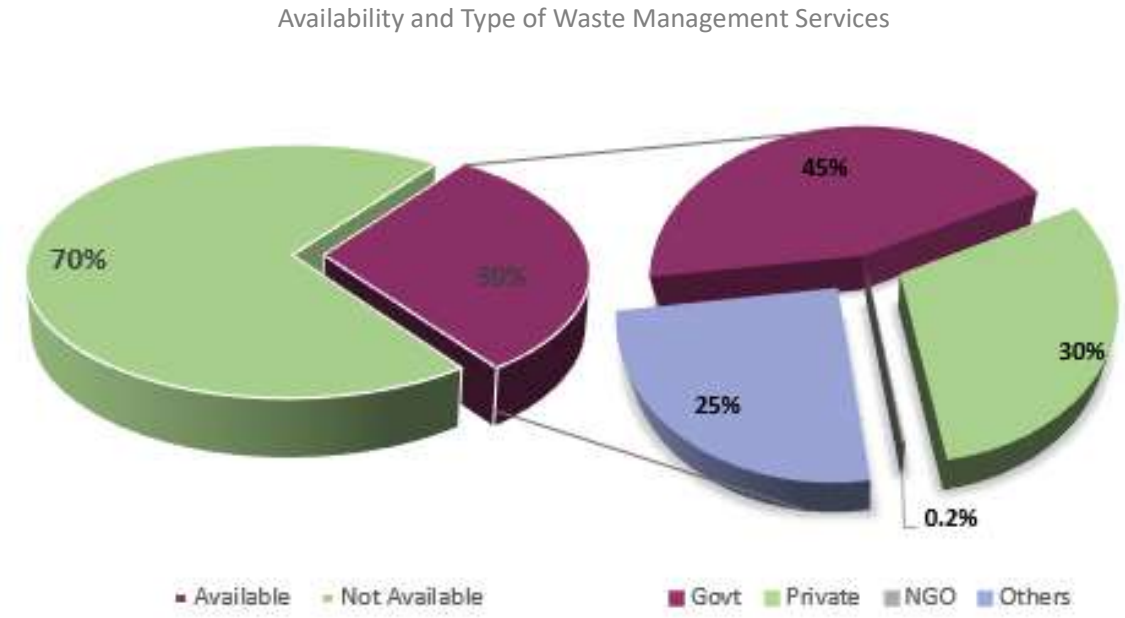


Figure 18: Availability and Type of Waste Management Services in Meherpur District

5.1.4.8 Transportation Mode

The transportation pattern in Meherpur District demonstrates a strong reliance on non-motorized travel modes, with a notable share of trips requiring multiple modes.

Transportation Modes Usage

The bar chart shows the percentage distribution of daily transportation modes:

- Walking is the dominant mode, representing 42.7% of all trips.
- Vans and cycles are the next most frequent, at 14.4% and 12.7%, respectively.
- Rickshaws account for 10.9%, serving as a key mode for short trips and connecting rural households to local markets and services.
- Motorcycles comprise 10.4% of trips. These are mostly used by households with dual rural-urban activity patterns, individuals who work in urban areas but maintain farms or agricultural land at home, using motorcycles for flexible and quick travel between home, fields, and workplaces.
- Buses, cars, and microbuses together represent less than 3%, indicating limited formal public transport use.
- Other modes contribute 5.2%, likely including informal or shared transport, as well as animal-drawn carts.

The data highlights that daily mobility is predominantly localized and non-motorized, consistent with rural and peri-urban settlement patterns.

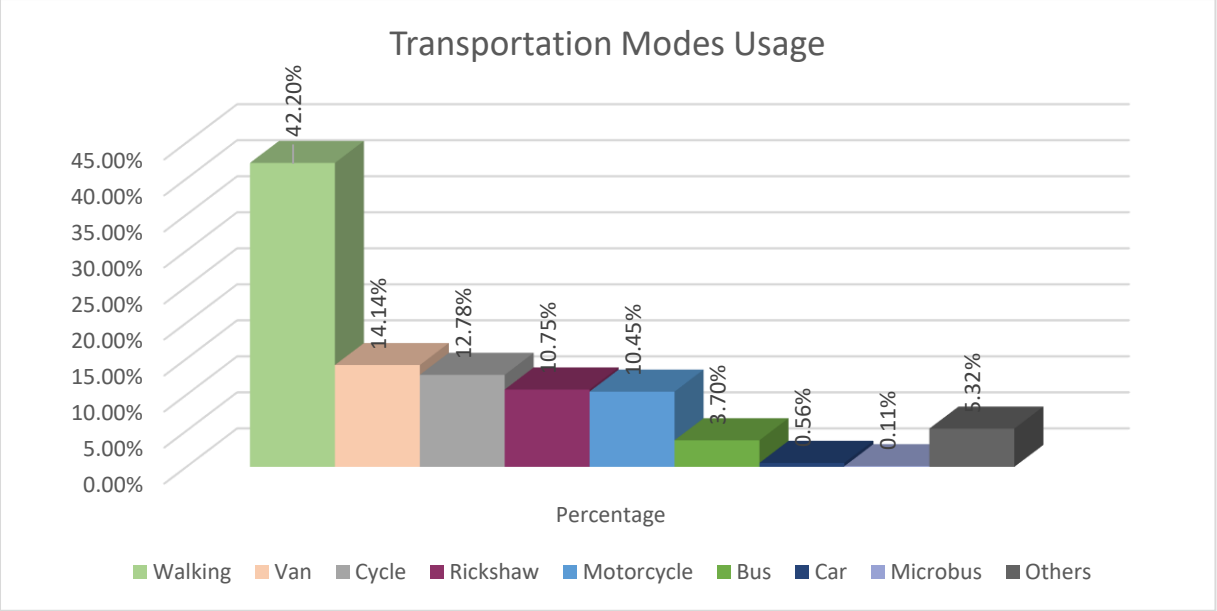


Figure 19: Transportation Modes Usage in Meherpur District

Multi-Modal Transportation Usage

Single-mode trips dominate (2,294 cases), mainly walking or one simple non-motorized option. Two-mode (1,353) and three-mode (1,119) trips are common, reflecting the need to combine walking, vans, rickshaws, or motorcycles to reach work, markets, and services. Four-mode (387), five-mode (82), and six-mode (1), for college and coaching going multiple purpose trip occur rarely but indicate complex travel chains for certain households.

Overall, 55% of daily trips involve multiple modes, demonstrating the importance of flexible and sequential transport options in the district. Motorcycle usage particularly illustrates a hybrid rural-urban livelihood pattern, enabling efficient movement between agricultural and non-agricultural activities.

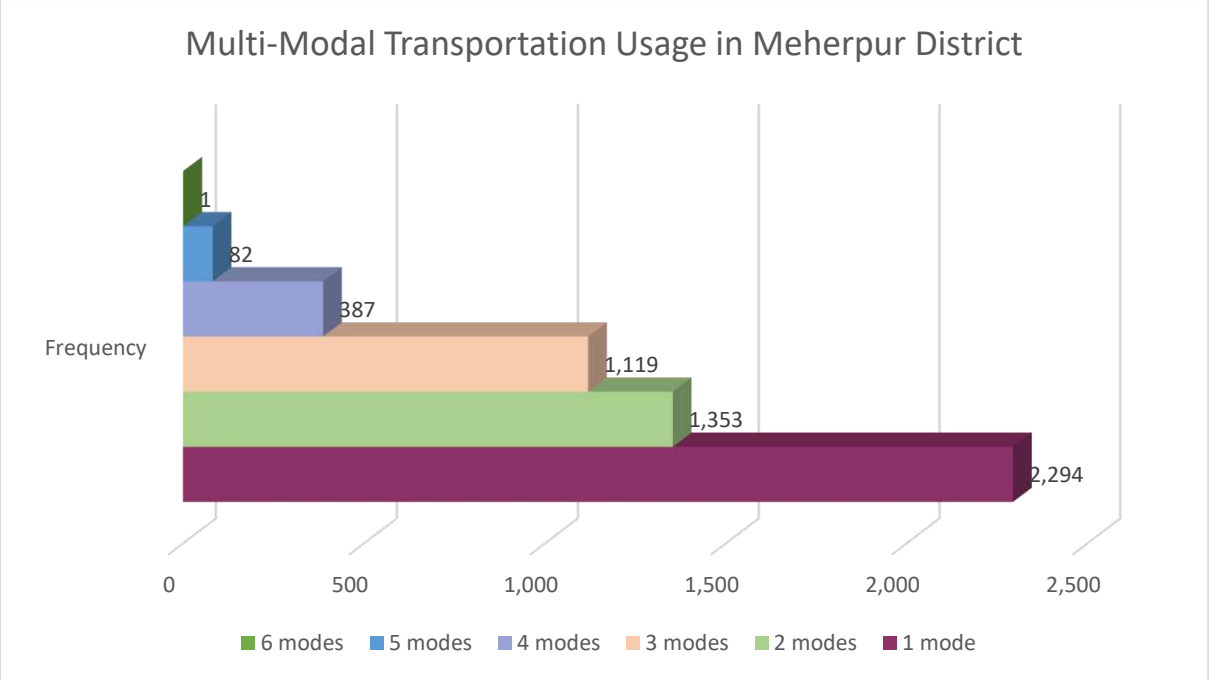


Figure 20: Multi-Modal Transportation Usage in Meherpur District

5.1.5 Financial Capital

5.1.5.1 Income

The household income distribution in Meherpur District reflects a predominantly low- to middle-income population, with clear clustering in the lower income ranges:

- The largest share of households (around 800) earns between 10,000–20,000 BDT per month, representing the core low-income group of the district.
- The second-largest group (about 550 households) falls into the 21,000–30,000 BDT range, indicating a modest middle-income segment.
- Households earning 31,000–40,000 BDT are fewer, roughly 200, reflecting a smaller proportion with stable or diversified incomes.
- High-income households (more than 40,000 BDT) are rare, with fewer than 100 households, highlighting limited presence of affluent groups in the district.
- At the lowest end, households earning less than 10,000 BDT per month number around 120, indicating the presence of vulnerable populations who may face challenges meeting daily needs.

The data shows that most households operate within subsistence to lower-middle income levels, which influences consumption patterns, access to services, and ability to invest in improved housing, education, and transport. This income profile suggests that development interventions in the district should focus on income-generating opportunities, agricultural productivity, and small-business support to lift a large share of households into more stable middle-income brackets.

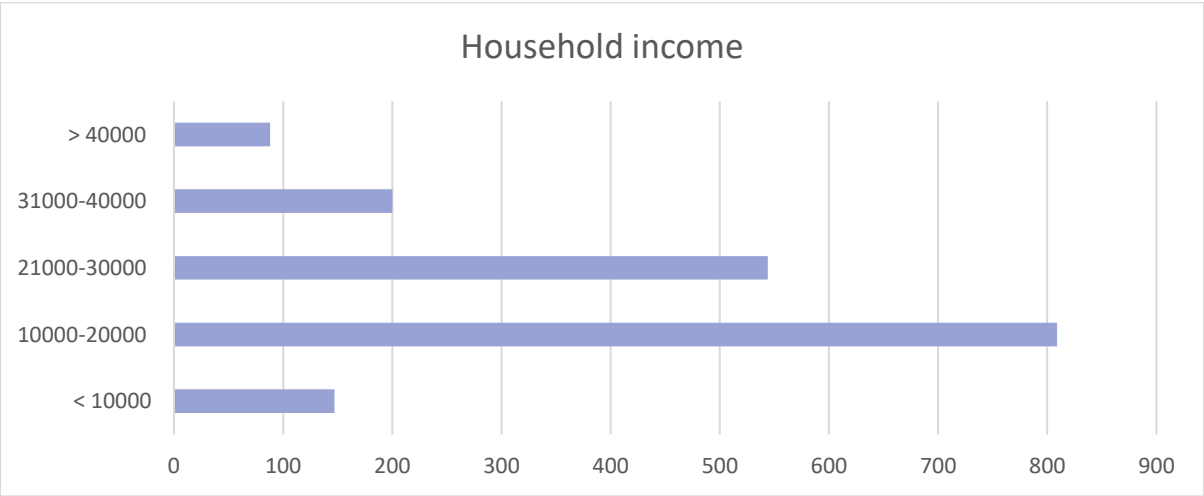


Figure 21: Household Income Distribution in Meherpur District

5.1.5.2 Expenditure

The expenditure distribution of households in Meherpur District provides critical insight into local consumption patterns and economic well-being. The data shows a concentration in the lower- to mid-expenditure categories, reflecting modest living standards for most households:

- The largest expenditure group consists of households spending 11,000–15,000 BDT per month, with 484 households (approx. 29% of the sample).
- The second largest group is those spending 5,000–10,000 BDT (408 households), indicating a significant segment living on constrained budgets.
- 16,000–20,000 BDT and more than 20,000 BDT expenditure groups include 391 and 340 households respectively, reflecting a smaller share of higher-spending households.
- Extremely low expenditure households (<5,000 BDT) are minimal, with only 32 households, representing the most vulnerable economic segment.

This pattern suggests that most households allocate their resources within a moderate expenditure band.

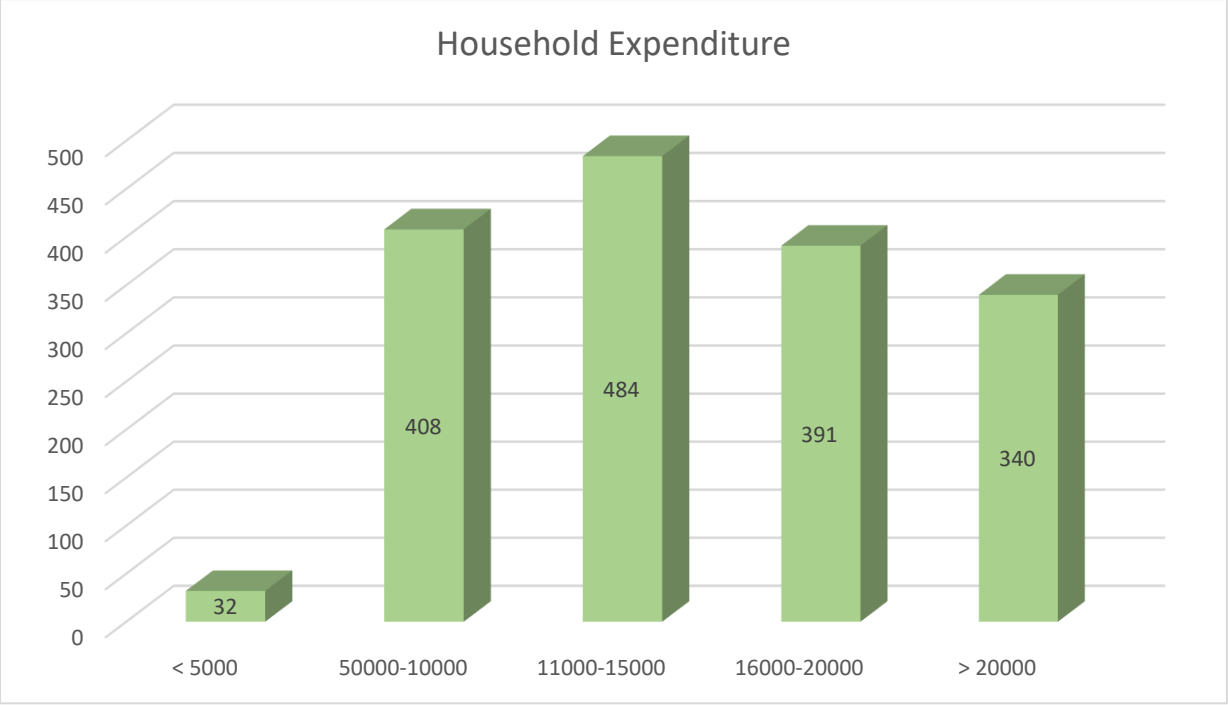


Figure 22: Household Expenditure Distribution in Meherpur District

5.1.5.3 Savings

The distribution of household savings in Meherpur District reflects limited financial resilience among the majority of households, with most reporting very low monthly savings:

- Less than 500 BDT: This category constitutes the largest segment, with nearly 700 households, indicating that a significant portion of families save only minimal amounts and are highly vulnerable to economic shocks.
- 500–1,000 BDT: The second largest group, with approximately 600 households, represents households with modest but still constrained saving capacity.
- 1,100–1,500 BDT: Only about 150–200 households fall into this category, showing that medium-level savings are uncommon.
- More than 1,500 BDT: The smallest segment, under 150 households, highlights the very limited number of financially secure households in the district.

This pattern clearly demonstrates that most households operate with very low savings, leaving them highly exposed to income disruptions, health emergencies, or natural disasters. From a WFP perspective, this finding reinforces the need for:

- Income diversification programs to increase household financial capacity;
- Community-based savings schemes or microfinance access to build financial resilience;
- Integration of social safety nets and livelihood interventions to protect the most vulnerable households with minimal savings.

The low savings levels underscore the fragile economic foundation of rural and semi-urban households in Meherpur District.

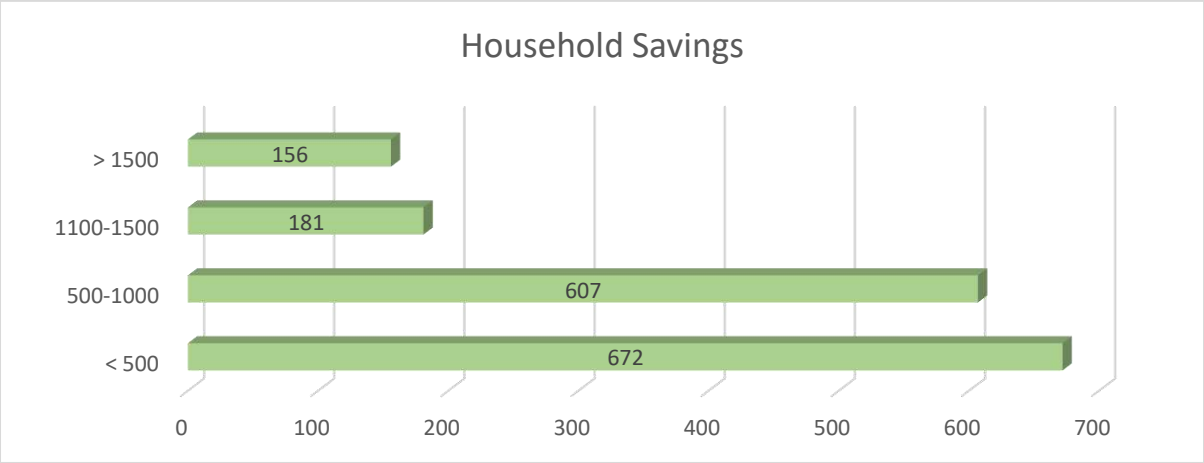


Figure 23: Household Savings Distribution in Meherpur District

5.1.6 Natural and Other Challenges

The household survey indicates that water logging is a recurring but spatially uneven hazard across Meherpur District. At the district level, the entire household sample (100 percent) was distributed across the three upazilas, allowing for a comparative understanding of localized vulnerabilities.

In Gangni Upazila, 9 percent of the district's households reported experiencing water logging, while 38 percent confirmed no such difficulty. This suggests that although a relatively smaller share of households face water logging here, the issue remains a notable environmental stressor in particular low-lying villages.

In Meherpur Sadar Upazila, the problem is more visible. 20 percent of households reported being affected by water logging, while 18 percent reported no such problems. The nearly balanced responses highlight that water logging is concentrated in specific clusters of the Sadar area, particularly where urban drainage infrastructure is weak.

In Mujibnagar Upazila, the prevalence is comparatively limited. Only 3 percent of households reported water logging, against 12 percent who did not. While the overall numbers appear lower, even localized incidents of water logging may compound vulnerabilities in poorer settlements where recovery capacity is limited.

Taken together, these findings show that 32 percent of surveyed households across the district confirmed exposure to water logging, whereas 68 percent did not. This indicates that while the majority are not directly affected, the scale of impact, particularly in Meherpur Sadar and Gangni, requires targeted interventions. Improving drainage systems, promoting climate-resilient settlement planning, and addressing seasonal flooding risks will be critical to reducing the district's exposure to this hazard.

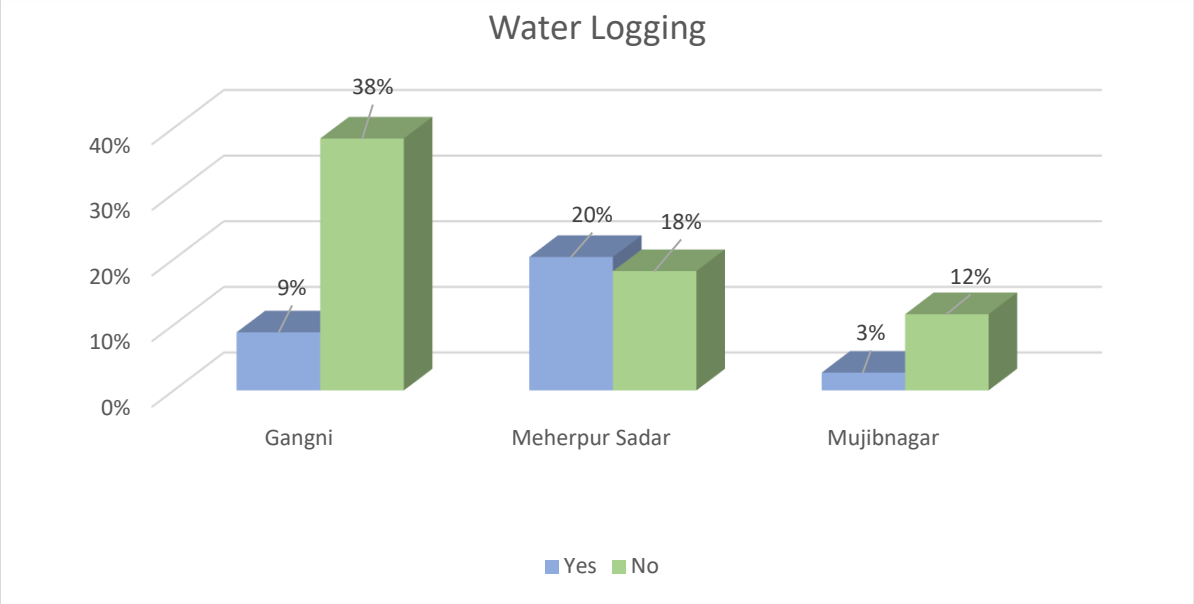


Figure 24: : Household incidence of water logging in Gangni, Meherpur Sadar, and Mujibnagar Upazilas

In Gangni Upazila, the distribution of waterlogging varies widely across unions and wards. The most affected area is Tentulbaria Union, where 6.2 percent of households reported waterlogging. This indicates structural drainage challenges and vulnerability to seasonal rainfall in the union. Kathuli Union also experiences a high share of waterlogging, with 4.8 percent of households affected. Moderate levels are seen in Raypur Union (2.3%) and Dhankhola Union (1.9%), suggesting localized drainage bottlenecks.

Other unions such as Matmura (1.2%) and Shaharbati (0.2%) reported relatively lower incidences, while Bamandi and Sholotaka (0.8% and 0.2%) show very minimal exposure. Among the wards of Gangni Paurashava, Ward No. 2 (2.9%) and Ward No. 8 (2.5%) report noticeable waterlogging, whereas Ward Nos. 3, 5, and 9 did not report any problem. Overall, Gangni presents a mixed picture, with some unions and wards experiencing significant challenges, while others remain largely unaffected.

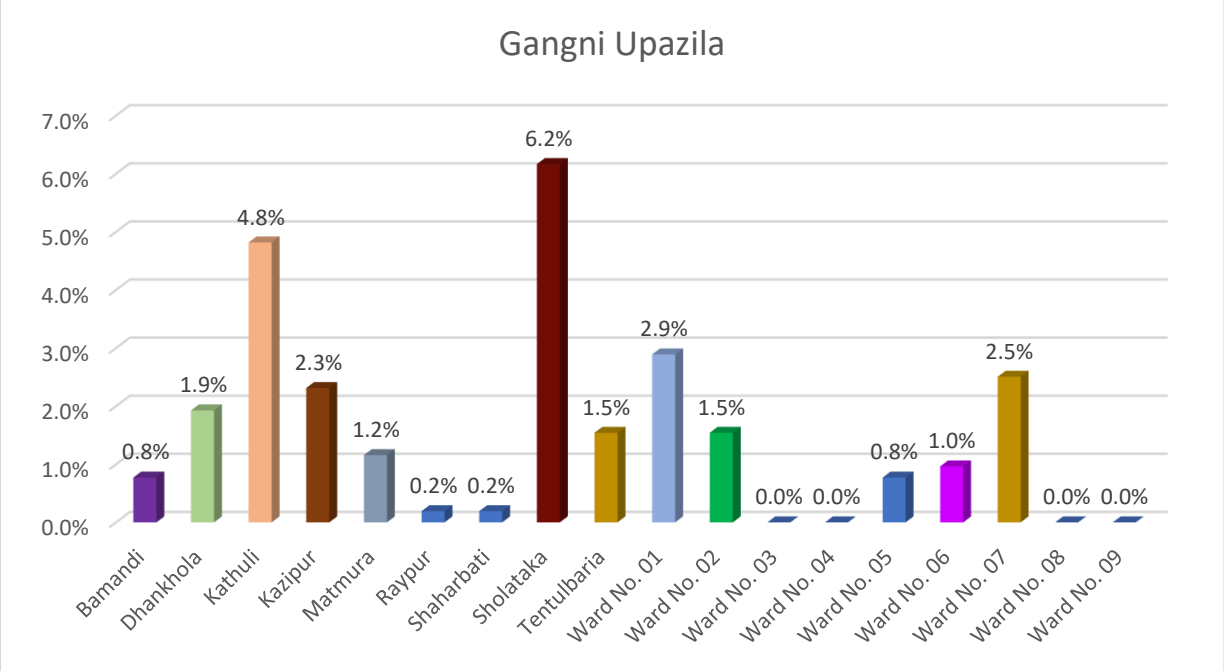


Figure 24: Waterlogging incidence by union and ward in Gangni Upazila

Meherpur Sadar demonstrates more intense waterlogging compared to Gangni. Amjhupi Union (10.6%) and Kutubpur Union (10.2%) are the most affected, marking them as critical hotspots in the district. Buripota Union (9.4%) and Baraiband Union (6.4%) also report significant levels, underscoring a concentration of problems in these semi-urban and peri-urban areas. The high incidence suggests both inadequate drainage and the impact of urban expansion without sufficient water management infrastructure.

Pirojpur Union (7.3%) and Monakhali Union (2.5%) add to the list of affected areas, while Amdah Union (0.0%) shows no reported waterlogging, highlighting localized resilience. Within Meherpur Paurashava, Ward No. 5 (4.6%) is the most affected, followed by Ward No. 9 (2.9%) and several other wards such as Ward Nos. 2, 4, 6, and 8 with smaller shares (1.2%–2.5%). On the other hand, Ward Nos. 3 and 7 did not report any issue. This uneven pattern indicates that waterlogging is clustered in particular low-lying zones rather than being evenly distributed across the Sadar.

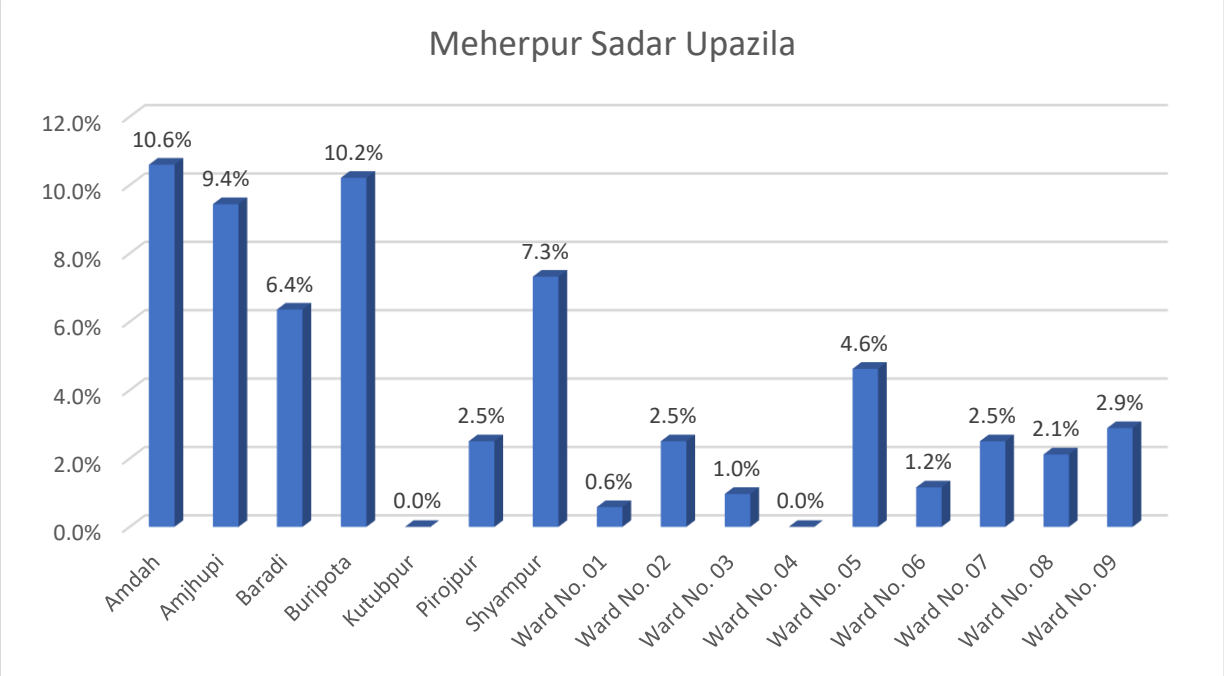


Figure 25: Waterlogging incidence by union and ward in Meherpur Sadar Upazila

Mujibnagar Upazila experiences the lowest district-wide incidence of waterlogging, but still shows notable localized challenges. Mahajanpur Union emerges as the most affected, with 4.0 percent of households reporting waterlogging. Monakhali Union (2.3%) and Bagowan Union (2.1%) also reflect moderate levels, while Dariapur Union reported no waterlogging at all. Compared to the other upazilas, Mujibnagar faces fewer cases overall, but the presence of affected unions indicates that specific low-lying settlements remain vulnerable.

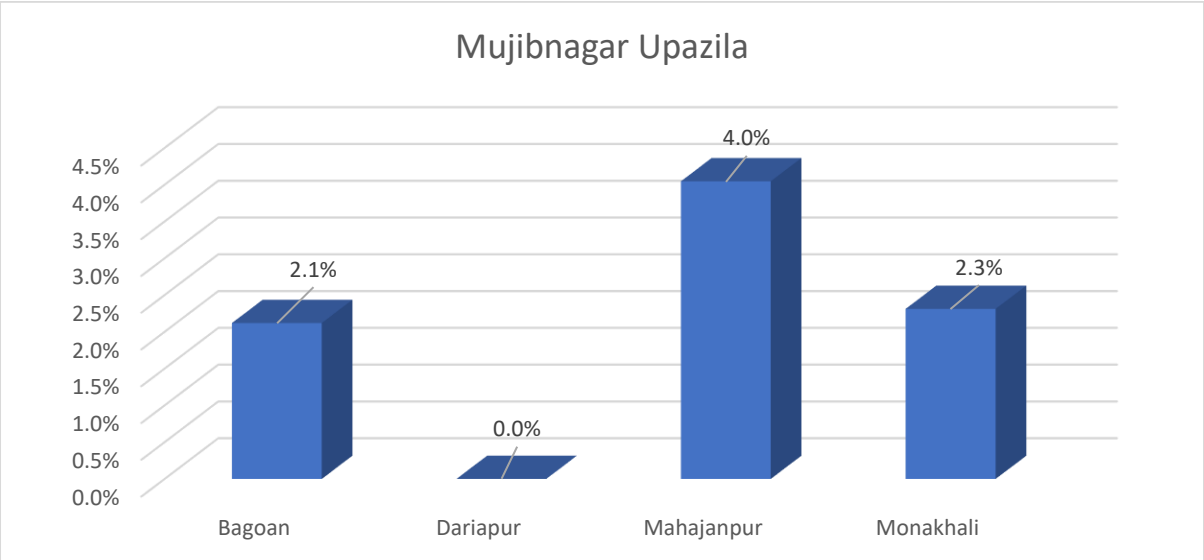


Figure 26: Waterlogging incidence by union and ward in Mujibnagar Upazila

5.2 Livelihood Context & Demographics of Gangni Upazila

5.2.1 Demographis

5.2.1.1 Population Pyramid

The population pyramid of Gangni Upazila exhibits an expansive structure characterized by a broad base and steady tapering toward older age groups. A high proportion of the population falls within the 0–19-year age range, indicative of high fertility and a youthful population. The gender distribution remains balanced across most age groups, with a marginal predominance of females in the older cohorts, consistent with national longevity trends. This demographic structure implies a high dependency ratio and signals increasing demand for educational facilities and maternal-child healthcare in the short term. In the medium term, the large youth population will require employment opportunities and vocational training. Long-term planning should account for the eventual aging of the current youth bulge, necessitating investments in geriatric care and social support systems.

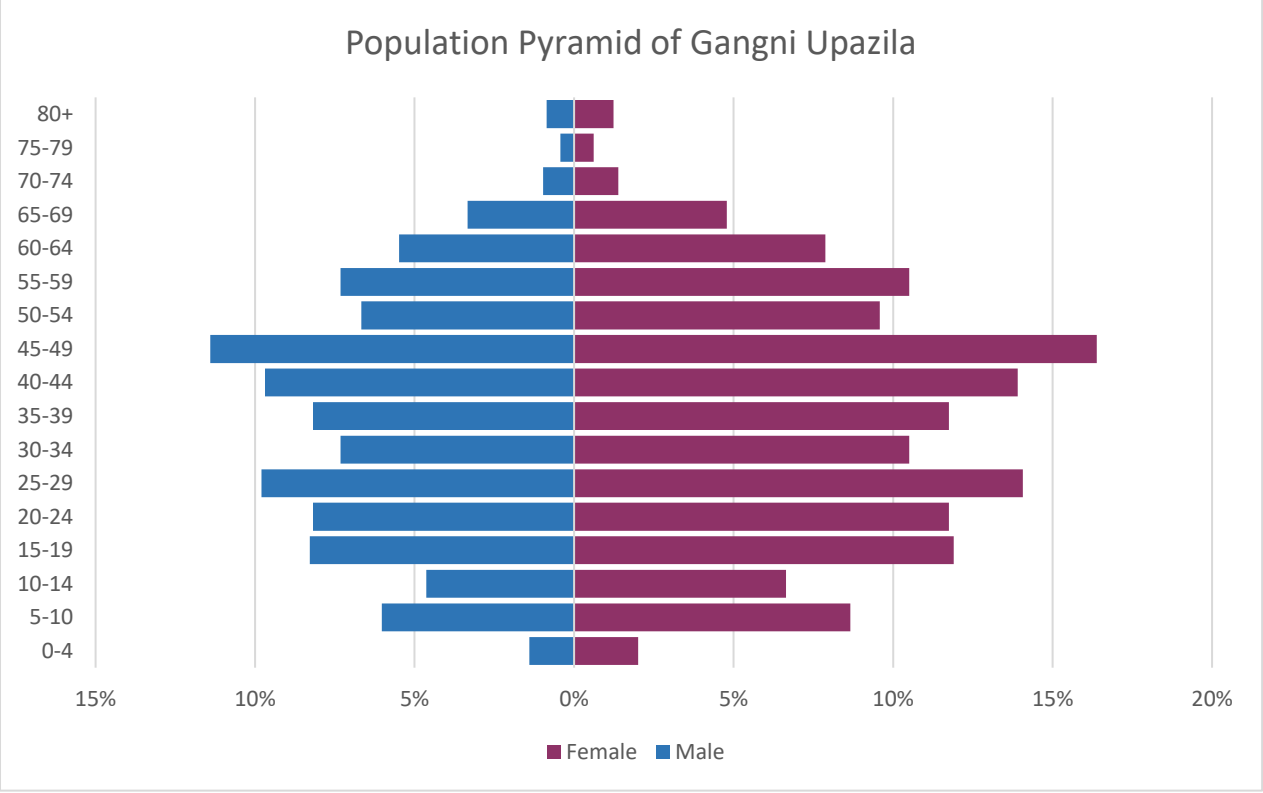


Figure 27: Population Pyramid of Gangni Upazila

5.2.1.2 Household Heads

The pie chart titled "Gender Distribution of Household Heads" reveals a pronounced gender imbalance in household leadership within Gangni Upazila. According to the data, 95% of households are headed by males, while only 5% are headed by females. This considerable disparity reflects the continued prevalence of traditional gender roles, where men are typically recognized as the primary decision-makers and legal heads of households.

However, the presence of female-headed households, though comparatively small, is a meaningful indicator of evolving social dynamics. Factors such as widowhood, male outmigration for work, female economic participation, or broader shifts in societal norms may contribute to this emerging trend. Recognizing and supporting female-headed households is essential for promoting inclusive planning and ensuring equitable access to social and economic resources.

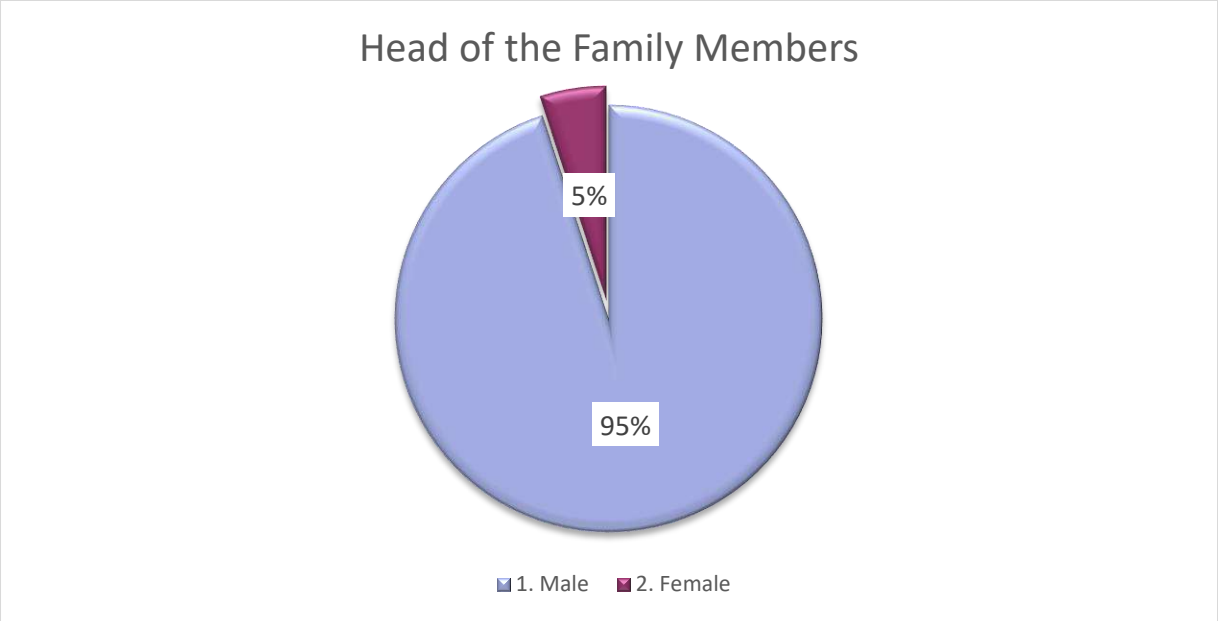


Figure 28: Head of the family of Gangni Upazila

Table 4: Head of the Family

SL No.	Catagories	Frequency	Percentage (%)
1	Male	703	95%
2	Female	37	5%

Source: Field Survey, 2025

5.2.1.3 Family Structure

The family type distribution in Gangni Upazila (Meherpur Paurashava) indicates that the majority of households (86%) are single-family units, while 14% of households are joint families. This distribution suggests a growing inclination towards nuclear family arrangements, although the presence of a significant proportion of joint families reflects that extended family traditions remain important in the socio-cultural fabric of the area.

Single-family households, consisting mainly of parents and dependent children, are often associated with socio-economic modernization, urbanization, and changing lifestyles (Goode, 1963). These households tend to require greater numbers of separate housing units and place different demands on local infrastructure and social services. Conversely, joint families, where multiple generations or extended relatives live together, emphasize collective living and resource sharing (Shah, 1998). Their continued prevalence highlights the role of intergenerational support, particularly in caregiving, income pooling, and maintaining social cohesion.

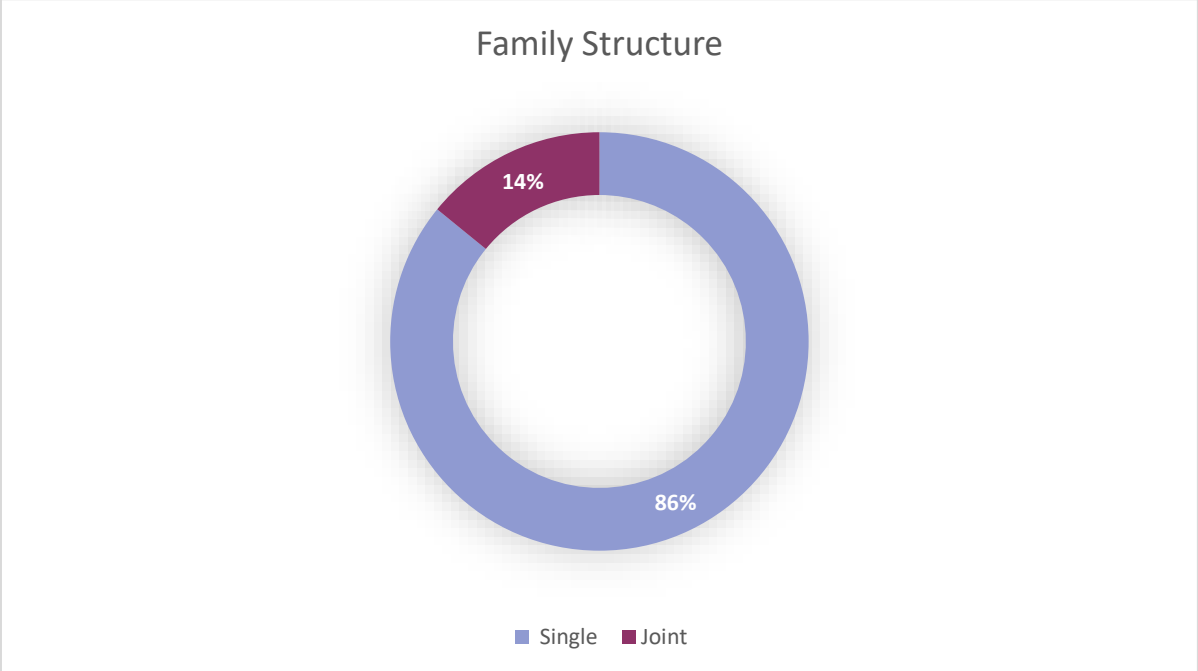


Figure 29: Family Structure of Gangni Upazila

Table 8: Family Structure of Meherpur Paurashava

SL No.	Catagories	Frequency	Percentage (%)
1	Single	669	86%
2	Joint	110	14%

Source: Field Survey, 2025

5.2.1.4 Religious Affiliation

The religious composition of Gangni Upazila, as presented in Figure 26 and Table 8, reveals that Muslims constitute the overwhelming majority at 97.2% of the population. Hindus account for 1.3%, Christians for 1.5%, while no Buddhist population is reported.

This high level of religious homogeneity reflects the cultural and demographic characteristics of the upazila. Nevertheless, the presence of minority communities, though small in percentage, calls for inclusive development approaches that ensure equitable access to religious facilities, cultural events, social services, and representation in local decision-making.

By fostering interfaith harmony and ensuring that the needs of all religious groups are addressed alongside those of the majority, local governance in Gangni Upazila can strengthen social cohesion and promote an inclusive environment for all residents.

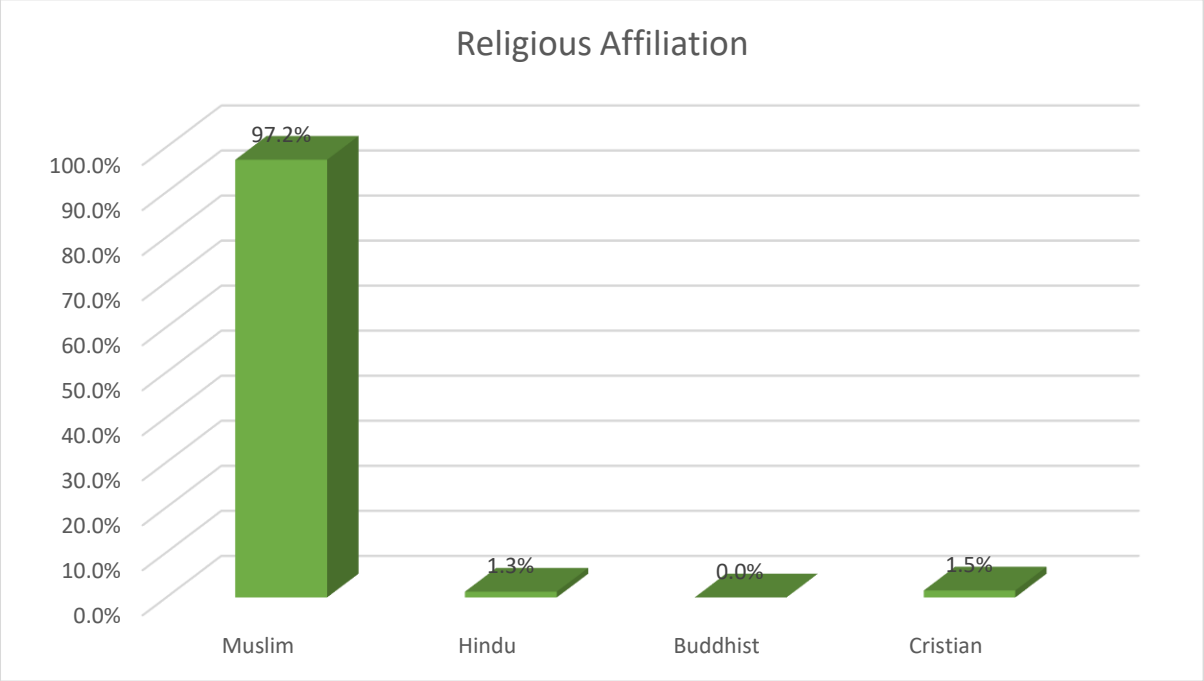


Figure 30: Religious Affiliation og Gangni Upazila

Table 9: Religious Affiliation og Gangni Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Muslim	758	97.2%
2	Hindu	10	1.3%
3	Buddhist	0	0.0%
4	Cristian	12	1.5%

5.2.2 Education

The pie chart on educated family members reveals a skewed distribution in Gangni Upazila. While 36.5% of families report two educated members, and 28.8% have only one, a concerning 17.5% of households have no educated members at all. Higher levels of household education are notably rare, just 9.2% of families have three educated members, and the numbers drop further to 6.8% for four, 1.0% for five, and a mere 0.3% for six.

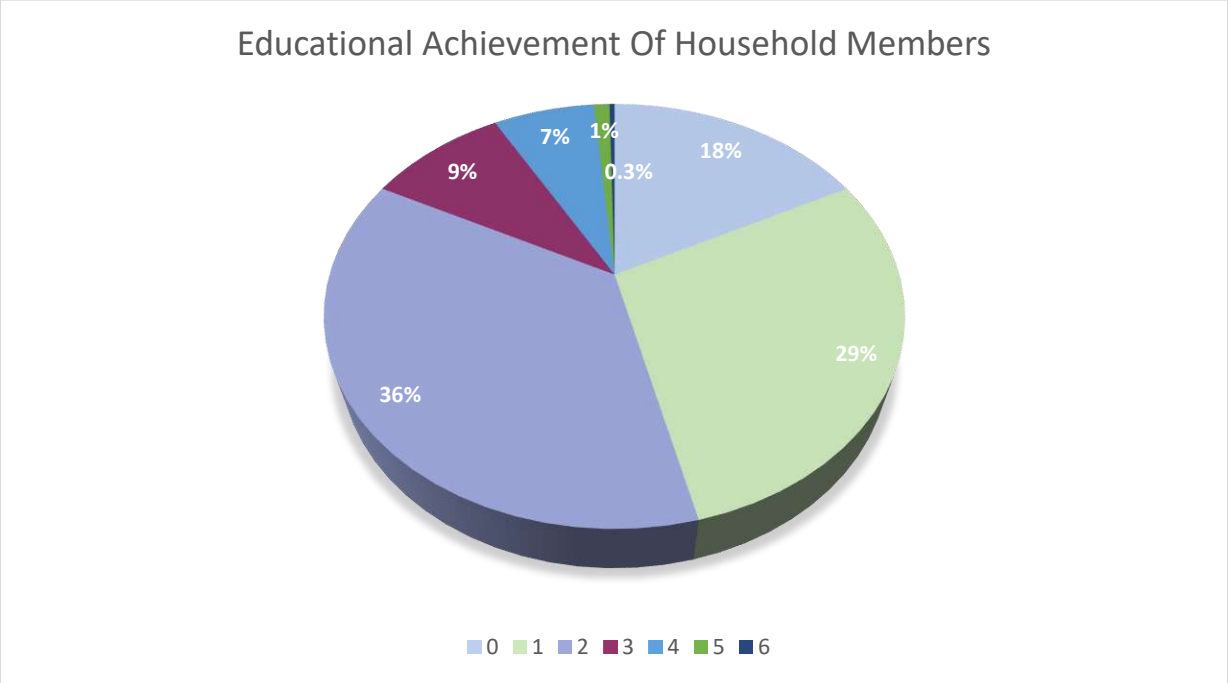


Figure 31: Educational Achievement of Adult (18+) Household Members of Gangni Upazila

Table 5: Educational Achievement of Adult (18+) Household Members

SL No.	Catagories (Member N)	Frequency	Percentage (%)
1	0	100	17.5%
2	1	165	28.8%
3	2	209	36.5%
4	3	53	9.2%
5	4	39	6.8%
6	5	6	1.0%
7	6	2	0.3%

Source: Field Survey, 2025

5.2.3 Health

The distribution of healthcare services across unions and wards in Gangni Upazila, as presented in Figure 34, highlights considerable variation in the number of reported facilities, particularly in community clinics, hospitals, and maternity centers.

Community clinics are the most widely available type of healthcare service in Gangni. The highest numbers are observed in Sholotaka (60 households), followed by Kazipur (45), Raypur (48), and Tentulbaria (42). These figures suggest a strong presence of primary healthcare facilities in those areas. In contrast, unions like Matmura (7), Pirojpur (11), and Dhankhola (17) report relatively low numbers, indicating service delivery gaps in primary care that may affect timely access to treatment.

Hospital services are significantly less widespread. The most reported availability is again concentrated in Sholotaka (35), Kazipur (32), and Tentulbaria (28). However, several unions such as Matmura (1), Bamondi (9), and Dhankhola (9) show minimal hospital access, which raises concerns about emergency care availability and referral systems in rural parts of the upazila.

Maternity centers, which are critical for ensuring maternal and child health, also show uneven availability. Ward No. 02 and Ward No. 09 each reported 29 instances of access to maternity centers, followed by Sholotaka (27) and several wards (e.g., Ward No. 06 and 08) with around 17–20 reported cases. On the other hand, Matmura (7) and Pirojpur (9) once again reflect low service presence in this category.

The findings underscore a clear pattern: while some unions like Sholotaka, Kazipur, and Tentulbaria are relatively well-served across all three types of facilities, other areas especially Matmura, Pirojpur, and Dhankhola, consistently report lower numbers across all healthcare service categories.

To address these intra-upazila disparities, targeted expansion of health infrastructure particularly hospitals and maternity centers should be prioritized in the under-served areas. Furthermore, regular monitoring and needs-based planning can help ensure that health resources are distributed equitably across all unions and wards of Gangni Upazila.

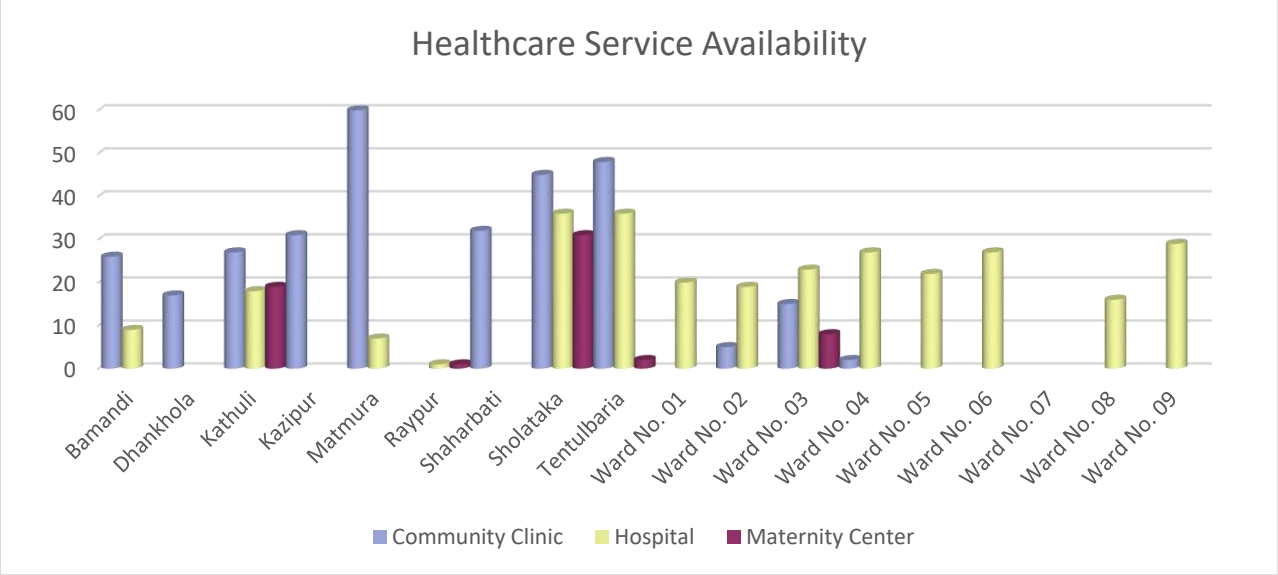


Figure 32: Healthcare Service Availability in Gangni Upazila

5.2.4 Physical Capital

5.2.4.1 Housing

The latest survey results show that Pucca houses now account for 50% of all dwellings, a remarkable increase from 15.1% in the BBS 2011 Census. This significant jump of nearly 35 percentage points indicates rapid structural upgrading and improved living standards over the past decade. Semi-Pucca houses currently stand at 34%, which is lower than the 42.2% recorded in 2011. This reduction suggests that a portion of semi-permanent dwellings has been upgraded into fully permanent Pucca houses.

Meanwhile, Kacha houses have declined sharply from 39.8% in 2011 to only 16% at present. This shift reflects notable progress in reducing vulnerable housing constructed with temporary materials, likely due to targeted housing schemes, household investment, and economic growth in the area.

Overall, compared to 2011, Gangni Upazila has undergone a substantial transformation in housing quality, with Pucca dwellings tripling in proportion, Semi-Pucca decreasing moderately, and Kacha houses reduced by more than half. This pattern highlights strong upward mobility in housing conditions and infrastructural development.

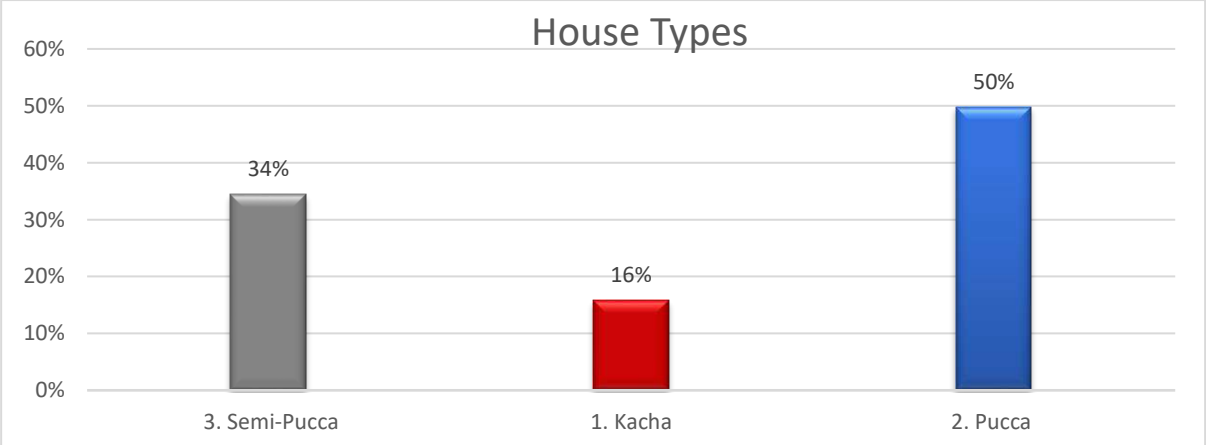


Figure 33: Distribution of House Types of Gangni Upozila

Table 10: House Type

SL No.	Catagories	Frequency	Percentage (%)
1	Semi-Pucca	254	34%
2	Kacha	117	16%
3	Pucca	368	50%

Source: Field Survey, 2025

5.2.4.2 Ownership of the Houses

In Gangni Upazila, homeownership appears to be nearly universal. As depicted in the bar chart titled "Ownership of the House," a striking 97% of surveyed households report owning their homes, while only 3% live in rented dwellings.

This pattern reflects a deeply rooted tradition of property ownership, likely influenced by factors such as intergenerational land transfer, rural land availability, and a cultural emphasis on long-term settlement. The minimal presence of rental housing suggests limited market dependency for accommodation and implies a community with strong attachment to place, stability in residency, and a potentially lower degree of migration or housing insecurity. This ownership structure can be seen as a strength for social cohesion, though it also highlights a limited rental market that may affect housing accessibility for transient or landless populations.

This pattern indicates that while education is reaching households, it often does not extend widely within them. The data suggests an urgent need to scale up access to education, with an emphasis on multi-member literacy within families to build long-term social equity and community resilience.

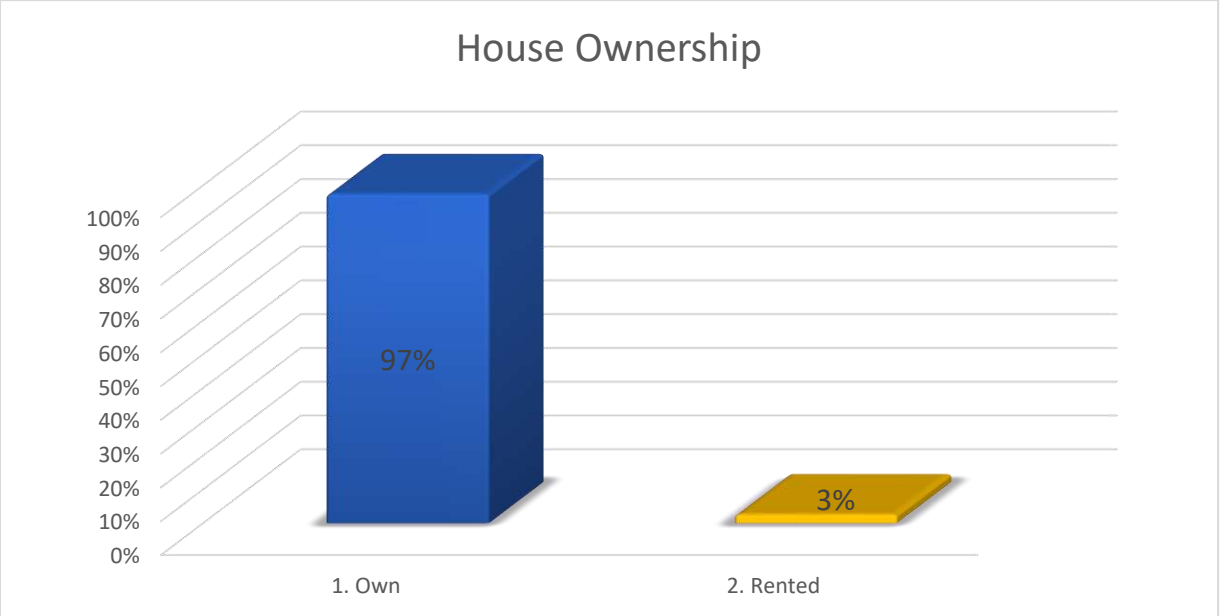


Figure 34: Ownership of Houses of Gangni Upazila

Table 11: House ownership

SL No.	Catagories	Frequency	Percentage (%)
1	Own	712	97%
2	Rented	19	3%

Source: Field Survey, 2025

5.2.4.3 Transportation Mode

The transportation system in Gangni Upazila reflects a strong dependence on non-motorized and localized travel modes, with walking and informal transport options dominating daily mobility. The modal split highlights a relatively low share of formal motorized public transport, emphasizing the rural settlement context of the upazila.

Transportation Modes Usage: The bar chart presents the percentage distribution of daily transportation modes:

- Walking is the leading mode, accounting for 37.4% of all trips. This reflects the localized nature of trips within villages and markets, where most destinations are accessible by foot.
- Vans hold the second-largest share at 18.5%, serving as crucial short-distance transport for goods and passengers, particularly in areas with limited road infrastructure.
- Cycles (16.4%) and motorcycles (14.5%) together account for nearly one-third of trips. Cycles remain affordable and widely available, while motorcycles provide flexible and fast transport, often used by households managing both rural farming and urban work responsibilities.
- Rickshaws contribute 9.9%, playing an important role in connecting households to local markets and schools, especially for short-distance, intra-village travel.
- Motorized four-wheel modes remain minimal, with cars (0.5%), buses (2.5%), and microbuses (0.2%) together comprising less than 4% of daily trips. This indicates limited penetration of formal public transport services and private vehicle ownership.

The findings highlight that daily mobility in Gangni Upazila is predominantly non-motorized, localized, and dependent on informal modes, consistent with the rural and semi-urban settlement structure of the area.

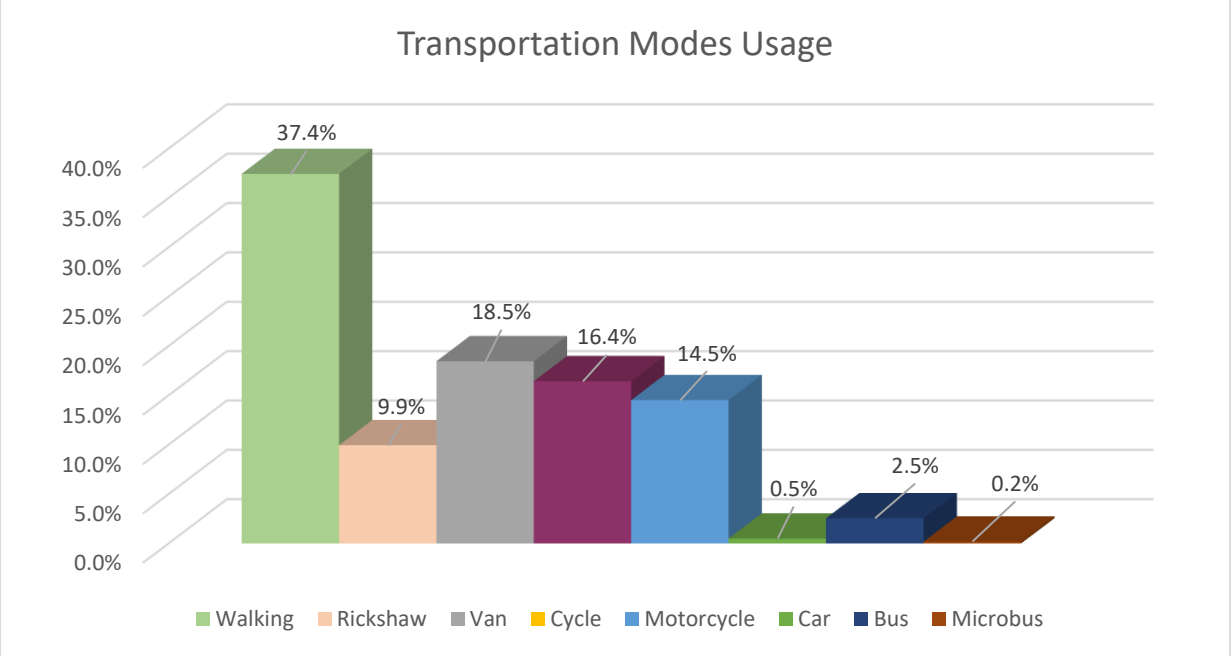


Figure 35: Transportation Modes Usage in Gangni Upazila

5.2.5 Financial Capital

5.2.5.1 Income

The bar chart displays the distribution of families based on their monthly income levels. The largest portion of families, 37%, falls within the income range of 10,000–20,000, indicating that nearly one-third of the population earns a modest income. This is followed by 34% of families earning between 21,000–30,000, and 9% and 6% earning less than 10,000 and more than 40000 respectively, and 15% of families earning between 30,000–40,000**.**

The data reflects a concentration of families in the lower to mid-income ranges, highlighting potential economic challenges and a need for targeted support to improve income levels in the community

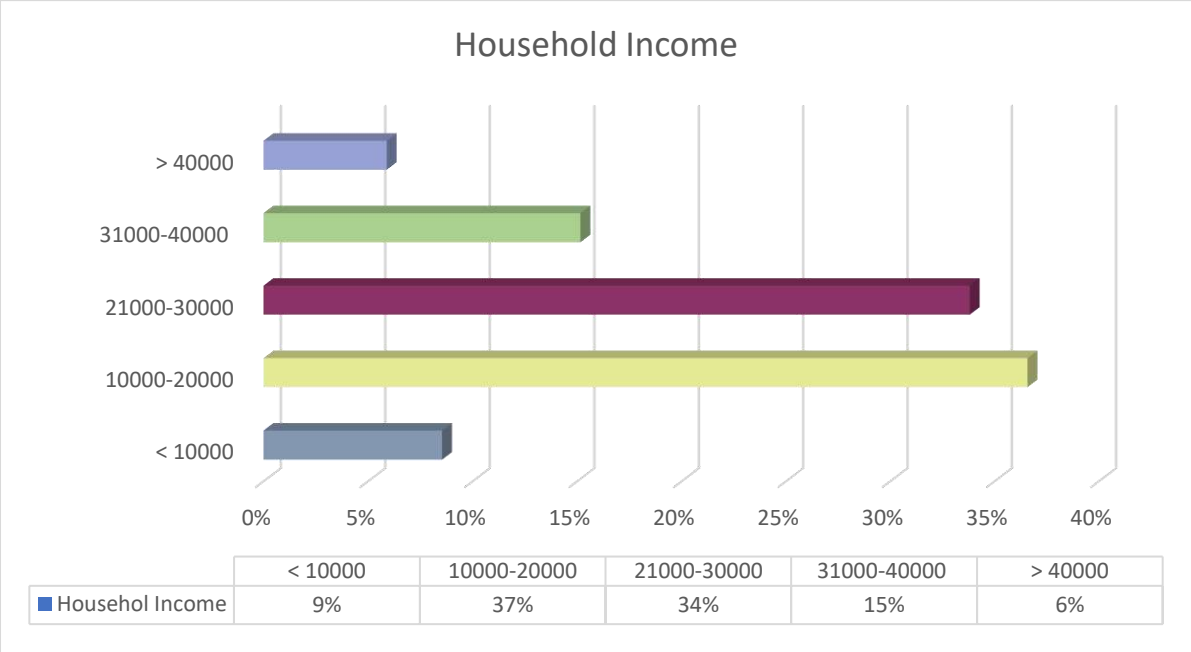


Figure 36: Income of the family of Gangni Upazila

Table 6: Income of the Household

SL No.	Categories (Tk)	Frequency	Percentage (%)
1	< 10000	71	9%
2	10000-20000	304	37%
3	21000-30000	281	34%
4	31000-40000	126	15%
5	> 40000	49	6%

Source: Field Survey, 2025

5.2.5.2 Expenditure

The bar chart titled "Expenditure" illustrates the distribution of families based on their monthly household spending. The largest group, comprising 32% of families, has more than 20,000 units of currency per month. Following this, 25% of families fall into the 11000-15000 expenditure range, and 22% spend between 16000 and 20,000. A smaller share, 17%, report spending 5000-10000 expenditure range, while only 1% of families spend less than 5,000 monthly. The chart suggest that most families have moderate monthly expenditures.

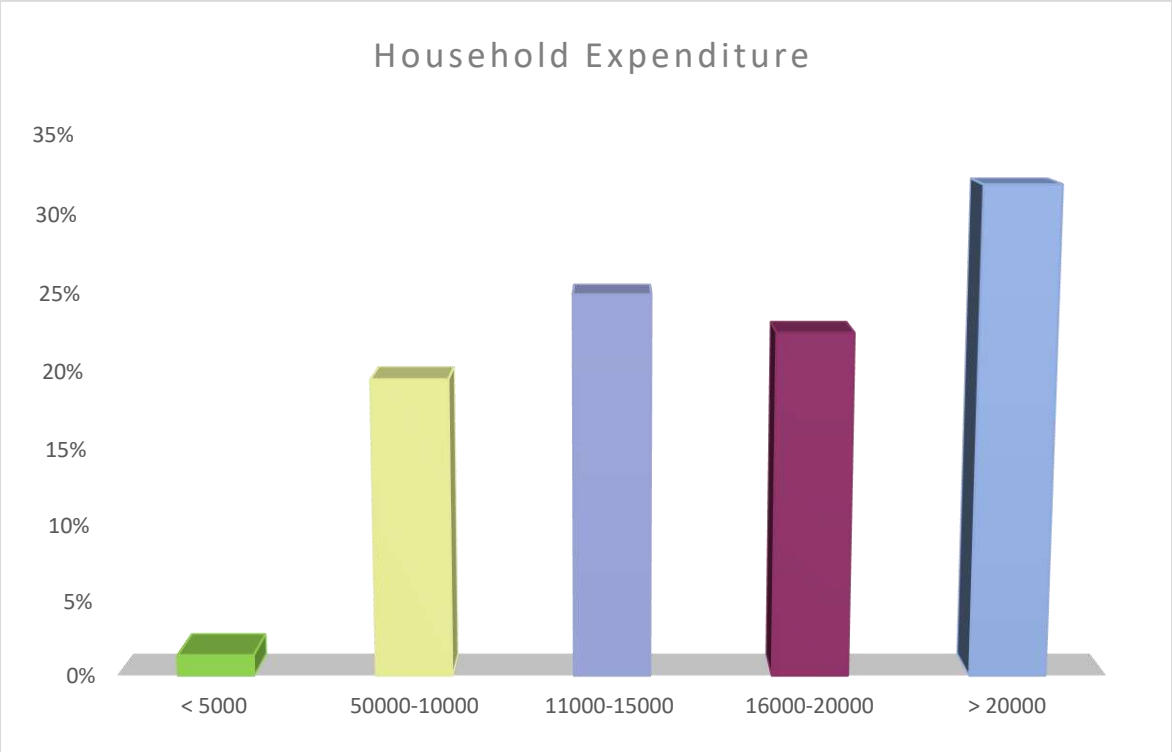


Figure 37: Expenditure of the family of Gangni Upazila

Table 7: Expenditure of the Family

SL No.	Categories	Frequency	Percentage (%)
1	< 5000	10	1%
2	5000-10000	144	19%
3	11000-15000	184	25%
4	16000-20000	166	22%
5	> 20000	235	32%

Source: Field Survey, 2025

5.2.5.3 Savings

The pie chart illustrates the distribution of household savings across different savings brackets. A significant portion of households, 49%, have savings of less than 500 units, making it the largest group. The second largest group comprises 29% of households with savings between 500 to 1000 units. Households with savings ranging from 1100 to 1500 units account for 11%, while another 11% of households have savings of more than 1500 units.

The chart highlights that nearly half of the households fall into the lowest savings category, indicating a relatively low level of savings across the majority of households.

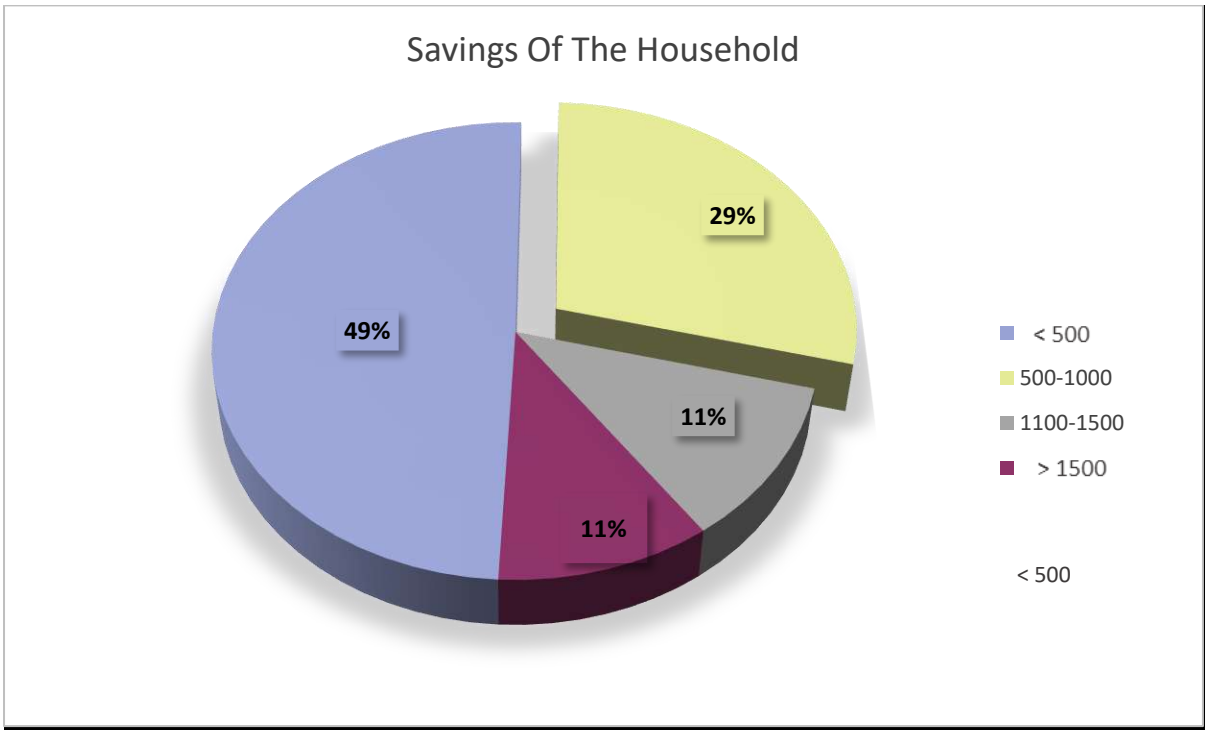


Figure 38: Savings of the family of Gangni Upazila

Table 8: Savings of the family

SL No.	Categories	Frequency	Percentage (%)
1	< 500	10	49%
2	500-1000	144	29%
3	1100-1500	184	11%
4	> 1500	166	11%

Source: Field Survey, 2025

5.3 Livelihood Context & Demographics of Gangni Paurashava

5.3.1 Demographis

5.3.1.1 Population Pyramid

The population pyramid of Gangni Paurashava displays a constrictive structure, characterized by a narrower base, bulging middle age groups, and gradual tapering at older ages. Unlike the expansive rural profile, this pattern reflects lower fertility rates and a stabilized urban growth trend.

The highest proportions are observed in the 30–34 and 35–39 age groups, especially among females, indicating a strong urban working-age population. The younger cohorts (0–14 years) appear comparatively smaller, which points to reduced birth rates typical of urban settings.

The gender distribution remains relatively balanced across most age groups, though females slightly outnumber males in older cohorts (60+), which is consistent with national longevity trends.

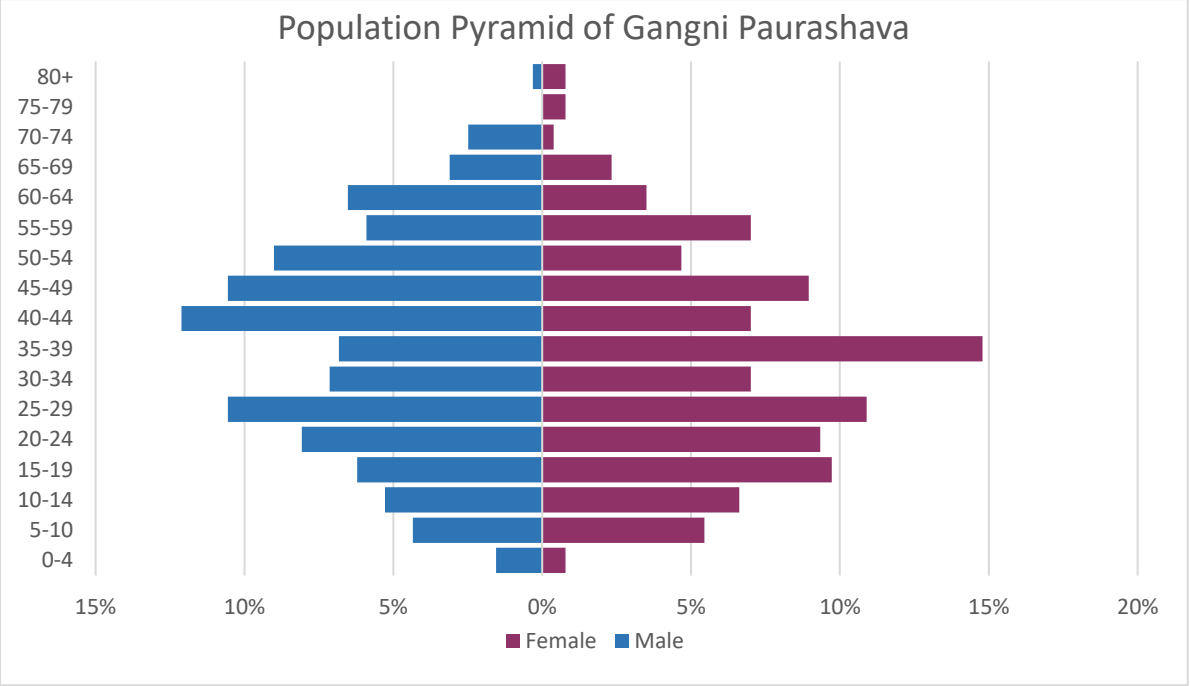


Figure 39: Population Pyramid of Gangni Paurashava

This urban demographic pattern implies a lower dependency ratio in the short term but signals emerging needs in areas such as employment generation, urban housing, and healthcare access for aging populations. Long-term planning will require increased attention to senior citizen services, urban healthcare infrastructure, and inclusive social protection systems to address the demographic shift already underway in Gangni Paurashava.

5.3.1.2 Household Heads

The pie chart titled "Head of the Family Members of Gangni Paurashava" shows a clear gender imbalance in household leadership. According to the data, 92.2% of households are headed by males, while only 7.8% are headed by females. This distribution reflects the continued dominance of traditional gender norms, where men are predominantly viewed as the primary decision-makers and legal representatives of households.

Despite the relatively low proportion of female-headed households, their presence remains an important indicator of changing social dynamics. Factors such as widowhood, male outmigration, increased female economic participation, or shifting societal norms may contribute to this emerging pattern. Recognizing and addressing the unique needs of female-headed households is vital for ensuring inclusive urban governance, promoting equitable resource allocation, and strengthening social protection frameworks in Gangni Paurashava.

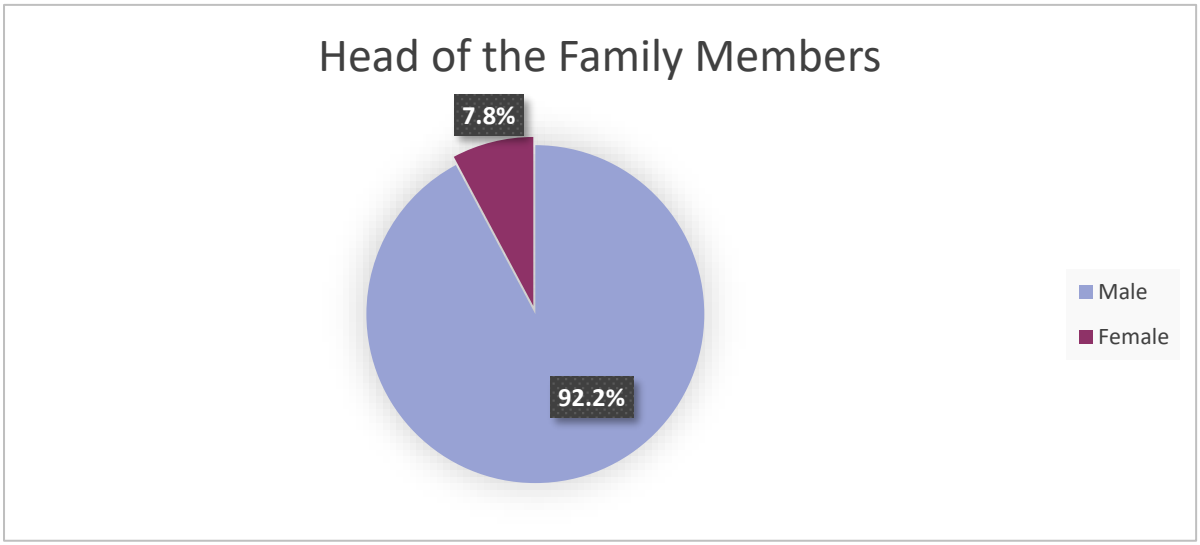


Figure 40: Head of the Family Members of Gangni Paurashava

Table 13: Head of the Family Members

SL No.	Categories	Frequency	Percentage (%)
1	Male	201	92.2%
2	Female	17	7.8%

Source: Field Survey, 2025

The largest proportion of household heads are in the 31–40 (34.6%) and 21–30 (26.6%) age groups, followed by 41–50 (23.4%). This demographic pattern indicates a relatively young and economically active population. Planners should focus on employment generation, skill training, and long-term housing and mobility services for a youthful urban base.

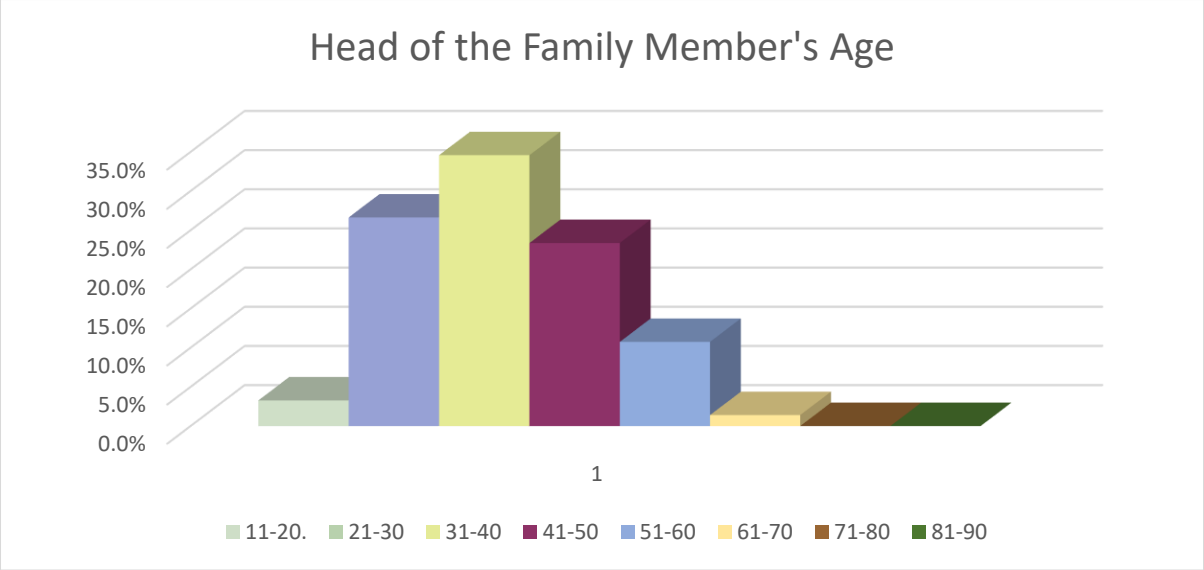


Table 14: Head of the Family Member's age

SL No.	Categories (Age)	Frequency	Percentage (%)
1	11-20.	7	3.3%
2	21-30	57	26.6%
3	31-40	74	34.6%
4	41-50	50	23.4%
5	51-60	23	10.7%
6	61-70	3	1.4%
7	71-80	0	0.0%
8	81-90	0	0.0%

Source: Field Survey, 2025

Survey results indicate that the vast majority of household heads in Gangni Paurashava are married, representing 97.0 percent (210 households) of the total sample. Only 2.0 percent (4 households) are unmarried, while 1.0 percent (3 households) are widowed. This distribution suggests a predominantly married household head demographic, which is consistent with socio-cultural norms in the area. The low proportion of unmarried and widowed household heads may have implications for household size, dependency ratios, and social support structures.

Table 12: Head of the Family Member's Marital Status

Categories	N	%
Unmarried	4	2
Married	210	97
Widowed	3	1
Total	217	100.0

Source: Field Survey, 2025

5.3.1.3 Family Structure

W The family type distribution in Gangni Paurashava shows that 90% of households are single-family units, while 10% are joint families. This reflects the strong predominance of nuclear households in the urban context, where modernization, occupational diversification, and space constraints encourage smaller family units.

Single-family households, generally comprising parents and dependent children, represent the dominant arrangement in urban areas due to socio-economic mobility, the desire for privacy, and the increasing cost of maintaining extended family systems (Goode, 1963). These households often create greater demand for independent housing and urban services tailored to smaller family sizes. In contrast, the 10% of joint families that persist in Gangni Paurashava demonstrate the endurance of extended kinship ties, shared resource management, and intergenerational caregiving (Shah, 1998).

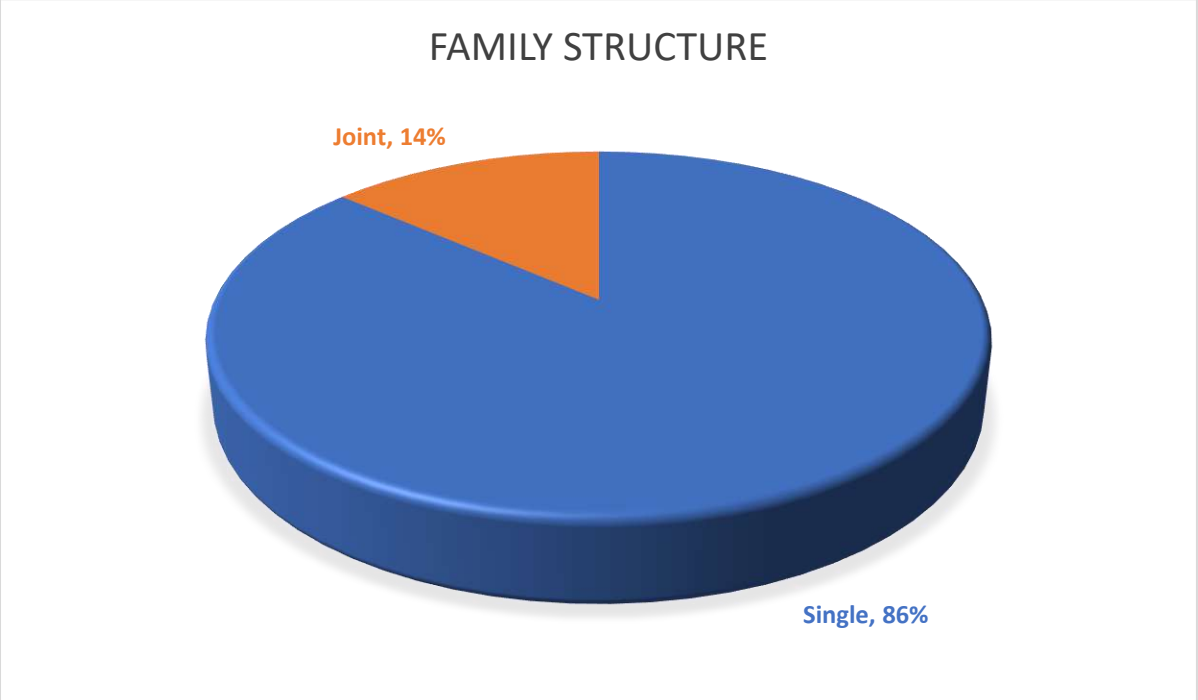


Figure 41: Family Structure of Gangni Paurashava

Table 10: Family Type

SL No.	Categories	Frequency	Percentage (%)
1	Single	195	90
2	Joint	22	10

Source: Field Survey, 2025

The relatively lower share of joint families in this Paurashava compared to rural upazilas suggests a stronger influence of urban living conditions on household patterns. For planning purposes, the dominance of nuclear households necessitates policies to expand housing, education, and employment opportunities, while also ensuring that social safety nets and community-based programs remain accessible for joint families that continue to uphold traditional intergenerational support systems.

5.3.1.3 Housing

The housing pattern of Gangni Paurashava, as illustrated by the field survey of 2025, reflects a predominance of permanent structures, with Pucca houses accounting for 58.9 percent of the total. This indicates a relatively stable and urbanized settlement pattern where a majority of households enjoy durable housing. However, a significant portion of the population still resides in less permanent structures, with 31.5 percent living in Semi-Pucca houses and 9.6 percent in Kacha houses. Together, these categories make up more than 40 percent of the housing stock, highlighting a socio-economic disparity within the urban area. While the dominance of Pucca houses demonstrates progress in housing standards, the persistence of Semi-Pucca and Kacha houses signals the need for targeted interventions in housing improvement and infrastructure development to ensure more equitable living conditions across the municipality.

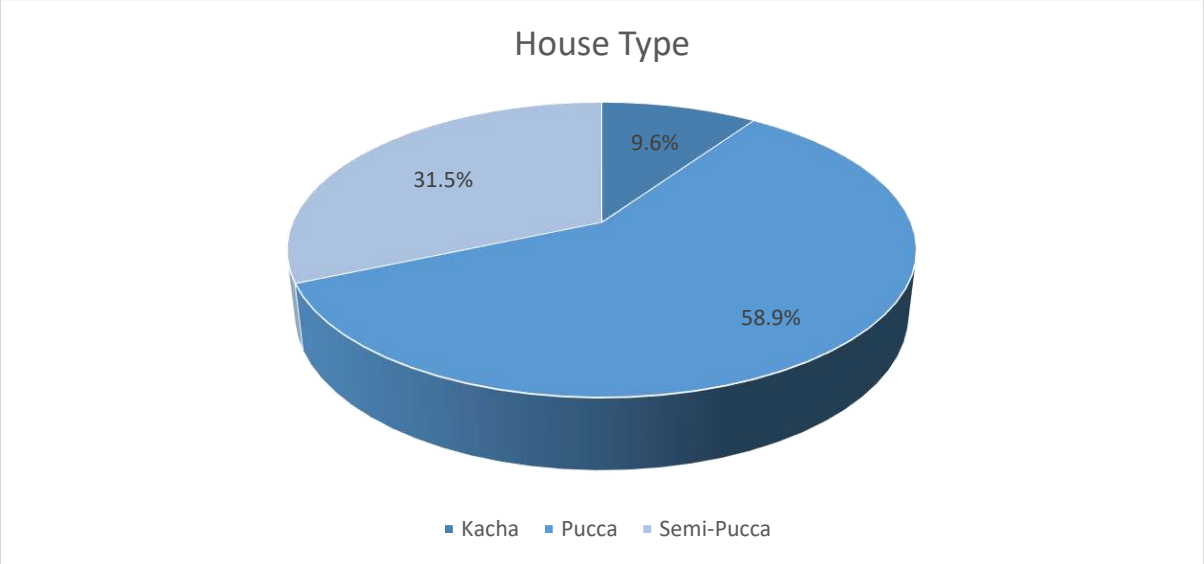


Figure 42: House Type of Gangni Paurashava

Table 11: House Type of Gangni Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Kacha	21	9.6%
2	Pucca	129	58.9%
3	Semi-Pucca	69	31.5%

Source: Field Survey, 2025

5.3.1.1 Religious Affiliation

This bar chart represents the religious composition of households in Gangni Paurashava. The data shows that 96.3% of residents identify as Muslim, 2.7% as Hindu, and 0.9% as Christian. The dominance of a single religion (Muslim) suggests relative cultural homogeneity, yet the presence of minorities, though small warrants culturally sensitive planning. Urban planners should ensure that all religious groups have equitable access to worship facilities, social services, and representation in local governance.

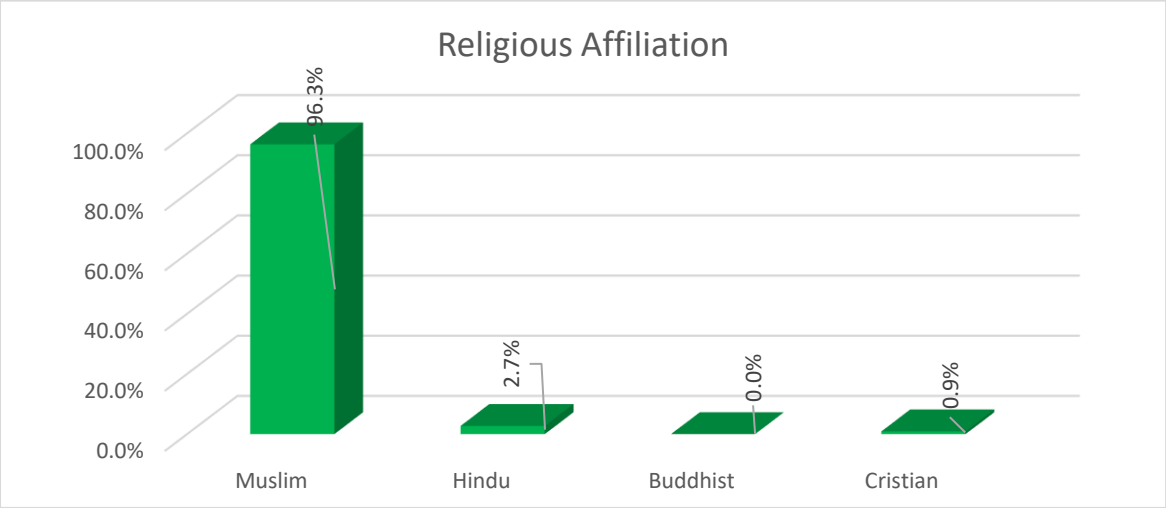


Figure 43: Religious Affiliation of Gangni Paurashava

Table 9: Religious Affiliation of Gangni Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Muslim	223	96.3%
2	Hindu	6	2.7%
3	Buddhist	0	0.0%
4	Cristian	2	0.9%

Source: Field Survey, 2025

5.3.2 Education

The educational profile of household members above the age of 18 in Gangni Paurashava reveals that the majority of families have at least two educated adult members, accounting for 54.4% of the surveyed households. This indicates a relatively strong presence of adult education within urban families.

Households with three educated members comprise 14.0%, followed closely by those with one educated member (13.0%) and four members (11.6%). A smaller proportion of families reported zero educated members (6.0%), highlighting a minority facing significant educational challenges. Very few households had five (0.9%) or six (0.0%) educated members, suggesting that extended adult education beyond two to three members is uncommon. This distribution suggests a moderate level of educational attainment among adult family members in Gangni Paurashava, with a concentration around two to three educated adults per household. The relatively low percentage of households with no educated adults indicates some success in basic adult education outreach, yet the near absence of households with more than four educated members points to limitations in multi-generational or higher-level educational attainment.

The findings highlight the importance of policies that support continued education and lifelong learning pathways, particularly for youth transitioning into adulthood and for women re-entering education or the workforce. Strengthening adult literacy programs, evening education schemes, and technical/vocational training access can further uplift the educational landscape and economic productivity of urban communities like Gangni Paurashava.

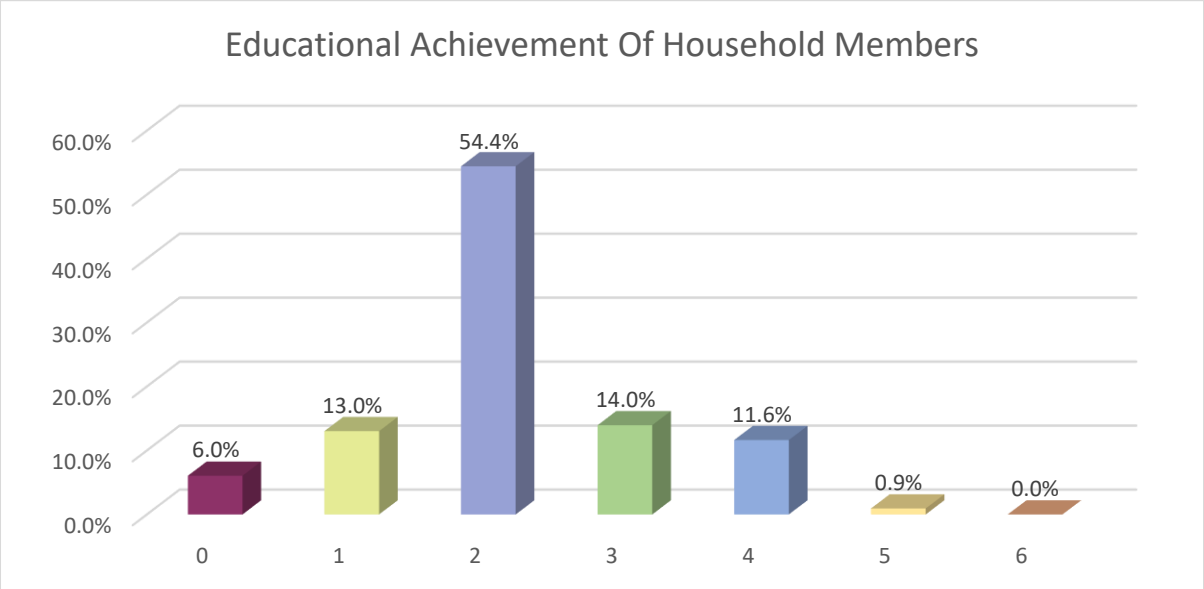


Figure 44: Educational Achievement of Adult (18+) Household Members of Gangni Paurashava

5.3.3 Health

The distribution of healthcare services across the wards of Gangni Paurashava, as illustrated in Figure 42, reveals a generally balanced presence of community clinics, hospitals, and maternity centers, with some variation between wards.

Community clinics are most available in Wards No. 04, 06, and 07, each reporting around 27 facilities, reflecting a strong provision of primary healthcare in these areas. Lower counts are observed in Ward No. 08 (17) and Ward No. 05 (21), suggesting potential service gaps in these locations.

Hospital availability follows a similar trend, with Wards No. 02, 04, and 06 leading at 26–27 facilities. Ward No. 08 again reports the lowest count (18), indicating reduced access to secondary healthcare services in this ward.

Maternity centers, vital for maternal and child health, show their highest counts in Wards No. 04, 06, and 09 (27–28 facilities). The lowest availability is again recorded in Ward No. 08 (18), consistent with its lower counts in the other two categories.

Overall, the data shows that Wards No. 04, 06, and 09 maintain strong healthcare service coverage across all categories, while Ward No. 08 consistently records the lowest availability. Addressing these disparities through targeted health infrastructure investments, particularly in under-served wards, would help ensure more equitable access to essential healthcare services in Gangni Paurashava.

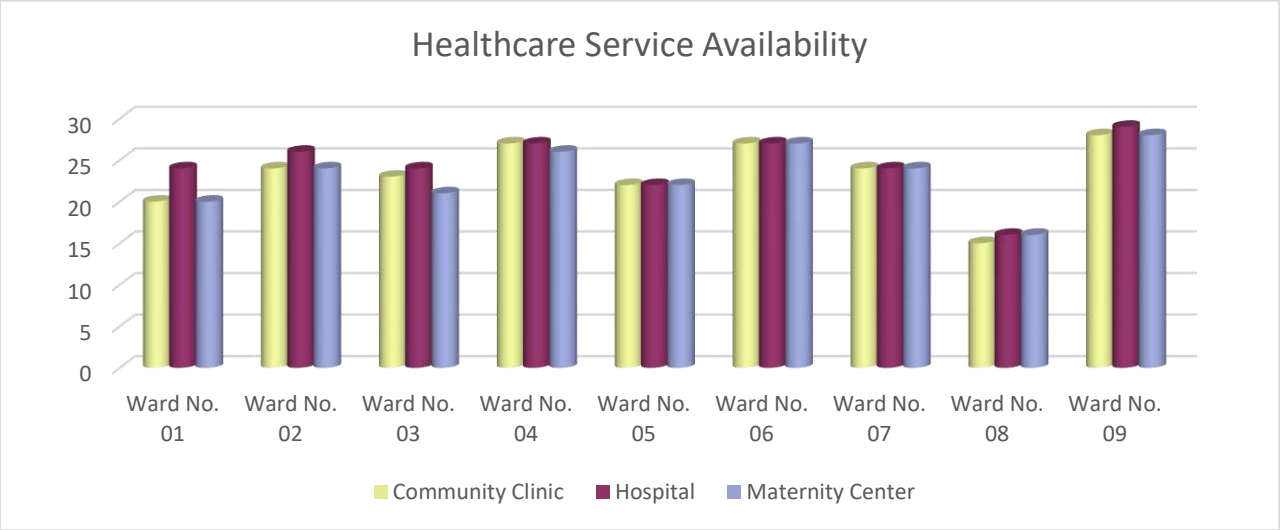


Figure 45: Healthcare Service Availability of Gangni Paurashava

5.3.4 Physical Capital

5.3.4.1 Housing

The recent survey shows that Pucca houses have increased to 58.9% from 28.6% in the BBS 2011 Census, a rise of over 30 percentage points. This indicates substantial improvement in permanent housing, reflecting better economic conditions, access to durable building materials, and investment in infrastructure.

Semi-Pucca houses have decreased sharply from 52.1% in 2011 to 31.5% at present. This significant reduction suggests that many semi-permanent structures have been upgraded to fully permanent Pucca houses.

Kacha houses have also declined from 17.6% in 2011 to 9.6% currently, showing progress in reducing structurally vulnerable dwellings made from temporary materials such as bamboo, mud, and thatch.

Overall, compared to 2011, Gangni Paurashava has seen a major shift towards more durable and resilient housing. The Pucca category has more than doubled in share, while both Semi-Pucca and Kacha categories have decreased notably, reflecting sustained socio-economic and infrastructural development in the municipality.

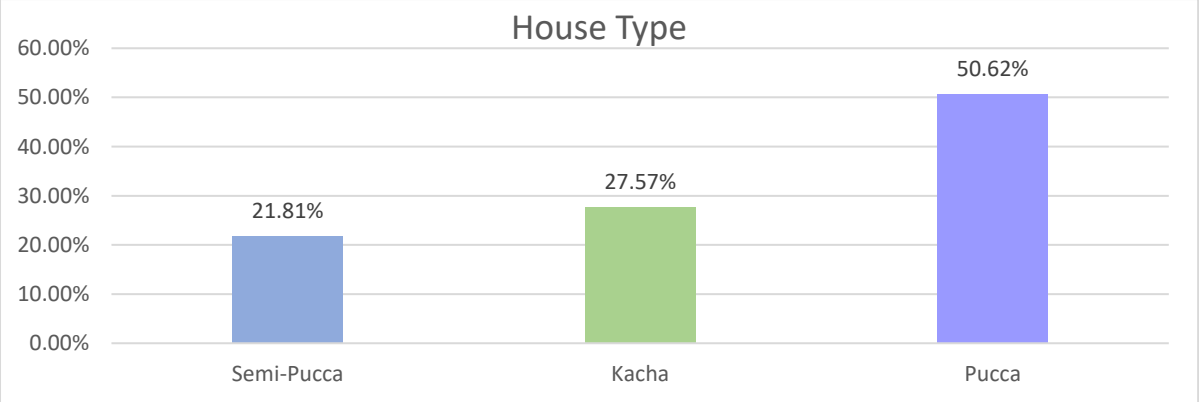


Figure 46: Distribution of House Types of Gangni Paurashava

Table 13: House Type

SL No.	Catagories	Frequency	Percentage (%)
1	Semi-Pucca	69	31.5
2	Kacha	21	9.6
3	Pucca	129	58.9

5.3.4.2 Ownership of the Houses

A strong 90.7% of residents own their homes, while 9.3% live in rented accommodations. This ownership pattern, slightly lower than rural figures, reflects an evolving urban housing market. From a planning standpoint, the presence of renters—albeit small—calls for formal rental regulations and quality control to protect tenants' rights.

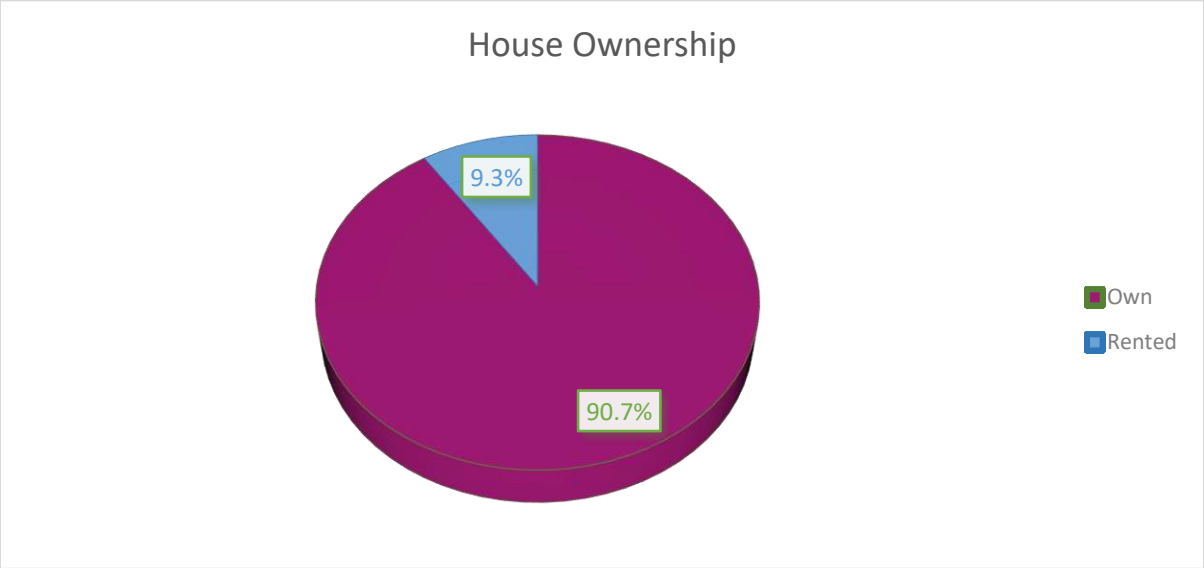


Figure 47: House Ownership of Gangni Paurashava

Table 12: House Ownership of Gangni Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Own	194	90.7%
2	Rented	20	9.3%

Source: Field Survey, 2025

Table 15: Number of Edecated Members above 18 years in the family

SL No.	Categories	Frequency	Percentage (%)
1	0	13	6.0%
2	1	28	13.0%
3	2	117	54.4%
4	3	30	14.0%
5	4	25	11.6%
6	5	2	0.9%
7	6	0	0.0%

Source: Field Survey, 2025

Over 54.4% of families have exactly two educated members above 18, while 6% have none. Though educational attainment is higher than in rural Gangni, the 6% without any literate adults still require adult literacy programs. Educational planning should continue to target functional literacy and promote lifelong learning centers in urban neighborhoods.

5.3.4.3 Transportation Mode

The transportation system in Gangni Paurashava reflects a more balanced mix of walking, cycling, and motorized modes compared to rural areas. The share of rickshaws and motorcycles is notably higher here, consistent with the denser settlement and higher demand for short-to-medium distance travel within the urban context.

Transportation Modes Usage: The bar chart shows the percentage distribution of daily transportation modes:

- Walking accounts for 26.3%, remaining the most common mode but significantly lower than in rural Gangni Upazila. This indicates that urban residents rely more on short-range motorized or semi-motorized options.
- Vans (22.1%) form a large share, serving both passengers and goods movement, particularly for intra-urban trips where flexible and affordable transport is required.
- Motorcycles (16.9%) and cycles (16.7%) together represent one-third of all trips. Motorcycles are popular for personal use, while cycles continue to provide an affordable option for daily commuting.
- Rickshaws contribute 14.8%, highlighting their critical role in short-distance urban trips, especially for school-going children, women, and market access.

- Buses (2.5%), cars (0.4%), and microbuses (0.2%) collectively remain very low, showing limited formal public transport services and low private car ownership within the municipality.

The results indicate that Gangni Paurashava exhibits more diversified transport use compared to its rural counterpart, with higher shares of vans, motorcycles, and rickshaws. This reflects the urban settlement structure and the greater demand for flexible, short-to-medium distance motorized transport.

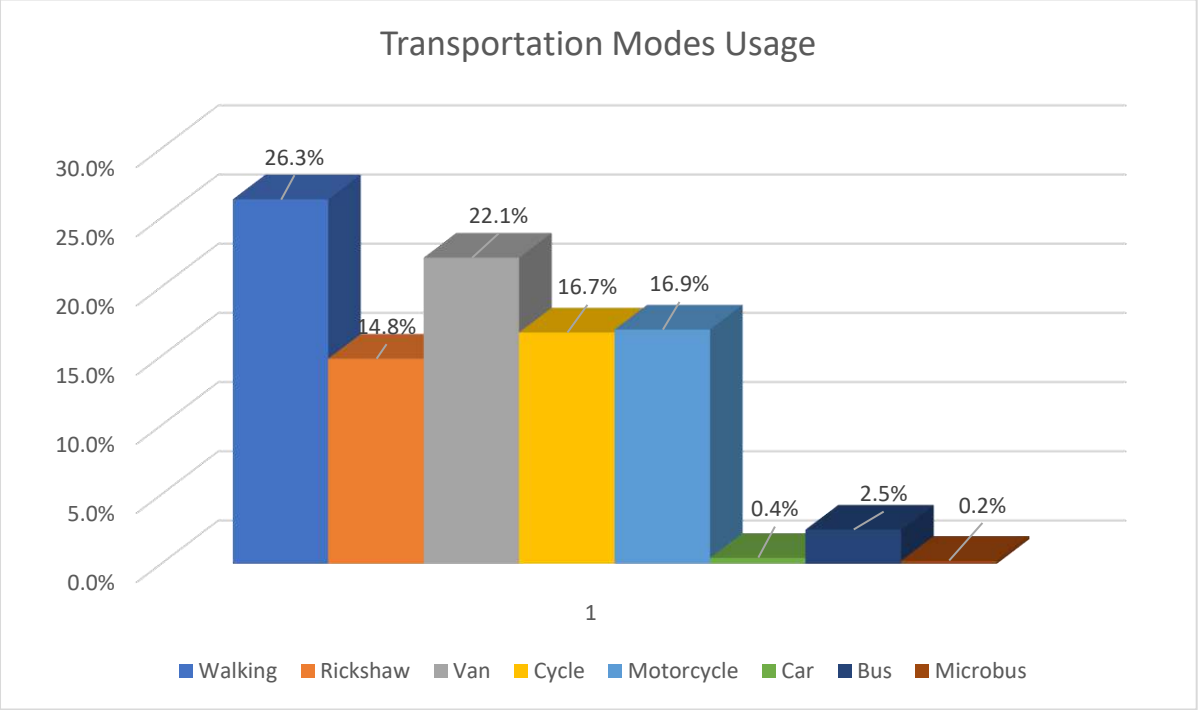


Figure 48: Transportation Modes Usage in Gangni Paurashava

5.3.5 Financial Capital

5.3.5.1 Income

The income distribution of households in Gangni Paurashava shows that the largest proportion of families, 47.7%, earn between 10,000–20,000 BDT per month, indicating that nearly half of the population falls within this modest income category. This is followed by 22.2% of households earning between 21,000–30,000 BDT, highlighting a significant mid-income segment.

Meanwhile, 12.3% of families report monthly incomes between 31,000–40,000 BDT, while 6.6% earn above 40,000 BDT, representing the higher-income groups. On the other end of the spectrum, 11.1% of households earn less than 10,000 BDT per month, reflecting a smaller proportion of lower-income families.

Overall, the data suggests that household incomes in Gangni Paurashava are concentrated within the 10,000–30,000 BDT range, which accounts for about 70% of families. While this demonstrates a strong presence of mid-level earners, the smaller shares of both lower-income and higher-income groups point to a relatively balanced income distribution within the paurashava..

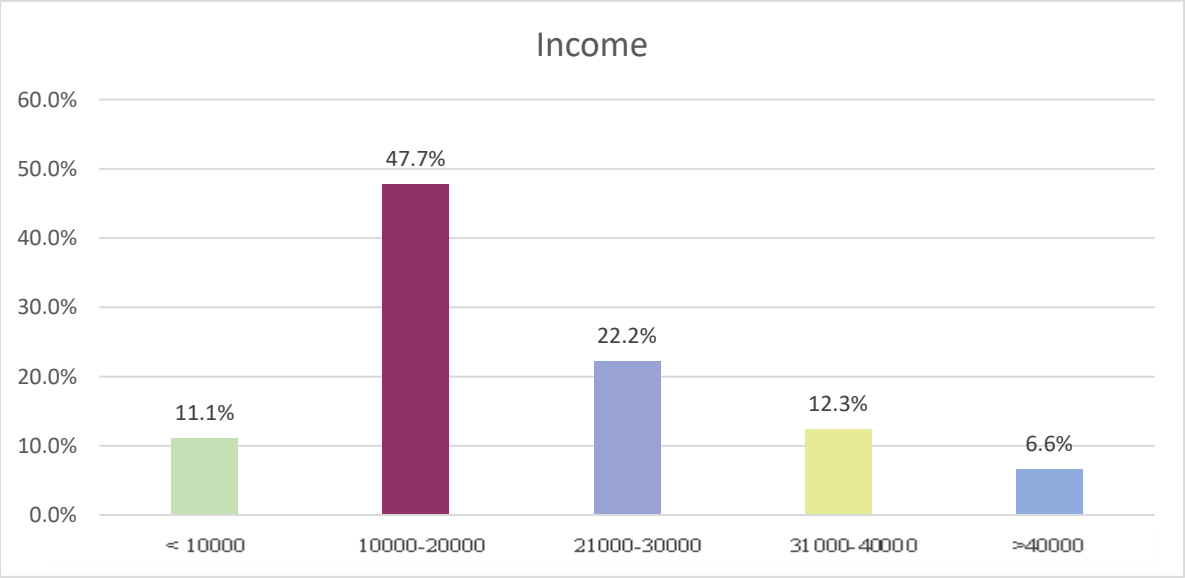


Figure 49: Income of Gangni Paurashava

5.3.5.2 Expenditure

The expenditure distribution of households in Gangni Paurashava reveals a concentration in the mid- to high-expenditure ranges. The largest share of households (42.6%) spend between 16,000–20,000 BDT per month, followed by 22.7% who report monthly expenditures above 20,000 BDT. Together, these categories highlight a significant proportion of households managing higher levels of monthly spending. Meanwhile, 19% of households fall within the 5,000–10,000 BDT expenditure band, and 15.3% within the 11,000–15,000 BDT category, indicating a considerable segment with moderate expenditure levels. Households with expenditures below 5,000 BDT are very few, accounting for only 0.5% of the total.

This pie chart suggests that Gangni Paurashava households are largely positioned within moderate to higher expenditure groups, reflecting a stable urban consumption pattern.

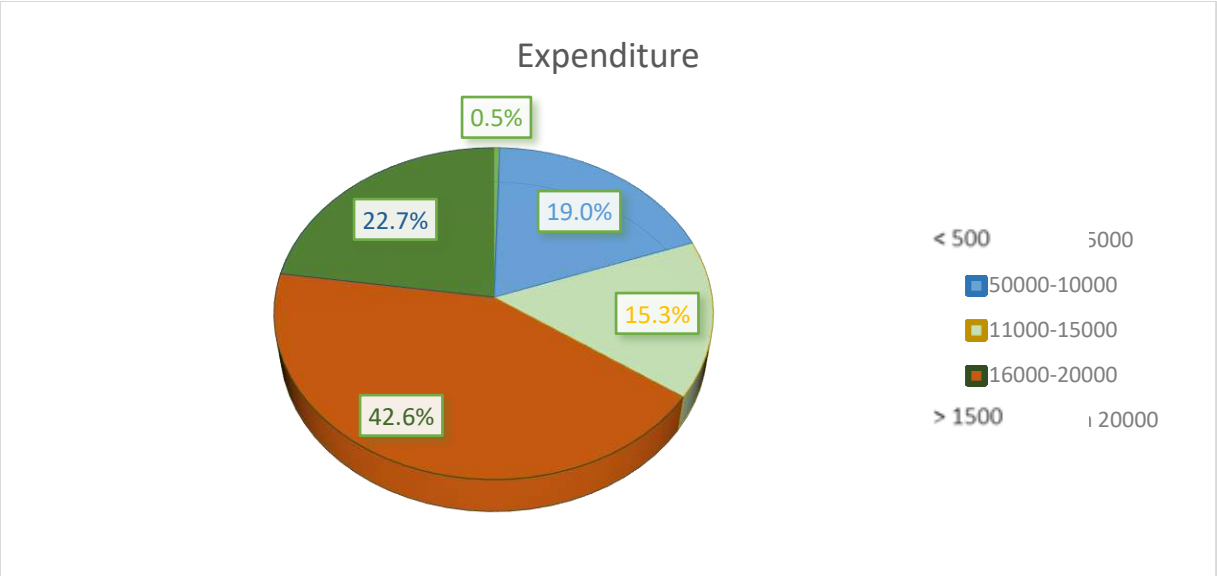


Figure 50: Expenditure of Gangni Paurashava

Table 17: Expenditure of Gangni Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	< 5000	1	0.5%
2	50000-10000	41	19.0%
3	11000-15000	33	15.3%
4	16000-20000	92	42.6%
5	> 20000	49	22.7%

Source: Field Survey, 2025

5.3.5.3 Saving

The savings distribution of households in Gangni Paurashava shows that the majority of families, 57.1%, have savings of less than 500 units, making this the largest group. The second largest category consists of households with savings between 500–1000 units, representing 26.4% of families.

Smaller proportions of households fall into the higher savings categories. Around 11.8% of households report savings of more than 1500 units, while only 4.7% of families have savings between 1100–1500 units.

This pattern indicates that most households in Gangni Paurashava maintain very limited savings capacity, with over half of them concentrated in the lowest savings bracket. The presence of a smaller share in the higher savings groups highlights that while some families have managed to build stronger financial reserves, the overall savings profile of the paurashava remains modest.

Figure 51: Saving of The Household of Gangni Paurashava

Table 18: Saving of The Household

SL No.	Categories	Frequency	Percentage (%)
1	< 500	121	57.1%
2	500-1000	56	26.4%
3	1100-1500	10	4.7%
4	> 1500	25	11.8%

Source: Field Survey, 2025

5.4 Livelihood Context & Demographics of Meherpur Sadar Upazila

5.4.1 Demographis

5.4.1.1 Population Pyramid

The population pyramid of Meherpur Sadar Upazila presents a transitional demographic structure, characterized by a moderately wide base, a strong middle-age concentration, and a gradually narrowing older age cohort. The highest proportion of the population falls within the 30–39 age range, followed closely by the 20–29 age groups, indicating a dominant working-age population and reduced fertility compared to more rural areas.

The 0–14 age groups are relatively smaller than the middle cohorts, suggesting a declining birth trend. In contrast, the elderly population (60+) remains limited but present, especially among males, implying an early signal of demographic aging.

The gender distribution is largely balanced in younger and middle age groups, with females outnumbering males slightly in the 30–39 range and males showing slight predominance in the older cohorts, which may reflect historical migration or reporting differences.

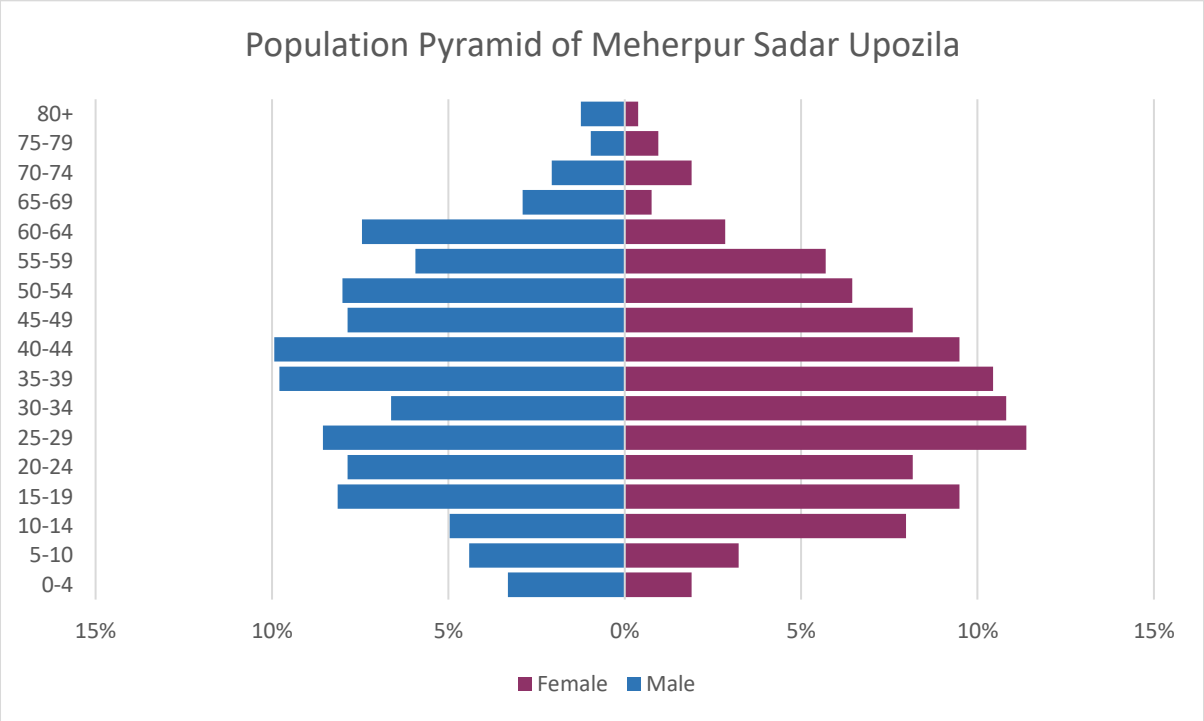


Figure 52: Population Pyramid of Meherpur Sadar Upazila

This demographic composition implies that in the short term, the upazila must focus on expanding employment opportunities, skills development, and urban services tailored to a productive age group. In the medium and long term, emerging signs of aging and reduced youth

share suggest the need for healthcare strengthening, social security systems, and retirement planning infrastructure, particularly in urban and peri-urban areas of Meherpur Sadar.

5.4.1.2 Household Heads

91.7% male-headed, 8.3% female-headed. A slightly more balanced figure than Gangni and Mujibnagar, it signals that urban women may have slightly greater agency. Planning should still include inclusive representation in ward committees and social development schemes.

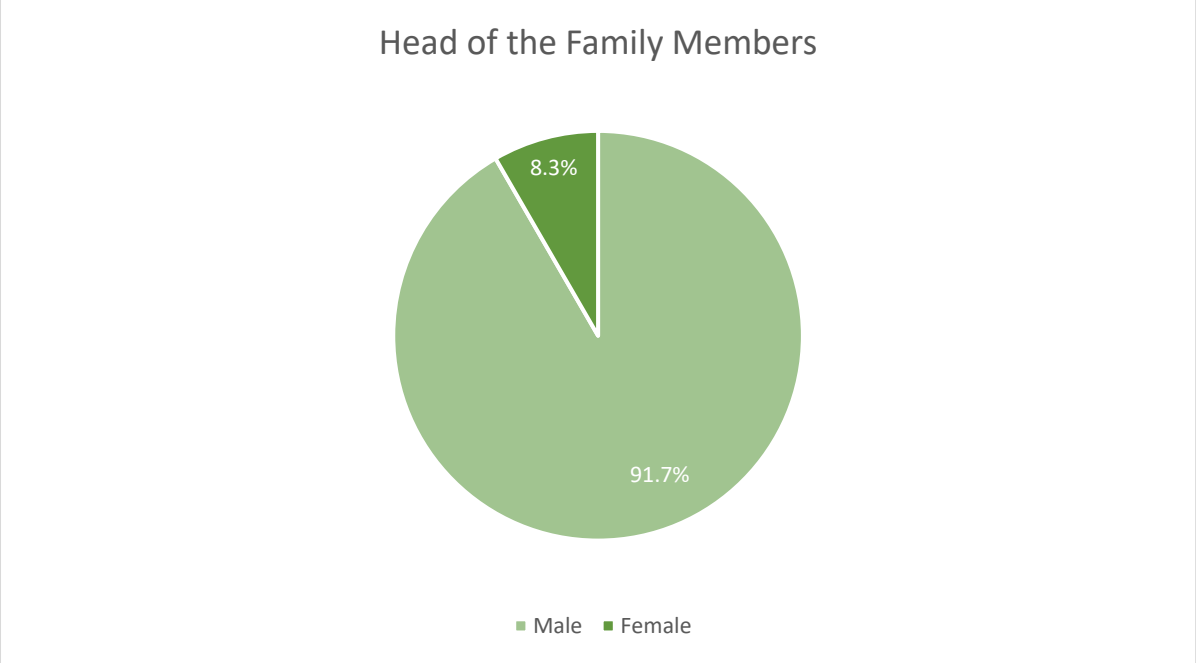


Figure 53: Head of the Family Members of Meherpur Sadar Upazila

Table 23: Head of the Family Members

SL No.	Categories	Frequency	Percentage (%)
1	Male	593	91.7%
2	Female	54	8.3%

Source: Field Survey, 2025

The peak age brackets are 31–40 (28.4%) and 41–50 (24.8%). With a maturing but still active demographic, planners should focus on mid-career employment services, lifelong education, and healthcare for working adults..4.1.6 Head of the Family Member's Age

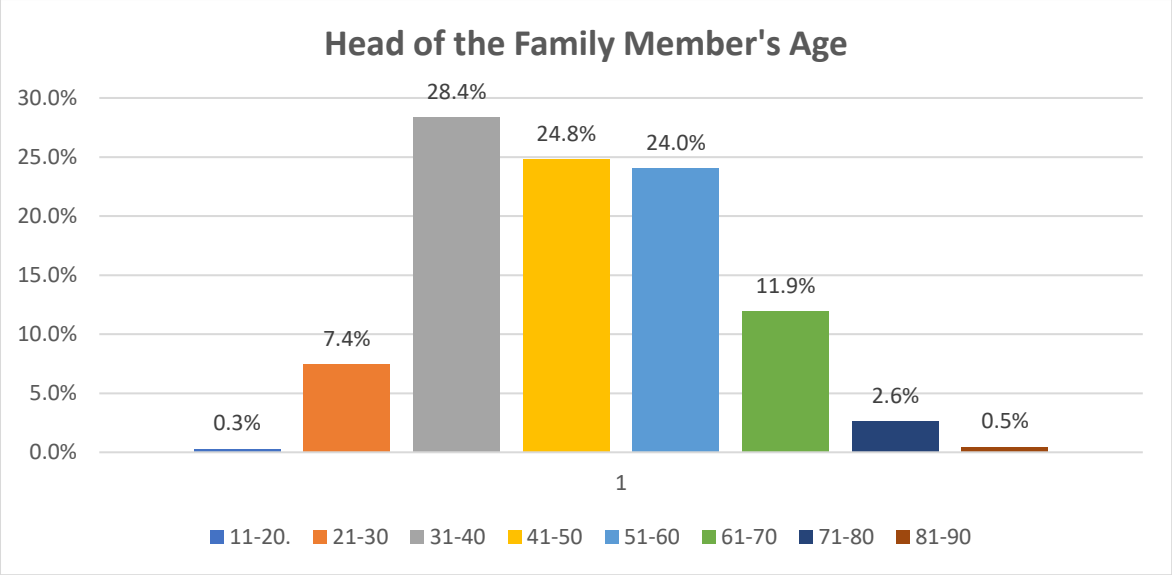


Figure 54: Head of the Family Member's Age of Meherpur Sadar Upazila

Table 24: Head of the Family Member's Age

SL No.	Categories (Age)	Frequency	Percentage (%)
1	11-20.	2	0.3%
2	21-30	48	7.4%
3	31-40	183	28.4%
4	41-50	160	24.8%
5	51-60	155	24.0%
6	61-70	77	11.9%
7	71-80	17	2.6%
8	81-90	3	0.5%

Source: Field Survey, 2025

5.4.1.3 Family Structure

The family type distribution in Meherpur Sadar Upazila shows that 87.9% of surveyed households are single-family units, while 12.4% are joint families. This pattern reflects the predominance of nuclear households, yet with a noticeable presence of joint family arrangements compared to more urbanized regions.

Single-family households, primarily comprising parents and their dependent children, represent a modern trend linked to socio-economic transitions, land fragmentation, and lifestyle changes (Goode, 1963). These households typically demand greater housing units and services tailored to smaller family sizes. Conversely, the persistence of joint families where multiple generations and extended relatives co-reside, highlights the continued role of intergenerational support systems, resource sharing, and cultural traditions.

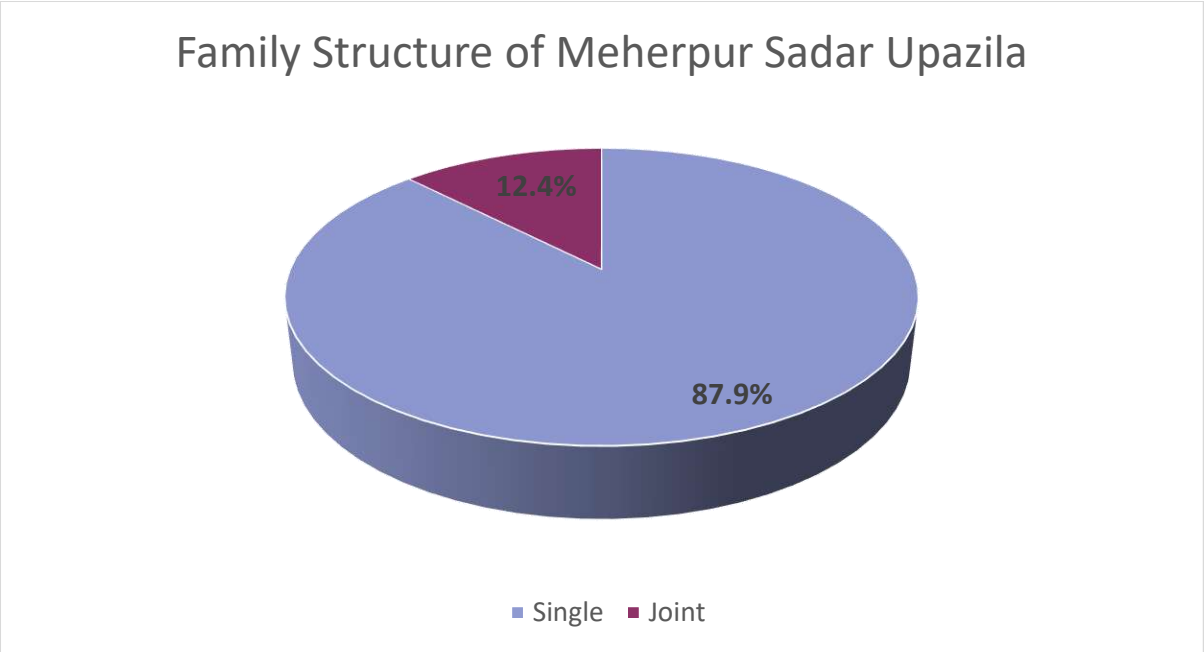


Figure 55: Family Structure of Meherpur Sadar Upazila

Table 20: Family Type of Meherpur Sadar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Single	567	87.9
2	Joint	80	12.4

Source: Field Survey, 2025

5.4.1.1 Religious Affiliation

The religious composition of households in Meherpur Sadar Upazila, as presented in Figure 46 and Table 19, shows that the population is predominantly Muslim (96.7%). Hindus constitute 2.9% of the population, while Christians account for 0.3%, and there is no reported Buddhist population.

This overwhelming Muslim majority reflects a high degree of cultural and religious homogeneity. However, the presence of minority groups, though small in proportion, warrants attention in planning processes to ensure inclusivity and equitable access to religious, social, and community services.

Urban and rural development initiatives should aim to maintain cultural harmony while safeguarding the rights and needs of all religious communities. This includes ensuring adequate access to places of worship, cultural representation, and participation in local decision-making processes for minority groups.

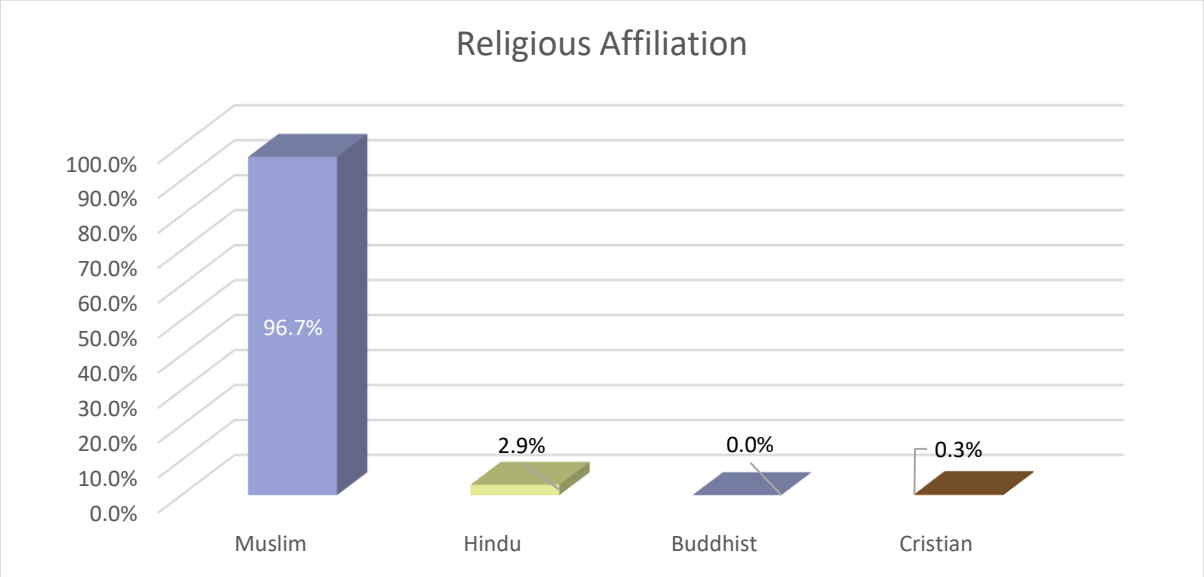


Figure 56: Religious Affiliation of Meherpur Sadar Upazila

Table 19: Religious Affiliation of Meherpur Sadar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Muslim	624	96.7%
2	Hindu	19	2.9%
3	Buddhist	0	0.0%
4	Cristian	**2**	0.3%

Source: Field Survey, 2025

5.4.2 Education

The educational achievement profile of adult (18+) household members in Meherpur Sadar Upazila reflects a moderately educated population, with the majority of households having two educated adults, accounting for 49.5% of respondents. This dominant share suggests that most families have reached a basic threshold of adult education.

Households with one and three educated members each represent 18.2%, while 8.9% reported four educated members. A small proportion of families have only one or no educated adult members 3.6% and 18.2%, respectively, highlighting continued gaps in educational coverage. Meanwhile, the share of households with five (1.3%) or six (0.3%) educated adults is minimal, indicating that extended adult education across large family units remains rare.

The overall distribution suggests that while foundational adult education is well established in Meherpur Sadar, there is limited penetration of higher or multigenerational education, especially among larger families. This points to a potential ceiling effect, where household education levels stagnate at 1–3 adult members.

To address these trends, education policy should focus on expanding post-secondary and lifelong learning opportunities, particularly for adults in low-literacy households and for youth transitioning into adulthood. Furthermore, targeted community-based education programs and workforce-oriented training can strengthen adult educational profiles and contribute to economic upliftment in Meherpur Sadar.

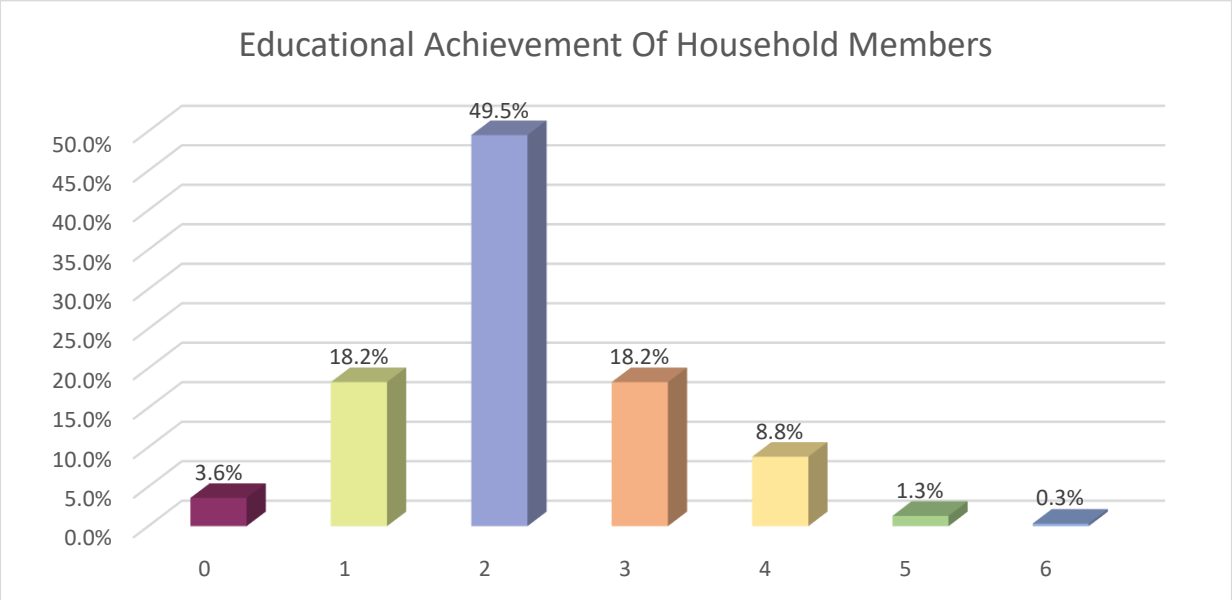


Figure 57: Educational Achievement of Adult (18+) Household Members of Meherpur Sadar Upazila

Table 25: Educational Achievement of Adult (18+) Household Members

SL No.	Categories (Member N)	Frequency	Percentage (%)
1	0	22	3.6%
2	1	112	18.2%
3	2	304	49.5%
4	3	112	18.2%
5	4	54	8.8%
6	5	8	1.3%
7	6	2	0.3%

Source: Field Survey, 2025

5.4.3 Health

The distribution of healthcare services across the wards of Meherpur Sadar Upazila, as depicted in Figure 55, reveals marked disparities in the availability of community clinics, hospitals, and maternity centers.

Community clinics are most abundant in Ward No. 03 (32) and Ward No. 05 (28), indicating strong primary healthcare coverage in these areas. In contrast, Wards No. 04 (3) and No. 02 (4) report extremely low numbers, highlighting significant access gaps in basic healthcare services.

Hospital availability shows a similar concentration pattern, with Ward No. 03 leading at 32 facilities, followed by Ward No. 05 (28) and Ward No. 09 (30). The lowest counts are recorded in Ward No. 04 (16) and Ward No. 01 (16), raising concerns about secondary healthcare access in these wards.

Maternity center services are strongest in Ward No. 09 (30) and Ward No. 03 (32), both offering robust maternal healthcare infrastructure. Conversely, Ward No. 04 (13) and Ward No. 02 (21) have relatively fewer facilities, which may affect maternal and child health service delivery.

Overall, Wards No. 03, 05, and 09 exhibit consistently high healthcare availability across all categories, while Wards No. 04 and 02 remain under-served. Addressing these inequalities, especially by expanding primary and maternal health facilities in low-coverage wards, would be key to achieving equitable healthcare access in Meherpur Sadar Upazila.

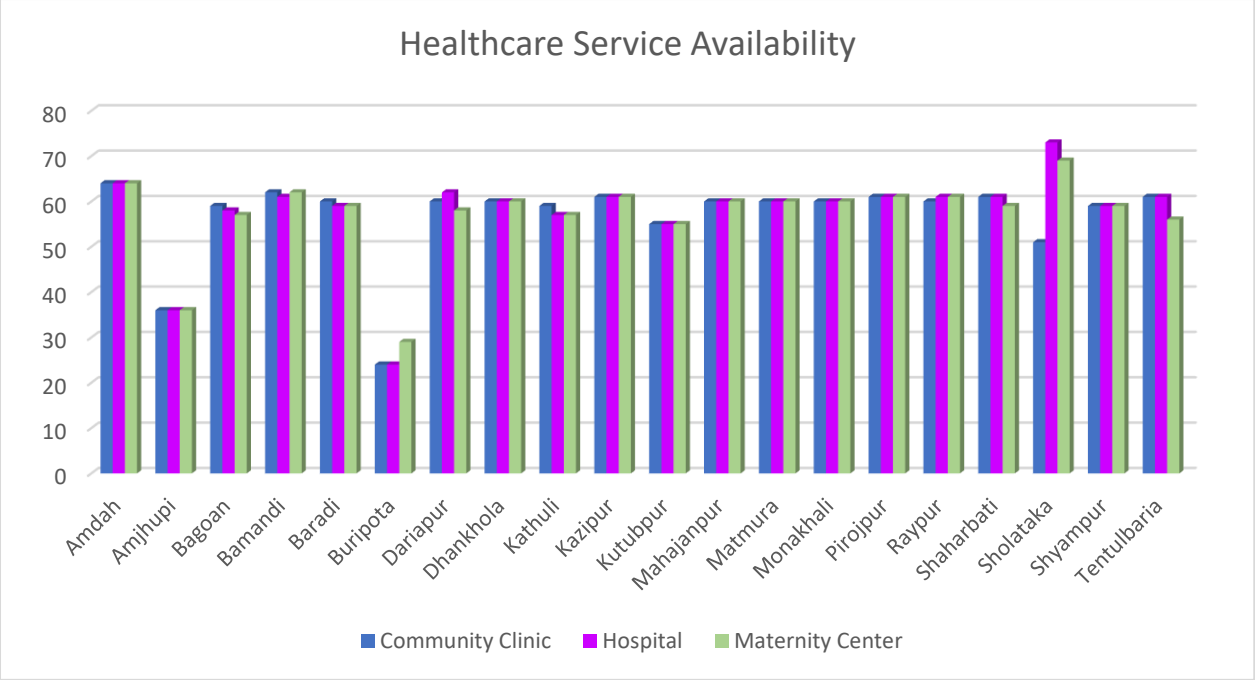


Figure 58: Healthcare Service Availability of Meherpur Sadar Upazila

5.4.4 Physical Capital

5.4.4.1 Housing

The latest survey indicates that Pucca houses now represent 52.6% of all dwellings, more than doubling from 23.5% in the BBS 2011 Census. This substantial increase of 29.1 percentage points highlights significant improvement in housing quality, likely due to urbanization, rising incomes, and infrastructure investments.

Semi-Pucca houses currently account for 25.9%, slightly down from 26.9% in 2011. This relatively small decrease suggests that while some semi-permanent dwellings have been upgraded to Pucca houses, the category still retains a sizable share of the housing stock.

Kacha houses have fallen sharply from 46.2% in 2011 to 21.5% at present, a reduction of nearly 25 percentage points. This marks a notable decline in vulnerable, temporary-material dwellings, reflecting socio-economic progress and improved resilience.

Overall, compared to 2011, Meherpur Sadar Upazila has experienced a strong shift towards durable housing, with Pucca dwellings now comprising the majority and both Semi-Pucca and Kacha houses reduced proportionally.

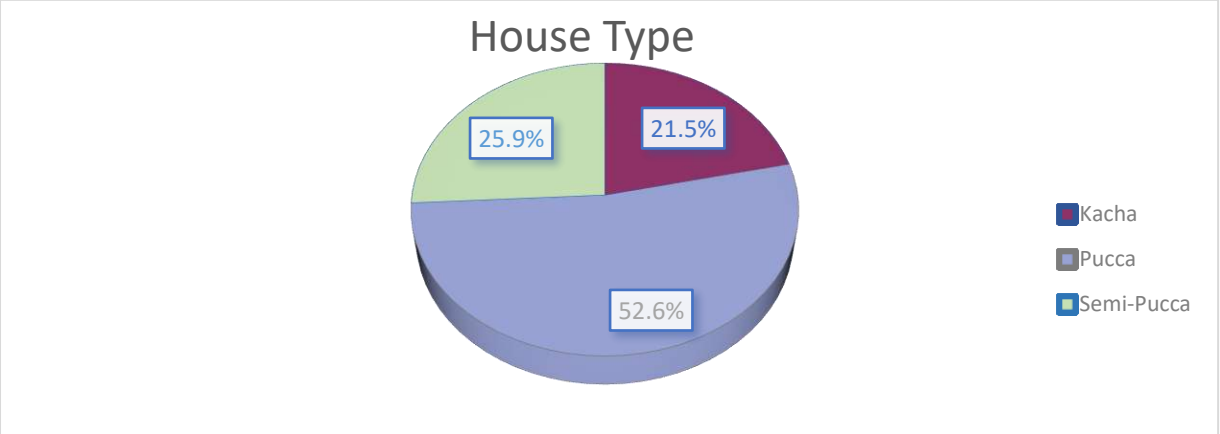


Figure 59: House Type of Meherpur Sadar Upazila

Table 21: House Type of Meherpur Sadar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Kacha	139	21.5%
2	Pucca	340	52.6%
3	Semi-Pucca	167	25.9%

Source: Field Survey, 2025

5.4.4.2 House Ownership

The latest survey indicates that 96.7% own their homes; 3.3% rent. This suggests strong tenure security, which allows for sustainable investment in infrastructure. Planning can leverage this stability for home-based enterprises, rooftop solar, and backyard agriculture programs.

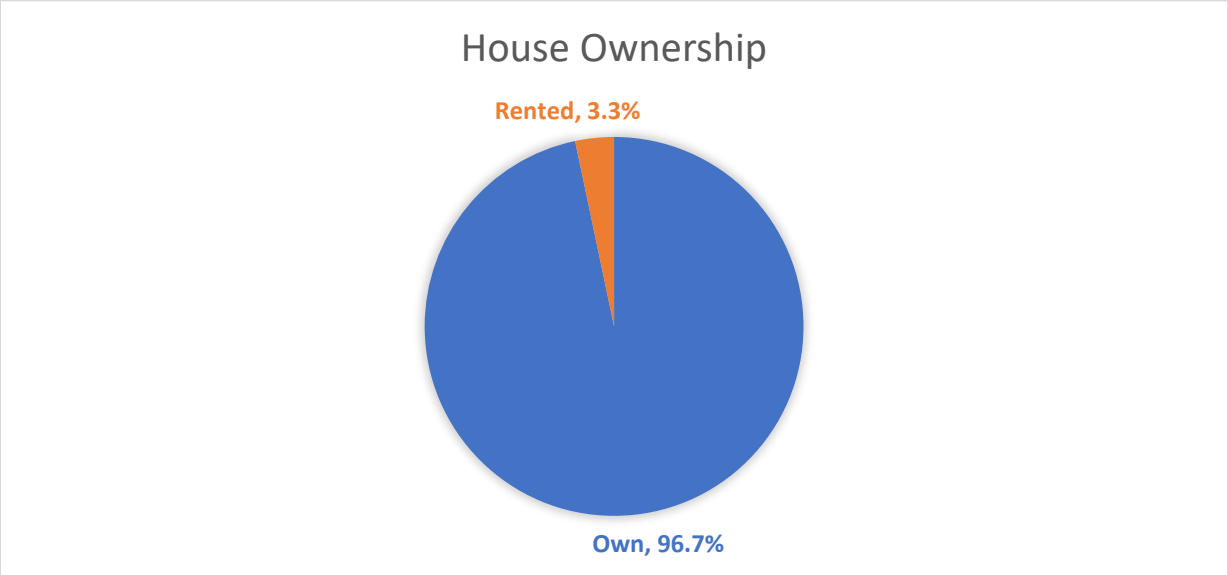


Figure 61: House Ownership of Meherpur Sadar Upazila

Table 22: House Ownership of Meherpur Sadar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Own	615	96.7%
2	Rented	21	3.3%

Source: Field Survey, 2025

5.4.4.3 Transportation Mode

The transportation profile in Meherpur Sadar Upazila is characterized by a strong reliance on non-motorized modes, with walking and cycling forming the core of daily mobility. While some use of motorized transport exists, formal public transport remains limited, highlighting localized travel patterns within rural and peri-urban contexts.

Transportation Modes Usage: The bar chart shows the percentage distribution of daily transportation modes:

- Walking is the dominant mode, representing 43.2% of all trips. This underlines the localized nature of travel in the upazila, where residents typically access markets, schools, and workplaces on foot.
- Cycles and motorcycles are widely used, making up 20.5% and 12.1% of trips respectively. Cycles remain an affordable, accessible option for households, while motorcycles enable faster, more flexible travel, particularly for those balancing rural agricultural and urban work activities.
- Rickshaws account for 10.2%, providing an important means of short-distance mobility, especially for school trips and connections to marketplaces.
- Vans represent 7.4%, often used for transporting both passengers and goods in areas with limited road infrastructure.
- Buses (6.0%) hold a larger share compared to other upazilas, reflecting somewhat greater access to formal public transport services in this sub-district.
- Cars (0.5%) and microbuses (0.1%) together account for less than 1%, indicating limited private vehicle ownership.

The analysis demonstrates that Meherpur Sadar Upazila relies primarily on walking and cycling, complemented by motorcycles and rickshaws for medium-distance travel, while buses play a relatively stronger role here than in surrounding upazilas. This reflects the upazila's semi-urban settlement pattern and its position as the administrative hub of the district.

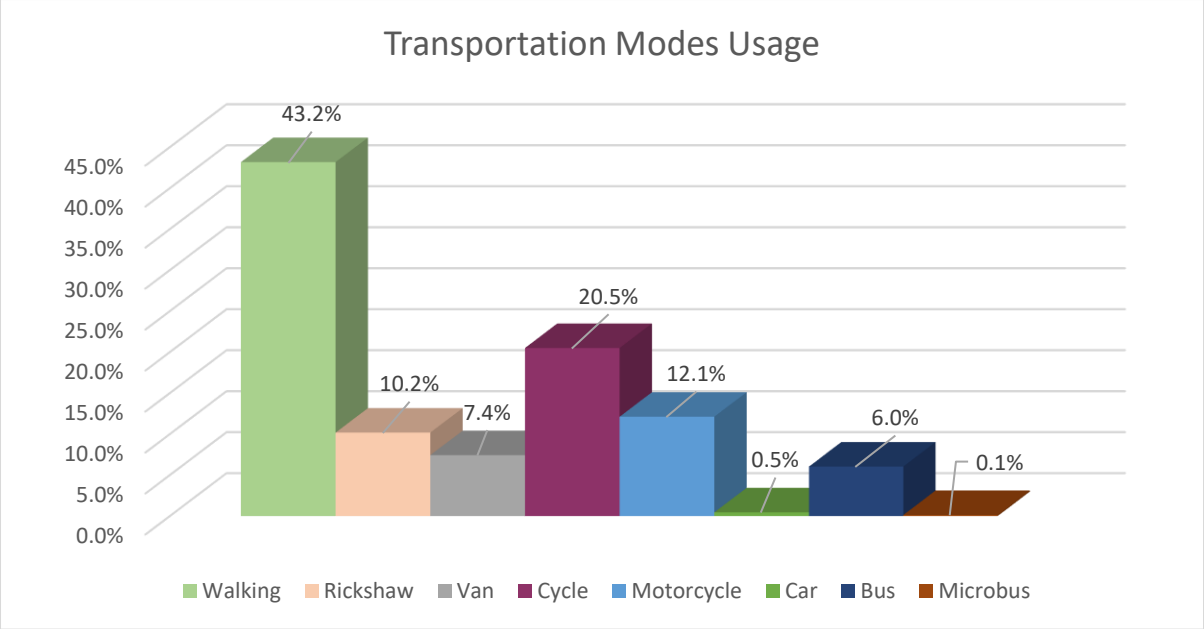


Figure 62: Transportation Modes Usage in Meherpur Sadar Upazila

5.4.4 Financial Capital

5.4.4.1 Income

The income distribution of households in Meherpur Sadar Upazila shows that the majority of families, 51.3%, fall within the monthly income range of 10,000–20,000 BDT. This highlights that over half of the households earn at modest levels, making this the dominant income category. The second largest group, 27%, consists of families earning between 21,000–30,000 BDT per month, representing a substantial mid-income segment.

Meanwhile, 9.4% of households report incomes between 31,000–40,000 BDT, while 4.5% earn above 40,000 BDT, indicating the presence of higher-income groups though comparatively smaller in proportion. On the lower end, 7.8% of households earn less than 10,000 BDT per month, representing families with limited income capacity.

Overall, the data suggests that household incomes in Meherpur Sadar Upazila are concentrated primarily in the 10,000–30,000 BDT range, which accounts for nearly 80% of families. This reflects a predominantly mid-level income structure, with smaller groups at both the lower and higher ends of the spectrum.

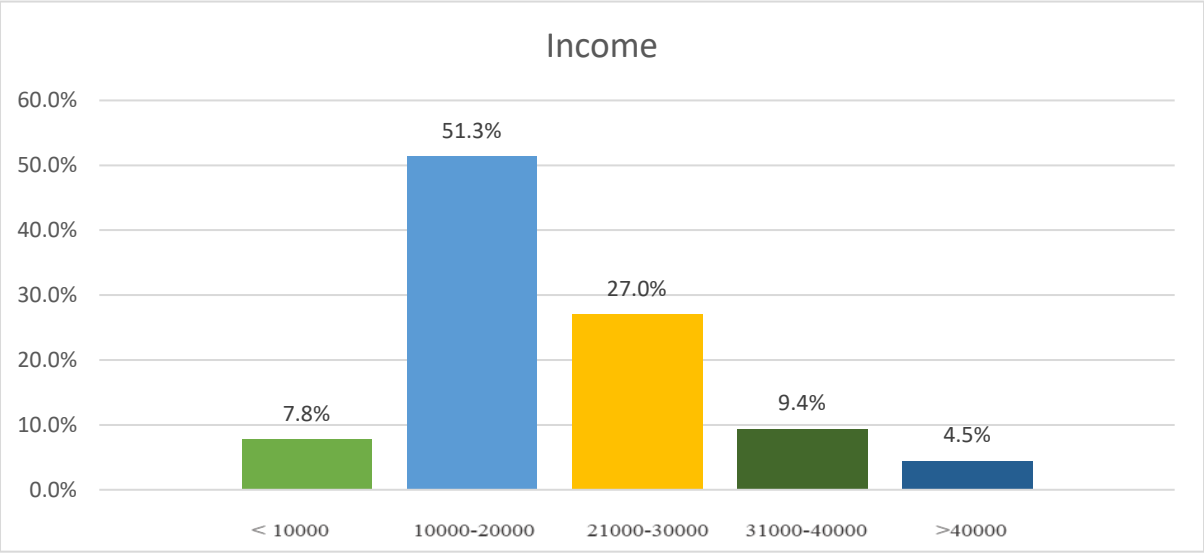


Figure 63: Income of The Household of Meherpur Sadar Upazila

Table 14 Income of The Household of Meherpur Sadar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	< 10000	52	7.8
2	10000-20000	344	51.3
3	210000-30000	181	27.0
4	310000-40000	63	9.4
5	> 40000	30	4.5

Source: Field Survey, 2025

5.4.4.2 Expenditure

The expenditure pattern of households in Meherpur Sadar Upazila shows a wide distribution across different spending categories, with a noticeable concentration in the mid-level expenditure range. The largest group of households (34.7%) spend between 11,000–15,000 BDT per month, indicating that a significant portion of families maintain moderate monthly spending. This is followed by 25.7% of households in the 16,000–20,000 BDT category, reflecting a considerable share with relatively higher expenditures.

Additionally, 24.3% of households fall within the 5,000–10,000 BDT expenditure band, representing families with more constrained levels of spending. A smaller group, 13.3%, report expenditures above 20,000 BDT, suggesting the presence of higher-spending households within the upazila. Extremely low expenditure households, spending less than 5,000 BDT per month, are minimal, representing just 1.9% of the sample.

Overall, the data indicates that most households in Meherpur Sadar Upazila are situated within the 11,000–20,000 BDT expenditure range, reflecting a predominantly moderate expenditure pattern.

Table 15: Expenditure of The Household

SL No.	Categories	Frequency	Percentage (%)
1	< 5000	12	1.9
2	50000-10000	155	24.3
3	11000-15000	221	34.7
4	16000-20000	164	25.7
5	> 20000	85	13.3

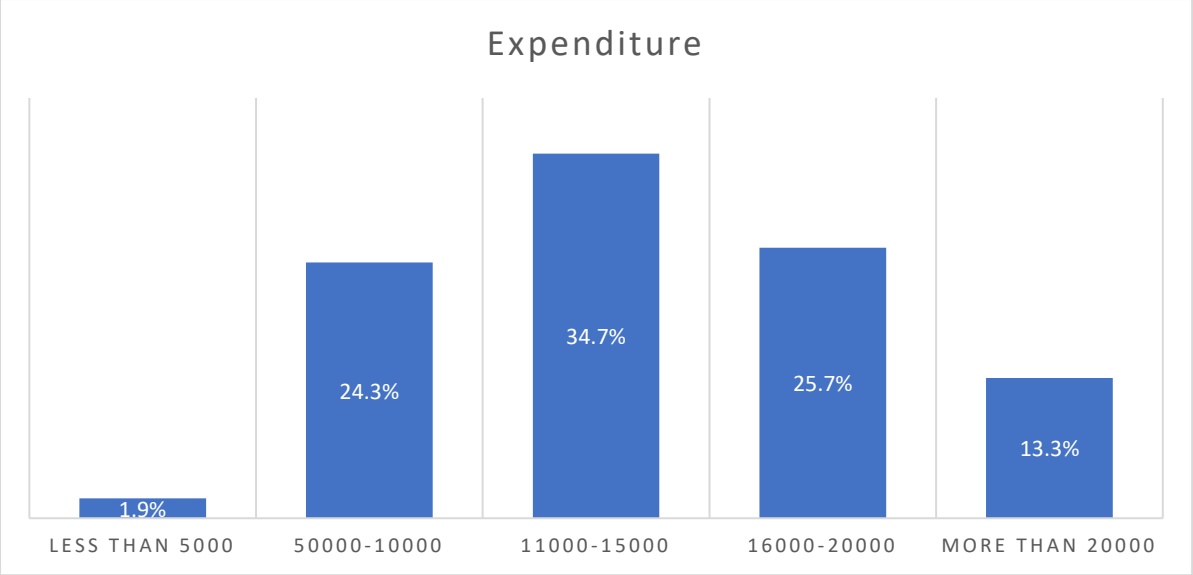


Figure 64: Expenditure of The Household of Meherpur Sadar Upazila

5.4.4.3 Saving

The savings distribution of households in Meherpur Sadar Upazila shows that the largest group, 44.6% of families, have savings between 500–1000 units. This is closely followed by 41.2% of households whose savings are less than 500 units, highlighting that a significant share of families have limited financial reserves.

A smaller proportion of households fall into higher savings categories. About 10.5% of families report savings between 1100–1500 units, while only 3.8% have savings above 1500 units.

This pattern indicates that the majority of households in Meherpur Sadar Upazila are concentrated in the lower to mid-savings categories, with very few families maintaining larger reserves. While a considerable segment has managed to save beyond the minimum level, the overall savings profile of the upazila suggests limited financial capacity among most households.

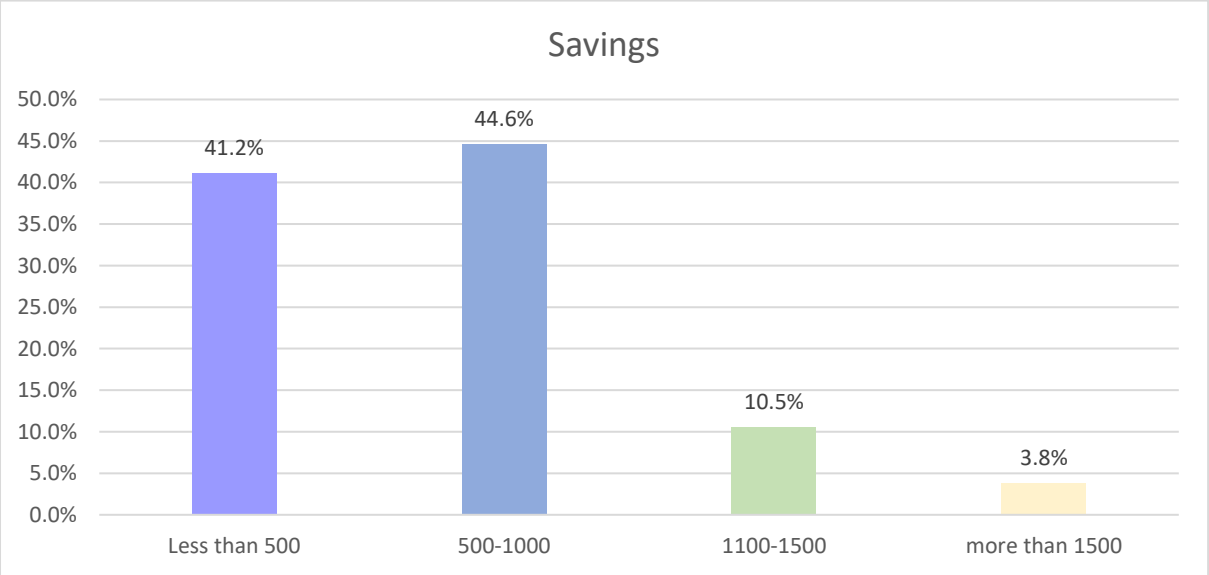


Figure 65: Saving of The Household of Meherpur Sadar Upazila

5.5 Livelihood Context & Demographics of Meherpur Paurashava

5.5.1 Demographis

5.5.1.1 Population Pyramid

The population pyramid of Meherpur Sadar Paurashava presents a constrictive urban structure, characterized by a narrow base and a strong concentration in the 30–44 age groups, particularly among females. This distribution reflects low fertility rates and urban demographic transition, with reduced proportions of children in the 0–14 year age brackets.

The pyramid also shows a balanced gender distribution across most age groups, with a slight predominance of females in older age cohorts, consistent with national longevity patterns. The relatively smaller share of elderly suggests a population that is just beginning to experience aging pressures.

This demographic profile indicates a lower dependency ratio and a high share of working-age population, pointing to immediate needs in employment generation, skills development, and urban infrastructure. In the long term, urban planning must account for an eventual increase in elderly populations, necessitating investments in geriatric care, age-sensitive housing, and social protection systems.

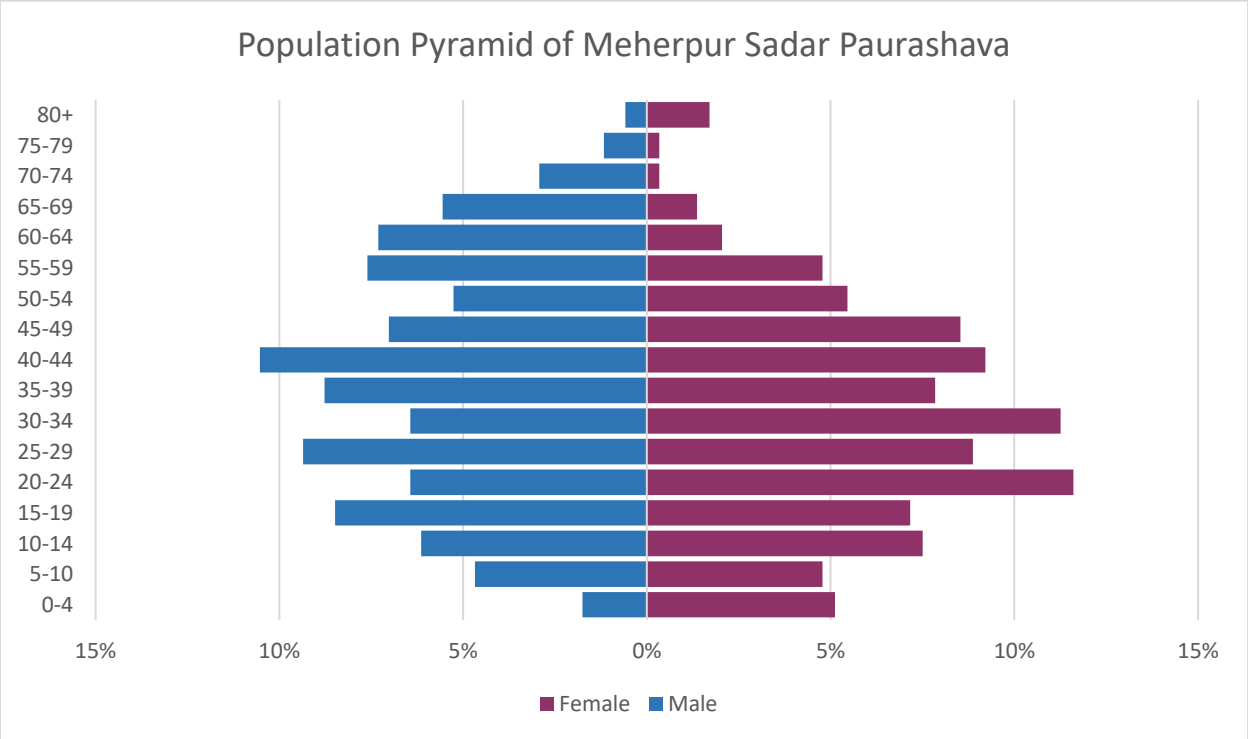


Figure 66: Population Pyramid of Meherpur Sadar Paurashava

5.5.1.2 Household Heads

84.2% male-headed and 15.8% female-headed—the highest female representation districtwide. This suggests a shifting gender dynamic and an opportunity for more inclusive urban governance. Urban programs must recognize and empower female-led households through housing, safety, and economic empowerment initiatives.

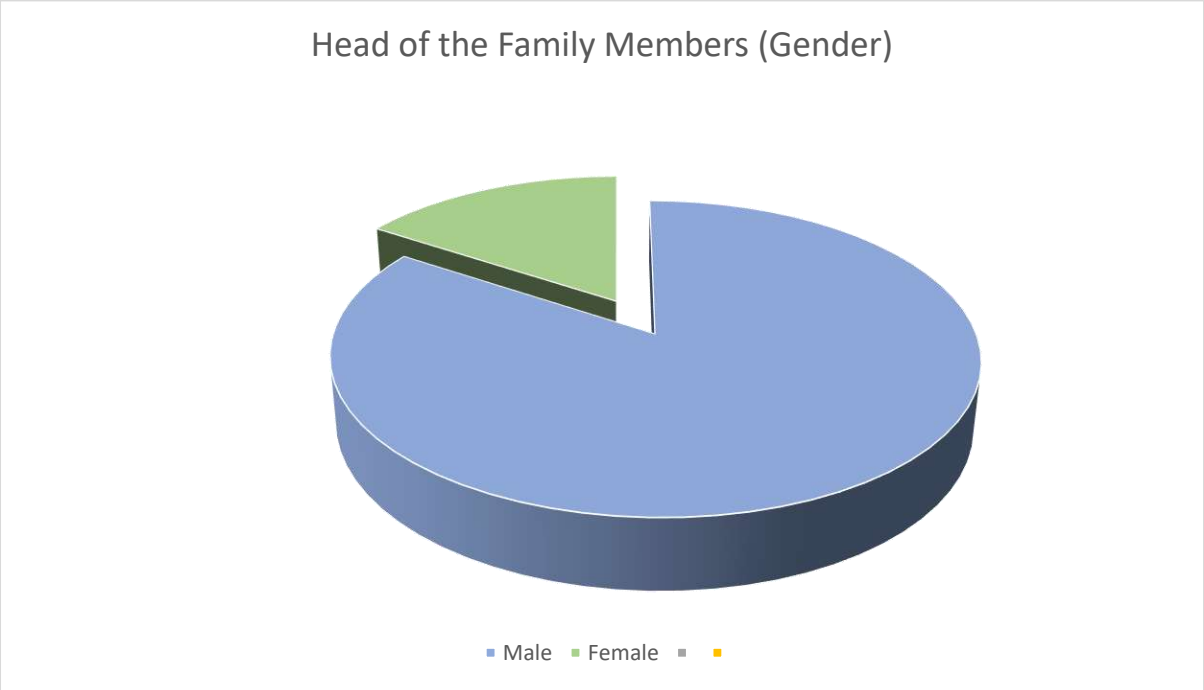


Figure 67: Head of the Family Members of Meherpur Paurashava

Table 33: Head of the Family Members of Meherpur Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Male	192	84.2%
2	Female	36	15.8%

Source: Field Survey, 2025

The age profile is distributed with peaks at 31–40 (27.2%) and 51–60 (25%). This mature profile indicates that urban residents are older and more experienced. Planners should emphasize healthcare access, lifelong learning, and secure retirement options.

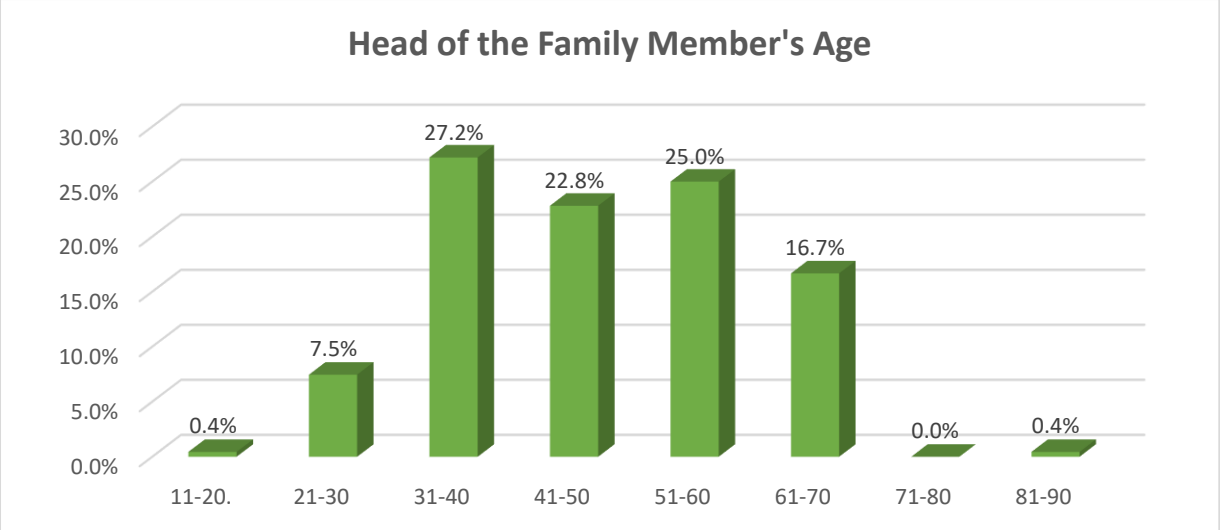


Figure 68: Head of the Family Member's Age of Meherpur Paurashava

Table 34: Head of the Family Member's Age

SL No.	Categories (Age)	Frequency	Percentage (%)
1	11-20.	1	0.4%
2	21-30	17	7.5%
3	31-40	62	27.2%
4	41-50	52	22.8%
5	51-60	57	25.0%
6	61-70	38	16.7%
7	71-80	0	0.0%
8	81-90	1	0.4%

Source: Field Survey, 2025

The findings show that 91.0 percent (207 households) of household heads in Meherpur Paurashava are married, reflecting a dominant marital pattern. Unmarried household heads represent 3.0 percent (7 households), while 5.0 percent (5 households) are widowed and 1.0 percent (1 household) are divorced. The presence of widowed and divorced household heads, though small, indicates the existence of vulnerable household categories that may require targeted support in livelihood and social protection programs.

Table 16: Head of the Family Member's Marital Status

Categories	N	%
Unmarried	7	3
Married	207	91
Widowed	5	5
Divorced	1	1
Total	228	100.0

5.5.1.3 Family Type

The family type distribution in Meherpur Paurashava shows that 85.5% of households are single-family units, while 14.5% are joint families. This highlights the dominance of nuclear households in the urban setting, yet also points to the continued significance of joint family arrangements within the municipality.

Single-family households, mainly consisting of parents and dependent children, reflect changing socio-economic conditions, growing demand for independent housing, and lifestyle preferences associated with smaller family sizes. At the same time, the presence of joint families illustrates the persistence of traditional living arrangements where extended relatives live together, sharing resources and responsibilities.

The higher proportion of joint families in Meherpur Paurashava compared to some other urban areas of the district suggests that cultural traditions and economic interdependence remain strong.

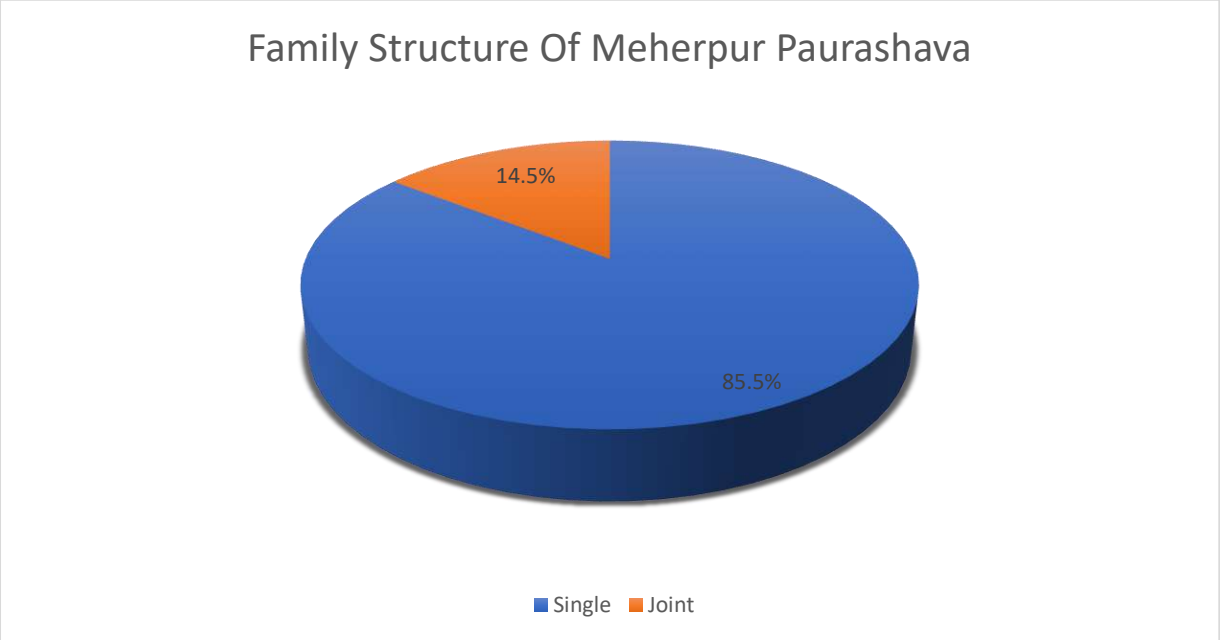


Figure 69: Family Type of Meherpur Paurashava

Table 30: Family Type of Meherpur Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Single	195	85.5
2	Joint	33	14.5

Source: Field Survey, 2025

5.5.1.4 Religious Affiliation

The religious composition of households in Meherpur Paurashava, as illustrated in Figure 58 and detailed in Table 29, indicates that Muslims form the overwhelming majority, accounting for 91.7% of the population. Hindus make up 7.9%, Christians 0.4%, and there is no reported Buddhist population.

While the predominance of Muslims reflects a high degree of cultural and religious uniformity, the presence of minority communities underscores the need for inclusive urban planning and social development. Ensuring that all religious groups regardless of size have equitable access to worship facilities, cultural activities, social services, and representation in local governance is essential for fostering community cohesion.

Development strategies should therefore address the needs of minority groups while preserving interfaith harmony, thereby promoting an inclusive and participatory urban environment for all residents of Meherpur Paurashava.

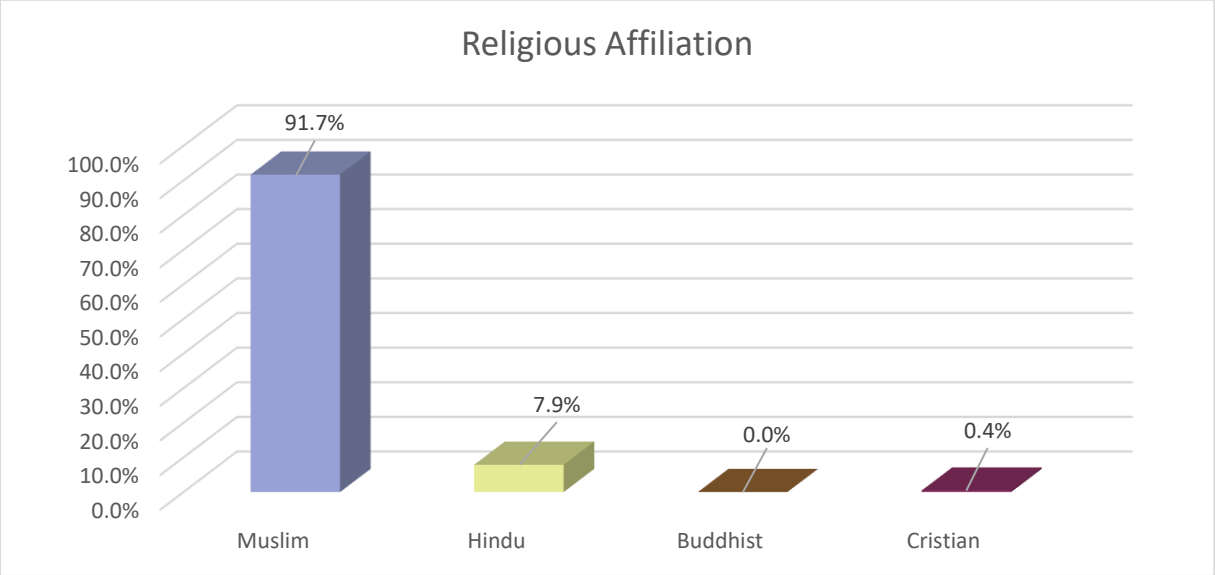


Figure 70: Religious Affiliation of Meherpur Paurashava

Table 29: Religious Affiliation of Meherpur Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Muslim	209	91.7%
2	Hindu	18	7.9%
3	Buddhist	0	0.0%
4	Cristian	1	0.4%

Source: Field Survey, 2025

5.5.2 Education

The educational profile of adult (18+) household members in Meherpur Paurashava highlights a concentration around moderate levels of educational achievement, with the majority of households reporting two educated adult members. This category accounts for 58.1% of the total surveyed households, indicating a strong baseline of education in urban family settings.

Households with three educated adults comprise 18.6%, followed by one educated member (11.4%) and four members (8.1%). Only 2.4% of households reported having no educated adult members, suggesting relatively low levels of educational exclusion in the urban context. The proportions drop sharply beyond four members, with 1.4% of households reporting five educated adults and 0% for six.

The overall distribution shows that educational attainment among adults in Meherpur Paurashava is fairly robust, yet also clustered around a narrow range (mostly two to three members). This pattern indicates a limited spread of education across larger households, pointing to barriers in access or continuity of adult education within extended families.

The findings underscore the importance of enhancing multi-generational learning opportunities and adult education pathways, particularly through flexible and community-based models. Future interventions should emphasize technical and vocational education, adult literacy programs, and urban learning hubs to expand educational achievement across broader household demographics and ensure long-term human capital development in Meherpur Paurashava.

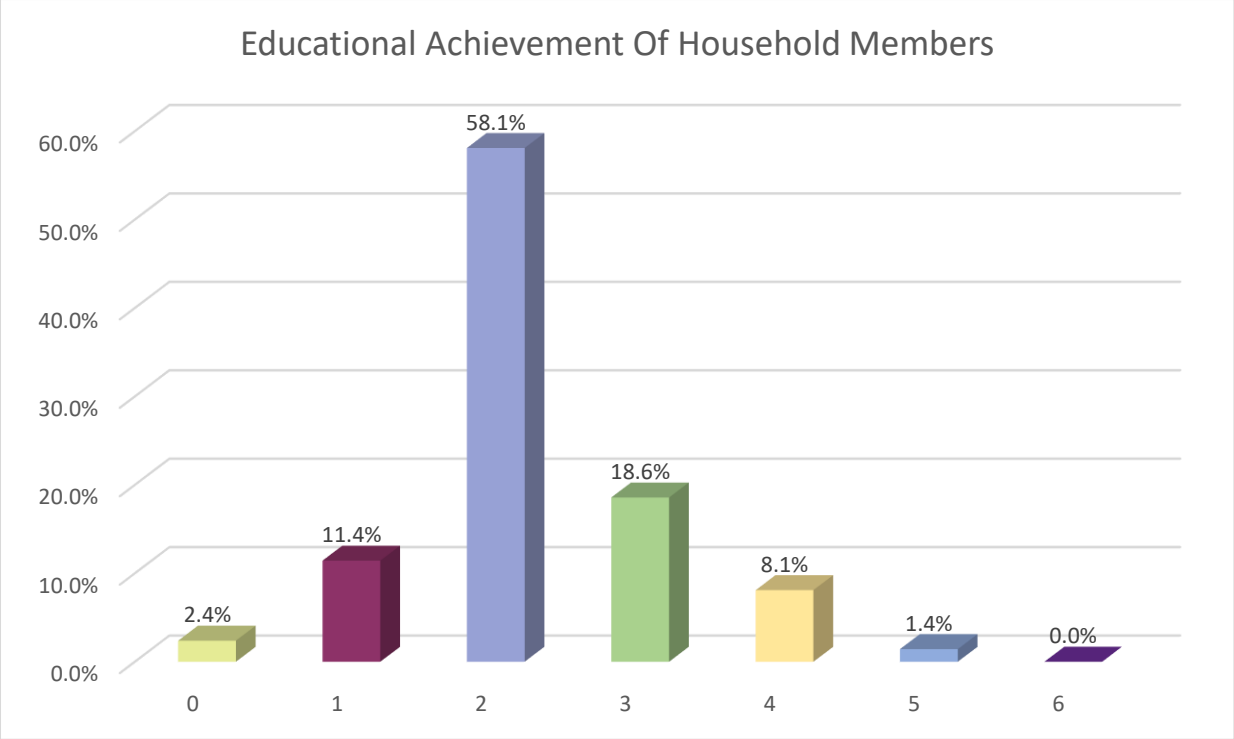


Figure 71: Educational Achievement of Adult (18+) Household Members of Meherpur Paurashava

Table 35: Educational Achievement of Adult (18+) Household Members

SL No.	Categories	Frequency	Percentage (%)
1	0	5	2.4%
2	1	24	11.4%
3	2	122	58.1%
4	3	39	18.6%
5	4	17	8.1%
6	5	3	1.4%
7	6	0	0.0%

Source: Field Survey, 2025

58.1% of households have two educated adults; only 2.4% have none. This is among the best literacy indicators in the district, supporting plans for e-governance, digital public services, and youth training in urban tech hubs.

5.5.3 Health

The distribution of healthcare services across the wards of Meherpur Paurashava, as shown in Figure 66, highlights significant variations in the availability of community clinics, hospitals, and maternity centers.

Community clinics are most prevalent in Wards No. 05 (28) and No. 09 (30), indicating a strong provision of primary healthcare in these areas. In contrast, Ward No. 04 (3) and Ward No. 02 (4) report very low numbers, pointing to major service gaps in primary care access.

Hospital services show a different pattern, with Ward No. 03 leading at 32 facilities, followed by Wards No. 05 (28) and No. 09 (30). The lowest hospital availability is observed in Ward No. 04 (16) and Ward No. 01 (16), raising concerns about secondary healthcare access in those wards. Maternity centers are generally well distributed in Wards No. 05 (27), No. 09 (30), and No. 03 (32), providing critical support for maternal and child health. However, Wards No. 04 (13) and No. 02 (21) report comparatively lower numbers, potentially limiting service coverage for maternal health in these areas.

Overall, the data reveals that Wards No. 03, 05, and 09 enjoy the strongest healthcare coverage across all three service categories, while Ward No. 04—and to some extent Ward No. 02—consistently record the lowest counts. Targeted interventions to enhance primary, secondary, and maternal health facilities in these under-served wards would help promote equitable access to healthcare in Meherpur Paurashava.

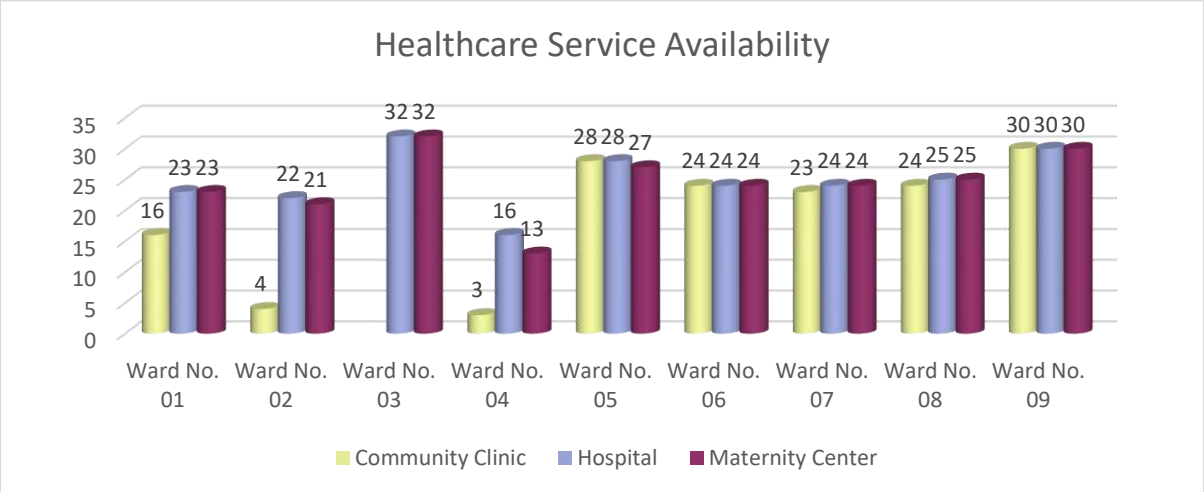


Figure 72: Healthcare Service Availability of Meherpur Paurashava

5.5.4 Physical Capital

5.5.4.1 Housing

The latest survey reveals that Pucca houses now make up 51.75% of the housing stock, a significant increase from 41.7% reported in the BBS 2011 Census. This growth of about 10 percentage points indicates steady progress towards permanent housing structures, reflecting improved socio-economic conditions and investment in durable construction.

Semi-Pucca houses currently stand at 31.58%, a slight decrease from 33.7% in 2011. This reduction suggests that some semi-permanent dwellings have been upgraded to Pucca houses, though the category still remains a considerable share of the housing profile.

Kacha houses have declined from 23.3% in 2011 to 16.67% in the present survey, marking a drop of about 6.6 percentage points. This points to a gradual but meaningful shift away from temporary-material dwellings towards more resilient housing types.

Overall, compared to 2011, Meherpur Paurashava shows clear improvement in housing durability, with a notable increase in Pucca dwellings and corresponding declines in both Semi-Pucca and Kacha categories.

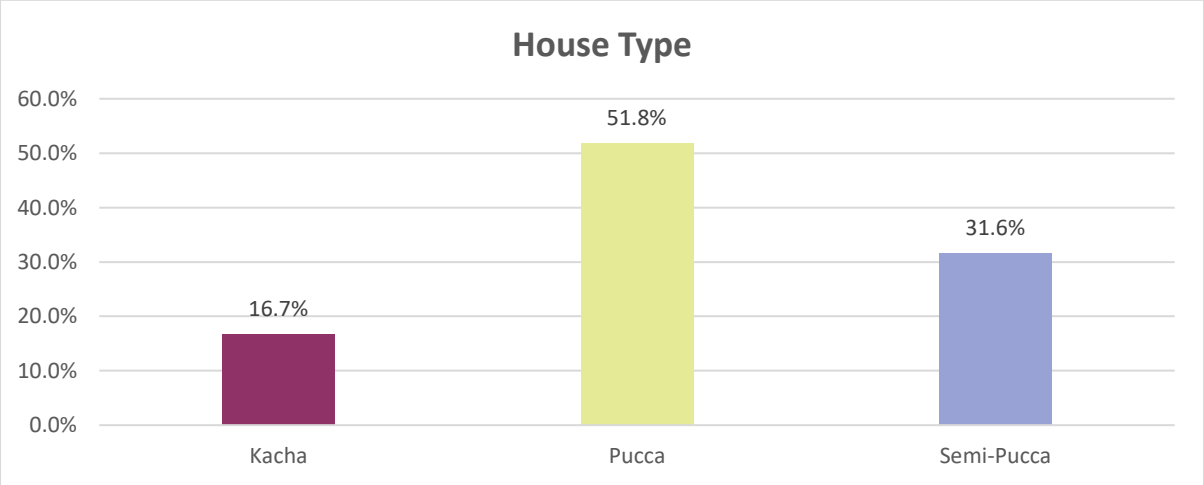


Figure 73: House Type of Meherpur Paurashava

Table 31: House Type of Meherpur Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Kacha	38	16.7%
2	Pucca	118	51.8%
3	Semi-Pucca	72	31.6%

Source: Field Survey, 2025

51.8% live in pucca houses, 31.6% semi-pucca, and 16.7% in kacha. Despite being an urban area, a substantial share lives in non-permanent housing, suggesting persistent pockets of urban poverty or informal settlements. Targeted housing regularization and upgrading schemes are needed.

5.5.4.2 House Ownership

The house ownership pattern in Meherpur Paurashava reveals a strong predominance of owned housing. According to the 2025 field survey, a vast majority of households, 91.2 percent (206 households), live in houses they own, while only 8.8 percent (20 households) live in rented houses. This indicates that homeownership is deeply rooted in the municipality, reflecting long-term residential stability and limited reliance on rental housing markets. The small share of rented households suggests that the housing sector is still largely self-sustained and family-oriented, with relatively little penetration of commercialized or large-scale rental housing systems. From a planning perspective, this trend highlights the importance of policies focusing on improving quality and durability of owned houses, while also ensuring affordable rental options for low-income or newly migrated residents who may not yet have access to ownership opportunities.

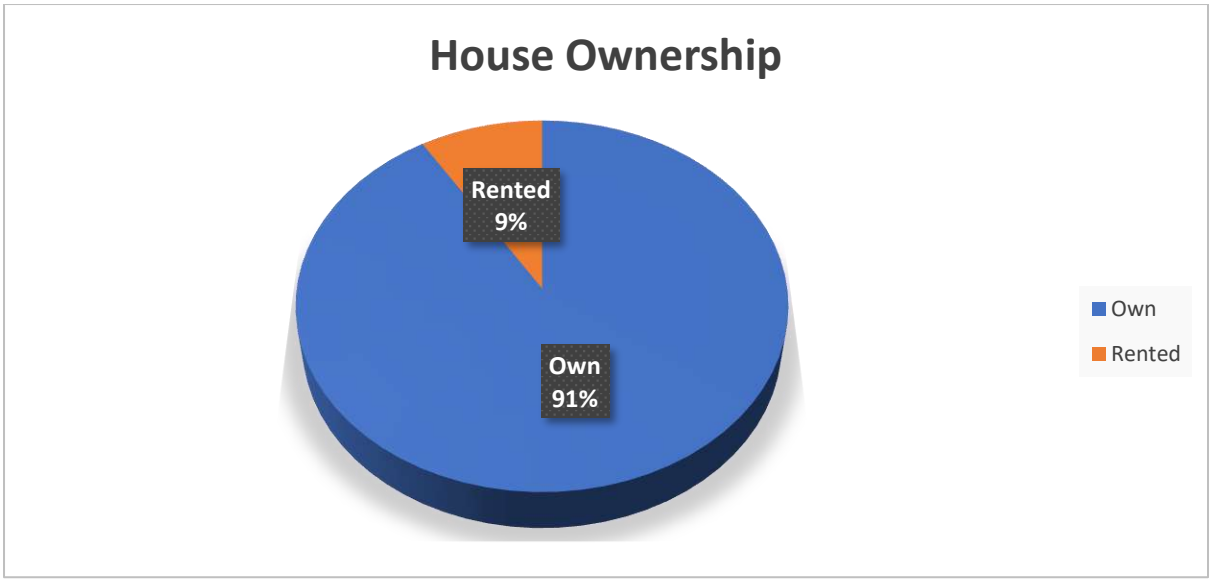


Figure 74: House Ownership of Meherpur Paurashava

Table 32: House Ownership of Meherpur Paurashava

SL No.	Categories	Frequency	Percentage (%)
1	Own	206	91.2%
2	Rented	20	8.8%

Source: Field Survey, 2025

5.5.4.3 Transportation Mode

The transportation system in Meherpur Paurashava demonstrates a strong dependence on walking and rickshaws, consistent with its compact urban structure. Informal modes dominate, while formal public transport and private cars remain negligible.

Transportation Modes Usage: The bar chart shows the percentage distribution of daily transportation modes:

- Walking is the most prevalent mode, accounting for 41.4% of all trips. This reflects the compactness of the town, where most daily needs—schools, markets, and workplaces—are within walking distance.
- Rickshaws hold the second-largest share at 24.3%, a significant portion compared to other upazilas and paurashavas. This underlines their importance as a flexible, short-distance transport mode within dense urban areas.
- Cycles (17.5%) and motorcycles (12.2%) together account for nearly one-third of trips. Cycles remain popular due to affordability and convenience, while motorcycles provide faster, more flexible options for longer intra-urban and peri-urban trips.
- Vans represent 2.6%, indicating a more limited role in the paurashava compared to rural areas.
- Buses (1.5%), cars (0.4%), and microbuses (0.1%) together make up less than 3% of trips, showing the marginal role of formal public transport and private vehicles in the municipality.

The analysis highlights that Meherpur Paurashava relies heavily on non-motorized and semi-motorized modes, particularly walking and rickshaws. This reflects its urban form, where compact settlement patterns and short-distance trips dominate daily mobility.

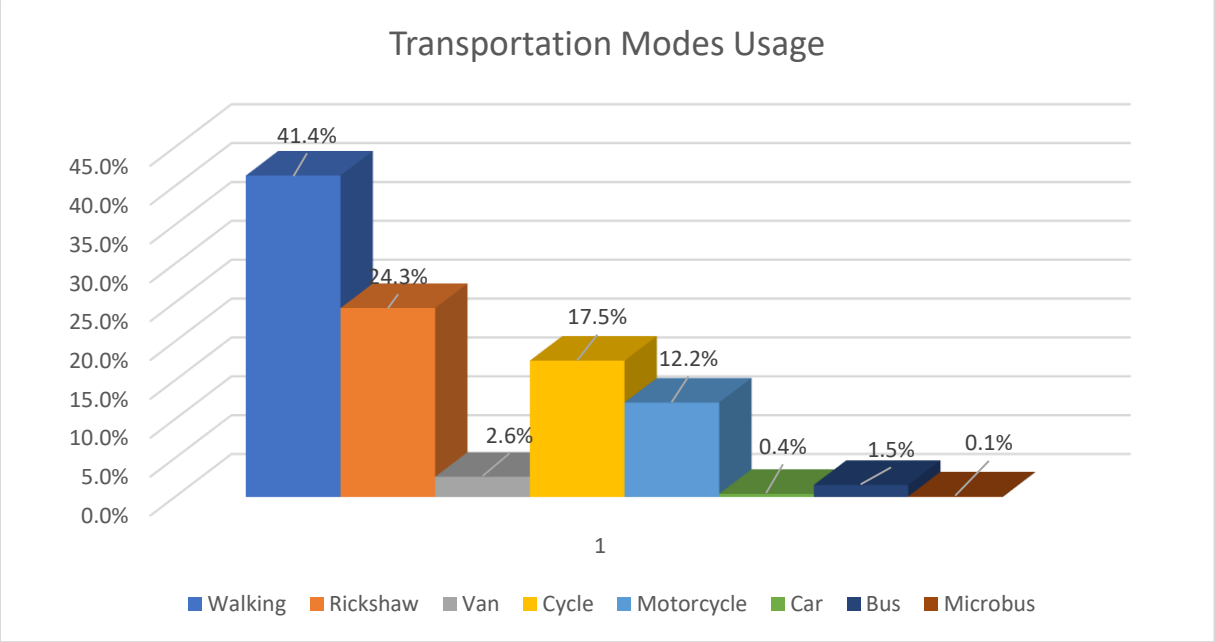


Figure 75: Transportation Modes Usage in Meherpur Paurashava

5.5.5 Financal Capital

5.5.5.1 Income

The household income distribution of Meherpur Paurashava shows a clear concentration within the lower to middle income brackets, highlighting the economic vulnerability of the majority of residents. According to the 2025 field survey, the largest share of households, 52.0 percent (127 households), fall within the Tk. 10000 to 20000 income range, making this the dominant income category. A further 20.9 percent (51 households) earn between Tk. 21000 to 30000, while 11.5 percent (28 households) fall into the Tk. 31000 to 40000 range. Only a small fraction of households, 5.7 percent (14 households), report earning more than Tk. 40000 per month, indicating limited representation of higher income groups. On the other hand, about 9.8 percent (24 households) survive with an income of less than Tk. 10000, reflecting a significant economically disadvantaged group.

Overall, this income profile illustrates that Meherpur Paurashava is largely a lower middle-income community, with limited upward income mobility. For urban planning and poverty reduction strategies, the focus should therefore be on job creation, skill development, and affordable services to uplift the majority who remain within modest earning brackets.

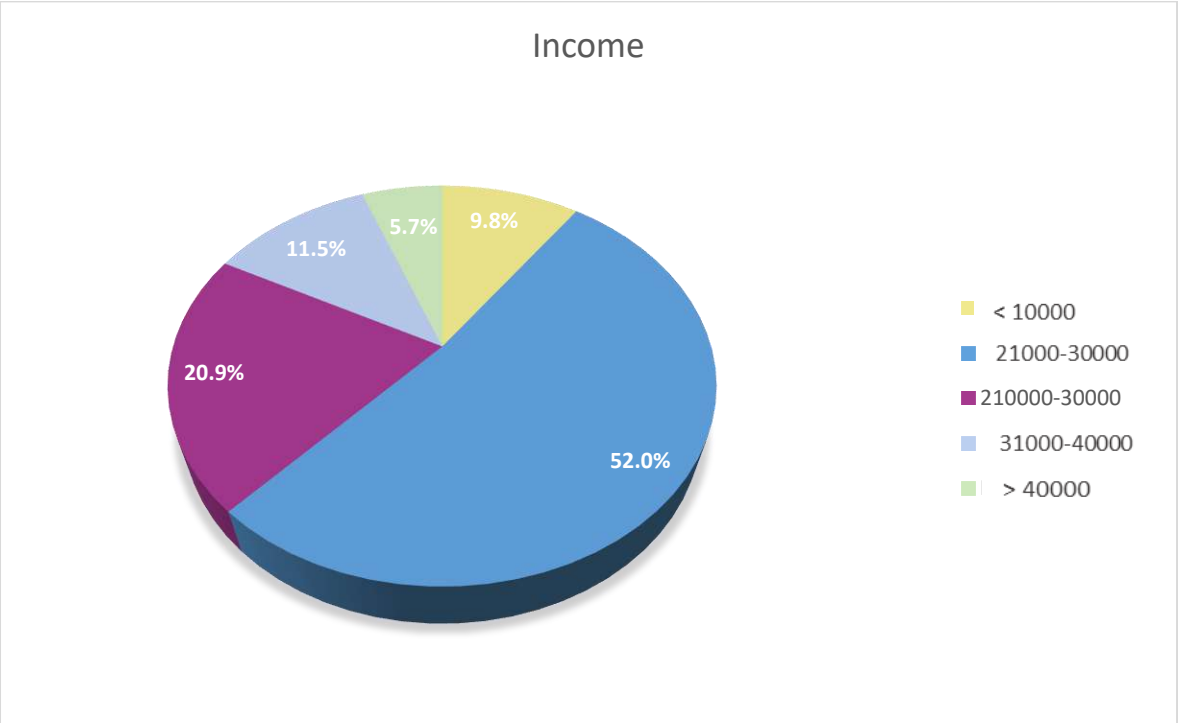


Figure 76: Income of The Household of Meherpur Paurashava

Table 36: Income of The Household of Meherpur Paurashava

SL No.	Categories (Tk)	Frequency	Percentage (%)
1	< 10000	24	9.8%
2	10000-20000	127	52.0%
3	21000-30000	51	20.9%
4	31000-40000	28	11.5%
5	> 40000	14	5.7%

Source: Field Survey, 2025

5.5.5.2 Expenditure

The expenditure pattern of households in Meherpur Paurashava highlights a moderate to high spending tendency, reflecting the cost of urban living. The largest proportion of households, 34.8 percent (78 households), report monthly expenditures between Tk. 11000 and Tk. 15000, which stands as the most dominant category. This is followed by 25.4 percent (57 households) spending between Tk. 16000 and Tk. 20000, suggesting that over half of the households allocate more than Tk. 11000 monthly for their basic and non-basic needs. A significant 23.7 percent (53 households) spend between Tk. 5000 and Tk. 10000, while 13.8 percent (31 households) exceed Tk. 20000, reflecting a small but notable group of higher-spending households. Only 2.2 percent (5 households) report monthly expenditures below Tk. 5000, representing the most economically constrained group.

This expenditure distribution indicates that most households fall into a middle expenditure bracket, aligning with the income trends of the area. The relatively high share of households spending above Tk. 15000 suggests rising living costs and dependency on stable income sources.

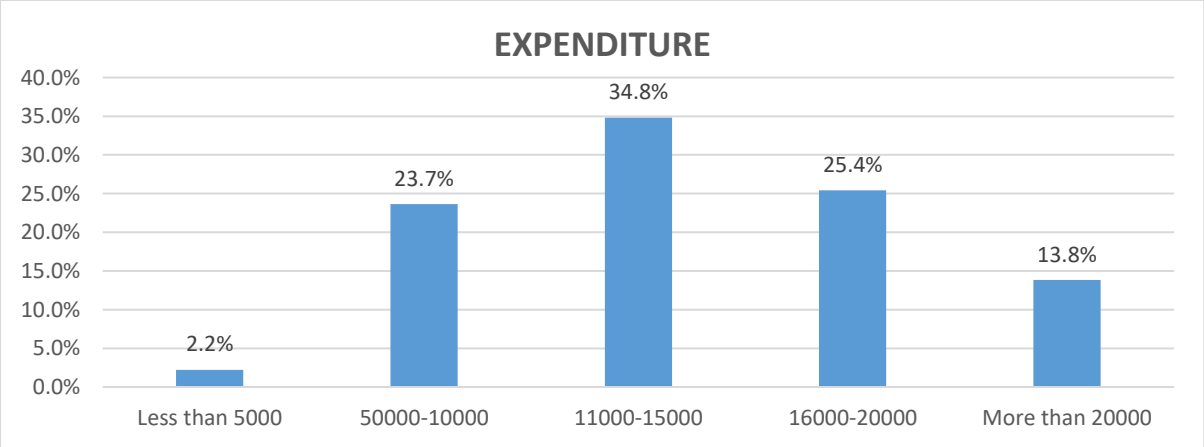


Figure 77: Expenditure of The Household of Meherpur Paurashava

Table 17: Expenditure of The Household

SL No.	Categories	Frequency	Percentage (%)
1	Less than 5000	5	2.2%
2	50000-10000	53	23.7%
3	11000-15000	78	34.8%
4	16000-20000	57	25.4%
5	More than 20000	31	13.8%

Source: Field Survey, 2025

5.5.5.3 Saving

The saving pattern of households in Meherpur Paurashava reveals a very limited capacity for financial security, reflecting economic vulnerability among a large portion of residents. Almost half of the households, 45.3 percent (102 households), save less than Tk. 500 per month, while another 38.7 percent (87 households) manage to save only between Tk. 500 and Tk. 1000. Together, this indicates that more than 80 percent of the households have minimal savings, insufficient to cope with major shocks or emergencies. A smaller proportion, 11.6 percent (26 households), save between Tk. 1100 and Tk. 1500, while only 4.4 percent (10 households) can save more than Tk. 1500 monthly, representing the relatively financially stable group.

Figure 78: Saving of The Household of Meherpur Paurashava

Table 38: Saving of The Household

SL No.	Categories	Frequency	Percentage (%)
1	Less than 500	102	45.3%
2	500-1000	87	38.7%
3	1100-1500	26	11.6%
4	more than 1500	10	4.4%

Source: Field Survey, 2025

This pattern highlights that although the majority of households are able to maintain some level of saving, the amounts are extremely low compared to living costs and future needs. The

findings suggest that households in Meherpur Paurashava remain financially fragile, with limited buffers against crises such as illness, job loss, or rising prices. Strengthening access to income-generating opportunities, microfinance, and financial literacy programs could play a crucial role in enhancing the resilience of these urban households.

5.6 Livelihood Context & Demographics of Mujibnagar Upazila

5.6.1 Demographis

5.6.1.1 Population Pyramid

The population pyramid of Mujibnagar Upazila reveals a contracting demographic structure, marked by a dominant concentration in the 30–39 age groups and a gradually narrowing base. The relatively smaller share of the 0–14 age group suggests declining fertility and a shift toward a more stabilized population growth pattern.

The working-age population (15–49 years) constitutes the majority, with females outnumbering males in nearly all cohorts, especially in the 30–34 and 35–39 age groups. This gender pattern may be linked to male outmigration or occupational shifts. The elderly population (60+) remains modest, though beginning to emerge, indicating the onset of population aging.

This demographic distribution implies a lower youth dependency burden, paired with increasing demand for employment, vocational training, and urban services for adults. In the long term, the growing middle-aged segment will necessitate planning for ageing-related services, including healthcare, pension schemes, and social care support.

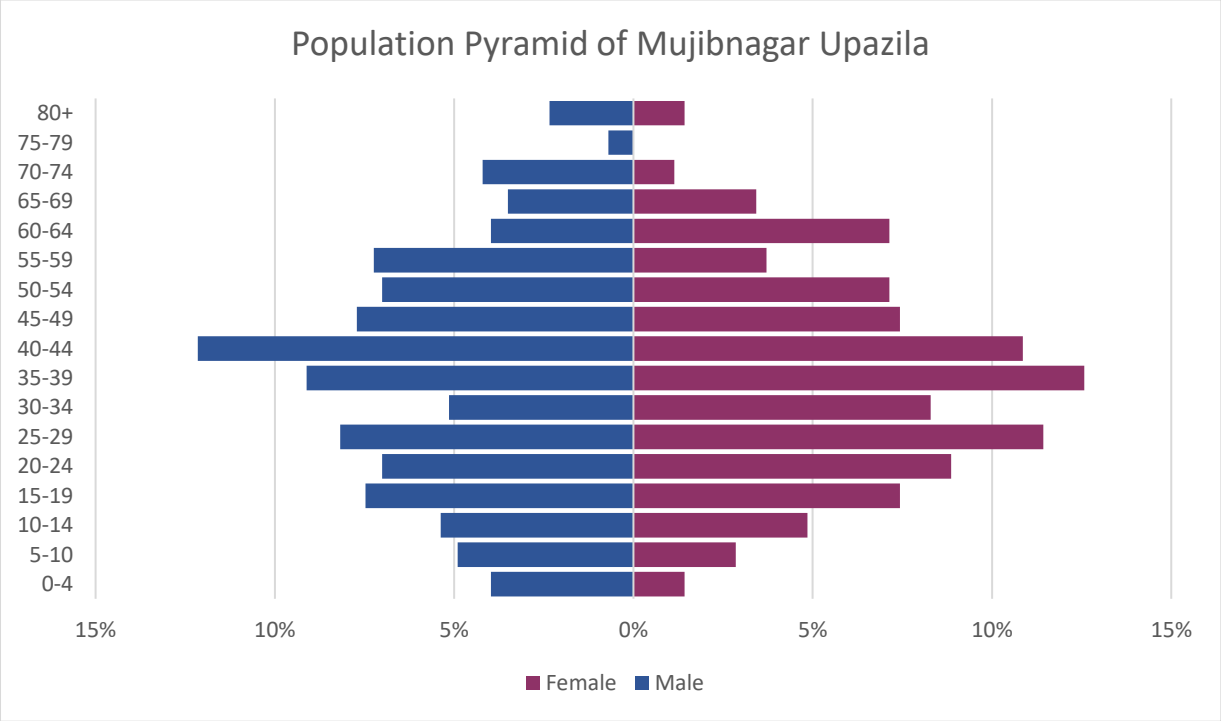


Figure 79: Population Pyramid of Mujibnagar Upazila

5.5.1.2 Household Heads

93% of household heads are male, and 7% are female. While slightly better than Gangni, the disparity still reveals deeply embedded gender roles. Planning should enable broader female participation in governance, facilitate women-led enterprises, and design public spaces that encourage safe and inclusive use by women and girls.

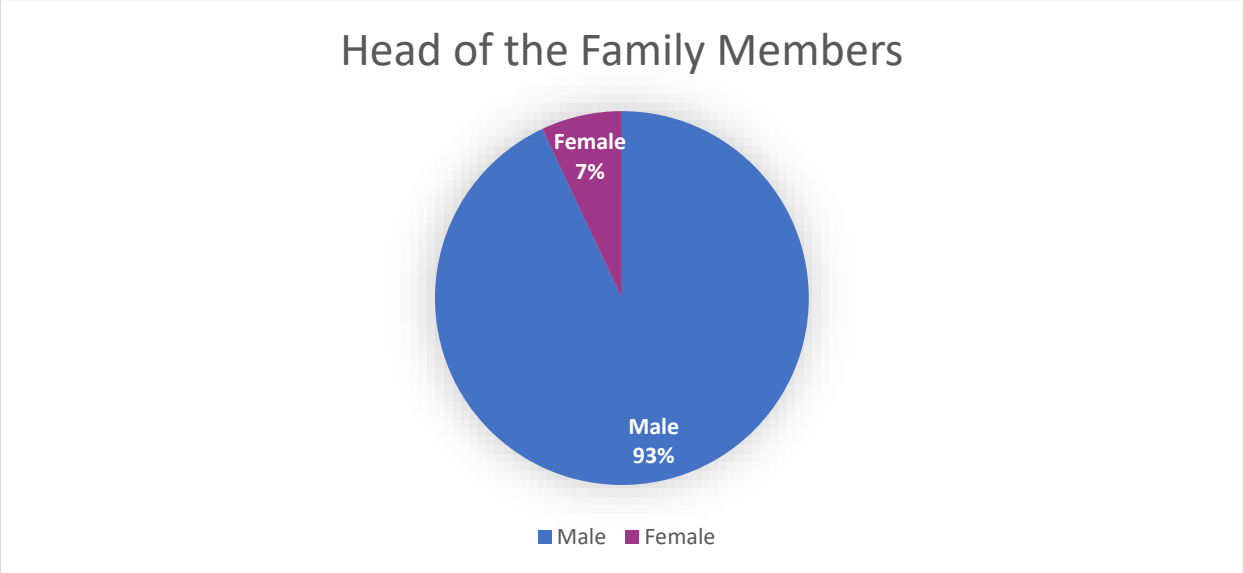


Figure 80: Head of the Family Members of Mujibnagar Upazila

Table 43: Head of the Family Members

SL No.	Categories	Frequency	Percentage (%)
1	Male	226	93%
2	Female	17	7%

The majority of household heads fall within the 31–40 (29%), 41–50 (24%), and 51–60 (20%) brackets. This working-age population suggests planning should emphasize income generation, upskilling, and family-centric services. Elderly households (61+) also represent nearly 18%, indicating a need for geriatric healthcare planning and social protection.

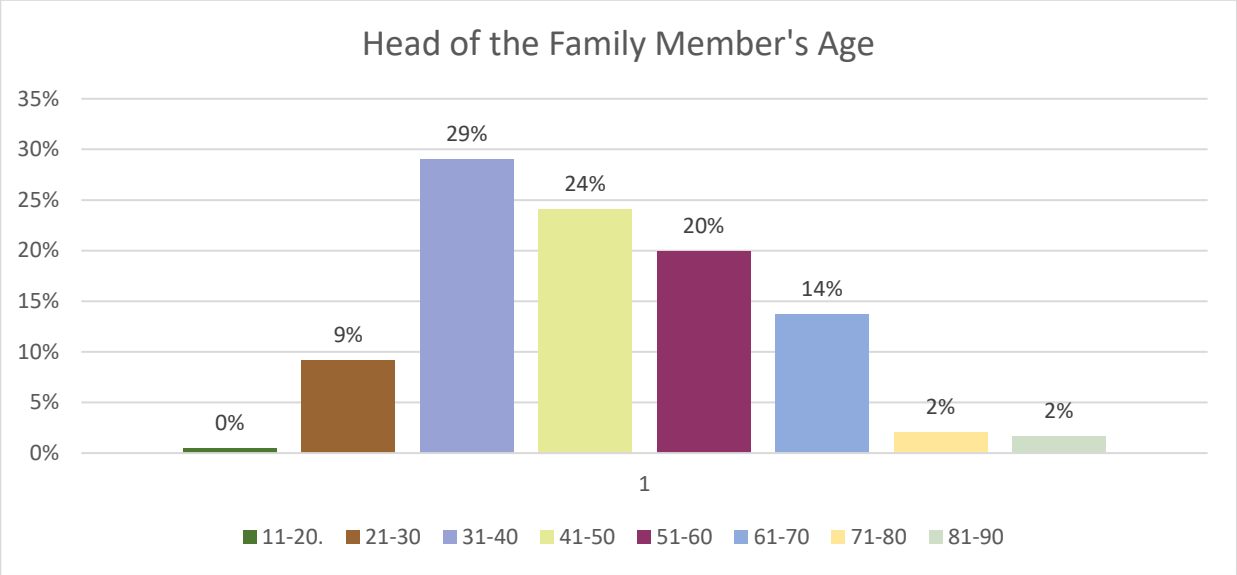


Figure 81: Head of the Family Member's Age of Mujibnagar Upazila

Table 44: Head of the Family Member's Age

SL No.	Categories (Age)	Frequency	Percentage (%)
1	11-20.	1	0%
2	21-30	22	9%
3	31-40	70	29%
4	41-50	58	24%
5	51-60	48	20%
6	61-70	33	14%
7	71-80	5	2%
8	81-90	4	2%

Source: Field Survey, 2025

5.5.1.3 Family Structure

The family type distribution in Mujibnagar Upazila reveals that 86% of surveyed households are single-family units, while 14% are joint families. This indicates that although nuclear households are predominant, a considerable proportion of the population continues to maintain joint family arrangements.

Single-family households, typically consisting of parents and dependent children, are becoming increasingly common as socio-economic modernization, mobility, and land division reshape rural household structures (Goode, 1963). These households often drive higher demand

for separate housing units, modern amenities, and individualized economic opportunities. In contrast, the persistence of joint families where extended relatives and multiple generations share a household underscores the continuing importance of traditional family systems, intergenerational caregiving, and collective resource management.

The relatively higher share of joint households in Mujibnagar compared to Meherpu sadar upazila suggests that cultural traditions and economic interdependence remain influential in this locality.

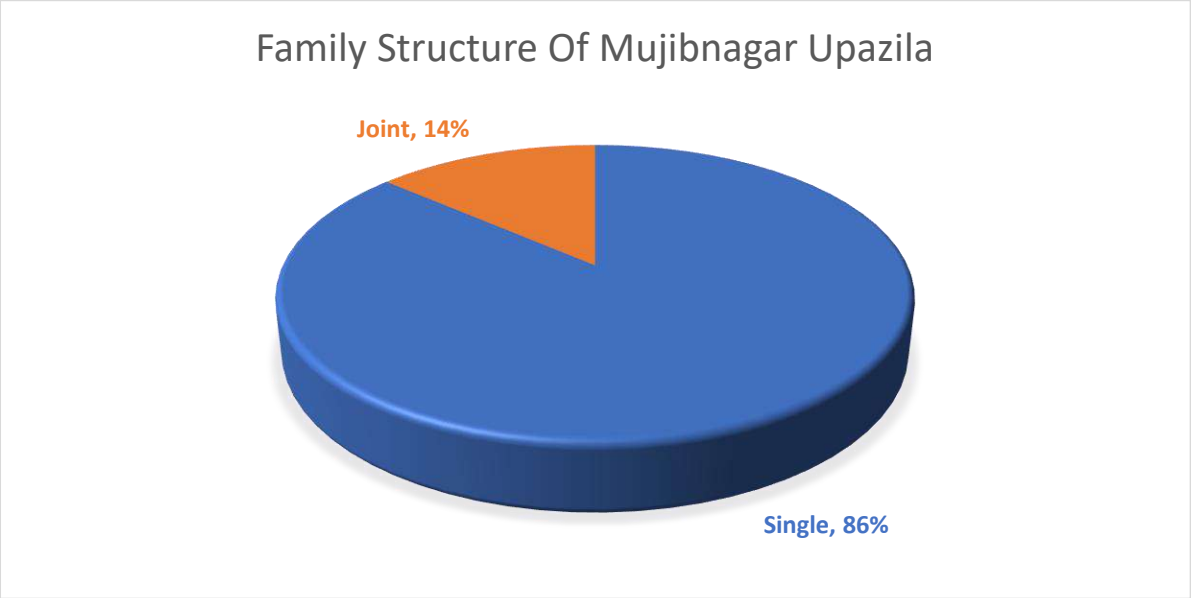


Figure 82: Family Type of Mujibnagar Upazila

Table 40: Family Type of Mujibnagar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Single	210	86
2	Joint	33	14

5.5.1.4 Religious Affiliation

The religious composition of Mujibnagar Upazila, as presented in Figure 70 and Table 39, shows that Muslims form the vast majority at 95.5% of the population. Hindus and Buddhists each represent 0.4%, while Christians account for 3.7%.

This demographic profile indicates a high level of religious homogeneity, with Islam as the dominant faith. However, the presence of minority communities, though relatively small, highlights the importance of inclusive planning to ensure that all groups have equitable access to religious facilities, cultural representation, and participation in community decision-making.

Development policies in Mujibnagar Upazila should therefore prioritize interfaith harmony and address the needs of minority populations alongside the majority, fostering a socially cohesive and equitable environment for all residents.

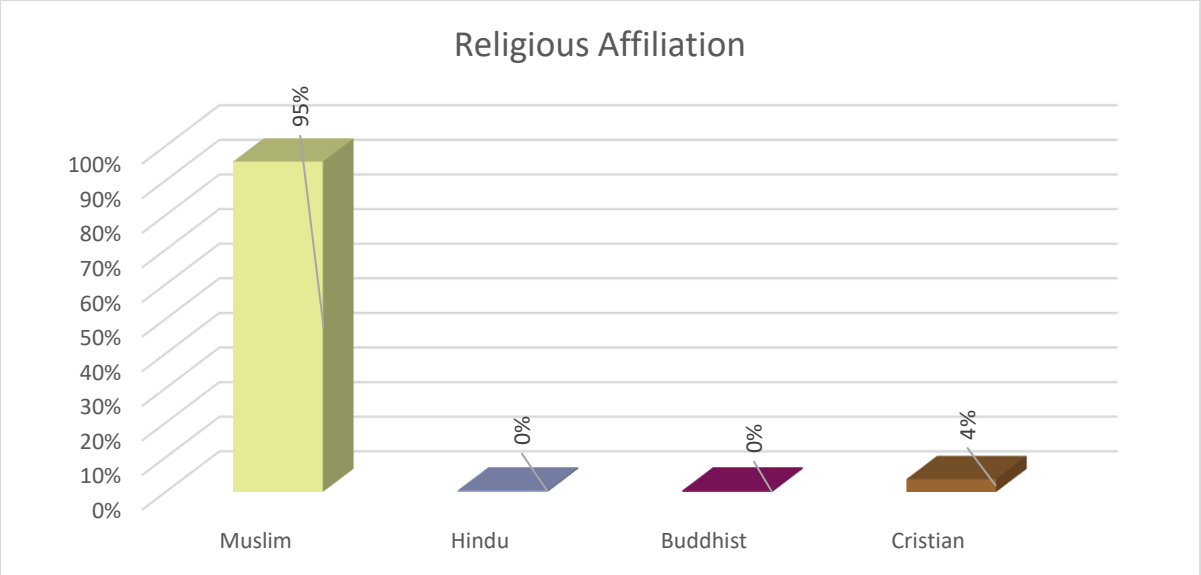


Figure 83: Religious Affiliation of Mujibnagar Upazila

Table 39: Religious Affiliation of Mujibnagar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Muslim	231	95.5%
2	Hindu	1	0.4%
3	Buddhist	1	0.4%
4	Cristian	9	3.7%

Source: Field Survey, 2025

5.5.1.6 House Ownership

An impressive 99% of households report owning their homes, with only 1% renting. While this implies strong settlement stability and social cohesion, the absence of rental housing options may limit mobility for job seekers, migrant labor, or younger adults. Regional housing strategies should introduce affordable rental models without displacing homeowners.

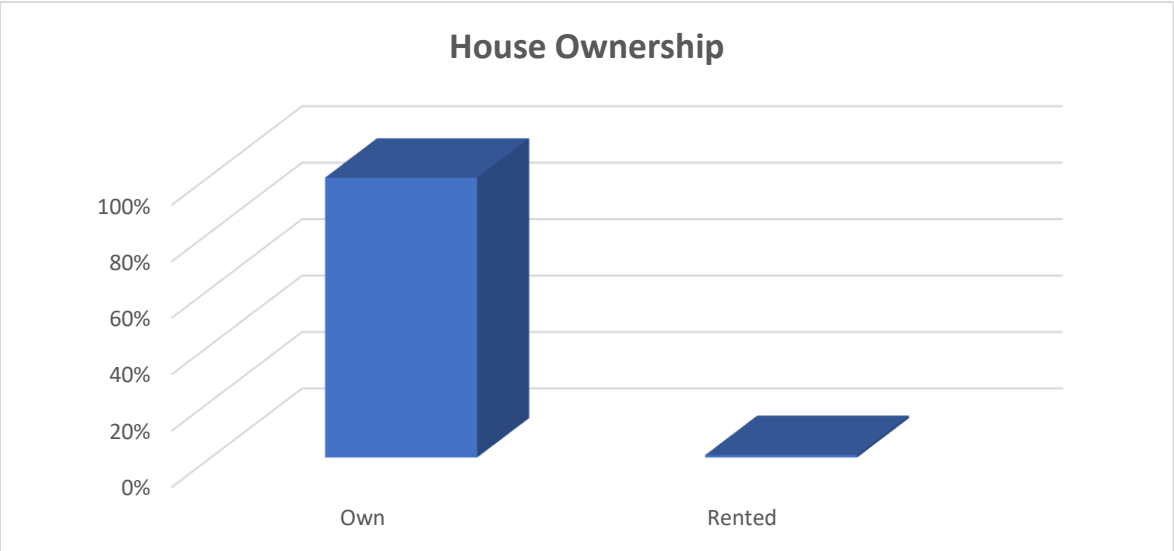


Figure 84: House Ownership of Mujibnagar Upazila

Table 42: House Ownership of Mujibnagar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	Own	232	99%
2	Rented	2	1%

5.6.2 Education

The educational achievement profile of adult (18+) household members in Mujibnagar Upazila reveals a moderately educated population, with the highest proportion of households 45%, reporting two educated adults. This indicates that while foundational adult education has reached a majority, there remains scope for expanding educational access across extended households. One educated member was reported in 25% of households, followed by no educated adults in 10%, highlighting a substantial pocket of educational deprivation that may require targeted literacy and outreach programs. Households with three educated adults account for 11%, while only a small portion reported four (5%), five (3%), or six (0%) educated members, indicating low multi-member adult education saturation.

This distribution suggests that although basic educational access exists for a significant portion of the population, further progress is needed in increasing the average number of educated adults per household—particularly in rural or disadvantaged clusters.

The findings call for focused investments in adult literacy, non-formal education, and vocational training programs, particularly for households with no or only one educated adult. Policy strategies should aim to reduce educational inequality by strengthening access to learning opportunities for all age groups within the household and fostering a culture of continuous education across generations in Mujibnagar Upazila.

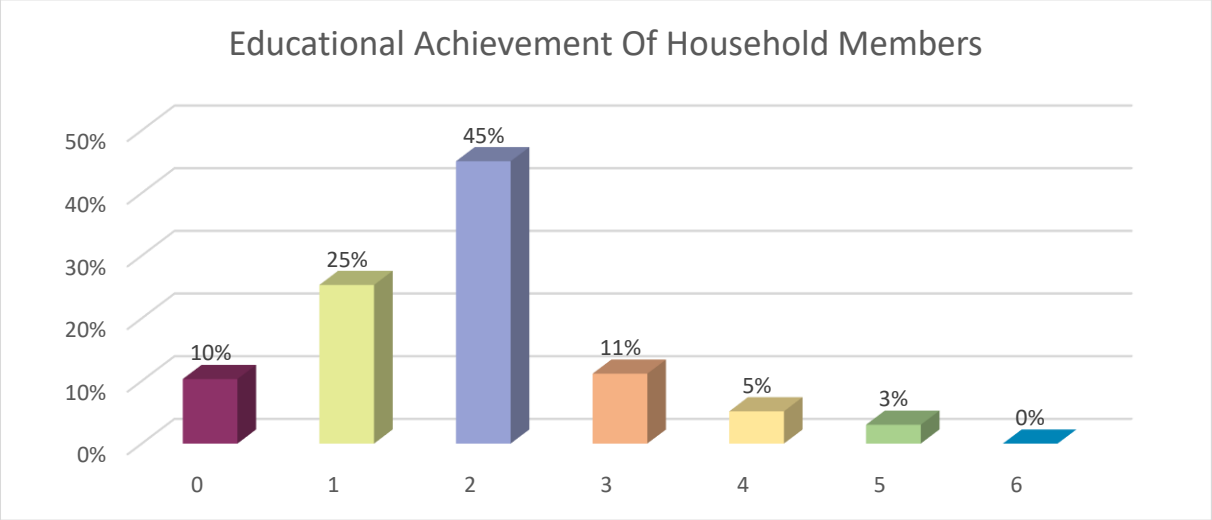


Figure 85: Educational Achievement of Adult (18+) Household Members of Mujibnagar Upazila

Table 18: Educational Achievement of Adult (18+) Household Members

SL No.	Categories (Member N)	Frequency	Percentage (%)
1	0	24	10%
2	1	59	25%
3	2	105	45%
4	3	26	11%
5	4	12	5%
6	5	7	3%
7	6	**0**	0%

Source: Field Survey, 2025

5.6.3 Health

The distribution of healthcare services across unions in Mujibnagar Upazila, as shown in Figure 76, indicates relatively uniform availability of community clinics, hospitals, and maternity centers, with only minor variations among unions.

Community clinics are well represented, with counts ranging from 59 in Bagoan to 60 in Dariapur, Mahajanpur, and Monakhali. These figures suggest a steady provision of primary healthcare services across the upazila.

Hospital availability follows a similar pattern, with most unions reporting 60 facilities. Dariapur stands out with the highest number (62), indicating slightly greater access to secondary healthcare services in that area. Conversely, Bagoan records the lowest hospital count (58), though the difference is minimal.

Maternity center availability is largely consistent, with Mahajanpur and Monakhali each reporting 60 facilities, while Bagoan (57) and Dariapur (58) show slightly lower counts. Despite these small differences, maternity care provision appears generally balanced across the upazila.

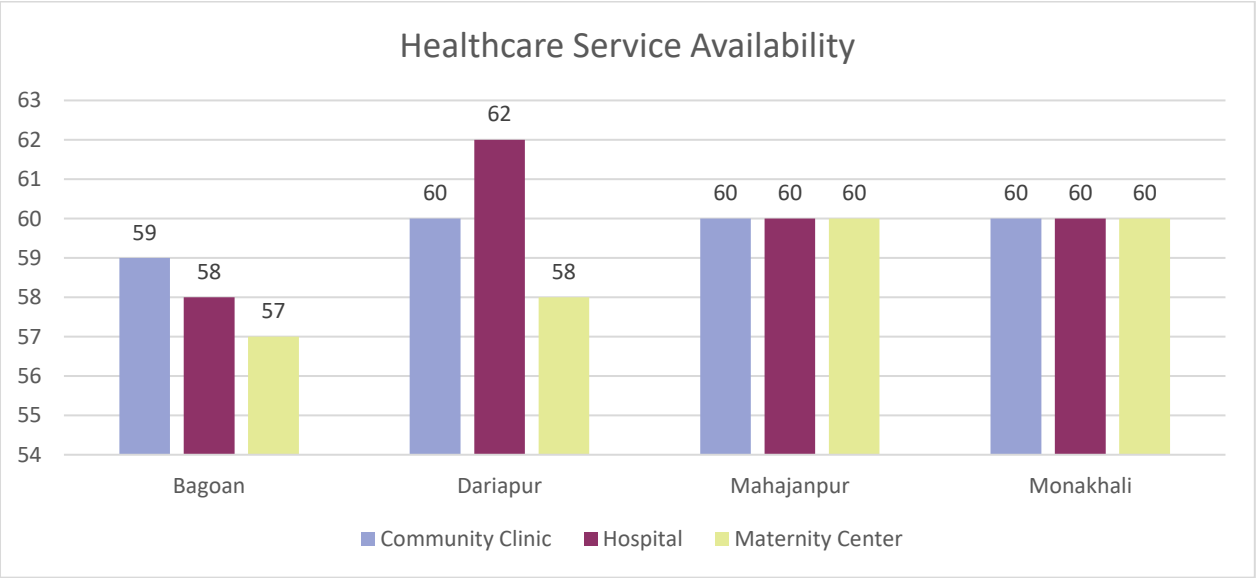


Figure 86: Healthcare Service Availability in Mujibnagar Upazila

Overall, the data reveals a relatively equitable distribution of healthcare infrastructure in Mujibnagar Upazila. While Dariapur benefits from marginally higher hospital coverage, and Bagoan slightly trails in all three service categories, the variations are not pronounced. Maintaining this balance while enhancing service quality could further strengthen healthcare delivery in the upazila.

5.6.4 Physical Capital

5.6.4.1 Housing

The current survey results show that Pucca houses make up 50.62% of all dwellings, which is a notable rise from 26.9% in the BBS 2011 Census. This increase of nearly 24 percentage points reflects significant improvement in permanent housing, likely driven by economic growth, infrastructural projects, and access to better construction materials.

Semi-Pucca houses have decreased from 22.6% in 2011 to 21.81% in the present survey, showing only a marginal reduction. This stability suggests that the Semi-Pucca category has not changed drastically, with limited transitions either upward to Pucca or downward to Kacha housing.

Kacha houses have dropped from 47.7% in 2011 to 27.57% now, a substantial decline of about 20 percentage points. This reduction indicates a significant improvement in housing durability, with many households moving away from vulnerable, temporary-material dwellings.

Overall, compared to 2011, Mujibnagar Upazila has undergone a major transformation in housing quality, with Pucca dwellings nearly doubling in share and Kacha housing significantly reduced.

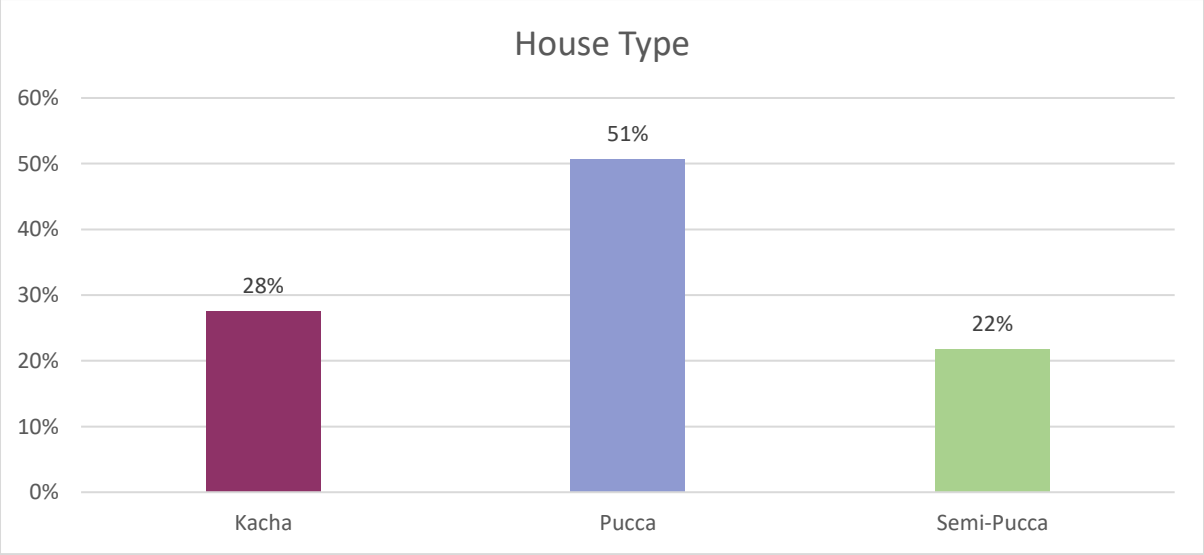


Figure 87: House Type of Mujibnagar Upazila

5.6.4.2 House Ownership

In Mujibnagar Upazila, house ownership is overwhelmingly prevalent, with 99% of surveyed households owning their homes and only 1% residing in rented dwellings. This dominance of ownership reflects the rural character of the upazila, where families place a high value on permanent settlement, land inheritance, and intergenerational property transfers.

The near absence of rental housing indicates that households rely primarily on family-owned land and housing, minimizing dependency on the rental market. Such patterns also reflect the community's strong attachment to place, stability, and long-term settlement preferences. However, this stability comes with limited housing flexibility, which could create challenges for landless families, migrant workers, or individuals seeking temporary accommodation.

Although the high rate of ownership strengthens social cohesion and long-term housing security, the lack of a rental market suggests potential barriers to inclusivity.

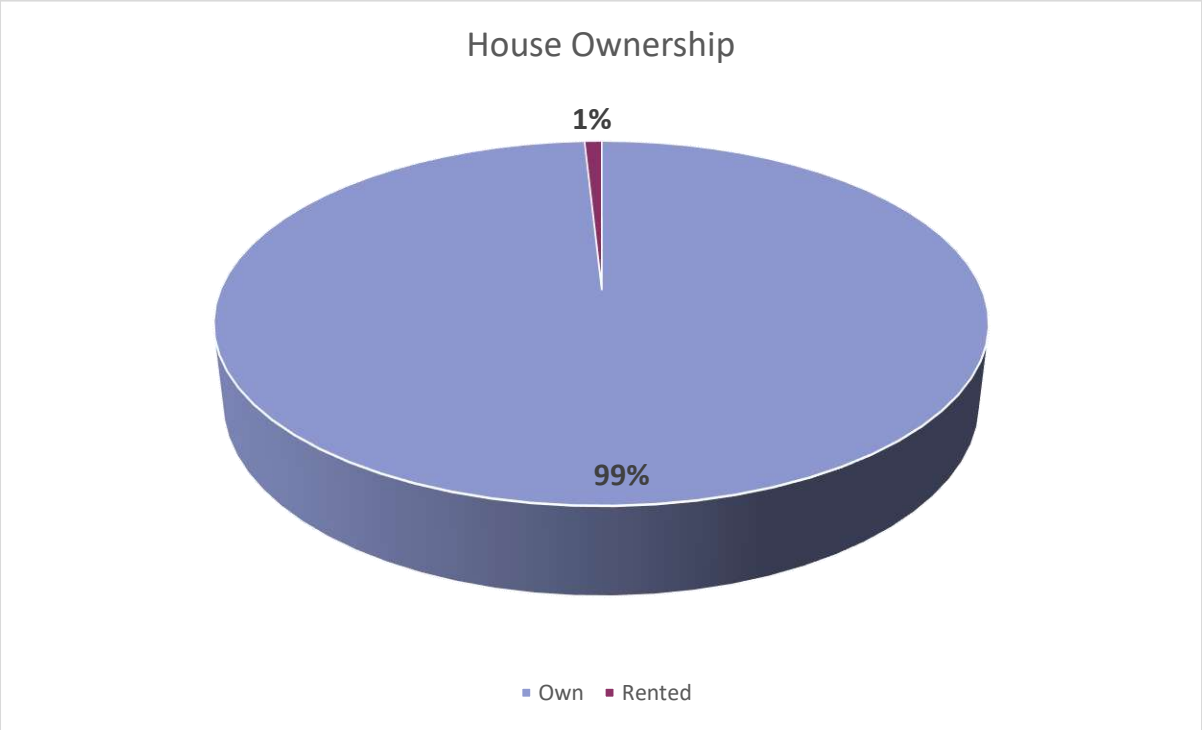


Figure 88: House Ownership of Mujibnagar Upazila

5.6.4.3 Transportation Mode

The transportation pattern in Mujibnagar Upazila reflects a strong dependence on walking and cycling, with relatively limited reliance on formal motorized transport. This distribution highlights the localized and rural nature of daily mobility, shaped by settlement patterns and accessibility to workplaces, schools, and markets.

Transportation Modes Usage: The bar chart illustrates the percentage distribution of daily transportation modes:

- Walking is the predominant mode, accounting for 46.2% of all trips. This underscores the compact settlement structure and the prevalence of short-distance travel within the upazila.
- Cycles constitute 26.7%, a significantly high share compared to other upazilas. This reflects affordability, availability, and cultural acceptance of cycling as a primary means of mobility.
- Motorcycles represent 11.6%, providing faster travel options for households with dual rural-urban activities or those covering medium distances between villages, fields, and marketplaces.
- Vans (7.1%) are widely used for both passenger movement and small-scale goods transport, serving areas where motorized alternatives are limited.
- Rickshaws account for 5.1%, indicating a modest role in local short-distance travel, particularly in peri-urban growth centers.
- Cars (1.6%) and buses (1.6%) together reflect a very small share of trips, highlighting low levels of formal public transport and private vehicle ownership.
- Microbuses are negligible (0.0%), confirming the absence of structured shared motorized transport in the upazila.

The data demonstrates that Mujibnagar is highly dependent on non-motorized transport, especially walking and cycling, which together constitute nearly three-fourths of daily trips. This reveals a distinctly rural mobility structure, shaped by short-distance, localized travel needs.

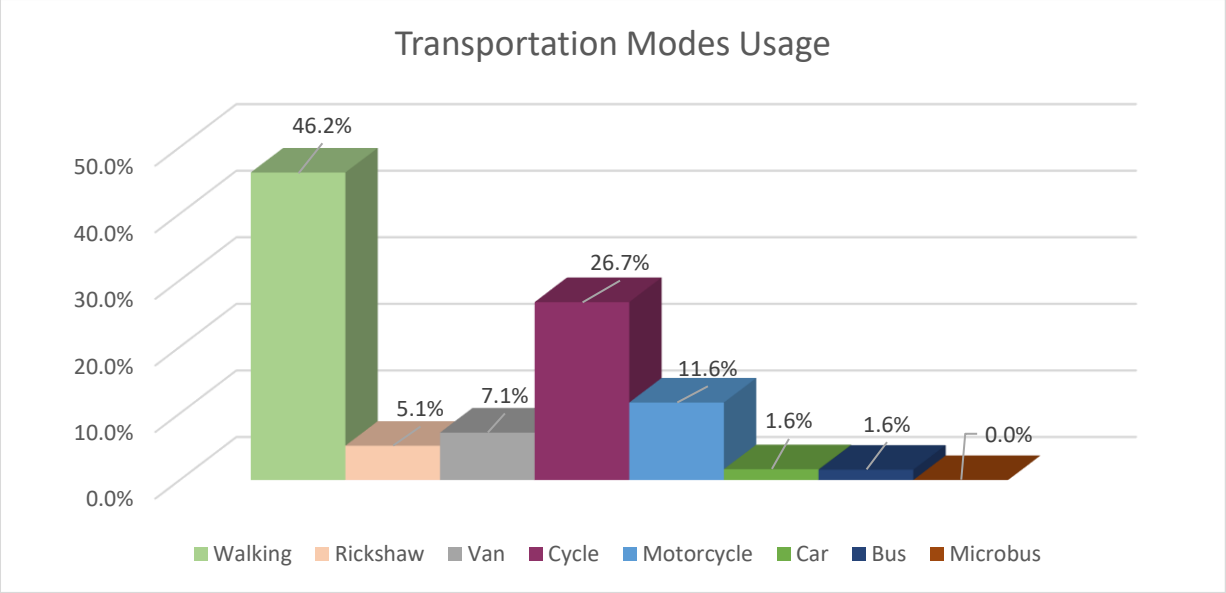


Figure 89: Transportation Modes Usage in Mujibnagar Upazila

5.6.5 Financial Capital

5.6.5.1 Income

The income distribution of households in Mujibnagar Upazila shows that a majority of families, 56%, earn between 10,000–20,000 BDT per month, making this the most dominant income group. This is followed by 29% of households who report monthly incomes between 21,000–30,000 BDT, reflecting a strong mid-income segment within the upazila.

Smaller proportions of households fall into the higher income categories, with 4% earning between 31,000–40,000 BDT and 3% earning above 40,000 BDT. On the lower end, 8% of households earn less than 10,000 BDT per month, representing those with limited earning capacity.Overall, the income profile of Mujibnagar Upazila is concentrated in the 10,000–30,000 BDT range, which together accounts for nearly 85% of households. This highlights the predominance of lower- to mid-income levels, with only a small proportion of families belonging to higher-income categories.

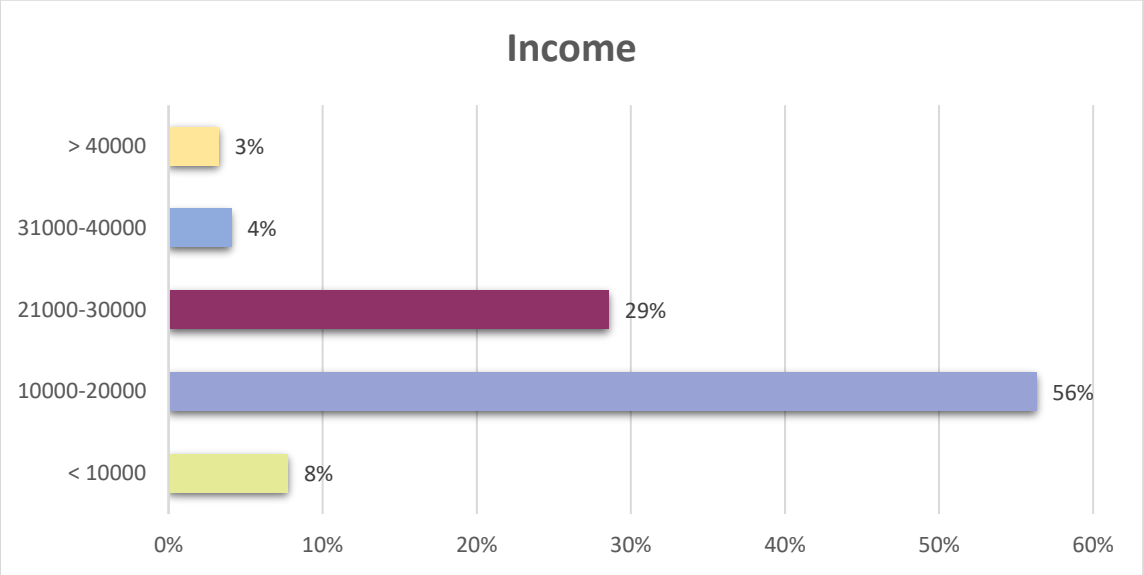


Figure 90: Income of The Household of Mujibnagar Upazila

Table 46: Income of The Household of Mujibnagar Upazila

SL No.	Categories	Frequency	Percentage (%)
1	< 10000	19	8%
2	10000-20000	138	56%
3	210000-30000	70	29%
4	310000-40000	10	4%
5	> 40000	8	3%

5.6.5.2 Expenditure

The expenditure distribution of households in Mujibnagar Upazila highlights a concentration in the lower- to mid-expenditure ranges. The largest proportion of households (41%) spend between 5,000–10,000 BDT per month, indicating that many families operate within modest monthly budgets. The second largest category is households spending 11,000–15,000 BDT, which accounts for 29% of the sample, reflecting another substantial group within the mid-expenditure range.

Meanwhile, 21% of households report monthly expenditures of 16,000–20,000 BDT, representing families with relatively higher spending levels. A smaller share, 7%, spend more than 20,000 BDT per month, signifying the presence of higher-expenditure households though limited in proportion. On the other end of the scale, households with very low monthly expenditures below 5,000 BDT make up only 2% of the total. Taken together, the data suggests that Mujibnagar Upazila households are primarily situated in the 5,000–15,000 BDT expenditure range, pointing towards a broad mid-level spending pattern.

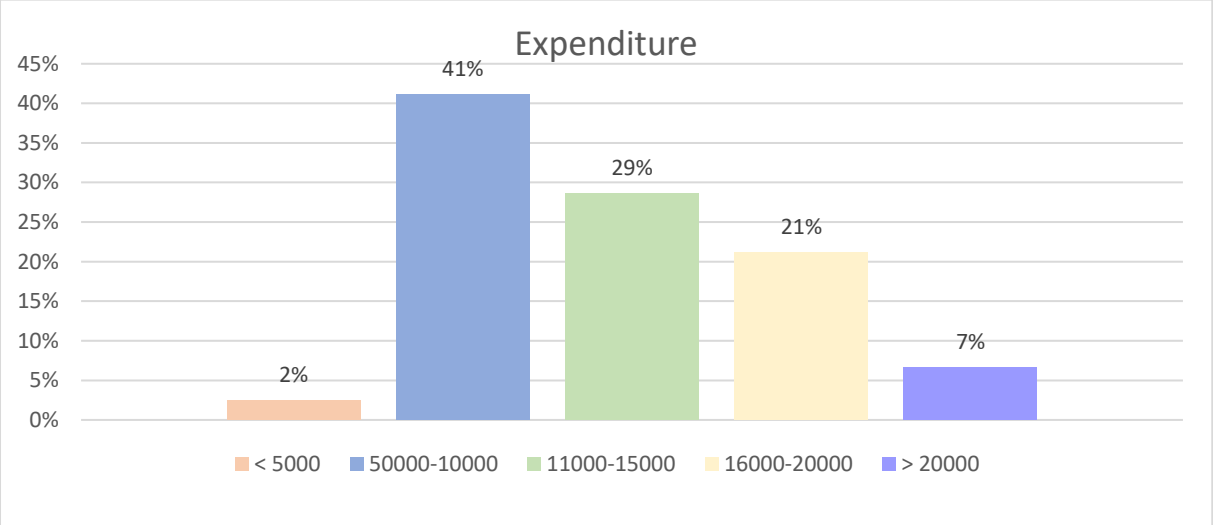


Figure 91: Expenditure of The Household of Mujibnagar Upazila

Table 47: Expenditure of The Household

SL No.	Categories	Frequency	Percentage (%)
1	< 5000	6	2%
2	50000-10000	99	41%
3	11000-15000	69	29%
4	16000-20000	51	21%
5	> 20000	16	7%

5.6.5.3 Saving

42% of households save BDT 500–1000, while 22% each fall below BDT 500 or above BDT 1500. These patterns show a bimodal saving culture: one group in chronic low-savings, another building modest capital. Financial inclusion and formal credit systems must be expanded to protect the vulnerable and incentivize productive savings.

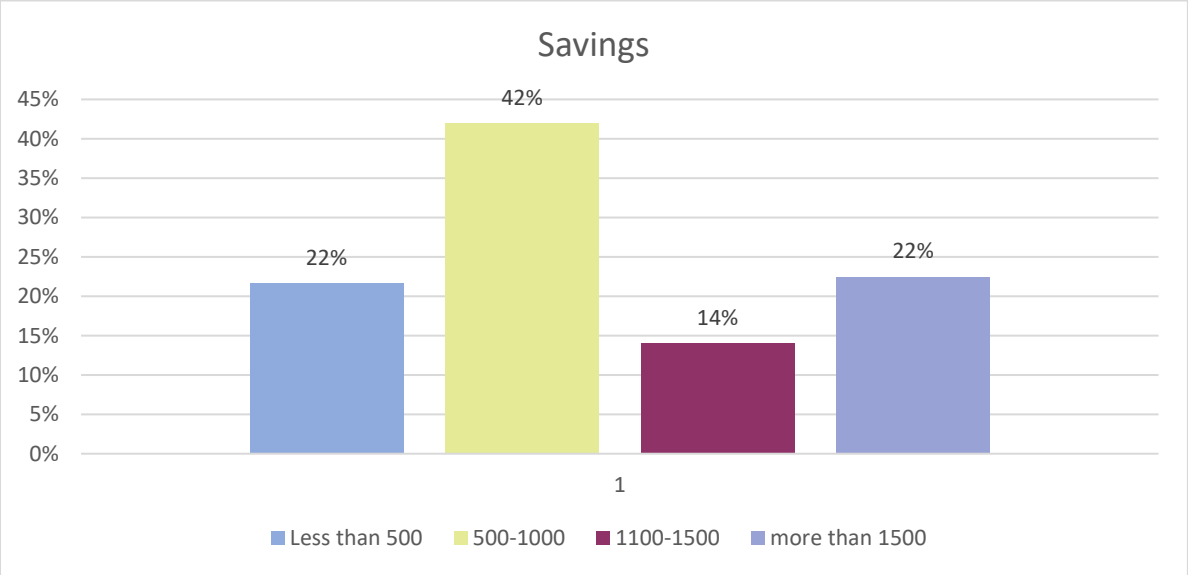


Figure 92: Saving of The Household of Mujibnagar Upazila

Table 48: Saving of The Household

SL No.	Categories	Frequency	Percentage (%)
1	< 500	51	22%
2	500-1000	99	42%
3	1100-1500	33	14%
4	> 1500	53	22%

5.7 Livelihood Context & Demographics of Rural Areas of Meherpur District

5.7.1 Demographis

5.7.1.1 Population Pyramid

The population pyramid of the rural areas of Meherpur District exhibits a distinctly expansive structure, marked by a broad base and a steady tapering toward older age groups. A substantial portion of the population falls within the 0–19 year age range, indicating high fertility rates and a predominantly youthful rural population.

The gender distribution is balanced across most age cohorts, with a slight female predominance in the older age groups, aligning with national patterns of longer female life expectancy. The sizeable middle-age population (30–49) further reflects the demographic momentum driven by past population growth. This rural demographic profile implies a high dependency ratio, signaling the need for continued investment in maternal and child healthcare, early education, and nutritional services in the short term. In the medium term, the large youth cohort will require employment opportunities, skills training, and rural economic diversification to absorb new entrants into the labor market.

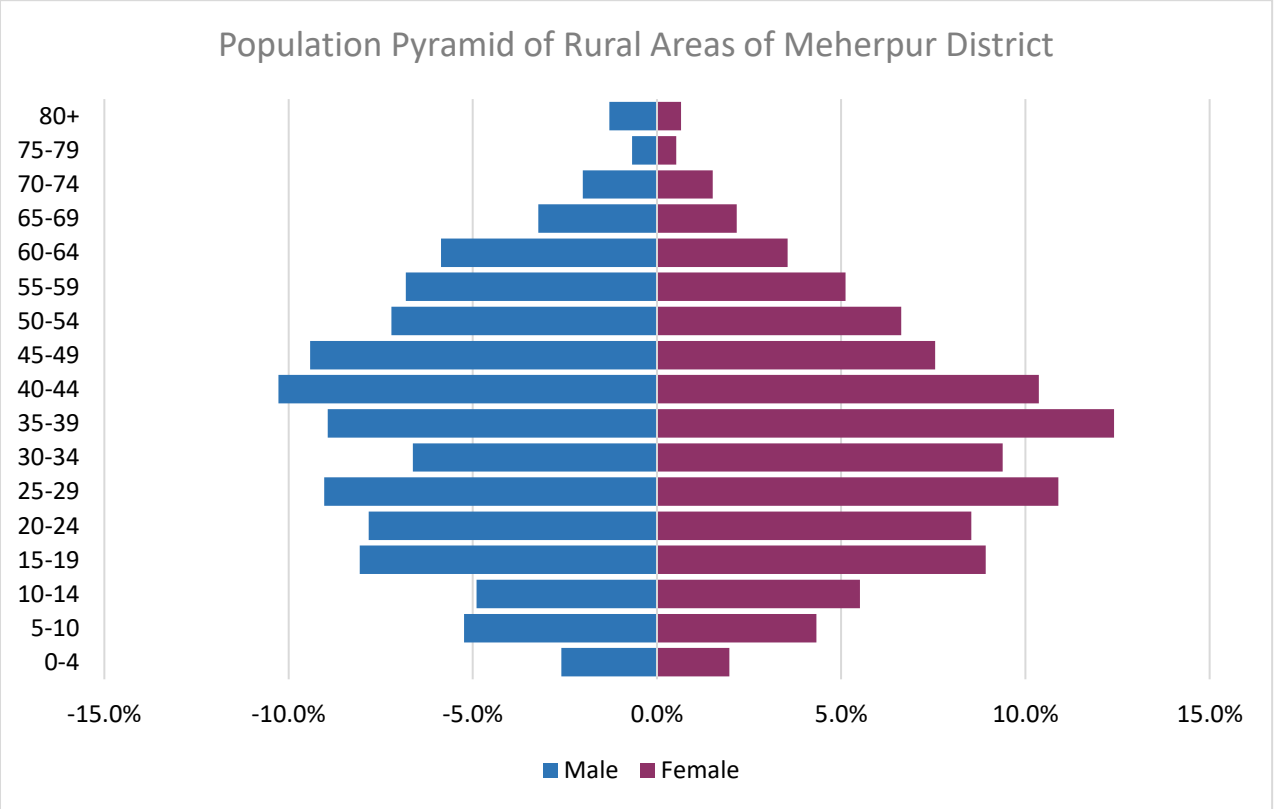


Figure 93: Population Pyramid of Rural Areas of Meherpur District

Over the long term, as the youthful population ages, rural areas will begin facing challenges related to elder care, health infrastructure, and social safety nets. Proactive planning is essential to ensure the rural health and support systems can evolve with the population's changing needs.

5.7.1.2 Household Heads

The distribution of household heads by sex in the rural areas of Meherpur District, as shown in Figure 83, indicates a predominantly male-headed household structure. In Gangni, 589 households (male-headed) and 29 households (female-headed) were recorded. Meherpur Sadar reported 520 male-headed and 33 female-headed households, while Mujibnagar recorded 296 male-headed and 20 female-headed households. This pattern reflects the prevailing patriarchal social structure typical of rural Bangladesh, where men traditionally assume the role of primary decision-makers. However, the presence of female-headed households, though relatively small, highlights the role of women in managing households, often due to factors such as male out-migration, widowhood, or changing social norms.

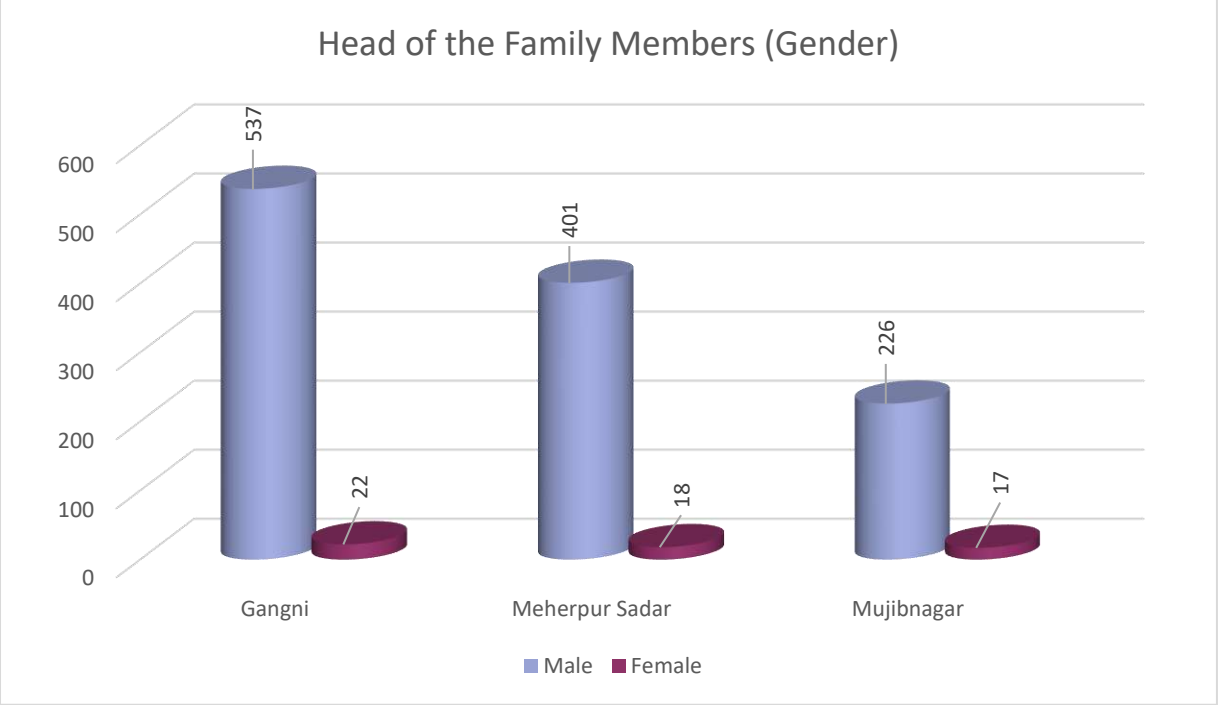


Figure 94: Head of the Family Members (Gender) of Rural Areas of Meherpur District

The age distribution of household heads in these rural areas shows a concentration in the middle-age groups. As presented in Table 14, the largest proportion falls within the 41–50 age group (28%), followed by 31–40 years (26%) and 51–60 years (22%). Younger household heads aged 21–30 years account for 11%, while older groups, such as 61–70 years and 71–80

years, represent 10% and 2% respectively. Only 1% are in the youngest category (11–20 years) and the oldest category (81–90 years).

The distribution suggests that household leadership is most commonly assumed by individuals in their economically active and socially influential years, with a gradual decline in representation among older age groups. This highlights the importance of designing age-sensitive policies supporting younger heads in establishing livelihoods while ensuring social protection and healthcare services for older heads approaching or in retirement.

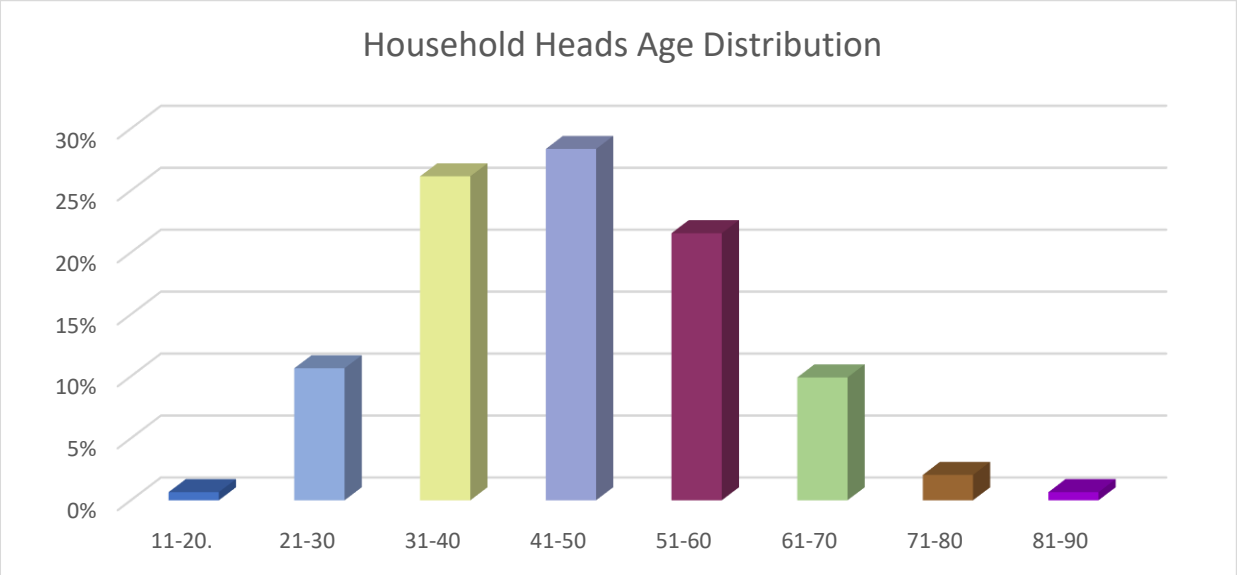


Figure 95: Household Heads Age Distribution of Rural Areas of Meherpur District

Table 19: Household Heads Age Distribution of Rural Areas of Meherpur District

SL No.	Categories (Age)	Frequency	Percentage (%)
1	11-20.	8	1%
2	21-30	130	11%
3	31-40	319	26%
4	41-50	346	28%
5	51-60	263	22%
6	61-70	121	10%
7	71-80	25	2%
8	81-90	8	1%

5.7.1.3 Family Structure

The family type distribution in the rural areas of Meherpur District shows that 86% of households are single-family units, while 14% are joint families. This indicates that nuclear families dominate even in rural settings, though a significant proportion of joint households remain an important feature of village life.

Single-family households in rural areas reflect changing socio-economic conditions, including increasing land fragmentation, migration, and a growing preference for smaller family units. These households typically demand separate housing plots and services tailored to smaller family sizes. On the other hand, the continued presence of joint families highlights the enduring role of extended kinship systems, where multiple generations live together, sharing responsibilities in agriculture, caregiving, and household management.

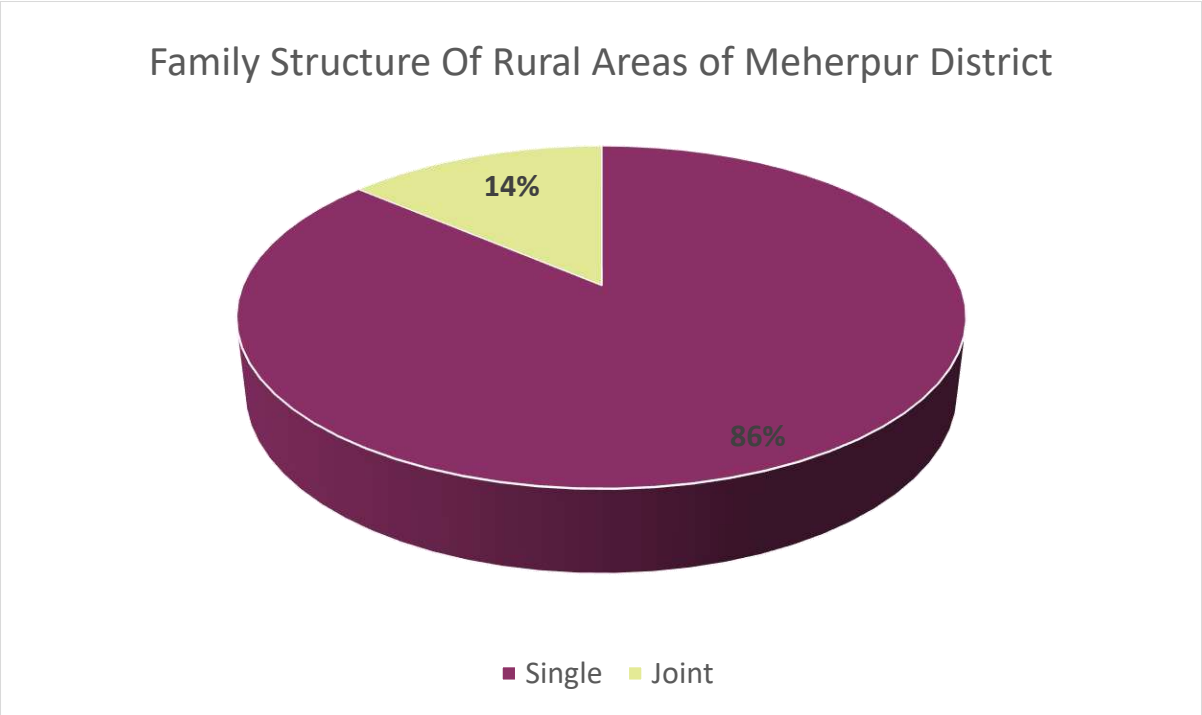


Figure 96: Family Structure Of Rural Areas of Meherpur District

Table 20: Family Structure Of Rural Areas of Meherpur District

SL No.	Categories	Frequency	Percentage (%)
1	Single	1056	86
2	Joint	168	14

5.7.1.4 Religious Affiliation

The religious composition of the rural areas of Meherpur District, as illustrated in Figure 81, shows that Muslims form an overwhelming majority at 97.8% of the population. Hindus represent 0.5%, Buddhists 0.1%, and Christians 1.6%.

This demographic pattern reflects a high level of cultural and religious homogeneity, with Islam as the dominant faith. Nonetheless, the presence of minority communities, though small in proportion, underscores the need for inclusive rural development planning that ensures equitable access to worship facilities, cultural activities, and social services for all groups.

By recognizing and addressing the needs of minority populations alongside the majority, local authorities can foster interfaith harmony, promote equitable representation, and strengthen community cohesion in the rural areas of Meherpur District.

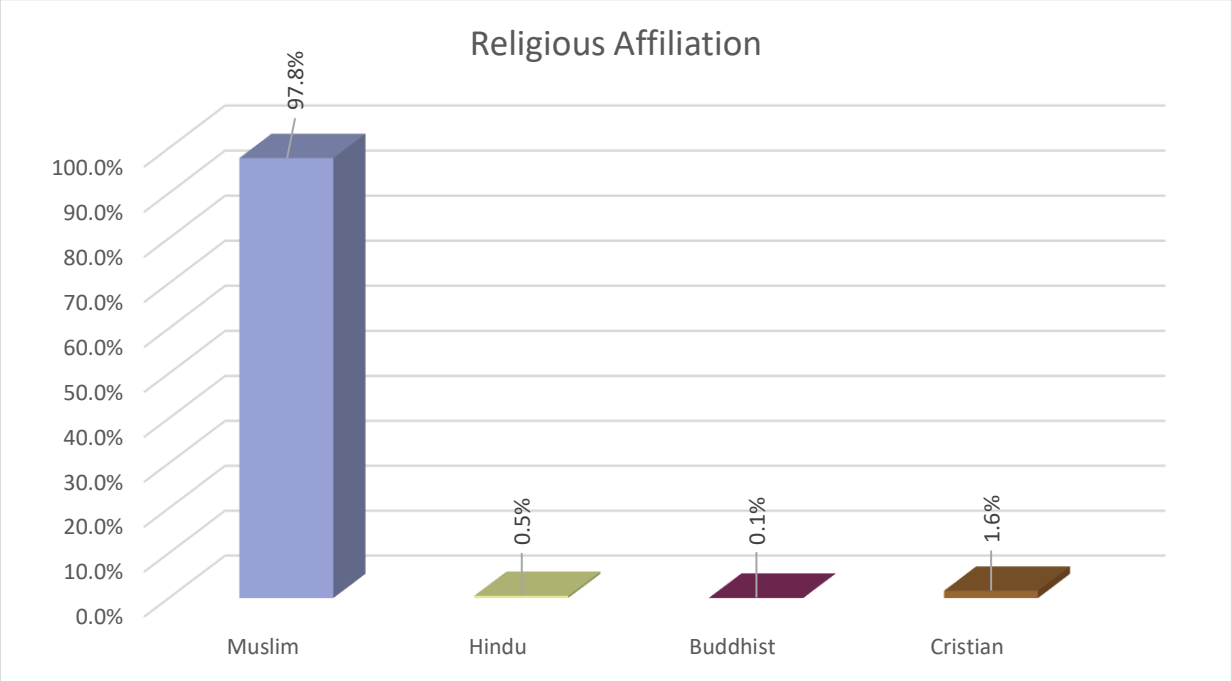


Figure 97: Religious Affiliation of Rural Areas of Meherpur District

5.7.2 Education

The educational profile of adult (18+) household members in the rural areas of Meherpur District presents a moderately concentrated pattern, with the highest proportion of households (50%) having two educated adult members. This indicates a foundational level of adult education is accessible to a large share of rural families.

Households with one and three educated members constitute 18% and 16%, respectively, followed by four members (9%). A small segment of the population—5%—reported no educated adults, reflecting localized areas of educational deprivation that may require targeted literacy initiatives. The proportion of households with five (1%) or six (0%) educated adult members remains negligible, suggesting limitations in household-wide adult education beyond basic levels.

This distribution underscores the progress of basic education penetration in rural areas, yet also reveals a ceiling effect in extending education across multiple adult members in the same household. It highlights the need for continued rural education investments, including adult literacy programs, family learning initiatives, and agriculture-oriented vocational training to increase the number of educated adults in rural homes.

Strengthening rural education systems will be key to breaking intergenerational cycles of low literacy, improving economic resilience, and promoting inclusive rural development throughout Meherpur District.

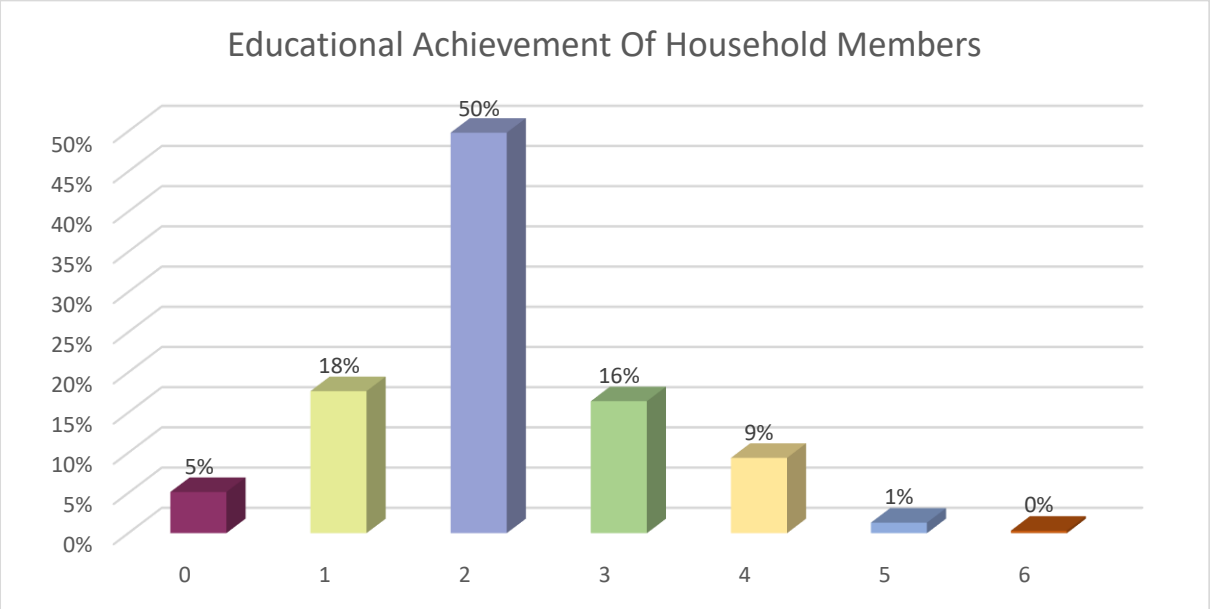


Figure 98: Educational Achievement of Adult (18+) Household Members of Rural Areas of Meherpur District

5.7.3 Health

The distribution of healthcare services across rural areas of Meherpur District, as presented in Figure 81, shows relatively balanced availability of community clinics, hospitals, and maternity centers in most unions, though notable disparities still exist.

Community clinics are generally well represented across the district, with the highest numbers observed in Sholotaka (73), Amdah (64), and Dhankhola (62). These high figures suggest a strong presence of primary healthcare facilities in these areas. In contrast, Dattapara (24) reports significantly fewer community clinics, pointing to potential gaps in basic healthcare access.

Hospital availability appears more consistent, with most unions recording counts between 55 and 62 facilities. Sholotaka (73) again stands out with the highest number of hospitals, while Dattapara reports the lowest (24), underscoring a need for improved secondary care coverage in this locality.

Maternity centers, which are essential for maternal and child health, also follow a broadly uniform pattern in most unions, with counts generally in the 55–62 range. However, areas such as Amdah (36) and Dattapara (24) report notably lower numbers, which may impact maternal healthcare outcomes.

Overall, the data reveals that while many rural unions in Meherpur District, including Sholotaka, Raypur, and Amjhupi, maintain strong healthcare infrastructure across all three categories, certain unions—particularly Dattapara and, to a lesser extent, Amdah—lag behind in service provision.

Addressing these imbalances will require targeted investments in under-served unions, especially for primary care in community clinics and maternal health facilities. Continued monitoring and strategic allocation of resources will be essential to ensure equitable healthcare access for all rural areas in Meherpur District.

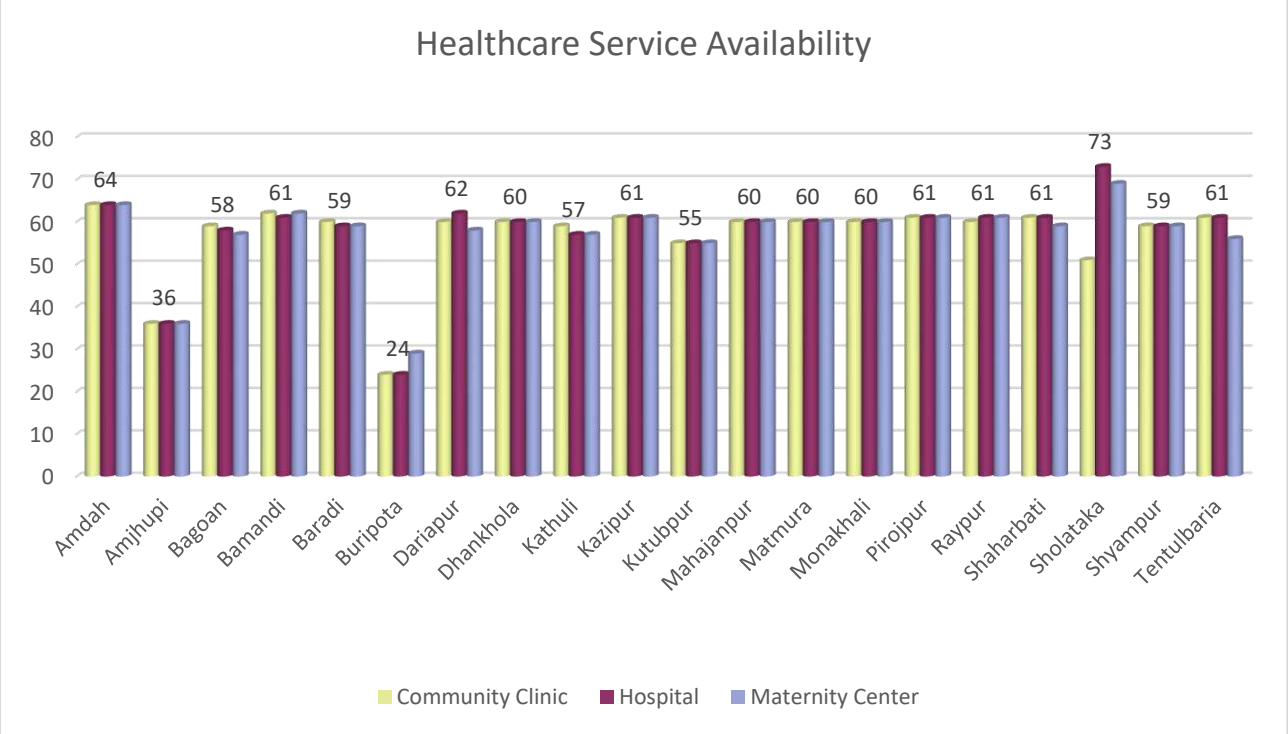


Figure 99: Healthcare Service Availability in Rural Areas of Meherpur District

5.7.4 Physical Capital

5.7.4.1 Housing

The present survey shows that Pucca houses account for 50% of all rural dwellings, a significant increase from 20.0% in the BBS 2011 Census. This 30-percentage point rise highlights major improvements in rural housing durability and investment in permanent structures over the last decade.

Semi-Pucca houses now make up 28%, which is lower than the 33.4% recorded in 2011. This decline indicates that a considerable share of Semi-Pucca houses has been upgraded to Pucca status, although the category still forms a substantial portion of the rural housing profile.

Kacha houses have declined sharply from 43.4% in 2011 to 22% currently, a reduction of more than 21 percentage points. This suggests strong progress in reducing reliance on temporary-material dwellings such as bamboo, mud, and thatch, which are more vulnerable to environmental hazards.

Overall, compared to 2011, rural Meherpur District has undergone a substantial shift towards more permanent and resilient housing, with Pucca houses now dominating, Semi-Pucca declining moderately, and Kacha housing nearly halved.

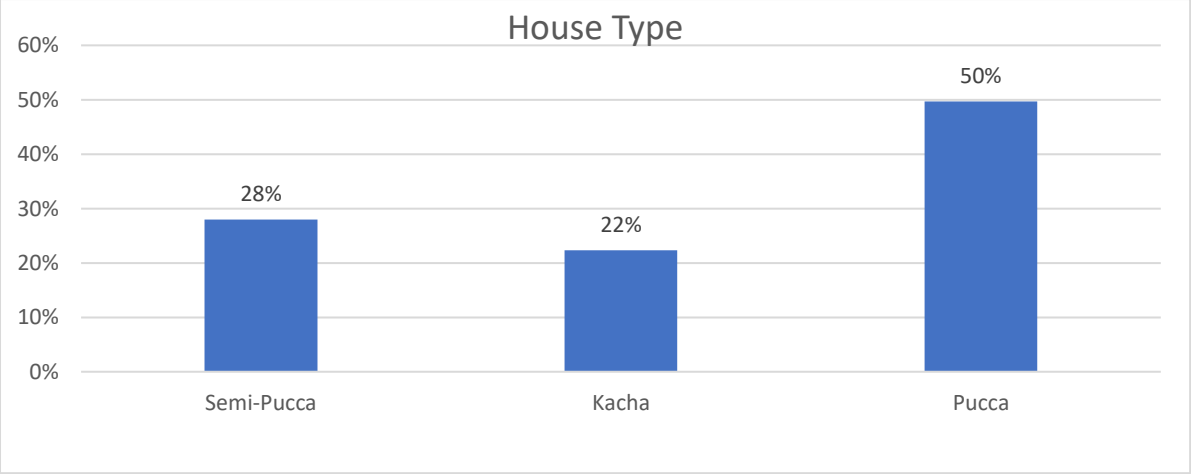


Figure 100: House Type of Rural Areas of Meherpur District

Table 21: House Type of Rural Areas of Meherpur District

SL No.	Catagories	Frequency	Percentage (%)
1	Semi-Pucca	272	28
2	Kacha	606	22
3	Pucca	341	50

5.7.4.2 House Ownership

In the rural areas of Meherpur District, house ownership is nearly universal. The survey findings indicate that 99.6% of households own their homes, while only 0.4% live in rented dwellings. This extremely high rate of ownership reflects deep-rooted traditions of property possession and long-term settlement, strongly reinforced by intergenerational land transfers, the abundance of rural land, and cultural preferences for permanent residence.

The negligible presence of rental housing suggests that there is little dependency on the rental market in rural areas. Communities demonstrate a strong sense of attachment to place and stability, with households preferring to invest in their own dwellings rather than rely on temporary or transitional arrangements. Such patterns also point to lower mobility, as ownership ties families to their land and locality.

While high ownership rates contribute positively to stability and community cohesion, the absence of a rental housing market may pose challenges for newcomers, landless families, and seasonal or migrant workers who may need temporary accommodation. This lack of flexibility in housing could limit opportunities for those seeking to settle or work in rural areas without property.

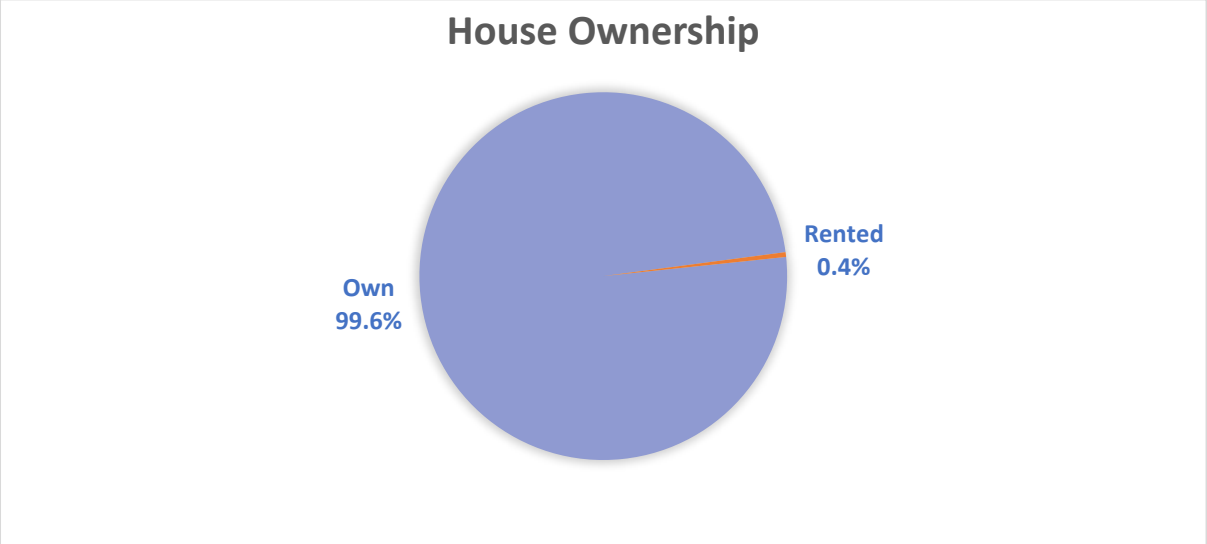


Figure 101: House Ownership of Rural Areas of Meherpur District

The findings suggest that while rural housing stability in Meherpur District is exceptionally strong, future policies should also consider small-scale interventions to support inclusive housing

5.7.4.3 Transportation Mode

The transportation pattern in the rural areas of Meherpur District shows a clear reliance on non-motorized modes, with walking and cycling dominating daily mobility. The use of formal motorized transport remains minimal, reflecting the localized and agricultural nature of travel in rural settlements.

Transportation Modes Usage: The bar chart presents the percentage distribution of daily transportation modes:

- Walking is the primary mode of travel, accounting for 43.5% of all trips. This highlights the rural settlement structure where schools, markets, and workplaces are typically within walking distance.
- Cycles make up 20.2%, demonstrating their strong role as an affordable and practical means of mobility for rural households.
- Motorcycles contribute 12.7%, indicating their importance in connecting households to farms, workplaces, and nearby growth centers, especially where flexibility and speed are required.
- Vans (12.5%) serve as an important transport mode for both passengers and small-scale goods, bridging the gap between walking and motorized trips.
- Rickshaws represent 6.0%, used mostly in village markets and semi-urban growth centers for short-distance trips.
- Buses (4.3%) hold a slightly higher share than in paurashavas, indicating their role in connecting rural households to sub-district and district centers.
- Cars (0.7%) and microbuses (0.1%) remain negligible, reflecting low levels of private vehicle ownership and limited formal shared transport services.

The findings emphasize that rural areas of Meherpur District rely heavily on walking and cycling, supported by motorcycles and vans for medium-distance trips, while formal public transport and private vehicles remain marginal. This modal structure is strongly shaped by localized rural lifestyles and agricultural dependence.

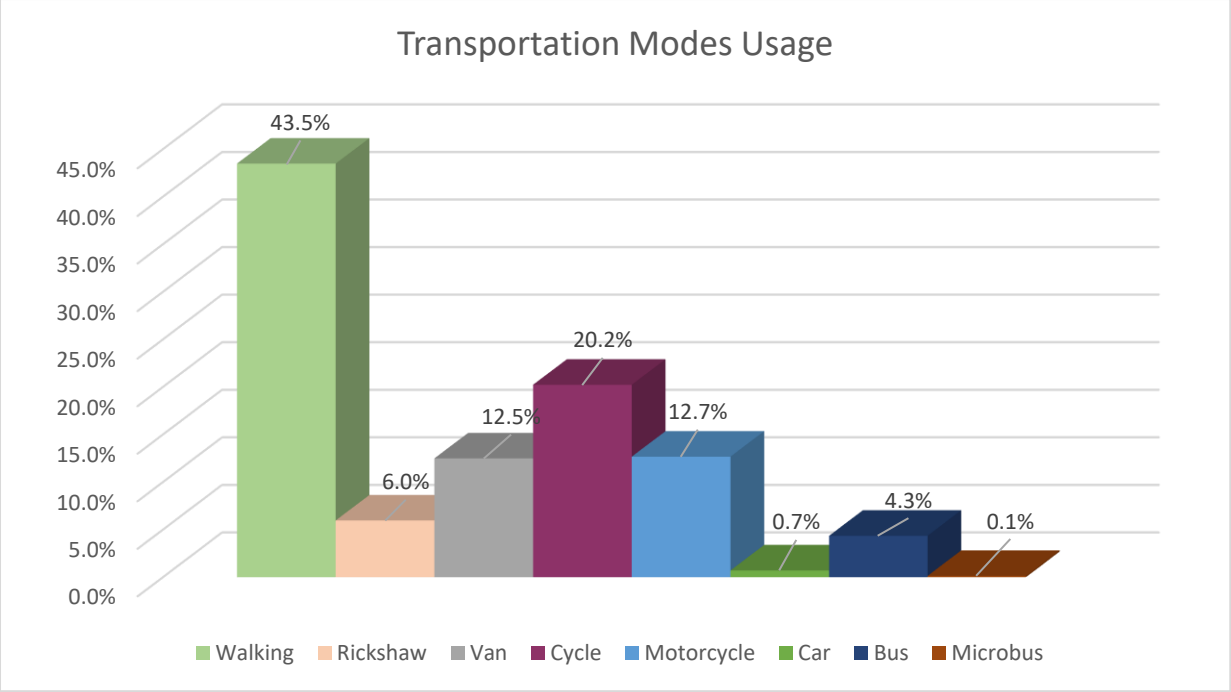


Figure 102: Transportation Modes Usage of Rural Areas of Meherpur District

5.7.5 Financial Capital

5.7.5.1 Income

The household income distribution in the rural areas of Meherpur District indicates a predominantly low- to lower-middle-income population, with most households earning between 10,000 and 30,000 BDT per month. The largest proportion of rural households (44%) falls within the 10,000–20,000 BDT range, representing the primary low-income segment of the rural economy. This group is likely engaged in small-scale agriculture, informal labor, or low-wage employment, with limited capacity for savings and investment.

The second-largest income group, comprising 34% of rural households, earns between 21,000 and 30,000 BDT per month. These households form the modest middle-income segment, potentially benefiting from diversified income sources such as commercial farming, skilled labor, or small business activities. Meanwhile, a smaller share of households (11%) earns between 31,000 and 40,000 BDT per month, reflecting a relatively stable income base with greater potential for investment in housing, education, and improved living conditions.

At the lowest end of the income spectrum, around 7% of rural households earn less than 10,000 BDT per month. This vulnerable group may struggle to meet daily needs, facing challenges related to food security, access to healthcare, and educational opportunities. In contrast, high-income households earning above 40,000 BDT are rare in rural Meherpur, accounting for only 4% of the population, highlighting the limited presence of affluent groups.

The overall bar chart suggests that rural Meherpur's economy is heavily concentrated in the low- to lower-middle-income brackets, which shapes household consumption patterns, limits investment capacity, and affects access to essential services. To address these challenges, development interventions should prioritize income diversification, agricultural productivity enhancement, and small-scale enterprise support. Such measures could enable a greater proportion of rural households to transition into more secure and sustainable middle-income levels.

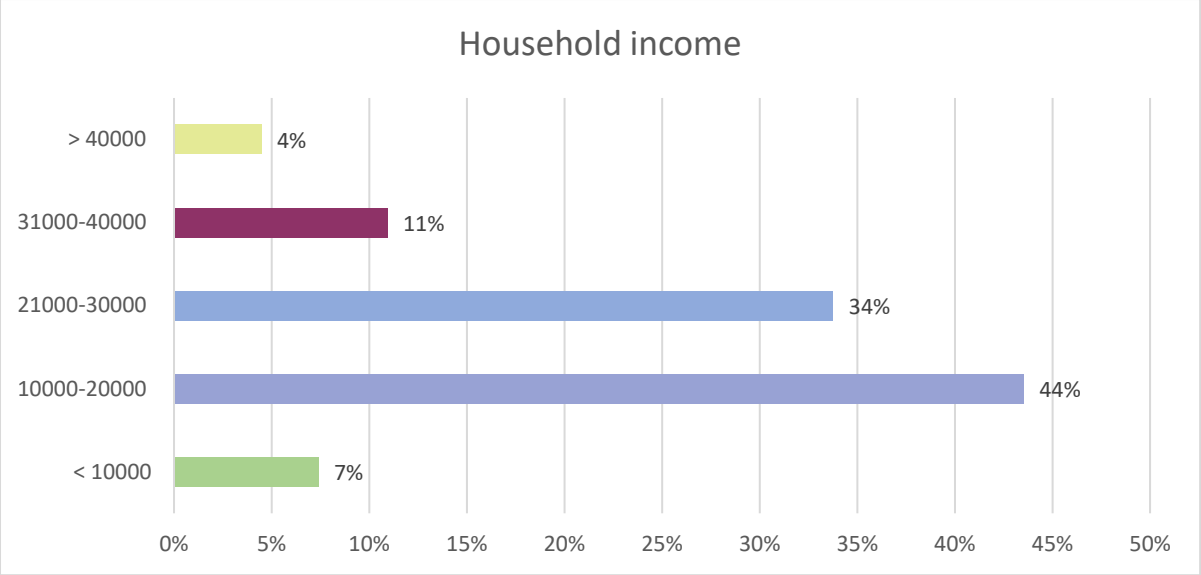


Figure 103: Income of The Households of Rural Areas of Meherpur District

5.7.5.2 Expenditure

The expenditure distribution of households in the rural areas of Meherpur District provides valuable insight into consumption behavior and economic conditions at the community level. The data indicates that rural households are primarily concentrated in moderate expenditure brackets, reflecting modest living standards and limited disposable income.

The largest expenditure group, comprising 31% of rural households, spends between 11,000 and 15,000 BDT per month. This segment represents households with stable, but not high, financial capacity, often balancing essential needs with limited discretionary spending. The second-largest category, accounting for 26% of households, falls within the 5,000–10,000 BDT expenditure range, highlighting a significant portion of the population living under tighter budget constraints.

Higher-expenditure households are more evenly distributed between the 16,000–20,000 BDT and over 20,000 BDT categories, representing 20% and 21% of households, respectively. These groups indicate the presence of a relatively smaller, but notable, segment of rural residents with greater purchasing power and the ability to invest in better housing, education, and other quality-of-life improvements.

At the lowest end of the spectrum, only 2% of rural households spend less than 5,000 BDT per month. This minimal figure reflects the limited number of extremely vulnerable households in rural areas, although this group remains at risk of economic hardship.

Overall, the distribution indicates that most rural households operate within moderate expenditure levels, which aligns closely with their low to middle-income ranges. The relatively narrow spread across expenditure categories suggests limited capacity for savings and investment, emphasizing the need for income-enhancing initiatives and financial resilience programs to strengthen rural economic stability.

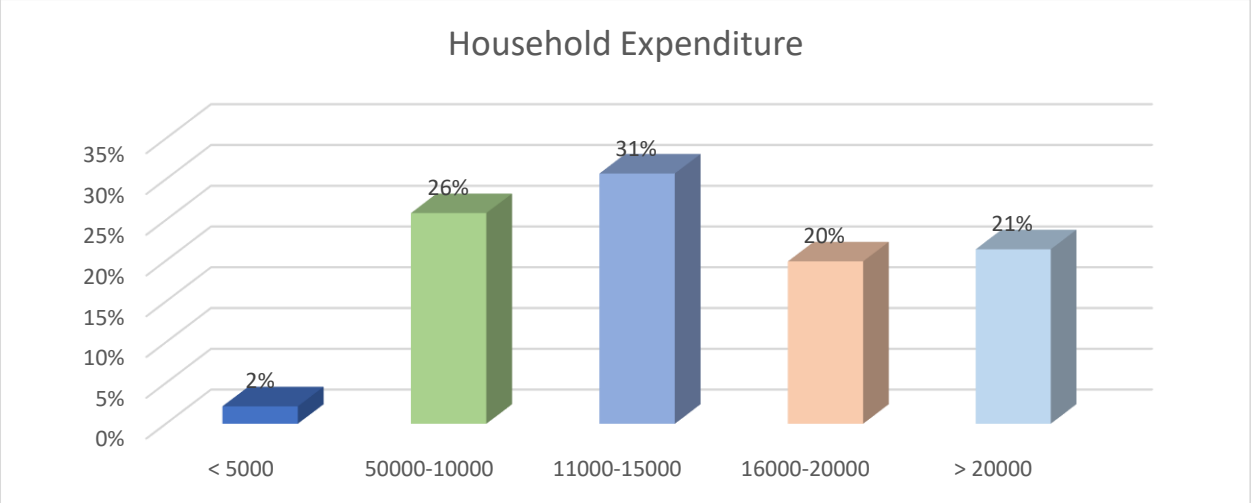


Figure 104: Expenditure of The Households of Rural Areas of Meherpur District

5.7.5.3 Saving

The savings pattern of households in the rural areas of Meherpur District generally reflects low levels of financial reserves, indicating a limited capacity for long-term asset building or emergency preparedness. The data shows that a significant majority of households save relatively small amounts each month, consistent with their modest income and expenditure profiles.

The largest proportion of rural households (39%) reports monthly savings between 500 and 1,000 BDT, closely followed by 38% of households saving less than 500 BDT. These two categories combined account for over three-quarters of rural households, underscoring a widespread tendency toward minimal savings, likely driven by the need to allocate most income toward daily necessities.

A smaller segment, 12% of households, reports savings in the range of 1,100–1,500 BDT, indicating slightly greater financial flexibility. The smallest group, 10% of households, saves more than 1,500 BDT per month, representing the most financially secure segment in rural areas with the potential to invest in productive assets or cope better with economic shocks.

Overall, the savings distribution highlights a constrained financial environment for rural households in Meherpur, where the majority are unable to set aside substantial reserves. This situation points to the importance of targeted interventions aimed at increasing household incomes, promoting financial literacy, and expanding access to formal savings mechanisms to strengthen economic resilience.

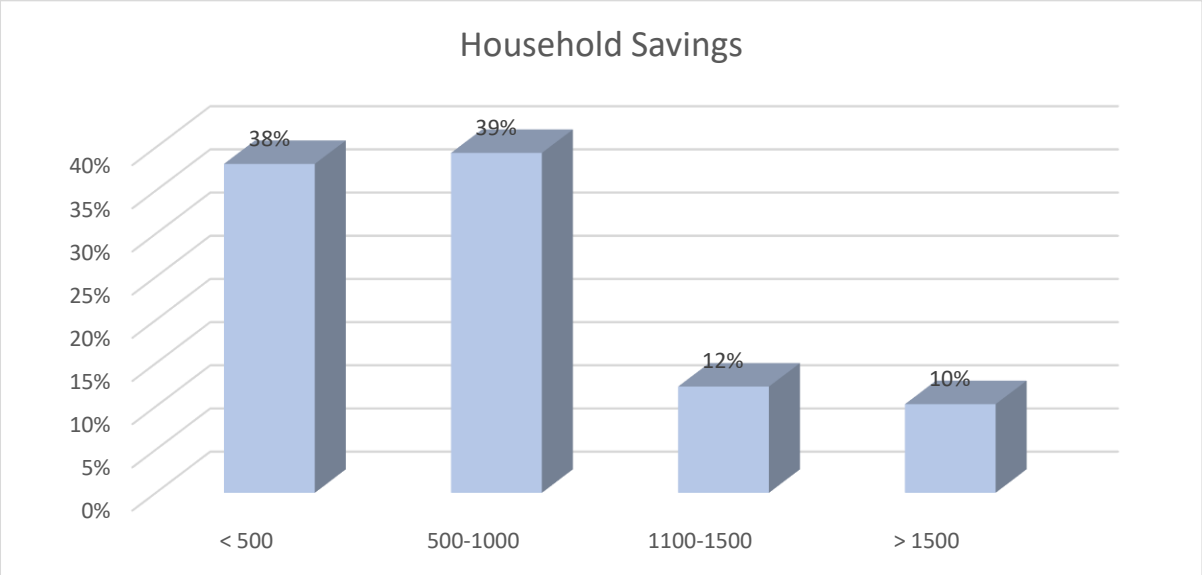


Figure 105: Savings of The Households of Rural Areas of Meherpur District

5.8 Physical Quality of Life Index

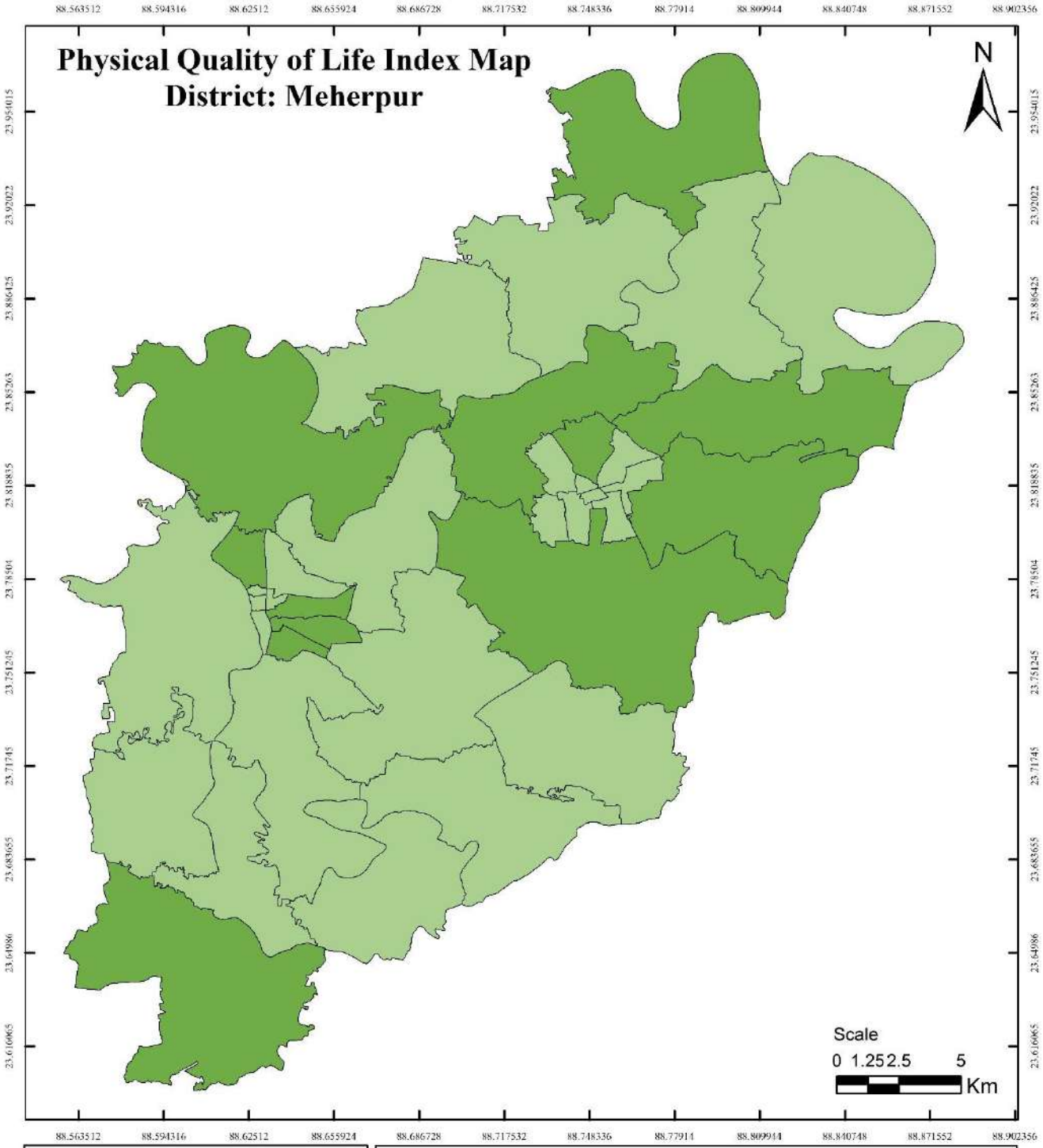
The Physical Quality of Life Index (PQLI) across Meherpur Zilla reveals important spatial variations in literacy, life expectancy, and infant mortality three core indicators that reflect the overall human development of an area. Among the upazilas, Gangni Upazila exhibits the highest PQLI score at 72.53, supported by a strong literacy rate of 81.55%, life expectancy of 74.07 years, and a relatively low infant mortality rate of 11.24 per 1,000 live births. These values indicate comparatively better access to education and healthcare services in Gangni, and reflect a relatively stable quality of life among the residents.

Closely following Gangni is Meherpur Sadar Upazila, which records a PQLI score of 71.88. The upazila has the highest literacy rate among all areas at 81.86%, with a matching life expectancy of 74.07 years, but a slightly higher infant mortality rate of 12.64 per 1,000 live births. These indicators suggest a robust education infrastructure, though there remains room for improvement in child health services to further enhance quality of life outcomes.

Mujibnagar Upazila, by contrast, has a slightly lower PQLI score of 71.15, driven by a moderate literacy rate of 71.52% and a higher infant mortality rate of 16.28 per 1,000 live births, despite sharing the same life expectancy value of 74.07 years. However, Mujibnagar stands out with a relatively strong Cultural Capital Index (CCI) of 75, indicating an active and engaged cultural environment. This dimension underscores the region's social vibrancy and local cultural assets, even as there is need for improved health interventions and educational outreach.

The Gangni Paurashava (Urban) area, analyzed separately from the rest of the upazila, registers the highest PQLI score in the district at 75.18. This score is powered by a low infant mortality rate of just 6.60 per 1,000 live births, which is the best among all surveyed areas. The literacy rate here stands at 78.43%, slightly lower than the rural Gangni area, while life expectancy remains consistent at 74.07 years. The urban advantage in healthcare access and service delivery is clearly reflected in these outcomes, making Gangni Paurashava the best-performing area in terms of physical quality of life.

In summary, the analysis of PQLI, along with QOLI and CCI where available, highlights spatial disparities in quality of life and development across Meherpur Zilla. These findings provide essential inputs for targeted policy design, particularly in the areas of education, child health, and cultural infrastructure



Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

$$\text{Literacy Rate} = \frac{\text{Number of Literate Individuals 18+ years}}{\text{The total number of Surveyed}} \times 100$$

$$\text{Life expectancy} = \frac{\text{Life Expectancy from BBS} - \text{Minimum value from question}}{\text{Maximum From Question} - \text{Minimum from Question}} \times 100$$

$$\text{Infant Mortality Rate} = \frac{\text{Number of Infant Deaths}}{\text{Number of Live Births total number of Surveyed}} \times 100$$

$$\text{PQLI} = \frac{\text{Literacy Rate} + \text{Infant Mortality Rate} + \text{Life Expectancy}}{3}$$

Range	Quality
0-20	Very Poor
21-40	Poor
41-60	Moderate
61-80	Good
81-100	Very Good

Legend
PQLI
61 - 80
81 - 100

Client

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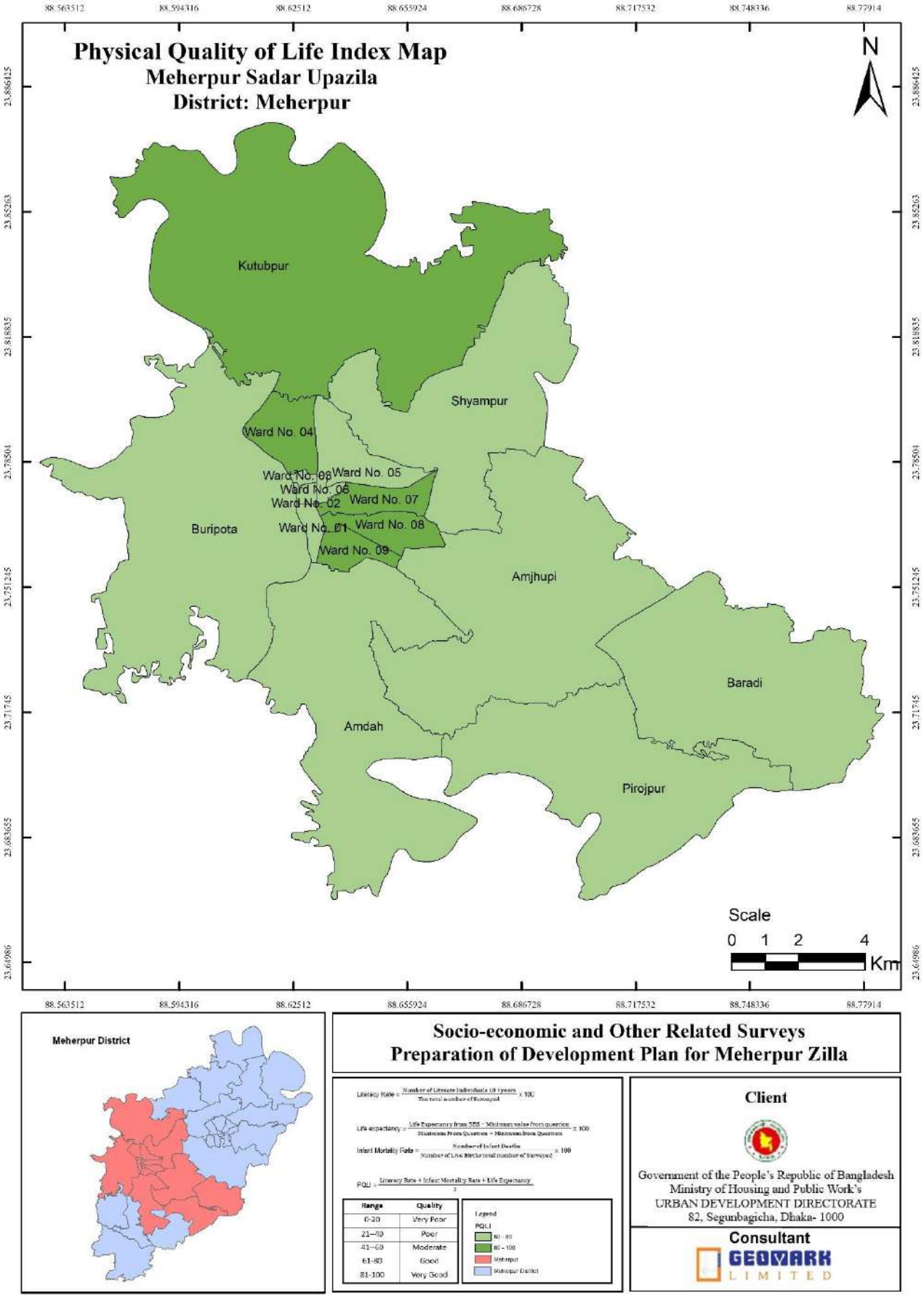
Consultant

GEOMARK LIMITED


Physical Quality of Life Index Map
Meherpur Sadar Upazila
District: Meherpur
N
Kutubpur
Shyampur
Ward No. 04
Ward No. 03
Ward No. 05
Ward No. 06
Ward No. 02
Ward No. 07
Buripota
Ward No. 01
Ward No. 08
Ward No. 09
Amjhupi
Baradi
Amdah
Pirojpur
Scale
0 1 2 4
Km
88.563512
88.594316
88.62512
88.655924
88.686728
88.717532
88.748336
88.77914
23.886425
23.85263
23.818835
23.78504
23.751245
23.71745
23.683655
23.649860
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Literacy Rate = (Number of Literate Individuals 10 +years / The total number of Surveyed) x 100
Life expectancy = (Life Expectancy from SRS - Minimum value From question / Maximum From Question - Minimum from Question) x 100
Infant Mortality Rate = (Number of Infant Deaths / Number of Live Births to total number of Surveyed) x 100
PQLI = (Literacy Rate + Infant Mortality Rate + Life Expectancy) / 3
Range
Quality
0-20
Very Poor
21--40
Poor
41--60
Moderate
61-80
Good
81-100
Very Good
Legend
PQLI
Meherpur
Meherpur District
Client
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Consultant
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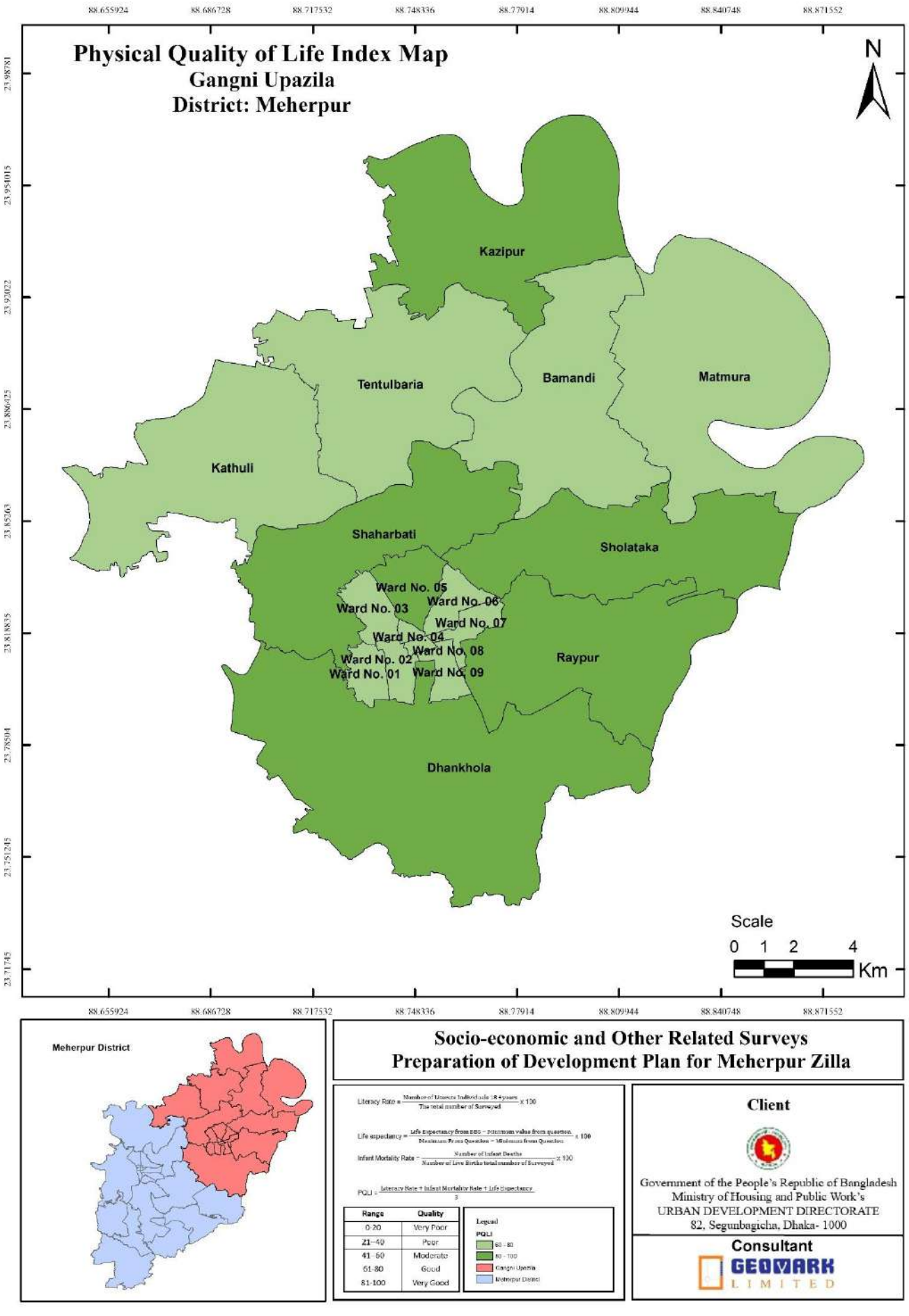
Physical Quality of Life Index Map
Gangni Upazila
District: Meherpur
N
Kazipur
Tentulbaria
Bamandi
Matmura
Kathuli
Shaharbati
Sholataka
Ward No. 05
Ward No. 06
Ward No. 03
Ward No. 07
Ward No. 04
Ward No. 08
Ward No. 02
Raypur
Ward No. 01
Ward No. 09
Dhankhola
Scale
0 1 2 4
Km
88.655924
88.686728
88.717532
88.748336
88.77914
88.809944
88.840748
88.871552
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Range
Quality
0-20
Very Poor
21-40
Poor
41-60
Moderate
61-80
Good
81-100
Very Good
Legend
PQLI
Gangni Upazila
Meherpur District
Client
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Consultant
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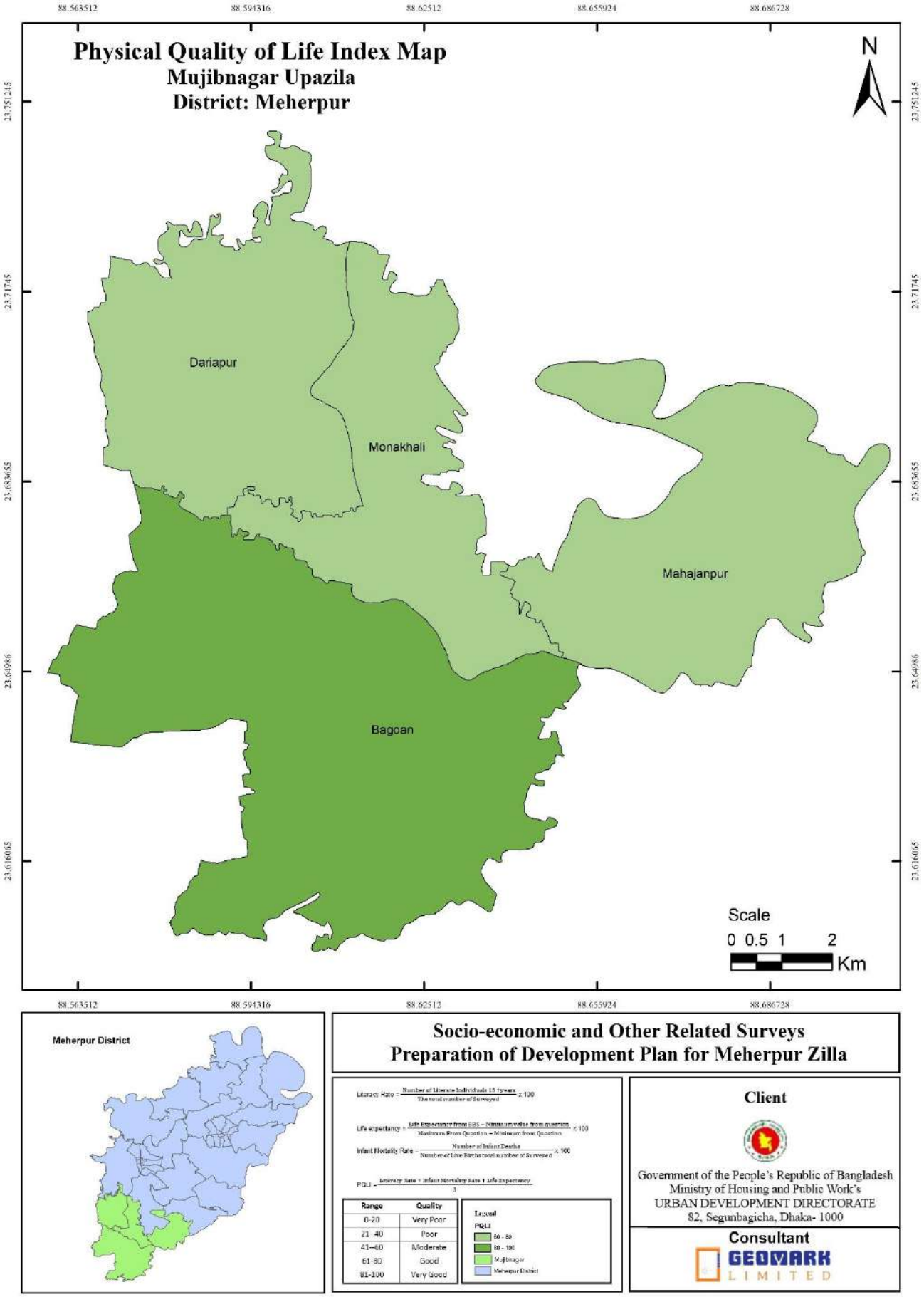
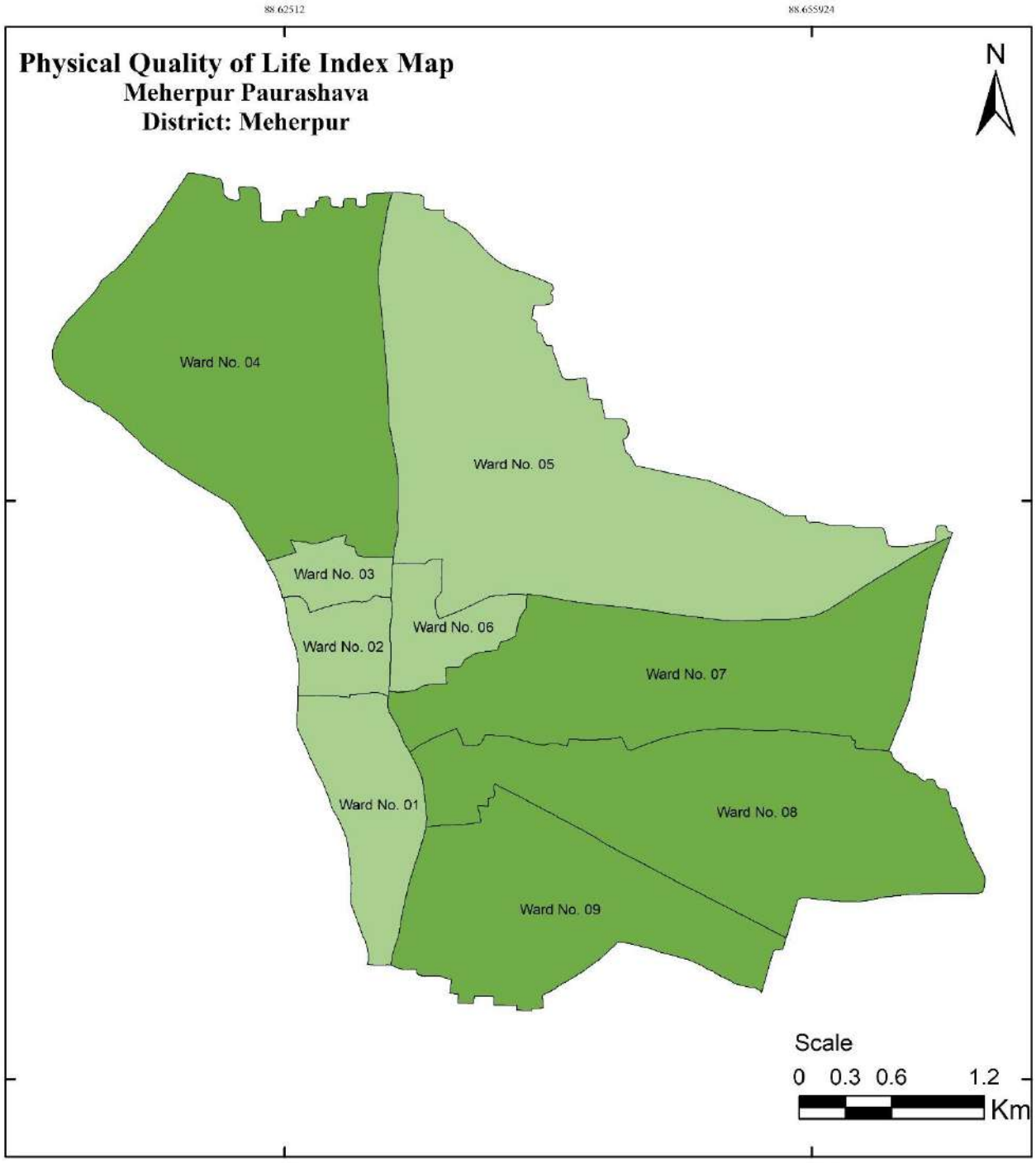

Physical Quality of Life Index Map
Mujibnagar Upazila
District: Meherpur
N
88.563512
88.594316
88.62512
88.655924
88.686728
23.751245
23.71745
23.683655
23.64986
23.616065
Dariapur
Monakhali
Mahajanpur
Bagoan
Scale
0 0.5 1 2
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Literacy Rate = Number of Literate Individuals 15 +years / The total number of Surveyed x 100
Life expectancy = Life Expectancy from BBS – Minimum value from question / Maximum Value Question – Minimum from Question x 100
Infant Mortality Rate = Number of Infant Deaths / Number of Live Births total number of Surveyed x 100
PQLI = Literacy Rate + Infant Mortality Rate + Life Expectancy / 3
Range
Quality
0-20
Very Poor
21-40
Poor
41-60
Moderate
61-80
Good
81-100
Very Good
Legend
PQLI
Mujibnagar
Meherpur District
Client
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Work's
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka- 1000
Consultant
GEOMARK LIMITED



Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

$$\text{Literacy Ratio} = \frac{\text{Number of Literate Individuals (8+ years)}}{\text{The total number of Surveyed}} \times 100$$

$$\text{Life expectancy} = \frac{\text{Life Expectancy from BBS} - \text{Minimum value from question}}{\text{Maximum From Question} - \text{Minimum from Question}} \times 100$$

$$\text{Infant Mortality Rate} = \frac{\text{Number of Infant Deaths}}{\text{Number of Live Birth or total number of Surveyed}} \times 100$$

$$\text{PQLI} = \frac{\text{Literacy Rate} + \text{Infant Mortality Rate} + \text{Life Expectancy}}{3}$$

Range	Quality
0-20	Very Poor
21--40	Poor
41--60	Moderate
61-80	Good
81-100	Very Good

Legend
PQLI
Meherpur Paurashava
Meherpur District

Client

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Consultant

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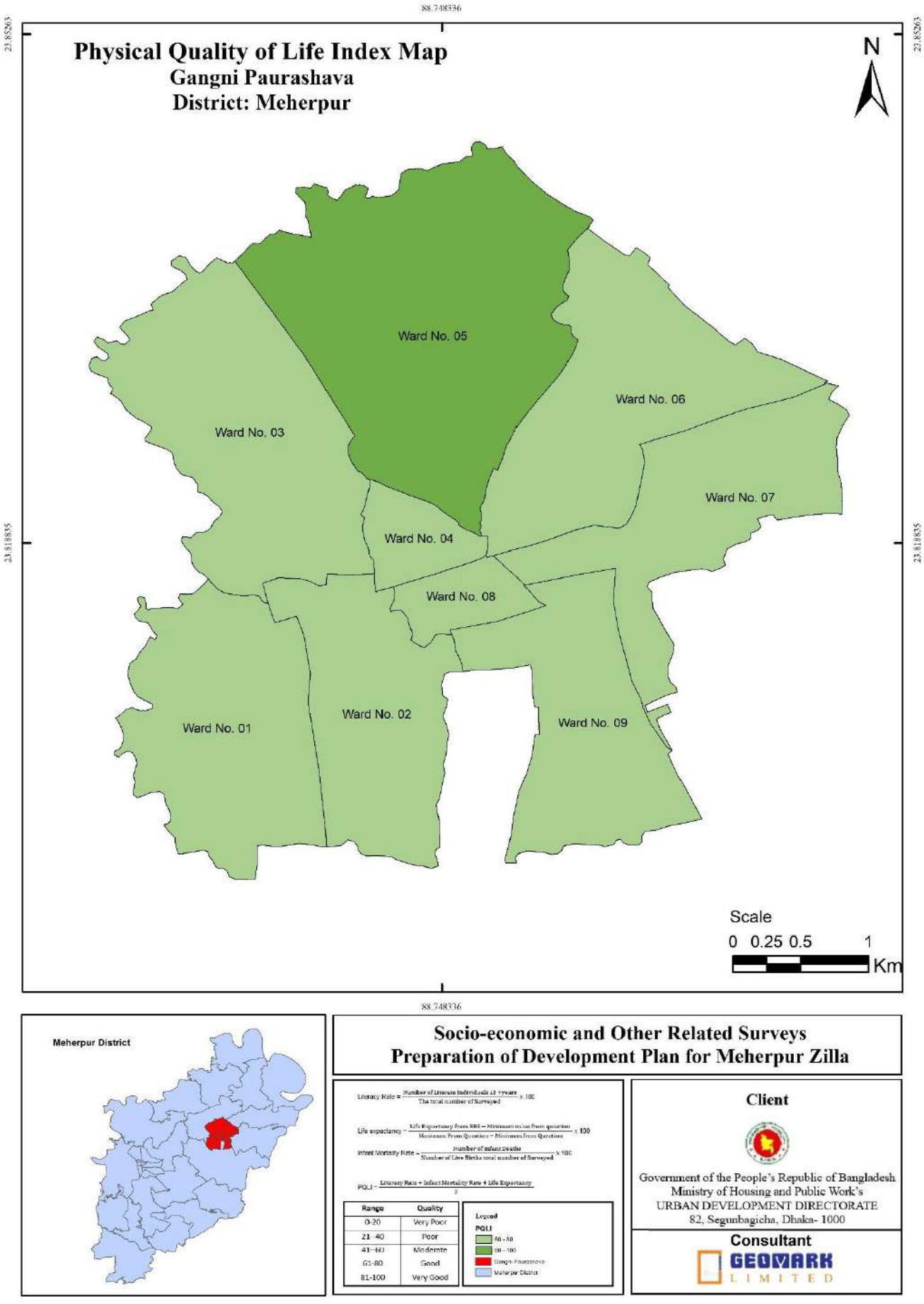
88.748336
23.85263
23.818835
Physical Quality of Life Index Map
Gangni Paurashava
District: Meherpur
N
Ward No. 05
Ward No. 06
Ward No. 03
Ward No. 07
Ward No. 04
Ward No. 08
Ward No. 01
Ward No. 02
Ward No. 09
Scale
0 0.25 0.5 1
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Literacy Rate = Number of Literate Individuals 10 +Years / The total number of Surveyed x 100
Life expectancy = Life Expectancy from SRS – Minimum value from question / Maximum From Question – Minimum from Question x 100
Infant Mortality Rate = Number of Infant Deaths / Number of Live Births total number of Surveyed x 100
PQLI = Literacy Rate + Infant Mortality Rate + Life Expectancy / 3
Range
Quality
0-20
Very Poor
21 -40
Poor
41--60
Moderate
61-80
Good
81-100
Very Good
Legend
PQLI
Gangni Paurashava
Meherpur District
Client
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Work's
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5.9 Quality of Life Index

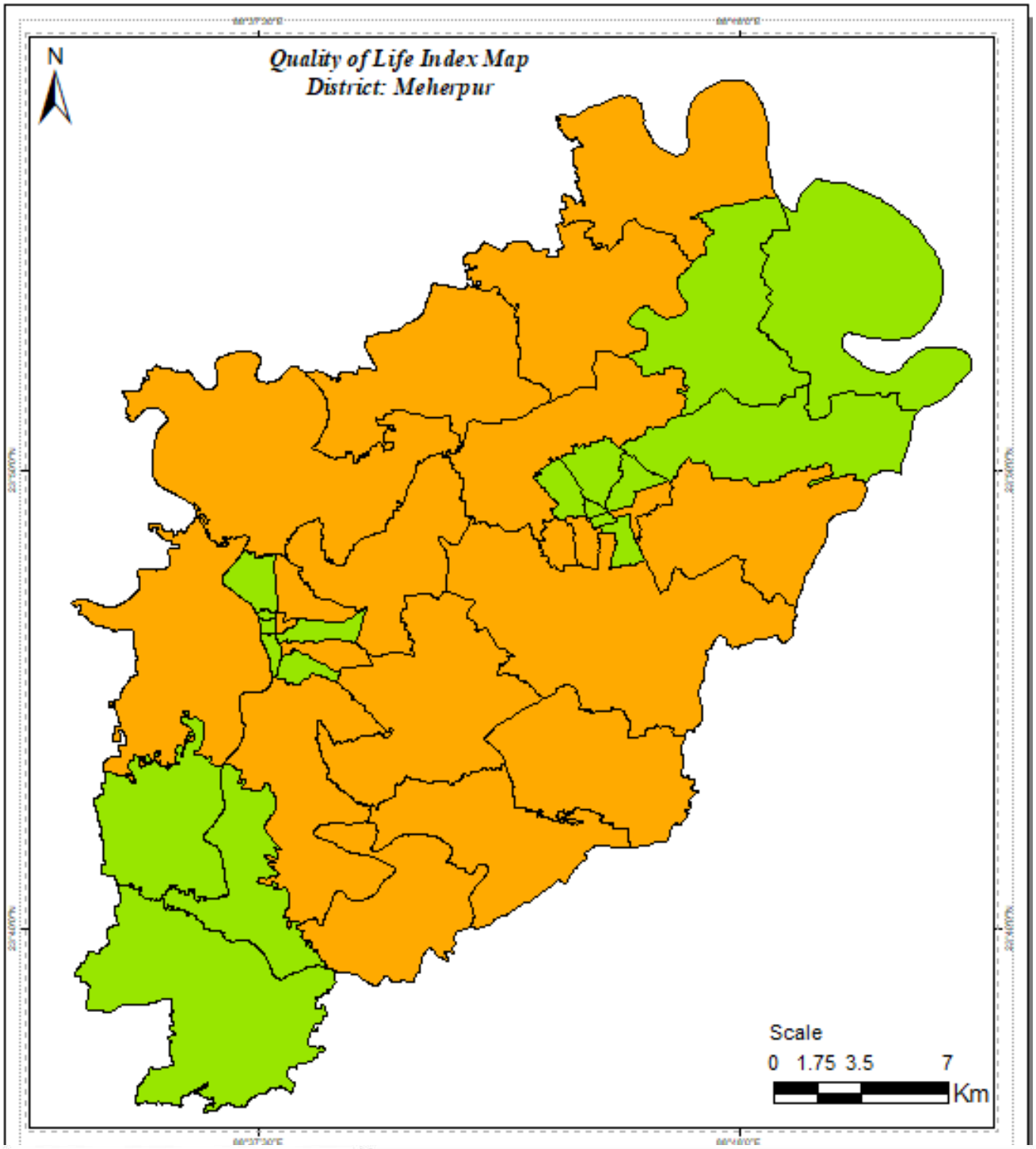
The Quality-of-Life Index (QOLI), which reflects the level of access to essential services and residents' satisfaction with civic amenities, varies significantly across the upazilas and paurashavas of Meherpur District. Meherpur Sadar Upazila stands out with the highest QOLI score of 87.10, indicating a very high degree of satisfaction among residents with services such as water supply, sanitation, waste management, transportation, and other civic infrastructure. This suggests that the upazila benefits from relatively well-developed urban-rural connectivity and public service coverage, aligning with its administrative and demographic prominence in the district.

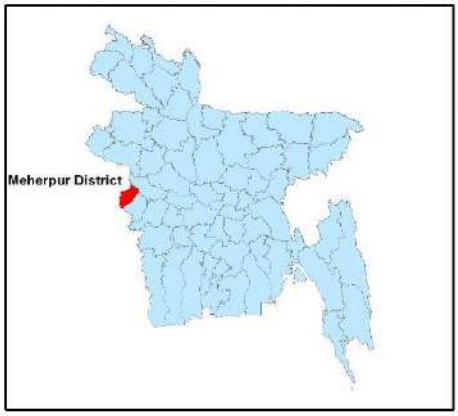
In contrast, Gangni Upazila shows a lower QOLI score of 76.83, implying more moderate levels of service provision and public satisfaction. While still above average, this score suggests that there may be critical service delivery gaps in some unions, particularly in infrastructure maintenance, drainage, and public amenities, which slightly pull down the overall quality of life for rural residents in Gangni.

However, within Gangni Upazila, the Gangni Paurashava area performs better in terms of urban service satisfaction, recording a QOLI score of 80.00. This reflects an urban advantage, where residents benefit from closer proximity to markets, schools, healthcare facilities, paved roads, and waste disposal systems. Although slightly below Meherpur Sadar, Gangni Paurashava still demonstrates commendable quality-of-life standards among urban dwellers.

For Mujibnagar Upazila, no explicit QOLI score is labeled in the dataset; however, satisfaction summaries embedded within service categories suggest a more modest performance. Inferences based on weighted average scores and service availability point toward comparatively lower satisfaction, especially in remote unions with less-developed infrastructure. Therefore, while a precise QOLI score is not available, the qualitative indicators suggest that Mujibnagar may require prioritized investment in core services to raise its overall livability and resident satisfaction.

In summary, QOLI analysis reveals that Meherpur Sadar leads in overall quality of life, followed by Gangni Paurashava, then Gangni Upazila, with Mujibnagar likely trailing behind. These insights offer clear direction for planners and policymakers aiming to bridge service delivery gaps and ensure more equitable development across Meherpur Zilla.





Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Quality of Life Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale = [Maximum Score= Indicators × 5 = 50]

$$QLI = \frac{\text{The sum of all the scores of the level of Satisfaction}}{50} \times 100$$

Legend	Range	Quality
0-49	Poor	0-49
50-74	Moderate	50-74
74 - 100	High	75-100

Client

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Consultant

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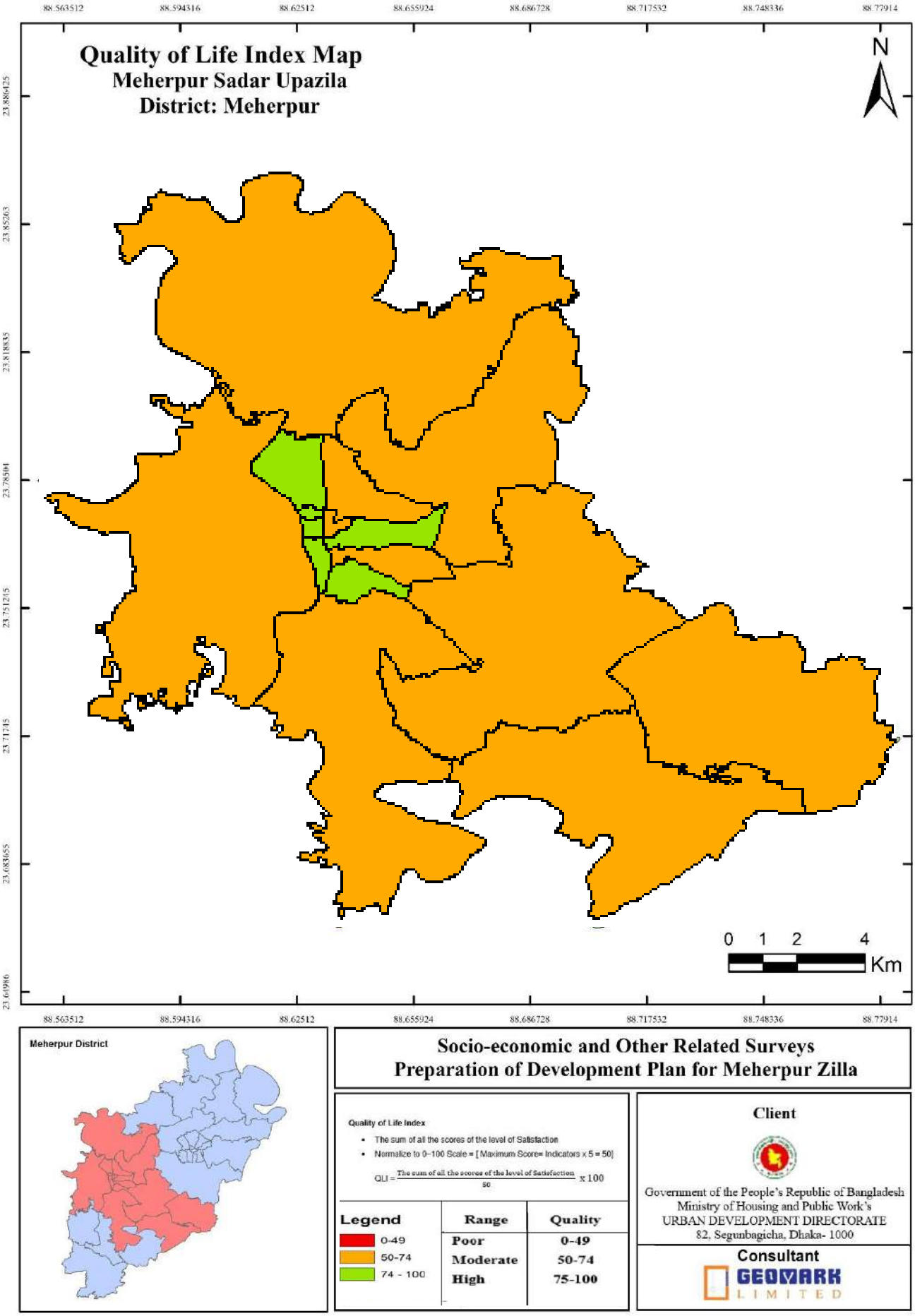
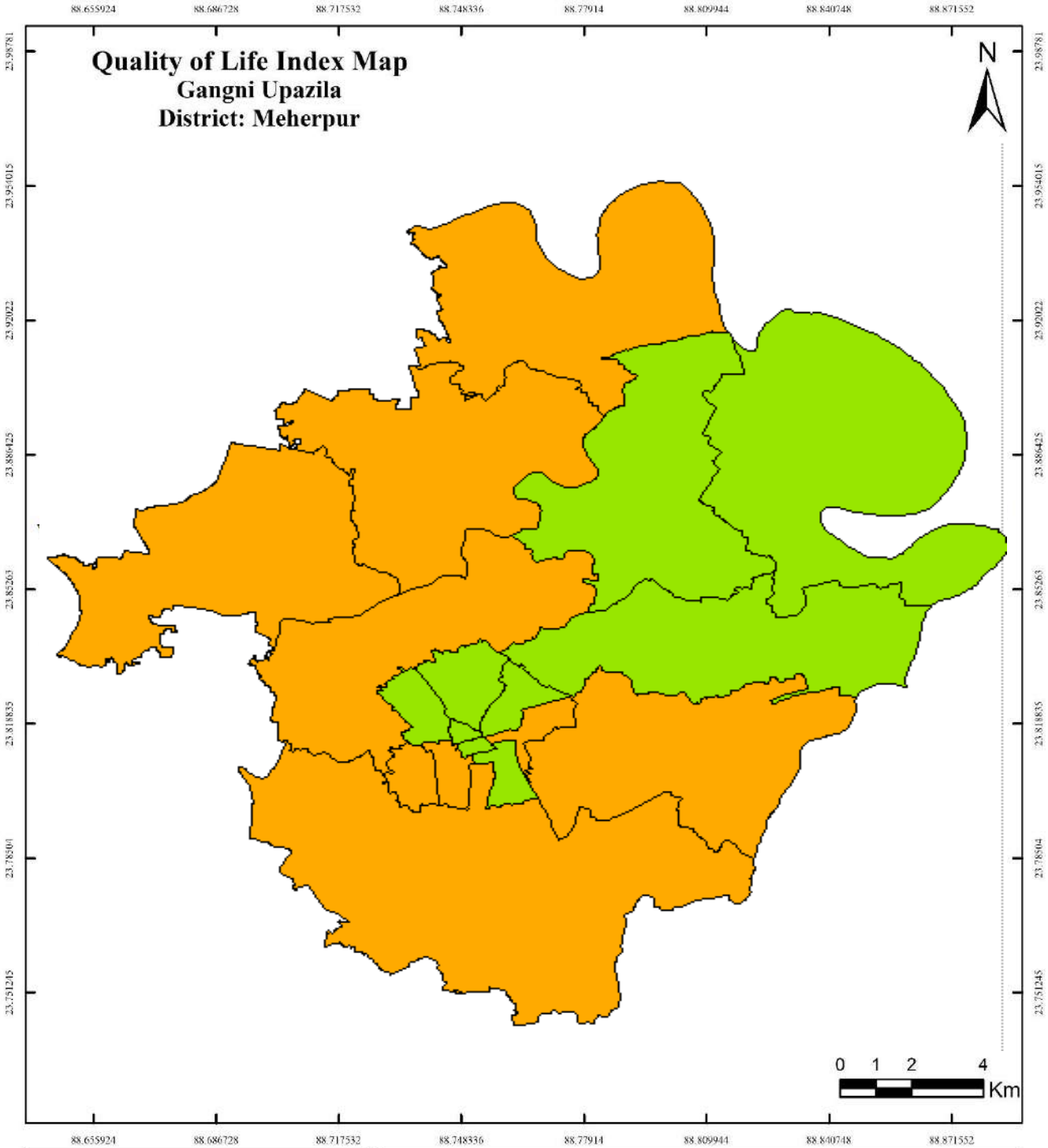
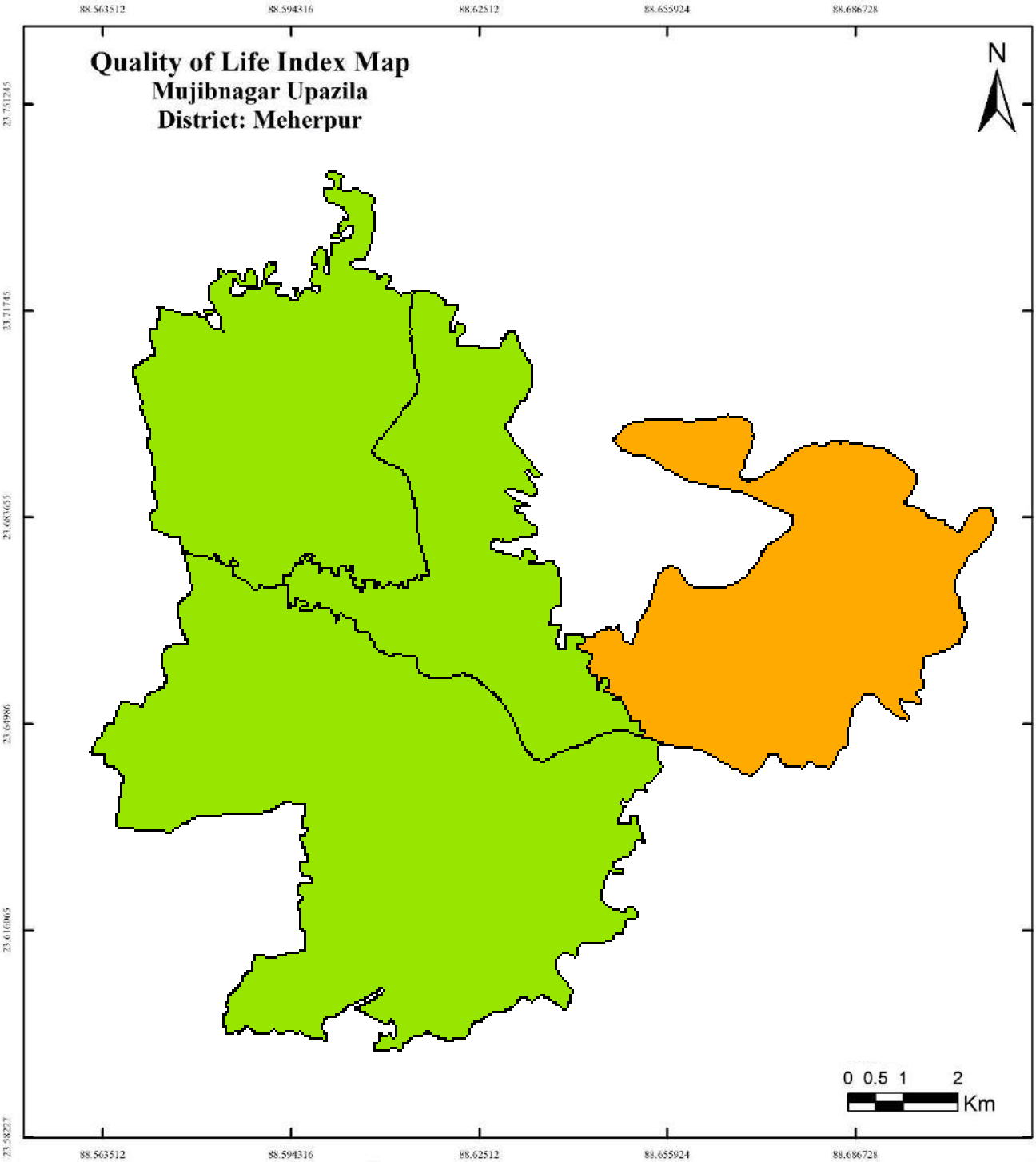
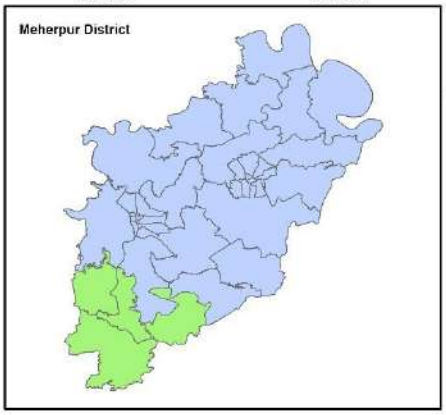

Quality of Life Index Map
Meherpur Sadar Upazila
District: Meherpur
N
88.563512
88.594316
88.62512
88.655924
88.686728
88.717532
88.748336
88.77914
23.886425
23.85263
23.818835
23.785041
23.751245
23.71745
23.683655
23.64986
0 1 2 4
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Quality of Life Index
The sum of all the scores of the level of Satisfaction
Normalize to 0-100 Scale = [Maximum Score= Indicators x 5 = 50]
QLI = The sum of all the scores of the level of Satisfaction / 50 x 100
Legend
0-49
50-74
74 - 100
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
Client
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Work's
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka- 1000
Consultant
GEOMARK
LIMITED


Quality of Life Index Map
Gangni Upazila
District: Meherpur
N
0 1 2 4
Km
88.655924
88.686728
88.717532
88.748336
88.77914
88.809944
88.840748
88.871552
23.98781
23.954015
23.92022
23.886425
23.85263
23.818835
23.78504
23.751245
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Quality of Life Index
The sum of all the scores of the level of Satisfaction
Normalize to 0-100 Scale = [Maximum Score= Indicators x 5 = 50]
QLI = The sum of all the scores of the level of Satisfaction / 50 x 100
Legend
0-49
50-74
74 - 100
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
Client
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Work's
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka- 1000
Consultant
GEOMARK LIMITED





Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Quality of Life Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale = [Maximum Score= Indicators x 5 = 50]

$$QLI = \frac{\text{The sum of all the scores of the level of Satisfaction}}{50} \times 100$$

Legend	Range	Quality
0-49	Poor	0-49
50-74	Moderate	50-74
74 - 100	High	75-100

Client

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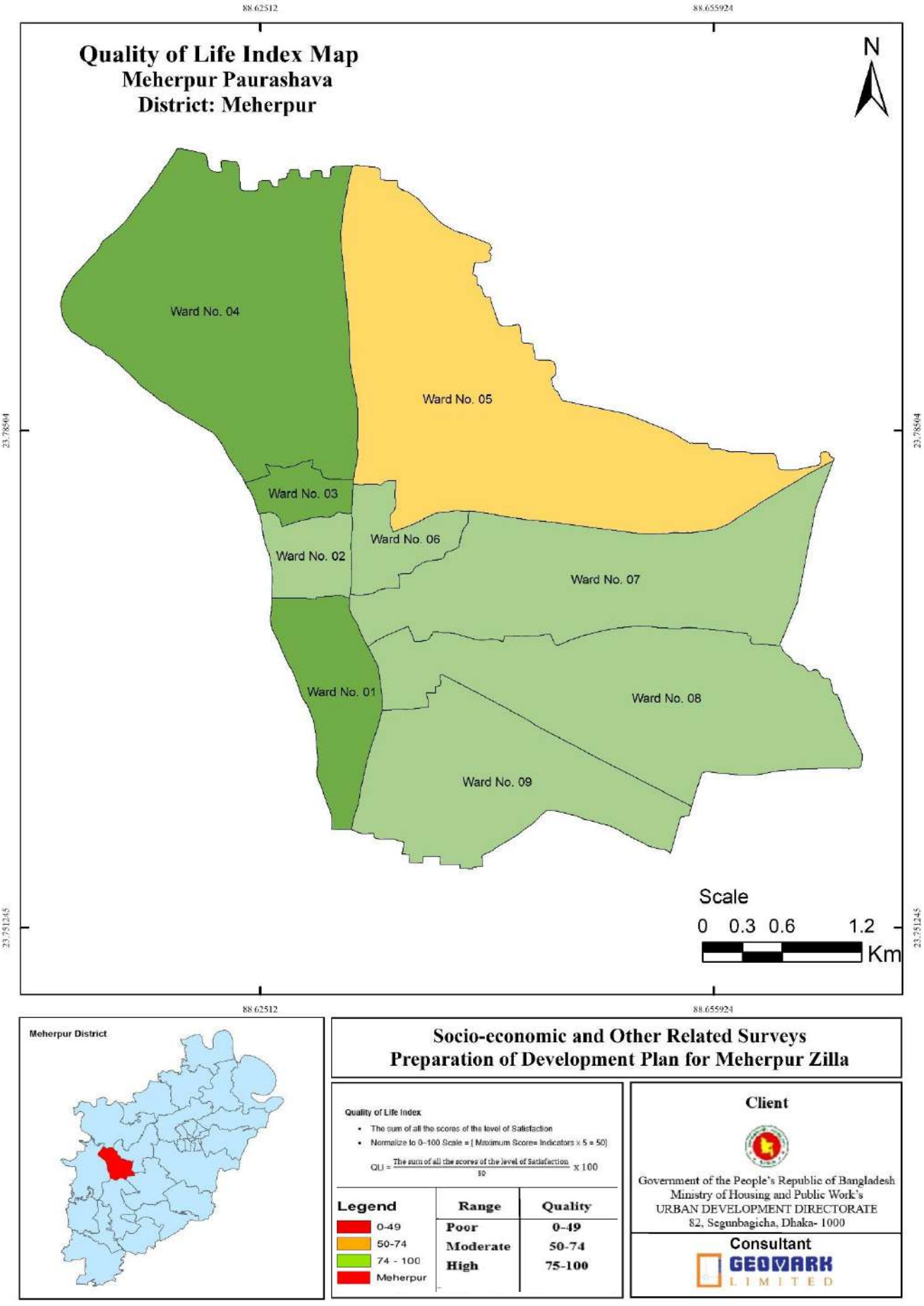
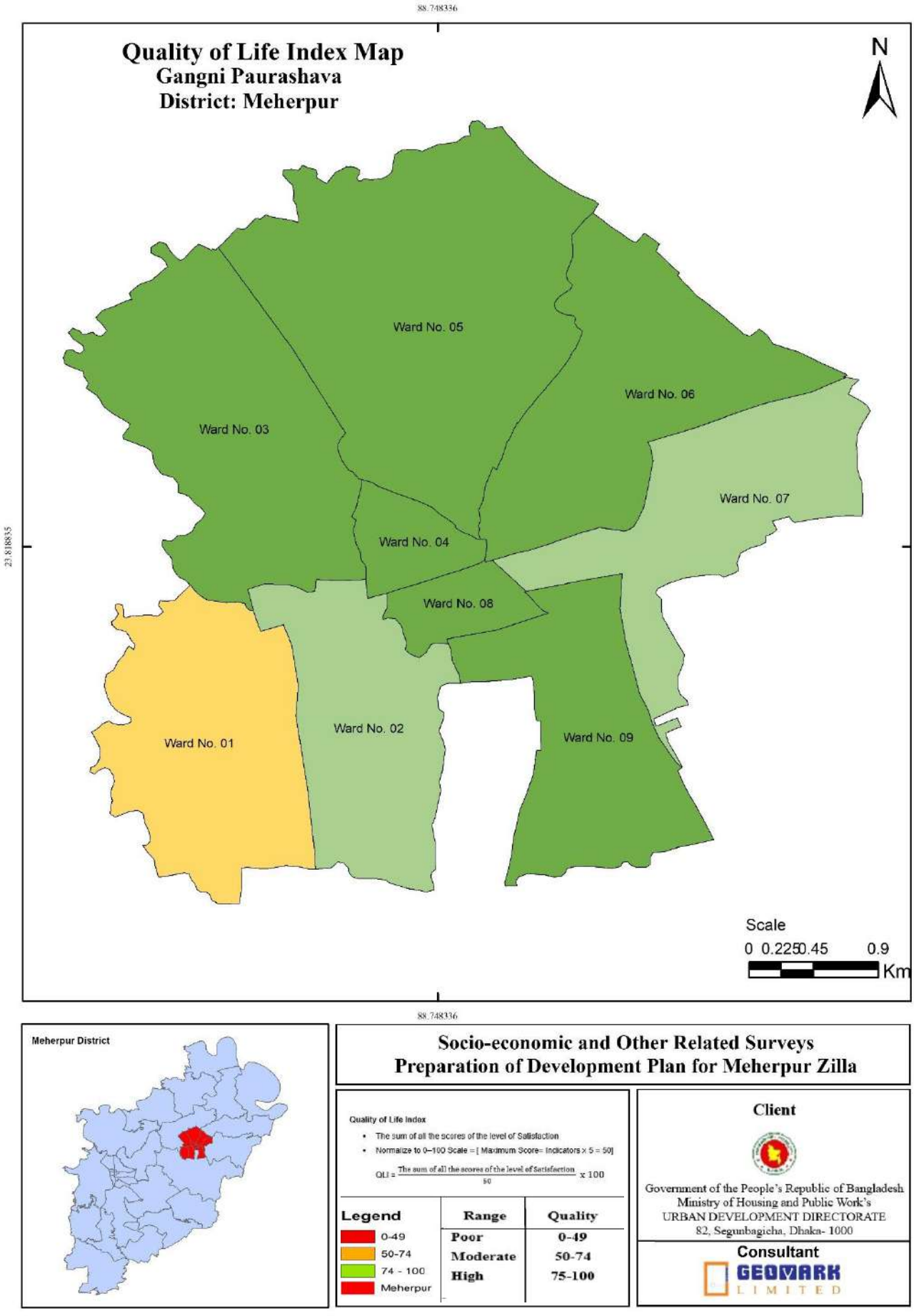
Ministry of Housing and Public Work's
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka- 1000

Consultant

GEOMARK LIMITED


88.62512
88.655924
Quality of Life Index Map
Meherpur Paurashava
District: Meherpur
N
Ward No. 04
Ward No. 05
Ward No. 03
Ward No. 06
Ward No. 02
Ward No. 07
Ward No. 01
Ward No. 08
Ward No. 09
23.78564
23.751245
Scale
0 0.3 0.6 1.2
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Quality of Life Index
The sum of all the scores of the level of Satisfaction
Normalize to 0-100 Scale = [Maximum Score= Indicators x 5 = 50]
QLI = The sum of all the scores of the level of Satisfaction / 50 x 100
Legend
0-49
50-74
74 - 100
Meherpur
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
Client
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Work's
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka- 1000
Consultant
GEOMARK LIMITED


88.748336
Quality of Life Index Map
Gangni Paurashava
District: Meherpur
N
Ward No. 05
Ward No. 06
Ward No. 03
Ward No. 07
Ward No. 04
Ward No. 08
Ward No. 01
Ward No. 02
Ward No. 09
Scale
0 0.225 0.45 0.9
Km
23.818835
88.748336
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Quality of Life Index
The sum of all the scores of the level of Satisfaction
Normalize to 0–100 Scale = [Maximum Score= Indicators × 5 = 50]
QLI = The sum of all the scores of the level of Satisfaction / 50 x 100
Legend
0-49
50-74
74 - 100
Meherpur
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
Client
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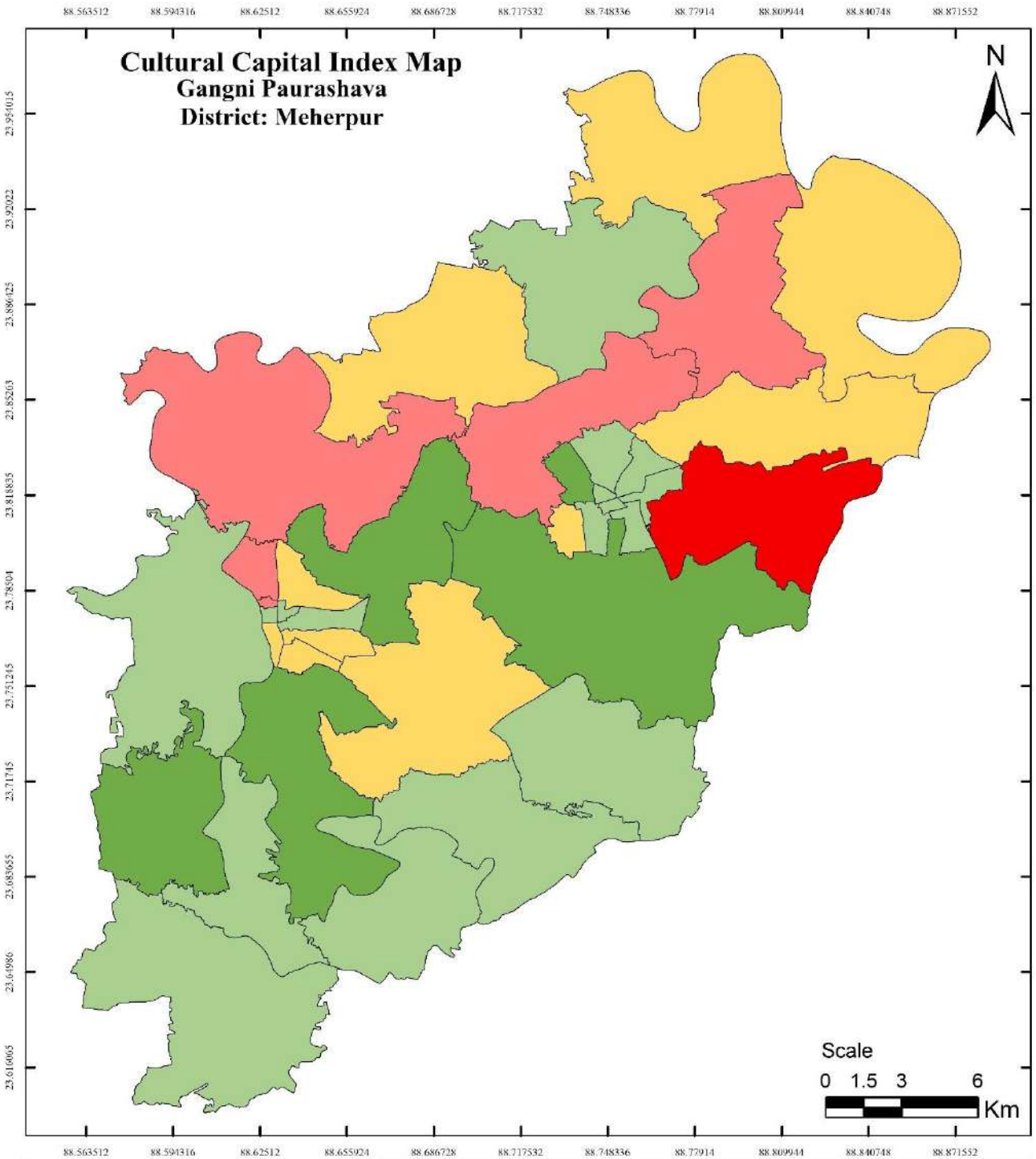
5.10 Cultural Capital Index

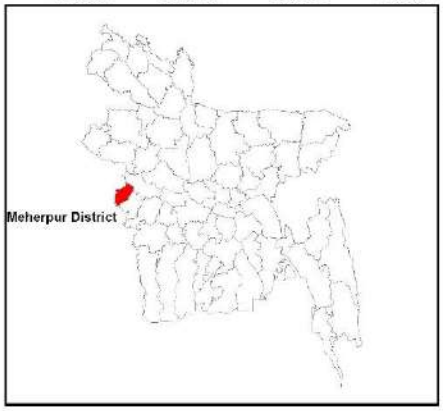
The Cultural Capital Index (CCI) offers a valuable perspective into the socio-cultural engagement and access to communal and religious infrastructure in Meherpur Zilla. The highest CCI is observed in Meherpur Sadar Upazila, with a score of 87.10, indicating a rich cultural landscape supported by strong institutional presence such as mosques, temples, graveyards, community centers, and regular socio-cultural activities. This high index is reflective of the upazila's urban-rural blend and central administrative role in the district.

In Gangni Upazila, the CCI is slightly lower at 76.83, pointing to good but comparatively limited cultural service coverage. While essential facilities exist, rural dispersion and resource gaps likely affect universal accessibility. However, the Gangni Paurashava (Urban) section, which functions as the cultural and economic heart of the upazila, demonstrates a relatively stronger CCI estimated at around 80.00, backed by access to diverse social and religious institutions within closer proximity.

Meanwhile, Mujibnagar Upazila reports a CCI of 75.00, reflecting moderate cultural infrastructure and community engagement. This score suggests a need for improved investment in communal facilities, cultural programming, and multi-faith infrastructure to foster social cohesion and strengthen the identity of this historically significant region.

Altogether, CCI patterns reveal that urbanized zones with stronger institutional concentration like Meherpur Sadar and Gangni Paurashava outperform more rural or peripheral areas in cultural engagement and facility satisfaction. These insights are crucial for planners and administrators seeking to foster inclusive cultural development across the district.





Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Cultural Capital Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale
- CCI = (Sum of scores /Number of questions) x 100

Range	Quality
0-20	Very Poor
21–40	Poor
41–60	Moderate
61-80	Good
81-100	Very Good

Legend
Meherpur
CCI

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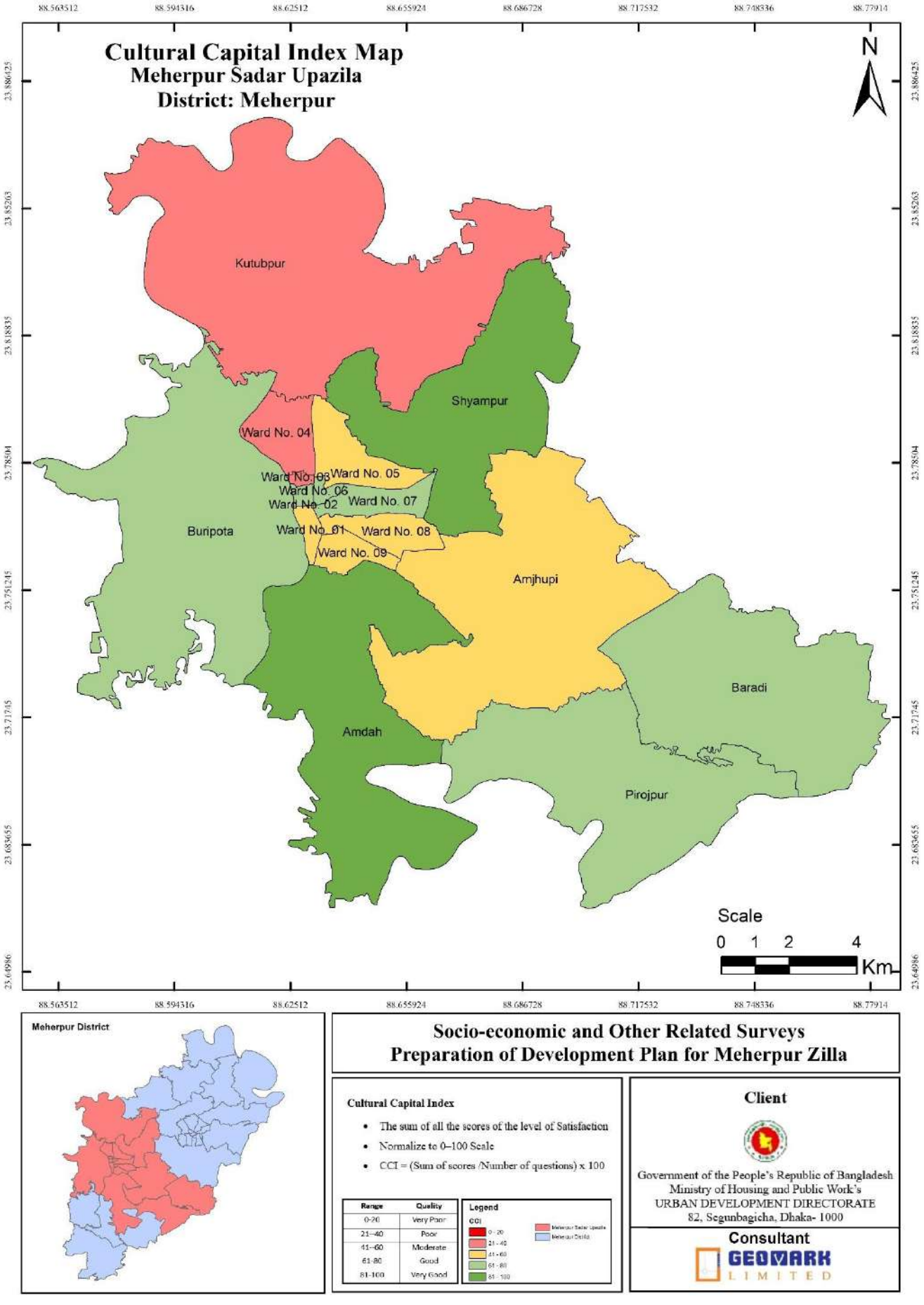

Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Cultural Capital Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale
- CCI = (Sum of scores /Number of questions) x 100

Range	Quality
0-20	Very Poor
21–40	Poor
41–60	Moderate
61-80	Good
81-100	Very Good

Legend
CCI
0 - 20
21 - 40
41 - 60
61 - 80
81 - 100

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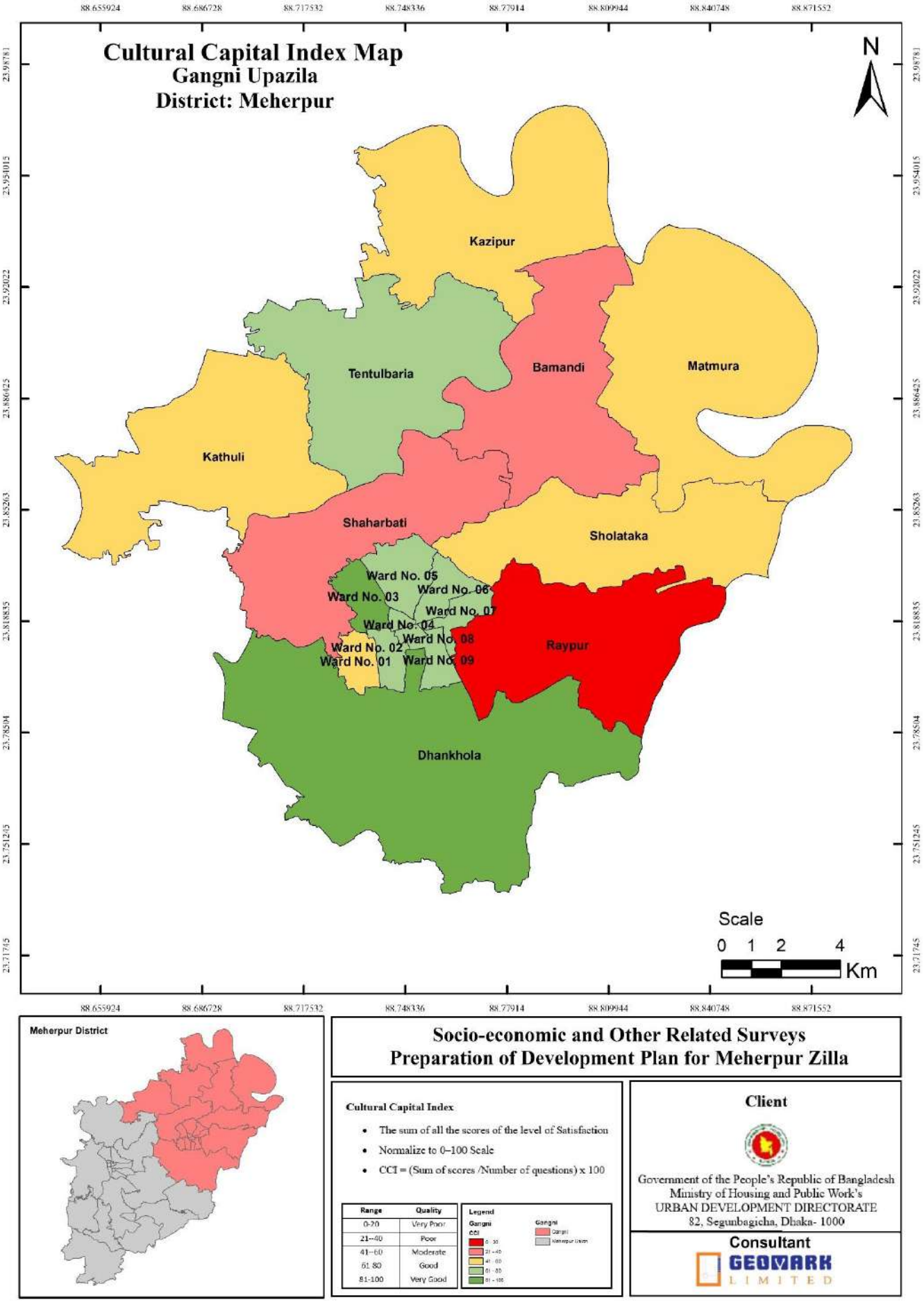
Cultural Capital Index Map
Gangni Upazila
District: Meherpur
N
88.655924
88.686728
88.717532
88.748336
88.77914
88.809944
88.840748
88.871552
23.98781
23.954015
23.92022
23.886425
23.85263
23.818835
23.78504
23.751245
23.71745
Kazipur
Tentulbaria
Bamandi
Matmura
Kathuli
Shaharbati
Sholataka
Ward No. 05
Ward No. 06
Ward No. 03
Ward No. 07
Ward No. 04
Ward No. 08
Ward No. 02
Raypur
Ward No. 01
Ward No. 09
Dhankhola
Scale
0 1 2 4
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Cultural Capital Index
The sum of all the scores of the level of Satisfaction
Normalize to 0–100 Scale
CCI = (Sum of scores /Number of questions) x 100
Range
Quality
0-20
Very Poor
21--40
Poor
41--60
Moderate
61-80
Good
81-100
Very Good
Legend
Gangni
CCI
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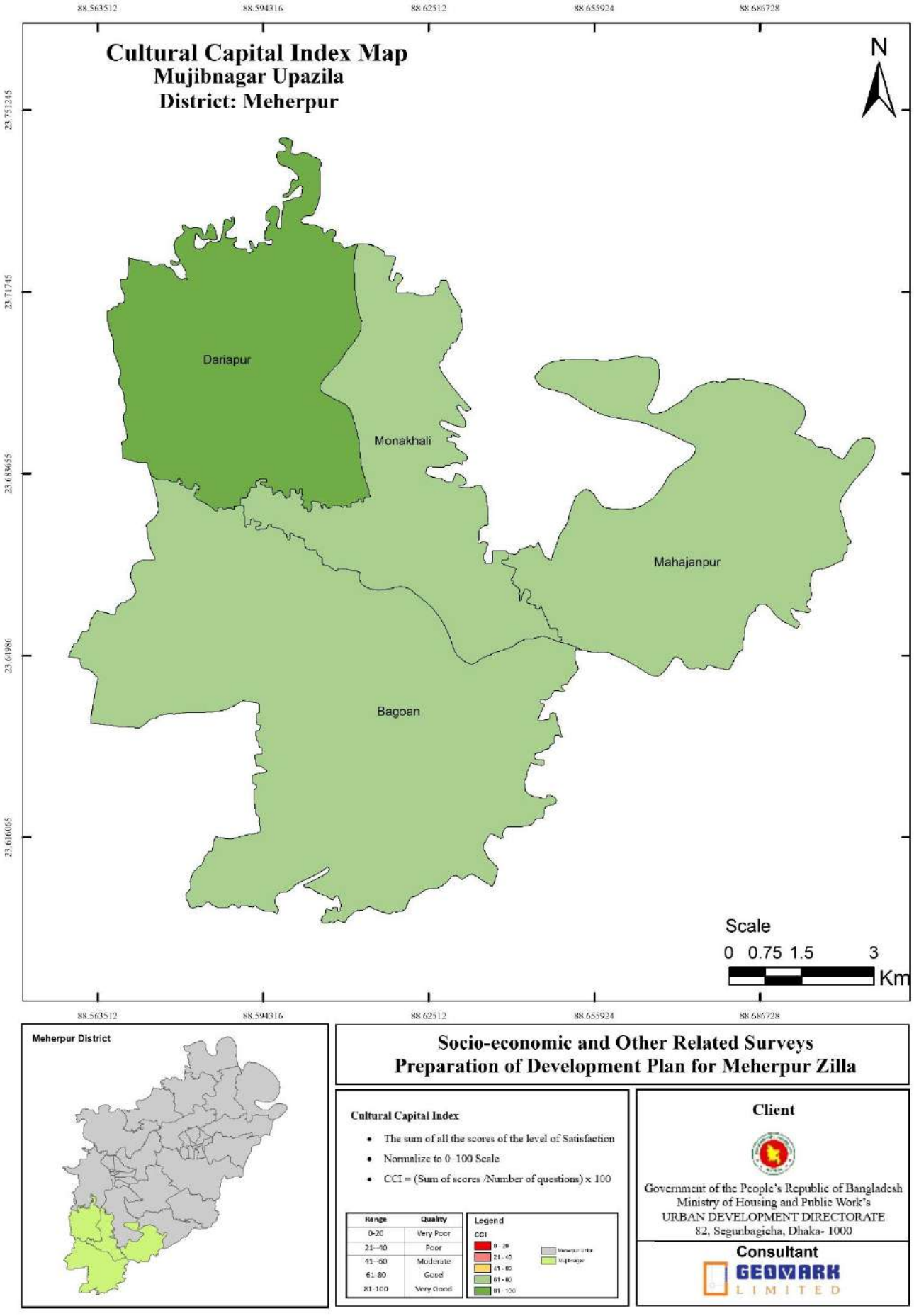
Consultant
GEOMARK LIMITED


Cultural Capital Index Map
Mujibnagar Upazila
District: Meherpur
N
88.563512
88.594316
88.62512
88.655924
88.686728
23.751245
23.71745
23.683655
23.64986
23.616065
Dariapur
Monakhali
Mahajanpur
Bagoan
Scale
0 0.75 1.5 3
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Cultural Capital Index
The sum of all the scores of the level of Satisfaction
Normalize to 0–100 Scale
CCI = (Sum of scores /Number of questions) x 100
Range
Quality
0-20
Very Poor
21--40
Poor
41--60
Moderate
61-80
Good
81-100
Very Good
Legend
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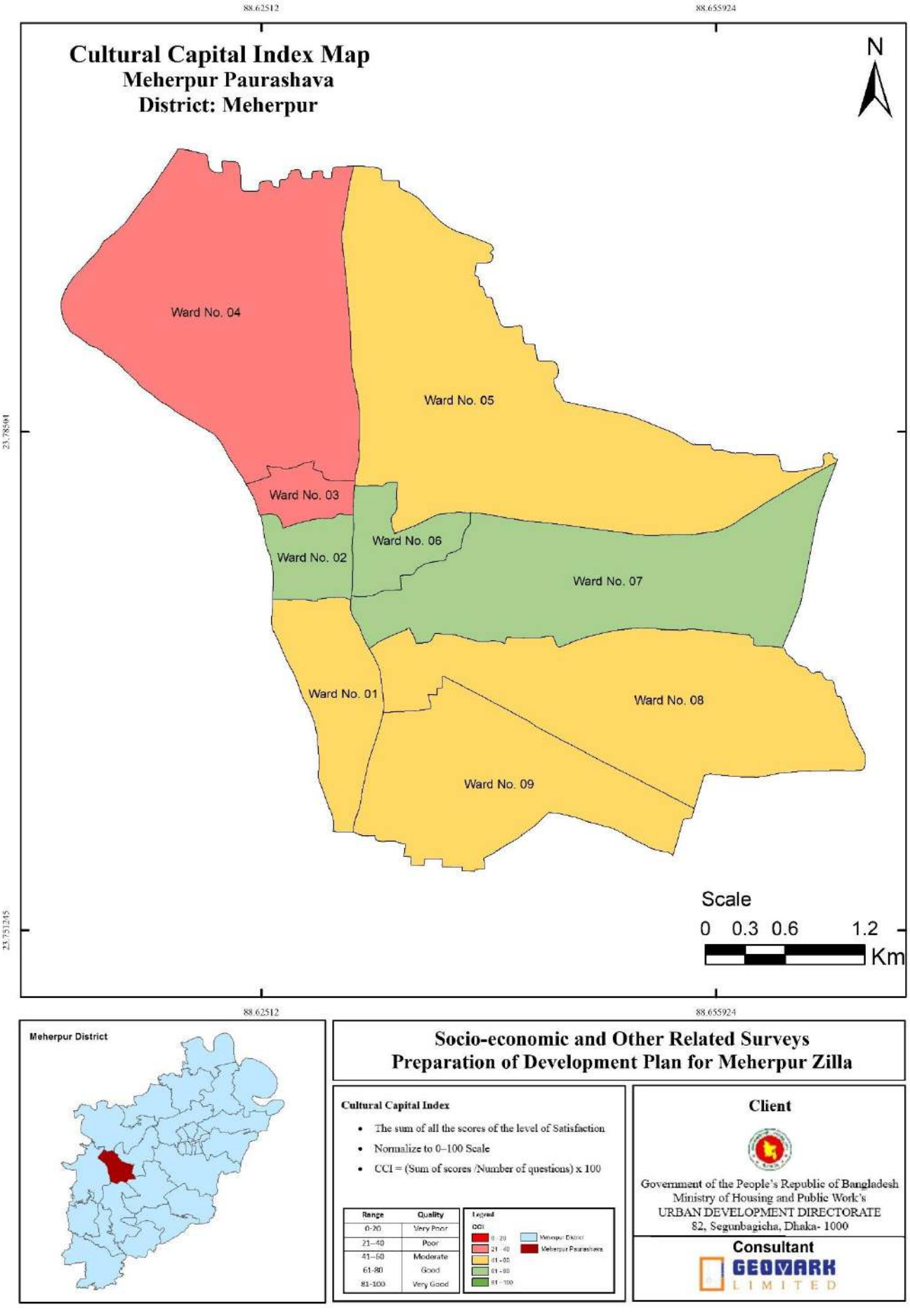
GEOMARK
LIMITED


Cultural Capital Index Map
Meherpur Paurashava
District: Meherpur
N
88.62512
88.655924
23.78504
23.751245
Ward No. 04
Ward No. 05
Ward No. 03
Ward No. 06
Ward No. 02
Ward No. 07
Ward No. 01
Ward No. 08
Ward No. 09
Scale
0 0.3 0.6 1.2
Km
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Cultural Capital Index
The sum of all the scores of the level of Satisfaction
Normalize to 0–100 Scale
CCI = (Sum of scores /Number of questions) x 100
Range
Quality
0-20
Very Poor
21–40
Poor
41–60
Moderate
61-80
Good
81-100
Very Good
Legend
CCI
Meherpur District
Meherpur Paurashava
Client
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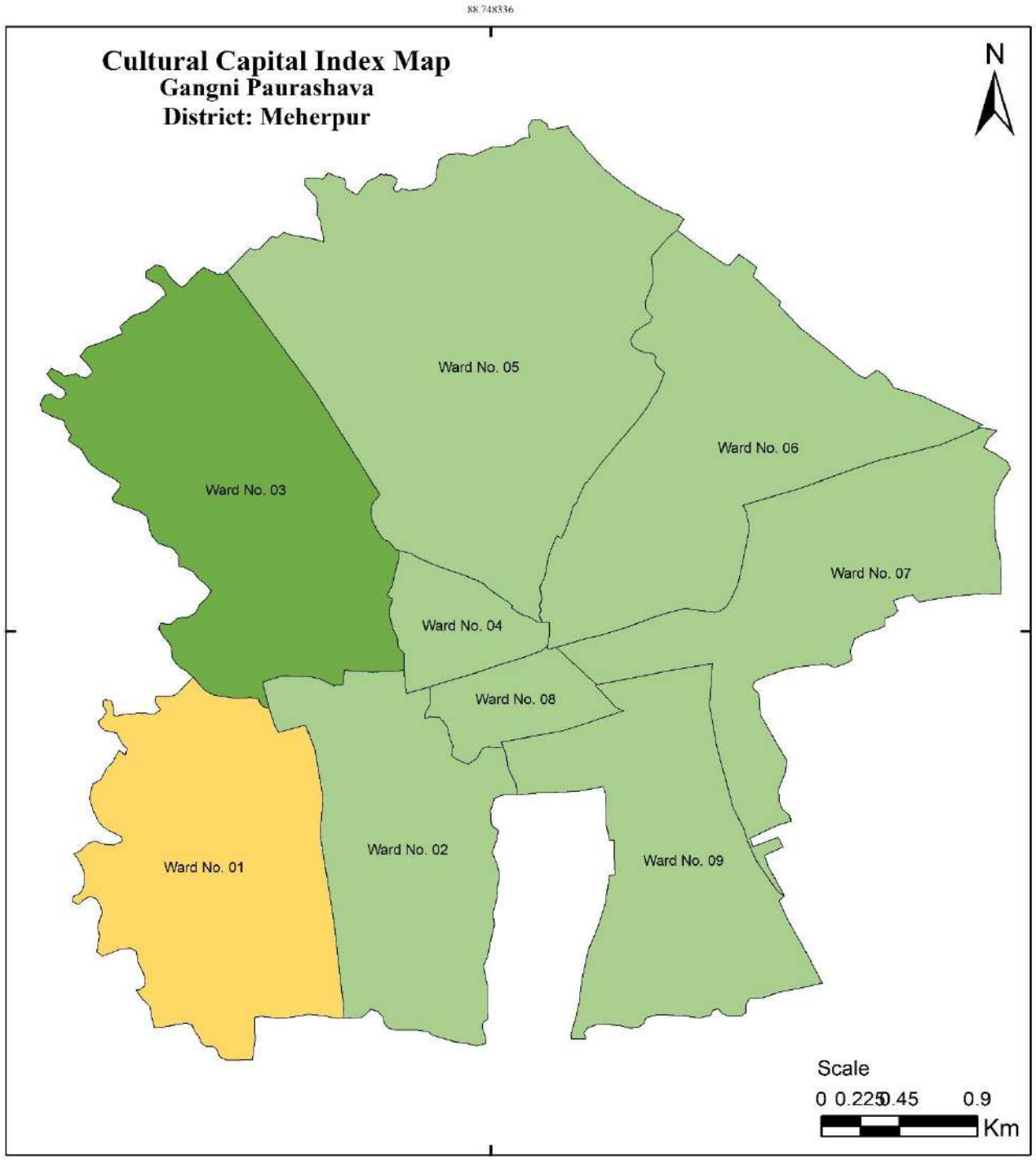
Ministry of Housing and Public Work's
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka- 1000
Consultant
GEOMARK
LIMITED



Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Cultural Capital Index

- The sum of all the scores of the level of Satisfaction
- Normalize to 0–100 Scale
- CCI = (Sum of scores /Number of questions) x 100

Range	Quality
0-20	Very Poor
21-40	Poor
41-60	Moderate
61-80	Good
81-100	Very Good

Legend
CCI
0 - 20
21 - 40
41 - 60
61 - 80
81 - 100
Gangni Paurashava
Meherpur Union

Client

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5.11 Resilient Space Index (RSI)

The Resilient Space Index (RSI) is a composite measure designed to capture the multidimensional aspects of human development at the local level. Unlike conventional indices that focus only on physical or economic indicators, the RSI combines three critical dimensions: Physical Quality of Life Index (PQLI), Quality of Life Index (QOLI), and Cultural Capital Index (CCI), to provide a holistic picture of wellbeing. Each dimension has been assigned equal weight (one-third), ensuring that social and cultural factors receive the same importance as physical and infrastructural indicators.

The RSI thus reflects not only the state of literacy, health, sanitation, and access to essential services but also the vibrancy of cultural participation, community engagement, and social organization. By integrating these dimensions, the index offers a more comprehensive understanding of human wellbeing, moving beyond infrastructure to encompass the lived experiences of communities.

At the upazila, union, and paurashava levels, the RSI highlights spatial disparities in development, identifying areas of strength and weakness. This makes it a valuable tool for local planning, policy alignment, and prioritization of interventions. Furthermore, the framework aligns with national strategies such as the Delta Plan 2100, the Perspective Plan 2041, and the Sustainable Development Goals (SDGs), offering a pathway to more inclusive, sustainable, and culturally enriched development in Meherpur District.

5.11.1 Meherpur Sadar Upazila (RSI)

The overall status of Meherpur Sadar shows a mixed performance across wellbeing and cultural indicators. While literacy, electricity access, and basic services remain relatively strong, there are persistent weaknesses in drainage, waste management, and cultural participation. Many wards reveal moderate to poor performance in health facilities, entertainment, and social organization involvement. These gaps lower the integrated index to a moderate range, mostly between 65 and 75. To address these challenges, Meherpur Sadar requires focused investments in urban services such as drainage and waste management systems in line with the Delta Plan 2100, while enhancing community health and security under the Perspective Plan 2041. In addition, strengthening reading culture, cultural participation, and civic engagement can help fulfill SDG 4 (Education), SDG 11 (Inclusive Communities), and SDG 16 (Institutions).

5.11.2 Gangni Upazila (RSI)

Gangni Upazila performs relatively better in terms of access to education, electricity, and water, which remain high in most unions. However, several unions and wards still display weaknesses in drainage, waste management, and health services. Life expectancy is also lower in some areas, reflecting gaps in health and nutrition. Moreover, the cultural capital index reveals poor reading interest, low participation in social organizations, and limited cultural activities in specific locations. Overall, Gangni's RSI ranges between 65 and 80, falling mostly within the moderate to high category. Addressing these gaps requires integrated actions: upgrading drainage and waste management systems through the Delta Plan 2100, improving health and nutrition for longer life expectancy as emphasized in the Perspective Plan 2041, and fostering a stronger reading culture and cultural participation aligned with SDG 4 and SDG 11.

5.11.3 Mujibnagar Upazila (RSI)

Mujibnagar emerges as the most vulnerable upazila in terms of integrated wellbeing and cultural development. The biggest concerns lie in health and life expectancy, particularly in Mahajanpur and Monakhali, where PQLI and QOLI remain low. While education and infrastructure are relatively strong in Bagoan and Monakhali, weaknesses in drainage, sewage, and social organization involvement persist across multiple unions. Cultural participation is also limited, which lowers the overall resilience of the upazila. The RSI scores mostly fall between 61 and 75, highlighting areas of concern. To improve outcomes, immediate action is needed to strengthen healthcare services and enhance life expectancy, in line with the Perspective Plan 2041 and Delta Plan 2100's maternal and child health priorities. Additionally, developing proper drainage and waste management systems will advance SDG 6 (Clean Water and Sanitation), while promoting cultural engagement and social organization participation will help realize SDG 11 (Inclusive Communities) and SDG 16 (Strong Institutions).

5.11.4 Meherpur Paurashava (RSI)

The wards of Meherpur Paurashava present a highly uneven picture of wellbeing and cultural development. On one hand, several wards score relatively high in education, electricity, and access to water, indicating good basic services. However, major weaknesses are evident in drainage and waste management, which consistently appear as poor or moderate across most wards. Health facilities and entertainment opportunities are also uneven, with some wards showing strong performance while others remain deficient. In terms of cultural capital, there is a recurring problem of low reading interest, weak participation in social organizations, and limited cultural or religious event engagement, dragging down the composite index. As a result,

Meherpur Paurashava's RSI fluctuates between moderate and high, with some wards performing better than others but overall revealing significant gaps. Policy responses should therefore prioritize improved urban sanitation and drainage systems in line with the Delta Plan 2100, while strengthening health and recreational facilities as highlighted in the Perspective Plan 2041. Equally important is investment in libraries, youth centers, and civic initiatives to foster cultural and social participation, thereby advancing SDG 4 (Education), SDG 11 (Inclusive Communities), and SDG 16 (Strong Institutions).

5.11.5 Gangni Paurashava (RSI)

The situation in Gangni Paurashava wards is somewhat similar, though with its own unique challenges. Most wards perform reasonably well in education, electricity, and communication, suggesting that the baseline infrastructure is adequate. Nonetheless, there are critical weaknesses in healthcare and life expectancy, particularly in Ward 01 and Ward 07, where health indicators score very low. Drainage and waste management also remain poor or moderate in several wards, highlighting a gap in urban services. The cultural capital index again emerges as a major challenge: reading interest, higher education encouragement, and participation in cultural or social organizations are consistently poor across almost all wards. This lack of cultural engagement undermines the overall wellbeing framework despite relatively good physical infrastructure. The RSI for Gangni Paurashava therefore ranges from moderate to high, but cultural development remains the limiting factor. To address this, healthcare services and nutrition programs must be expanded under the Perspective Plan 2041, while urban infrastructure improvements (drainage, sewage, waste management) should follow the Delta Plan 2100. At the same time, cultural programs, reading initiatives, and civic engagement platforms need to be promoted to meet SDG 4, SDG 11, and SDG 16, ensuring a more holistic development pathway for the municipality.

5.11.6 Rural Areas of Meherpur District (RSI)

The rural areas of Meherpur District show clear contrasts across upazilas. Meherpur Sadar's rural unions suffer primarily from poor drainage, waste management, and limited cultural participation, despite strengths in basic education and utilities. Gangni's rural unions enjoy stronger infrastructure but face challenges in rural health and cultural capital. Mujibnagar's rural unions are the most vulnerable, with low life expectancy, inadequate health services, and weak social organization participation pulling down the integrated index. Strengthening rural sanitation and waste systems (Delta Plan 2100), expanding health and nutrition services

(Perspective Plan 2041), and promoting cultural and civic participation (SDGs 4, 11, 16) are essential to raise the RSI across rural Meherpur.

5.11.6.1 Meherpur Sadar Rural Unions (RSI)

The rural unions of Meherpur Sadar show a mix of moderate and high scores in the RSI, though several structural challenges persist. Access to water, electricity, and basic education is relatively satisfactory, with most unions performing in the moderate-to-high category. However, serious weaknesses remain in drainage and waste management, which are consistently poor in Amdah, Baradi, and Shyampur. Health facilities and security services are also moderate in many unions, pointing to gaps in rural healthcare delivery and community safety. Cultural indicators are mixed: while reading interest and higher education encouragement reach moderate levels in some areas, social organization participation remains persistently poor. Overall, rural Meherpur Sadar requires targeted investments in rural sanitation and drainage under the Delta Plan 2100, alongside programs for rural healthcare expansion under the Perspective Plan 2041. Community-led initiatives to strengthen social and cultural participation will be essential for achieving SDG 4 (Education), SDG 11 (Community Wellbeing), and SDG 16 (Institutions).

5.11.6.2 Gangni Rural Unions (RSI)

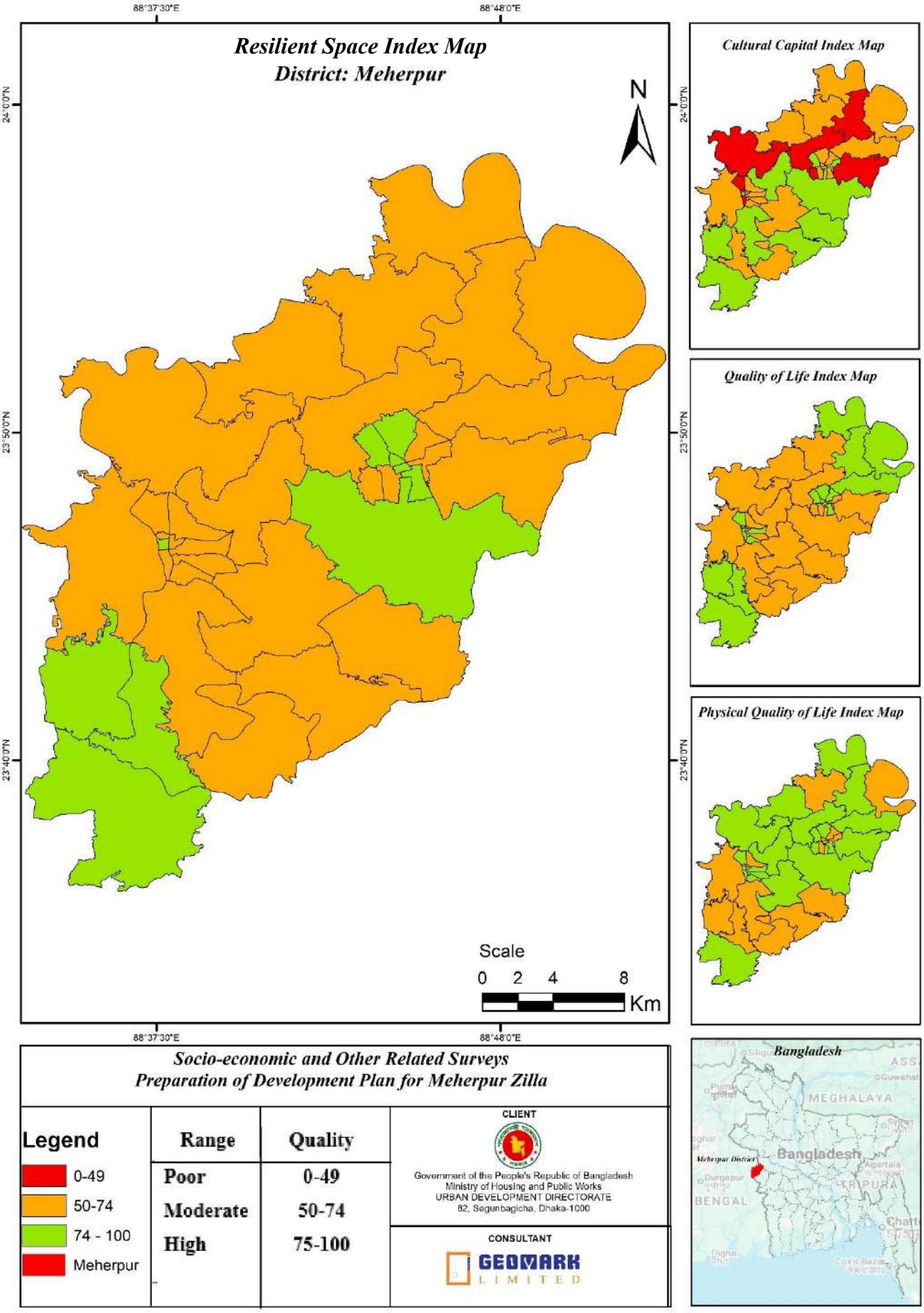
Rural Gangni demonstrates relatively strong performance in education, electricity, and access to water across most unions. For example, Kazipur and Matmura achieve high scores in their integrated wellbeing index. However, persistent deficiencies are observed in drainage, waste management, and health services in unions such as Kathuli, Raypur, and Shaharbati. Life expectancy is also a concern in some areas, pointing to broader issues of rural health and nutrition. On the cultural side, although unions like Dhankhola and Sholataka show relatively good cultural capital, many others (e.g., Raypur and Shaharbati) lag significantly in reading interest and participation in social organizations. Consequently, the rural RSI for Gangni ranges from moderate to high, with infrastructure relatively stronger than cultural development. Addressing these gaps will require expansion of rural health and nutrition programs (Perspective Plan 2041), improvements in drainage and waste management systems (Delta Plan 2100), and long-term investment in libraries, cultural events, and civic networks to fulfill SDG 4, SDG 11, and SDG 16.

5.11.6.3 Mujibnagar Rural Unions (RSI)

The rural unions of Mujibnagar present the most vulnerable situation in Meherpur District. While Bagoan and Monakhali score relatively well in education and infrastructure, severe weaknesses are visible in Mahajanpur and Dariapur, particularly in health facilities and life expectancy. In these areas, the Physical Quality of Life Index (PQLI) remains low, reflecting inadequate healthcare coverage. Drainage and waste management also reveal significant deficiencies, while cultural participation and involvement in social organizations are weak across almost all unions. As a result, the RSI in Mujibnagar is skewed towards the lower end of the moderate scale, with some unions approaching poor performance. To address these gaps, urgent healthcare interventions are required under the Perspective Plan 2041, alongside infrastructure development for sanitation and drainage under the Delta Plan 2100. Promoting cultural awareness, reading programs, and civic participation will be essential for uplifting social capital in line with SDG 4 (Education), SDG 11 (Inclusive Communities), and SDG 16 (Institutions).

Table 22: Resilient Space Index Of Meherpur District

Upazila	Union/Ward	PQLI	CCI	QOLI	RSI
Meherpur Sadar	Amdah	73.23	92.31	57.49	74.34
Meherpur Sadar	Amjhupi	78.07	52.73	65.94	65.58
Meherpur Sadar	Baradi	72.84	79.67	62.03	71.51
Meherpur Sadar	Buripota	72.28	61.00	65.52	66.27
Meherpur Sadar	Kutubpur	85.42	30.18	59.85	58.48
Meherpur Sadar	Pirojpur	71.74	75.48	63.02	70.08
Meherpur Sadar	Shyampur	78.75	81.67	57.58	72.67
Meherpur Sadar	Ward 01	79.19	47.20	86.27	70.89
Meherpur Sadar	Ward 02	77.39	77.39	75.48	76.75
Meherpur Sadar	Ward 03	73.43	38.75	97.91	70.03
Meherpur Sadar	Ward 04	84.54	28.75	93.74	69.01
Meherpur Sadar	Ward 05	64.54	54.29	59.15	59.33
Meherpur Sadar	Ward 06	76.04	63.33	72.95	70.77
Meherpur Sadar	Ward 07	80.22	64.00	75.23	73.15
Meherpur Sadar	Ward 08	80.35	57.60	72.01	69.99
Meherpur Sadar	Ward 09	82.39	56.67	75.25	71.44
Gangni	Bamandi	78.95	38.71	77.15	64.94
Gangni	Dhankhola	84.95	84.00	65.18	78.04
Gangni	Kathuli	78.29	56.33	56.76	63.79
Gangni	Kazipur	83.28	58.69	66.97	66.97
Gangni	Matmura	66.49	58.00	88.04	70.84
Gangni	Raypur	89.88	17.70	57.69	55.09
Gangni	Shaharbati	96.59	34.10	60.18	69.65
Gangni	Sholataka	82.86	55.26	78.67	72.26
Gangni	Tentulbaria	72.47	66.23	71.43	70.04
Gangni	Ward 01	77.51	47.50	55.59	60.20
Gangni	Ward 02	70.63	61.54	70.52	67.56
Gangni	Ward 03	79.40	82.50	82.99	81.63
Gangni	Ward 04	70.27	73.33	83.97	75.86
Gangni	Ward 05	82.29	66.36	90.15	79.60
Gangni	Ward 06	69.15	65.00	87.27	73.81
Gangni	Ward 07	72.46	80.00	69.53	74.00
Gangni	Ward 08	79.74	78.75	89.72	82.74
Gangni	Ward 09	78.46	70.34	88.06	78.95
Mujibnagar	Bagoan	82.34	75.00	76.42	77.92
Mujibnagar	Dariapur	72.95	83.49	79.91	78.78
Mujibnagar	Mahajanpur	63.23	66.00	56.58	61.94
Mujibnagar	Monakhali	72.46	68.00	87.07	75.84


Resilient Space Index Map
District: Meherpur
88°37'30"E
88°48'0"E
24°0'0"N
23°50'0"N
23°40'0"N
N
Scale
0 2 4 8
Km
Cultural Capital Index Map
Quality of Life Index Map
Physical Quality of Life Index Map
Bangladesh
MEGHALAYA
TRIPURA
BENGAL
Meherpur District
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Legend
0-49
50-74
74 - 100
Meherpur
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
CLIENT
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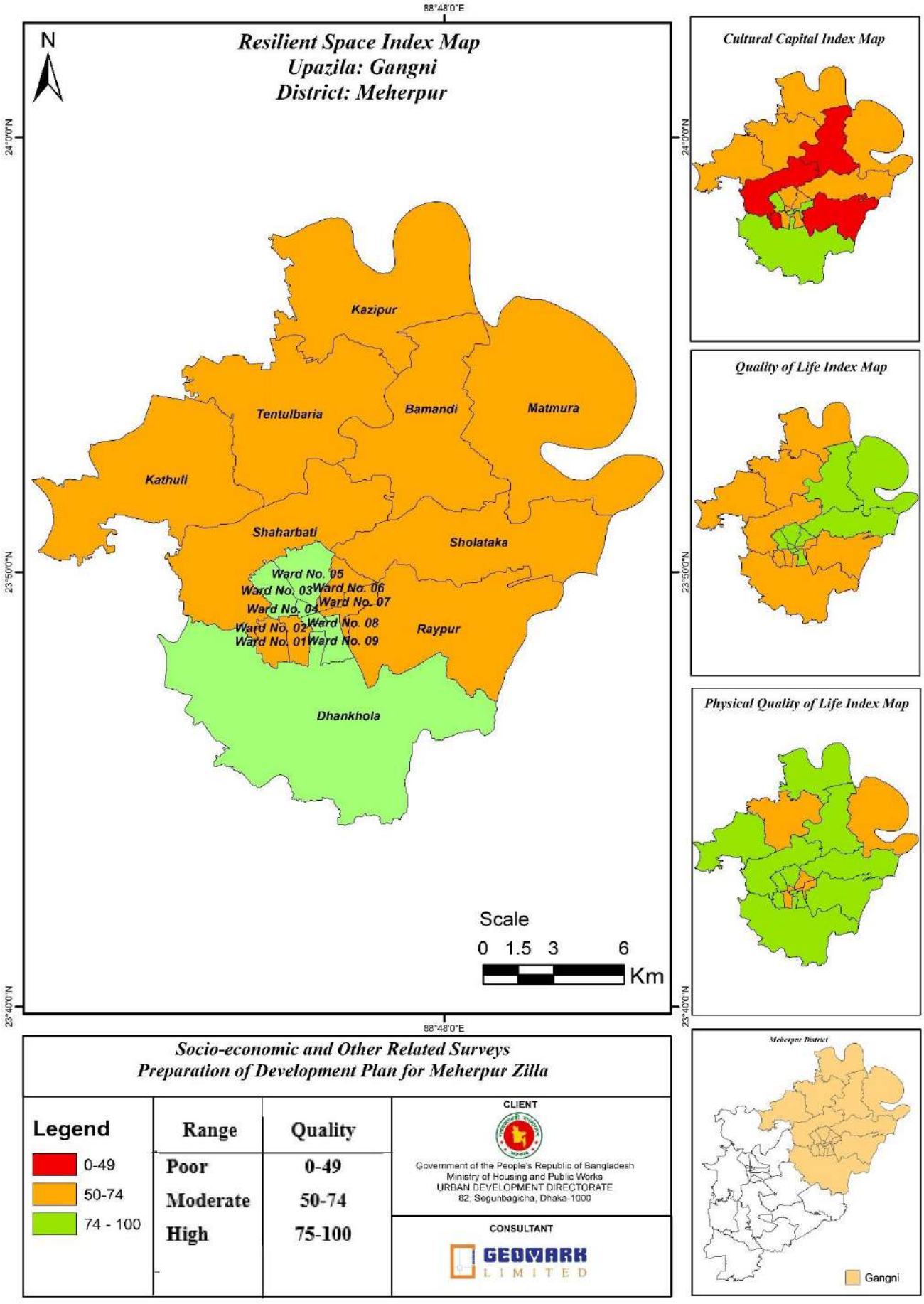
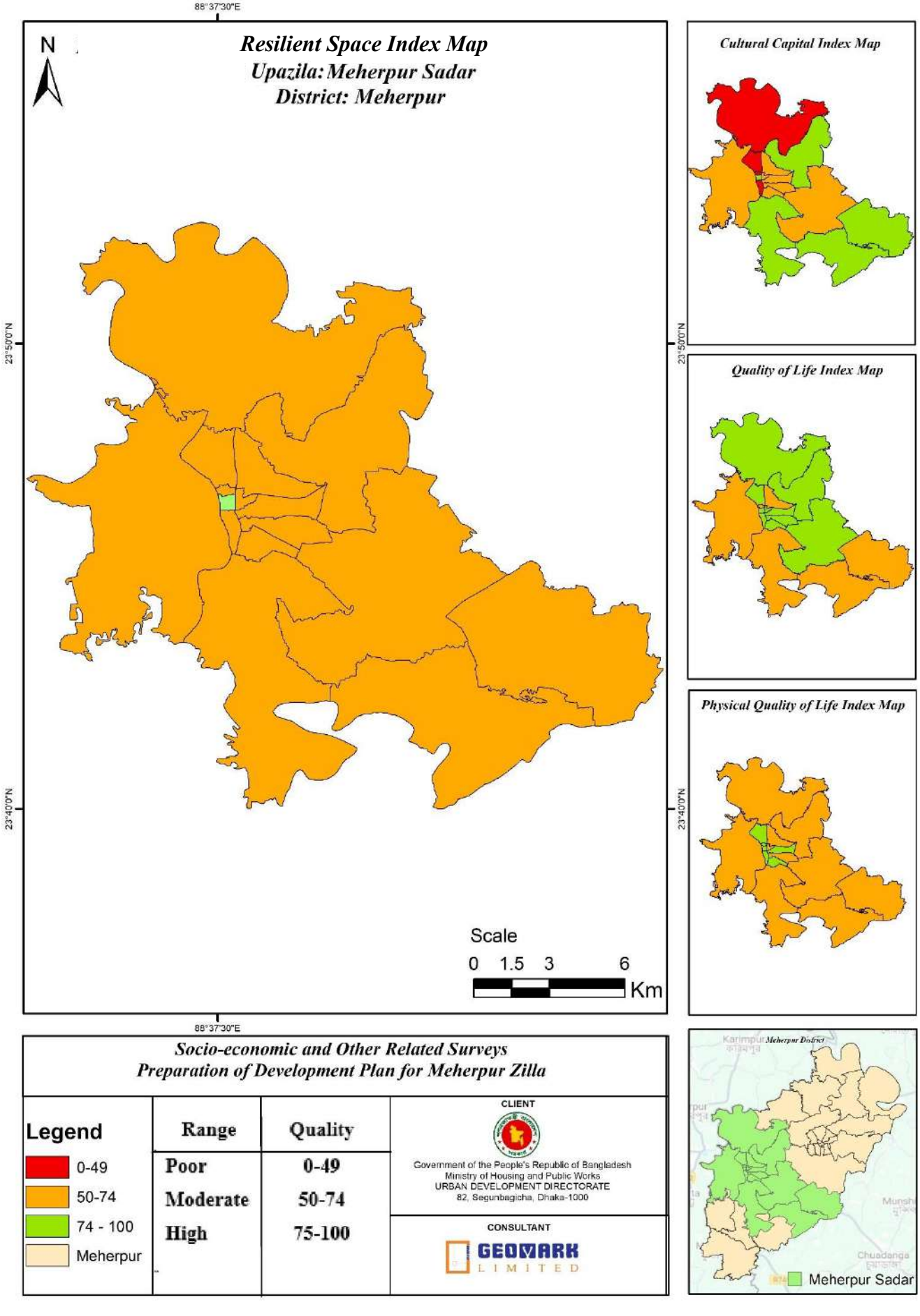
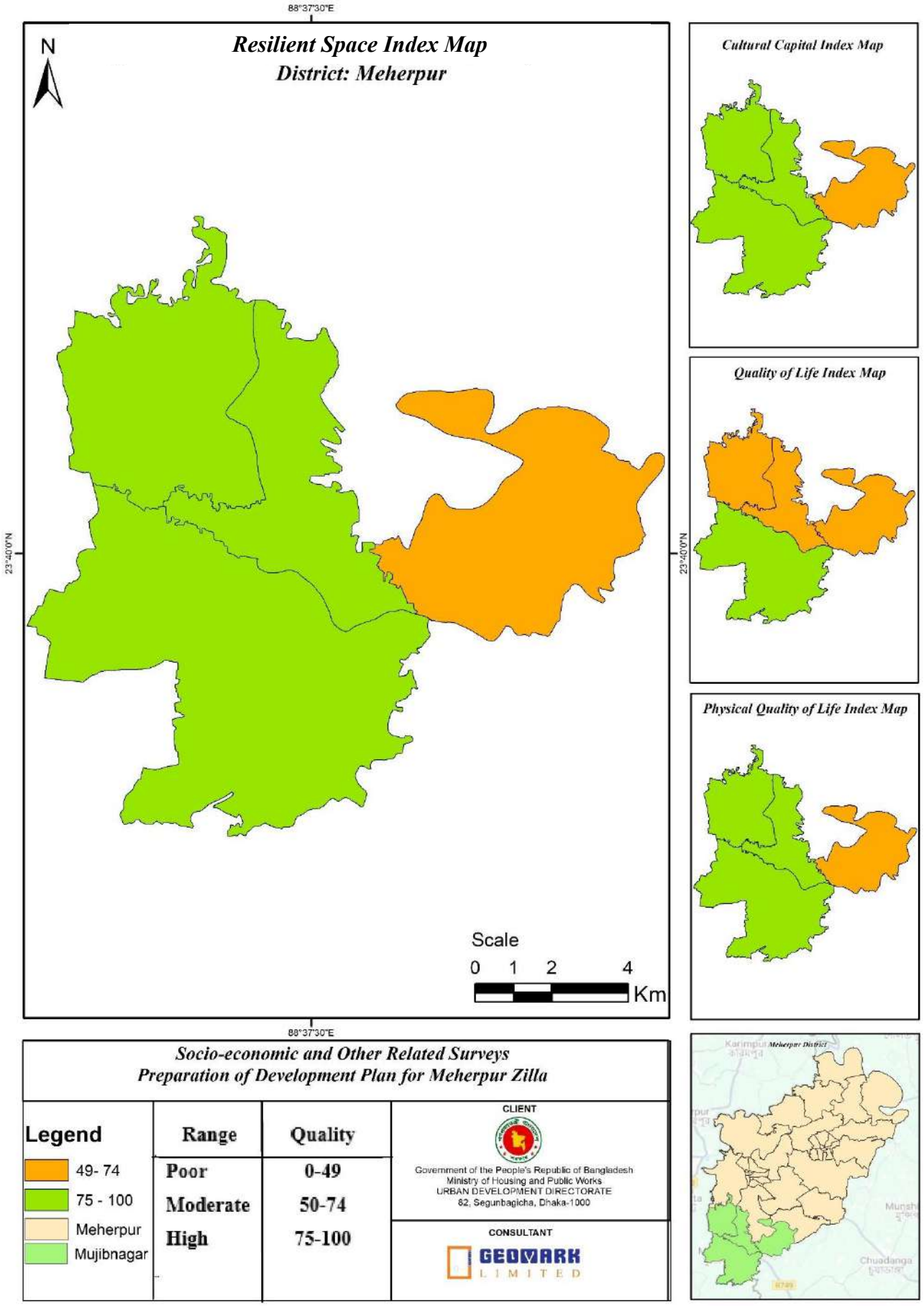
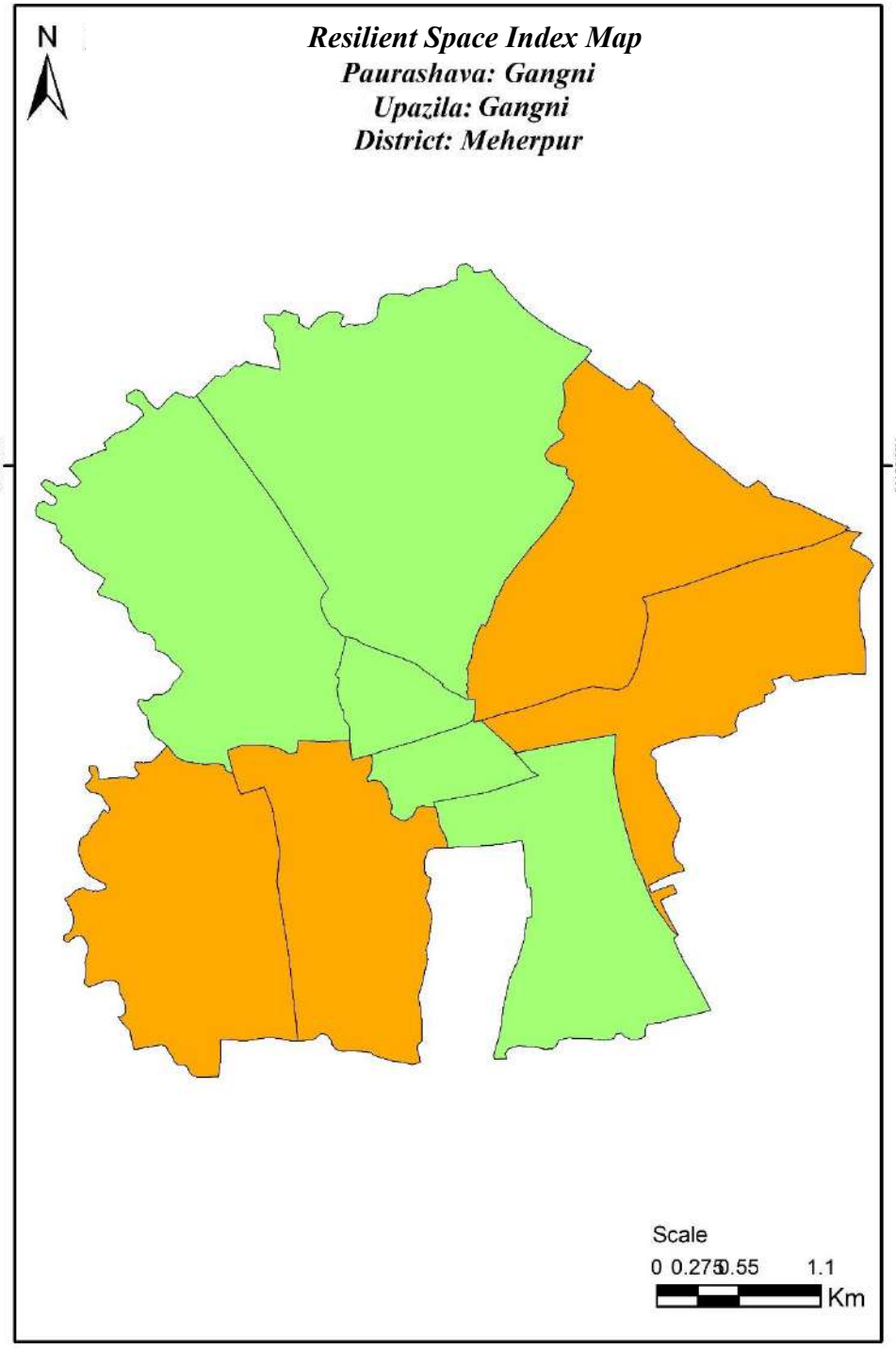
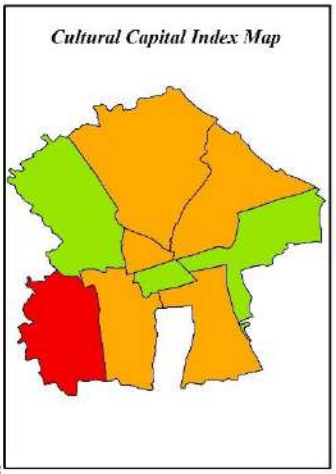
Ministry of Housing and Public Works
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka-1000
CONSULTANT
GEOMARK LIMITED

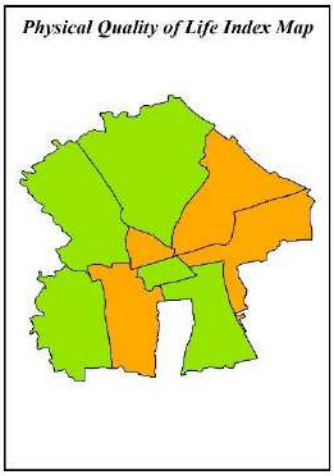

88°48'0"E
N
Resilient Space Index Map
Upazila: Gangni
District: Meherpur
24°0'0"N
23°50'0"N
23°40'0"N
Kazipur
Tentulbaria
Bamandi
Matmura
Kathuli
Shaharbati
Sholataka
Ward No. 05
Ward No. 03
Ward No. 06
Ward No. 07
Ward No. 04
Ward No. 02
Ward No. 08
Ward No. 01
Ward No. 09
Raypur
Dhankhola
Scale
0 1.5 3 6
Km
Cultural Capital Index Map
Quality of Life Index Map
Physical Quality of Life Index Map
Meherpur District
Gangni
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Legend
0-49
50-74
74 - 100
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
CLIENT
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Works
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka-1000
CONSULTANT
GEOMARK LIMITED


88°37'30"E
N
Resilient Space Index Map
Upazila: Meherpur Sadar
District: Meherpur
23°50'0"N
23°40'0"N
Scale
0 1.5 3 6
Km
Cultural Capital Index Map
Quality of Life Index Map
Physical Quality of Life Index Map
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Legend
0-49
50-74
74 - 100
Meherpur
Range
Quality
Poor
0-49
Moderate
50-74
High
75-100
CLIENT
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Works
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka-1000
CONSULTANT
GEOMARK LIMITED
Meherpur Sadar


88°37'30"E
N
Resilient Space Index Map
District: Meherpur
23°40'0"N
Scale
0 1 2 4
Km
Cultural Capital Index Map
Quality of Life Index Map
Physical Quality of Life Index Map
Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla
Legend
49- 74
75 - 100
Meherpur
Mujibnagar
Range
Poor
Moderate
High
Quality
0-49
50-74
75-100
CLIENT
Government of the People's Republic of Bangladesh
Ministry of Housing and Public Works
URBAN DEVELOPMENT DIRECTORATE
82, Segunbagicha, Dhaka-1000
CONSULTANT
GEOMARK LIMITED
Meherpur District







Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Legend	Range	Quality
0-49	Poor	0-49
50-74	Moderate	50-74
74 - 100	High	75-100

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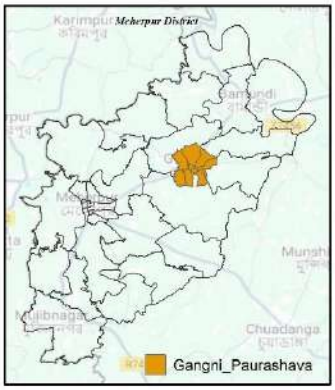

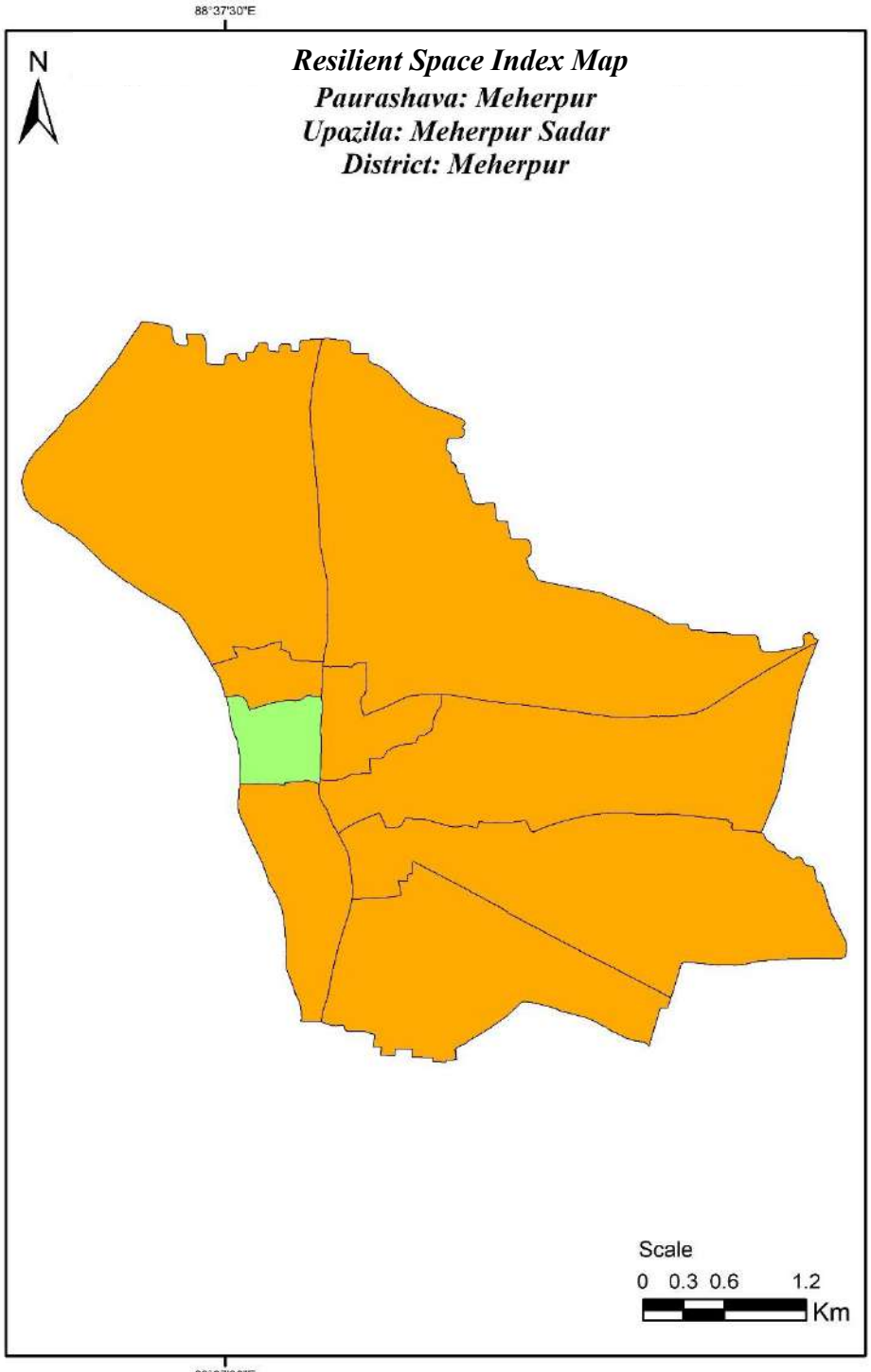

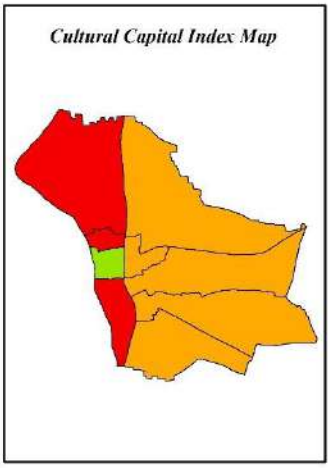

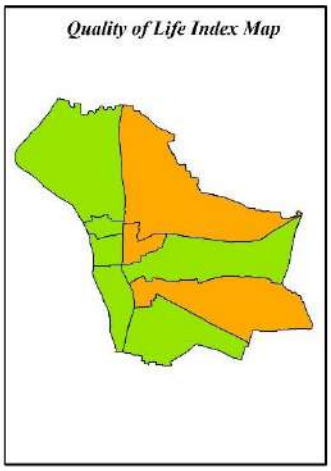

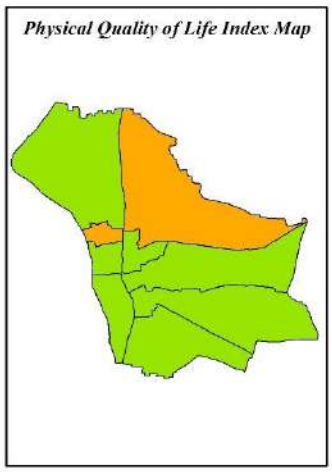

Socio-economic and Other Related Surveys
Preparation of Development Plan for Meherpur Zilla

Legend	Range	Quality
0-49	Poor	0-49
50-74	Moderate	50-74
74 - 100	High	75-100

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Chapter 6: Upazila Wise Key Challenges and Disparities

6.1 Gangni Upazila

Gangni upazila (Meherpur District) has 9 unions (plus an urban municipality). The unions falling in the bottom third (lowest 33%) for each index are identified in the matrix below. These include Matmura, Tentulbaria, and Kathuli for PQLI; Raypur, Shaharbati, and Bamandi for CCI; and Kathuli, Raypur, and Shaharbati for QOLI. The table marks which indices each of these unions underperform in, followed by specific challenges contributing to their low scores:

Table 23: Upazila Based Key Challenges Identification (Gangni)

Union	PQLI	CCI	QOLI	Key Challenges
Bamandi	78.95	38.71	77.15	Limited educational & cultural facilities – CCI only ~38.7 despite moderate literacy (~79%).
Dhankhola	84.95	84.00	65.18	Infrastructure and living conditions weaker than human development outcomes; QOLI moderate.
Kathuli	78.29	56.33	56.76	High infant mortality (≈23%, 6 deaths) undermines PQLI; poor infrastructure & services (QOLI ~56.8, lowest in Gangni).
Kazipur	83.28	58.69	66.97	Poor Drainage (13.93) and Waste Management (13.52) system, Moderate cultural participation (CCI ~58.7); community engagement needs strengthening.
Matmura	66.49	58.00	88.04	Lowest literacy (~71%) & high infant mortality (~26.7%) depress PQLI, despite strong infrastructure (QOLI high).
Raypur	89.88	17.70	57.69	Very low cultural/educational resources (CCI ~17.7, lowest); poor infrastructure & living conditions despite ~99% literacy. Moderate Social Organization Participation Very poor waste management and drainage system.

Union	PQLI	CCI	QOLI	Key Challenges
Shaharbati	96.59	34.10	60.18	Lack of higher education/cultural assets (CCI ~34.1 very low despite high literacy); basic services also weak (QOLI ~60.2).
Sholataka	82.86	55.26	78.67	Moderate cultural/social participation; needs stronger community-based cultural activities.
Tentulbaria	72.47	66.23	71.43	Lower literacy (~72.47%) holds back PQLI; life expectancy index weak though no infant deaths.
Ward 1	77.51	47.50	55.59	Very low cultural participation; poor housing & weak urban infrastructure.
Ward 2	70.63	61.54	70.52	Low literacy, infant mortality issues, poor facilities, weak urban services.
Ward 3	79.40	82.50	82.99	Average human development; good living conditions; few challenges.
Ward 4	70.27	73.33	83.97	Low literacy requires educational support; infrastructure moderate.
Ward 5	82.29	66.36	90.15	Strong living conditions & services; cultural participation moderate.
Ward 6	69.15	65.00	87.27	High infant mortality; weak literacy; low cultural engagement despite good infrastructure.
Ward 7	72.46	80.00	69.53	Weak urban services (water, drainage, sanitation) pulling QOLI down.
Ward 8	79.74	78.75	89.72	Performs well across all indices; minimal challenges.
Ward 9	78.46	70.34	88.06	Strong and consistent across all indices; cultural participation only moderate.

Bamandi

Bamandi maintains high PQLI (~78.9) and QOLI (~77.2), but its CCI is very poor (~38.7). Despite decent literacy, there is little educational or cultural participation, and community engagement remains underdeveloped. The key challenge is therefore strengthening cultural and social capital to match physical development.

Dhankhola

Dhankhola scores well in PQLI (~84.9) and CCI (~84.0), but its QOLI (~65.2) is only moderate. This mismatch shows that while people are healthy and culturally engaged, infrastructure and service delivery (roads, utilities, sanitation) remain weak. Addressing these gaps is essential to bring living conditions in line with human development achievements.

Kathuli

Kathuli faces one of the toughest human development challenges in Gangni. Despite a relatively high PQLI (~78.3), infant mortality is very high (~23%, 6 deaths), pulling down overall progress. Both QOLI (~56.8) and CCI (~56.3) are moderate to low, reflecting poor infrastructure and weak cultural participation. Strengthening healthcare and improving basic services must be prioritized here.

Kazipur

Kazipur is relatively strong, with high PQLI (~83.3) and moderate QOLI (~66.97). However, its CCI (~58.7) is only moderate, pointing to weaker cultural and educational participation. The key challenge lies in enhancing community engagement and social capital to complement its infrastructural progress.

Critical Concern:

Despite reporting moderate satisfaction levels regarding QOLI, drainage and waste management systems are alarmingly poor. This indicates that existing facilities are severely limited across the union.

Drainage Availability: The data on drainage infrastructure in Kazipur Union paints a stark picture of neglect. Despite broader developmental gains, only a very small fraction of residents 2% have access to any drainage facilities, while the overwhelming majority remain outside coverage. This indicates that drainage is not simply insufficient, but almost entirely absent at the community scale. Such limited availability means that households are forced to rely on

natural runoff or makeshift solutions, leaving the area highly prone to flooding, unhygienic conditions, and longer-term structural damage to roads and homesteads.

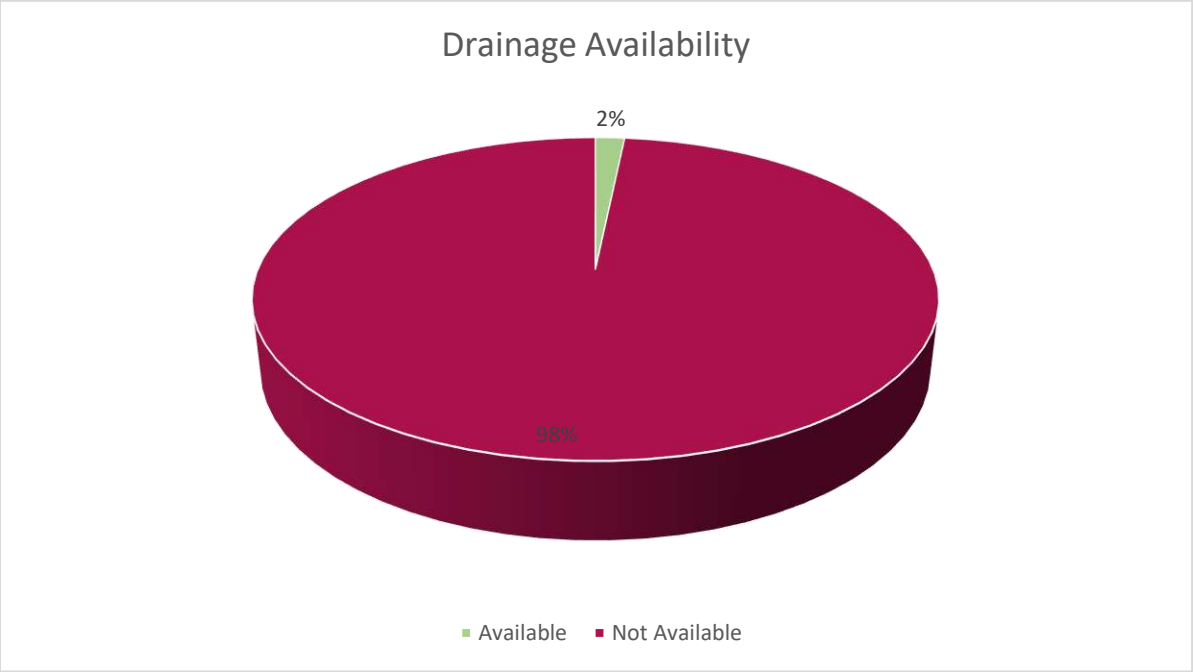


Figure 106: Drainage Availability of Kazipur Union

The drainage unavailability across villages in Kazipur Union highlights spatial disparities that require targeted attention. Haravanga (Molla Para, Halsana Para–Eidgah/GorosthanPara, in front of Adarsha Secondary School, Haravanga Pashchim Para, Amin Master Para, Haravanga Pashchim Para (densely populated)) is the most severely affected, accounting for 51.7% of the total lack of drainage facilities, making it the most vulnerable settlement. Sahebnagar (Sahebnagar Purbo Para (East Para Jame Mosque area), Madrasa Para, Dokkhin Para, Sardar Para, Sahebnagar Forayezi Para, Sahebnagar Government Primary School area (backside)) also faces a significant gap, contributing 40% to the overall deficit. Meanwhile, Notun Brojopur, though less affected, still represents 8.3% of the unserved households.

This breakdown suggests that while the drainage crisis is widespread across the union, its intensity varies from one village to another. Haravanga and Sahebnagar together represent over 90% of the drainage unavailability, making them critical hotspots for immediate intervention. Prioritizing infrastructure investment in these villages would not only address the bulk of the problem but also significantly reduce the union-wide vulnerability to waterlogging, sanitation issues, and environmental hazards.

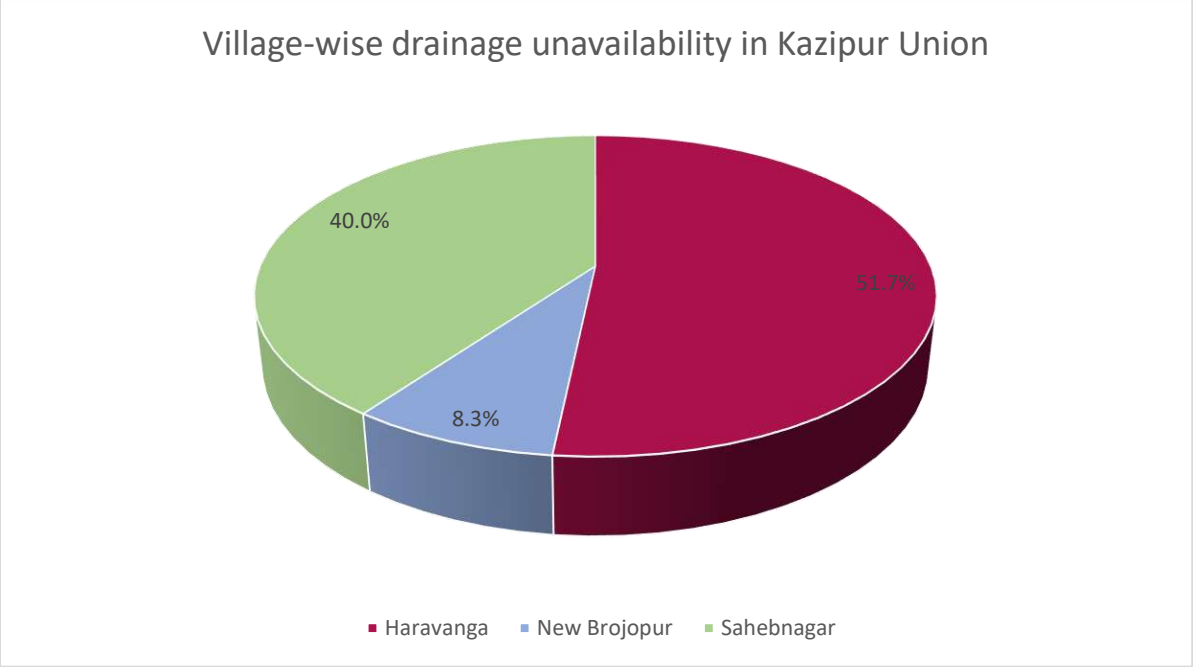
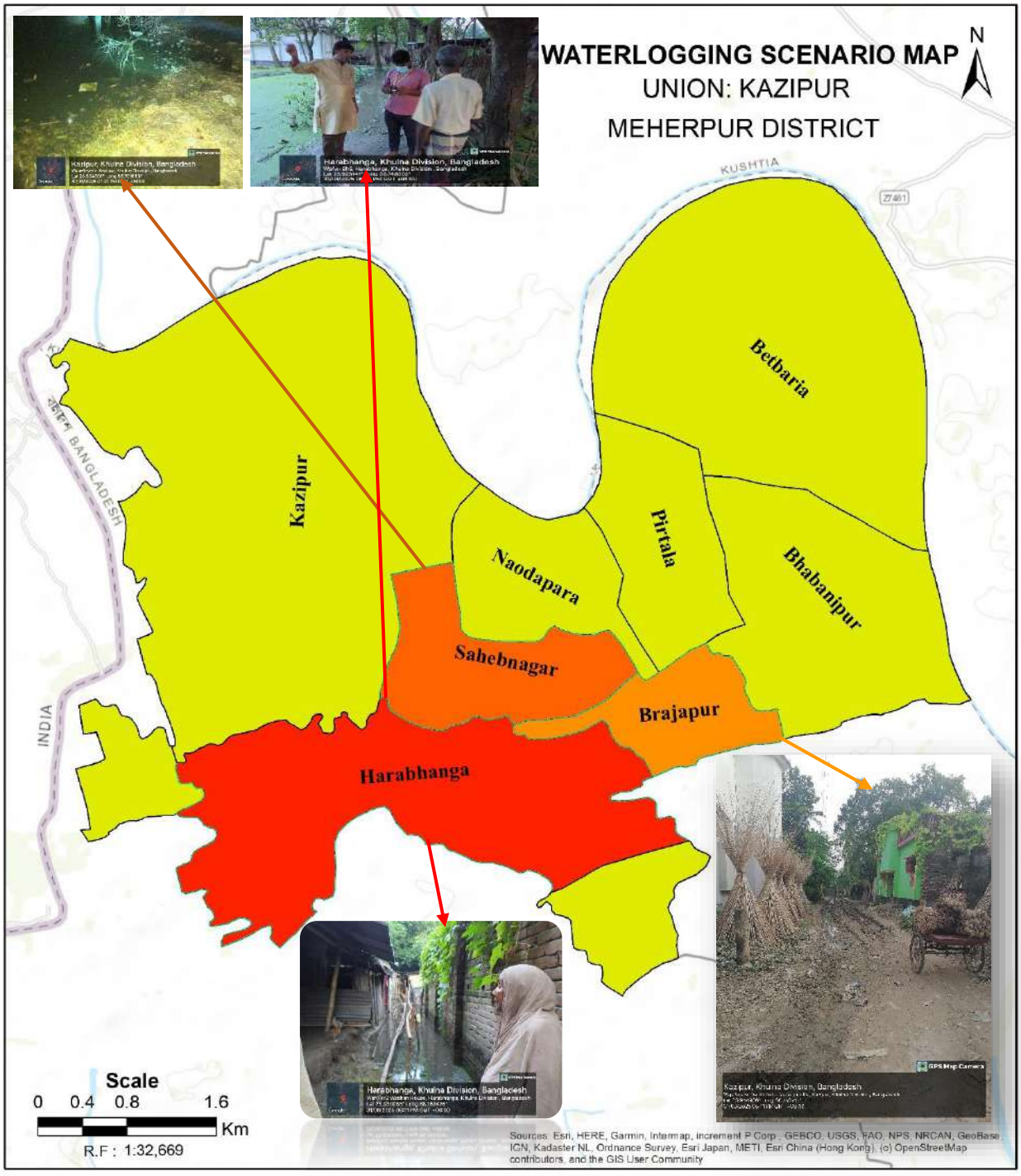


Figure 107: Village-wise distribution of households without access to drainage facilities in Kazipur Union

Figure 108: Waterlogging Scenario of Kazipur Union



SOCIO-ECONOMIC & OTHER RELATED SURVEY
PREPARATION OF DEVELOPMENT PLAN FOR MEHERPUR ZILLA PROJECT (PACKAGE-4)

LEGEND

Kazipur Union

Village Name

- Betbaria
- Bhabanipur
- Chak Charalkhali
- Kazipur
- Naodapara
- Natun Brajapur
- Pirtala
- Brajapur
- Sahebnagar
- Harabhanga

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Waste Management: Waste management in Kazipur Union shows a similarly critical shortfall. Just 2% of households benefit from organized waste disposal systems, with the remaining 98% left to manage their waste informally, often through open dumping or burning. This absence of proper facilities not only undermines environmental health but also increases the risks of disease outbreaks, groundwater contamination, and degraded living conditions. The lack of institutional coverage highlights how a basic but essential urban service has yet to be meaningfully introduced, creating long-term sustainability concerns for the union.

Figure 109: Village-wise distribution of households without waste management facilities in Kazipur Union

Matmura Union: Matmura Union has no outright **Poor** indicators in its quality-of-life measures. However, its Physical Quality of Life Index (PQLI) is 66.49, a **Moderate** score that signals uneven access to basic services. Cultural indicators also remain **Moderate**, with community activities at 32 and participation in events at 42, reflecting limited engagement beyond subsistence concerns.

Raypur Union: Raypur Union is one of the most deprived in Gangni. Security, drainage, and waste management all register at 0.00 (**Poor**), leaving the population exposed to multiple risks. Cultural capital is similarly weak, with reading at 3, participation in activities at 7, and higher education opportunities at 7, all in the **Poor** category. These scores depict an area of severe multidimensional deprivation.

Shaharbati Union: Shaharbati Union also records extreme deficits in basic services. Sewage (0.00), drainage (0.00), and waste management (0.00) are all **Poor**, creating a hazardous living

environment. Cultural life is also weak, with reading at 9, activities at 12, and higher education at 18, each of them falling in the **Poor** category.

Sholataka Union: Sholataka Union generally performs at a **high** level across most quality-of-life indicators, but it shares the common challenge of weak civic participation. Social organization engagement is only 9 (**Poor**), which suggests that while material progress has been achieved, social capital remains fragile.

Tentulbaria Union: Tentulbaria Union is constrained by poor water services, with access to safe drinking water scoring only 29.31 (Poor). Other indicators are Moderate, including education (62.85), health (53.41), entertainment (66.67), cooking fuel (66.67), drainage (69.29), and waste management (66.89). Cultural participation also remains modest, with activities at 33 and events at 49, both Moderate.

Ward 1: Ward 1 is heavily deprived in multiple services. Health stands at 44.57, sewage at 25.00, drainage at 25.00, and waste management at 40.00 all Poor. Education (71.58), communication (56.25), and water (68.48) are in the Moderate range. Cultural indicators are very low, with reading at 13, activities at 11, higher education at 18, and social organization participation at just 3, all of which are Poor.

Ward 2: Ward 2 presents a weaker profile. Health scores 51.04 (Moderate), education 71.88 (Moderate), and water 61.54 (Moderate). Yet, cultural and civic participation remain poor, with activities at 12 and social organizations at 5, both in the Poor category.

Ward 3: Ward 3 performs moderately in entertainment, with a score of 60.00. However, cultural capital is particularly underdeveloped. Reading is at 18, activities at 19, and higher education opportunities at 22, all of which fall in the Poor category.

Ward 4: Ward 4 demonstrates borderline Moderate levels in sewage (77.78) and other facilities (73.15). Still, cultural indicators remain poor: reading at 19, higher education at 21, and social organization engagement at 5 all point to significant weaknesses in community life.

Ward 5: Ward 5 performs strongly in physical infrastructure, with drainage at 87.5 and waste management at 86.36, both High. However, cultural participation remains deeply lacking. Higher education scores only 16 and social organization participation is at 0, both Poor, showing a disconnect between physical and social development.

Ward 6: Ward 6 records a Moderate score in health (73.15), but cultural and institutional engagement is absent. Higher education opportunities are at 18 and social organization participation is at 1, both of which are Poor.

Ward 7: Ward 7 is one of the most deprived in the Paurashava. Health, drainage, and waste management all stand at 0.00, leaving residents without essential services. Education is very high at 98.68, but cultural indicators remain poor: reading at 23, activities at 24, and social organization engagement at 2.

Ward 8: Ward 8 records no poor scores in its quality-of-life indices but still suffers from weak cultural capital. Reading at 14, activities at 13, and social organization engagement at 4 all remain in the Poor category, pointing to an absence of community vibrancy.

Ward 9: Ward 9 is the best-performing ward in Gangni Paurashava, with health at 88.79, drainage at 90.79, and waste management at 81.03, all in the High range. Yet even here, social organization engagement is poor (4), demonstrating that institutional and civic life is a systemic weakness across the municipality.

6.2 Meherpur Sadar Upazila

Meherpur Sadar upazila has 7 unions (rural) in addition to Meherpur town. The bottom-third cutoff here corresponds to the lowest two unions (approximately 33%). The unions performing in the bottom 33% for each index are as follows: Pirojpur and Buripota for PQLI, Kutubpur and Amjhupi for CCI, and Amdah and Shyampur for QOLI. The matrix below summarizes these problem areas, followed by details on the contributing factors:

Table 24: Upazila Based Key Challenges Identification (Meherpur)

Union	PQLI	CCI	QOLI	Key Challenges
Amdah	73.23	92.31	57.49	Lowest QOLI (~57.5) despite 78.6% literacy and highest CCI (92+). Indicates poor infrastructure/economic conditions; residents dissatisfied with services (roads, utilities, healthcare).
Amjhupi	78.07	52.73	65.94	Low CCI (~52.7) suggests limited higher education/cultural outlets despite decent literacy (~86%).
Baradi	72.84	79.67	62.03	Moderate performance across indices; literacy lagging (~74%) and infant mortality moderately high; infrastructure improvements needed.
Buripota	72.28	61.00	65.52	Low PQLI (~72.3) due to low literacy (~74%) and high infant mortality (~25% IMR; 3 infant deaths out of 12 births).
Kutubpur	71.74	75.48	63.02	Lowest PQLI (~71.7) from lowest literacy (~73%); although no infant deaths, education is lagging significantly.
Pirojpur	78.75	81.67	57.58	Low QOLI (~57.6) despite good literacy (~79%) and strong CCI (~81.7). Likely inadequate infrastructure/services (water, sanitation, housing, jobs).

Union	PQLI	CCI	QOLI	Key Challenges
Shyampur	79.19	47.20	86.27	Limited cultural engagement; very few community or educational facilities.
Ward 1	77.39	77.39	75.48	Average performance; some infrastructure/service gaps but no critical challenge.
Ward 2	73.43	38.75	97.91	Low literacy rates and very limited cultural participation, despite strong living conditions.
Ward 3	84.54	28.75	93.74	Very low CCI (~28.8); absence of cultural/community hubs despite otherwise good living conditions.
Ward 4	64.54	54.29	59.15	High infant mortality and weak infrastructure; poor basic service delivery.
Ward 5	76.04	63.33	72.95	Elevated infant mortality; housing and living conditions weak compared to literacy levels.
Ward 6	80.22	64.00	75.23	Balanced development with no acute challenges; human development is average, living conditions better.
Ward 7	80.35	57.60	72.01	Infrastructure and urban service deficits are lowering QOL.
Ward 8	82.39	56.67	75.25	Strong and consistent performance across all indices; minimal immediate challenges.
Ward 9	80.35	72.01	57.60	Lowest QOLI (~57.5) despite 78.6% literacy and highest CCI (92+). Indicates poor infrastructure/economic conditions; residents dissatisfied with services (roads, utilities, healthcare).

Amdah

Amdah shows the lowest Quality of Life Index (QOLI ~57.5) despite a decent literacy rate (78.6%) and the highest Cultural Capital Index (CCI ~92). This imbalance highlights deep-rooted dissatisfaction with infrastructure and basic services. Poor roads, unreliable utilities, and weak healthcare delivery are undermining overall well-being, even though the community is culturally active and educationally motivated.

Amjhupi

Although Amjhupi has a fairly good literacy rate (~86%), its CCI (~52.7) is low. This indicates a lack of higher education opportunities, cultural institutions, and social organization participation. Without community libraries, cultural programs, or youth engagement spaces, the union struggles to translate educational achievement into broader social and cultural development.

Baradi

Baradi performs moderately across all indices (PQLI ~72.8, QOLI ~62.0, CCI ~79.7). The union suffers from relatively low literacy levels and moderate infant mortality rates. These weaknesses, coupled with underdeveloped infrastructure, create barriers to improving quality of life. Though cultural engagement is stronger than in many other unions, health and education remain persistent challenges.

Buripota

Buripota records a low PQLI (~72.3), driven by weak literacy rates (~74%) and a high infant mortality rate (~25%). With three infant deaths out of twelve births, the union reflects significant gaps in maternal and child healthcare. Cultural engagement is also modest (~61 CCI). Despite some infrastructural strength, basic health and education gaps remain pressing.

Kutubpur

Kutubpur has very high literacy (~99%), but its CCI is the lowest (~30.2). This stark contrast shows that despite strong primary education, there are almost no higher education facilities, cultural outlets, or graduate-level achievements. Its QOLI (~59.9) also falls close to the bottom tier, reflecting inadequate services and infrastructure. Cultural deprivation remains the most critical issue here.

Pirojpur

Pirojpur shows the weakest PQLI (~71.7) due to the lowest literacy levels in the upazila (~73%). Even though no infant deaths were reported, weak educational attainment pulls down overall human development. With moderate cultural strength (~75 CCI), the union requires urgent educational support and community-based literacy initiatives.

Shyampur

Shyampur highlights a paradox: its literacy rate is decent (~79%) and CCI is relatively high (~81.7), yet QOLI remains low (~57.6). This suggests significant dissatisfaction with infrastructure and living conditions. Residents face problems with water, sanitation, housing, and job opportunities. Weak service delivery undermines what should otherwise be a strong human development profile.

Ward 1: Ward 1 is weakened by poor outcomes in life expectancy, reading habits, cultural activities, higher education, cultural events, and social organization participation. These indicators place the ward in a category of high cultural and institutional deprivation, despite its urban location.

Ward 2: Ward 2 also suffers from poor results in life expectancy, reading, activities, higher education, events, and social organization participation. The lack of longevity and weak civic engagement highlight the ward's fragile development status.

Ward 3: Ward 3 performs poorly in life expectancy, reading, activities, higher education, events, and social organization participation, while literacy remains only moderate. This reflects a ward where education has not translated into meaningful gains in cultural life or community engagement.

Ward 4: Ward 4 is hampered by poor indicators in infant mortality, reading, activities, higher education, cultural events, and social organizations. This combination reflects vulnerabilities in both health and social infrastructure.

Ward 5: Ward 5 faces multiple poor scores: life expectancy, sewage, drainage, waste management, reading, activities, higher education, events, and social organizations are all weak. The range of poor outcomes makes this ward one of the most disadvantaged within the Paurashava.

Ward 6: Ward 6 records poor performance in reading, activities, higher education, events, and social organization participation. Life expectancy, water, drainage, and waste management are only Moderate, leaving the ward with weak cultural life and fragile infrastructure.

Ward 7: Ward 7 is marked by poor cultural outcomes, with low levels of reading, activities, higher education, events, and social organization participation. Life expectancy and communication are only Moderate, further reflecting mid-level progress without cultural vitality.

Ward 8: Ward 8 is similarly affected, with poor results in reading, activities, higher education, events, and social organizations. Life expectancy, communication, water, drainage, and waste management all remain Moderate, which indicates limited-service provision coupled with weak civic participation.

Ward 9: Ward 9 also performs poorly in reading, activities, higher education, events, and social organization indicators. Health, water, and waste management are only Moderate, demonstrating persistent weaknesses in both infrastructure and cultural development.

6.3 Mujibnagar Upazila

Mujibnagar is a smaller, entirely rural upazila with 4 unions. Here the "bottom third" roughly equates to the single lowest-performing union for each index. In Mujibnagar, Mahajanpur emerges as the union consistently in the bottom tier for all indices (PQLI, CCI, and QOLI). The table highlights Mahajanpur's status and the likely causes, with other unions shown for comparison:

Table 25: Upazila Based Key Challenges Identification (Gangni)

Union	PQLI	CCI	QOLI	Key Challenges
Mahajanpur	82.34	75.00	76.42	Poorest performance across all three indices, lowest PQLI (~63.2), QOLI (~56.6), and CCI (~66). Weak literacy, higher infant mortality, and limited cultural resources.
Bagoan	72.95	83.49	79.91	Strong performer overall, highest PQLI (~82.3) and fairly high QOLI (~76.4) & CCI (~75). Few pressing challenges; only moderate gaps in infrastructure and services.
Dariapur	63.23	66.00	56.58	Moderate levels across all indices (PQLI ~73, QOLI ~79.9, CCI ~83.5). Needs improvement in health and education to lift human development further.
Monakhali	72.46	68.00	87.07	PQLI somewhat low (~72.5) due to infant mortality despite strong literacy; however, QOLI is highest (~87.1). Challenge lies in addressing health gaps while maintaining strong infrastructure.

Bagoan Union: Bagoan Union is deprived in environmental services, with drainage (0.00) and waste management (0.00) both scoring Poor. Literacy stands at 66.51 and life expectancy at 65.12, both in the Moderate category. Social organization participation is extremely weak, scoring only 5 (Poor), making civic engagement nearly absent.

Dariapur Union: Dariapur Union faces poor performance in life expectancy (36.58) and cooking fuel access (41.83), both Poor. Health is 72.32, security 74.73, electricity 70.00, and drainage 55.83, all Moderate. Social organization engagement is also weak, with a score of 19 (Poor). These values show a union with fragile health and energy systems, coupled with weak civic life.

Mahajanpur Union: Mahajanpur Union records extremely low outcomes in health (0.00) and life expectancy (33.63), both Poor. Its Physical Quality of Life Index is 63.23 and Quality of Life Index 56.58, placing them in the Moderate range. Cultural capital remains weak, with reading at 31, activities at 43, and events at 48, all within the Moderate to Poor range.

Monakhali Union: Monakhali Union also struggles with health and civic participation. Life expectancy is very low at 39.08 (Poor). Sewage services record 78.75, which is at the borderline of Moderate to High. Social organization engagement is minimal, with a score of just 2 (Poor), representing one of the lowest civic participation rates in the entire district.

Chapter 7: Recommendations on Planning with Social Justice

The following recommendations provide targeted interventions for each union and each municipal ward in Meherpur Sadar, Gangni, and Mujibnagar upazilas. These measures address the specific challenges identified in this chapter, including low literacy, poor health outcomes, lack of cultural infrastructure, and deficient urban services, with an emphasis on social justice and equitable development. Each recommendation is justified in light of Bangladesh's national planning frameworks, namely the Eighth Five-Year Plan (8FYP), Bangladesh Delta Plan 2100, Sustainable Development Goals (SDGs), and the Perspective Plan 2041. This alignment ensures that local actions in Meherpur District contribute to broader national objectives of inclusive growth, poverty reduction, and sustainability. The recommendations are organized by upazila, then by union or ward, and are written in a formal planning tone suitable for government reporting.

7.1 Gangni Upazila

Overview: Gangni Upazila's planning focus is on uplifting its most disadvantaged rural unions (e.g. Matmura, Tentulbaria, Kathuli, Bamandi, Shaharbati, Raypur) and improving service delivery in Gangni Paurashava's lagging wards, while sustaining gains in better-off areas (Dhankhola, Kazipur, Sholataka). This approach upholds the Perspective Plan 2041 objective of reducing regional disparities through targeted local interventions. It also mirrors the Bangladesh Delta Plan 2100 strategy of improving access to social services in vulnerable communities to reduce poverty. By prioritizing unions and wards with low Physical Quality of Life (PQLI), Cultural Capital (CCI), and Quality of Life (QOLI) indices, the plan ensures resources reach those left behind, consistent with SDG principles of equity and inclusion.

Matmura Union: As Matmura suffers Meherpur's lowest literacy (~71%) and high infant mortality, a dual education-and-health initiative is recommended. This includes expanding primary schools and adult literacy programs (e.g. night schools and community learning centers), aligning with the 8FYP's emphasis on expanding rural schooling to build human capital. Simultaneously, strengthen maternal and child healthcare by establishing a community clinic or regular mobile health outreach, in line with 8FYP investments in maternal/child health infrastructure and SDG 3 targets for child mortality reduction. These steps realize the Perspective Plan's call to *"improve education access and literacy levels across upazilas"* and extend healthcare to all segments of society, ensuring social justice for Matmura's underserved population.

Tentulbaria Union: Given Tentulbaria's below-average literacy (~72.7%), the priority is on educational uplift. The plan recommends launching an "Education for All" campaign with remedial classes, adult literacy courses, and enhanced secondary schooling facilities. This directly supports SDG 4 (Quality Education) and is reinforced by national programs for digital literacy. Establishing a vocational training center for youth is also advised, reflecting the 8FYP's introduction of digital education platforms and vocational training to empower rural youth. These measures will raise literacy and skill levels, helping Tentulbaria catch up and contributing to the Perspective Plan 2041 goal of a skilled, knowledge-based society.

Kathuli Union: Kathuli's high infant mortality (≈23% IMR) and lowest QOLI in Gangni indicate urgent needs in healthcare and infrastructure. It is recommended to set up a fully staffed maternal and child health sub-center or upgrade existing health facilities to provide prenatal care, immunizations, and nutrition support, an action aligned with the 8FYP's commitment of 6.7% ADP spending on health services and SDG 3 objectives. In parallel, invest in basic infrastructure: safe drinking water (install arsenic-free tube wells), sanitation (latrine coverage), and all-weather road access. These improvements echo the Perspective Plan 2041 directive to *"Enhance infrastructure and service delivery in rural areas"*. They also advance the Delta Plan's vision of climate-resilient, inclusive settlements, for example by upgrading housing and infrastructure in vulnerable localities. By targeting Kathuli's deficits, the plan reduces spatial inequality, as advocated in the 8FYP which views connectivity and services in remote unions as tools to reduce gaps.

Bamandi Union: Bamandi's low Cultural Capital Index (~38.7) despite moderate literacy suggests a lack of higher educational and cultural facilities. The plan recommends establishing a new higher secondary school or vocational institute in Bamandi, and creating a community resource center (with a library, ICT lab, and space for cultural events). This aligns with the Delta Plan 2100 guideline to allocate land for social infrastructure like schools and cultural spaces in rural areas. It also supports the 8FYP's goal of introducing vocational training for youth, ensuring local students can pursue advanced education rather than leaving the area. A richer educational and cultural environment will boost Bamandi's CCI, fostering social inclusion consistent with SDG 10 (Reduced Inequalities) and the Perspective Plan 2041 objective of expanding education to all segments of society.

Shaharbati Union: Shaharbati faces a dual challenge: very low CCI (~34.1, indicating minimal cultural/educational amenities) and low QOLI (~60.2, indicating poor basic services).

An integrated strategy is proposed. First, develop a Union Community Center that houses a public library, adult education classes, and space for cultural programs (e.g. folk arts, women's cooperatives). This directly addresses the cultural gap and is in line with the Perspective Plan's promotion of participatory development and preservation of cultural heritage in local planning. Second, upgrade essential infrastructure: improve water supply (install deep tube wells or piped water schemes), expand the rural electrification network, and rehabilitate sanitation facilities. These improvements fulfill the 8FYP's call to *"address poverty traps through improved housing and basic services"*. They also contribute to SDG 11 (Sustainable Communities) by making Shaharbati a more livable, serviced community. Collectively, these actions realize the Delta Plan's principle of integrated service delivery by targeting a union with clear deficits in both social and physical infrastructure.

Raypur Union: Raypur has the lowest CCI (~17.7) and one of the lowest QOLI (~57.7) in the entire district, despite almost universal basic literacy. This indicates severe shortcomings in advanced education opportunities and infrastructure. The plan recommends establishing a Combined Education and Training Center in Raypur, essentially a small rural college or technical training institute, to enable higher secondary education, technical skills training, and community activities. This aligns with the Perspective Plan 2041 targets for human capital development in lagging regions. In tandem, Raypur requires major infrastructure investment: pave its internal roads to improve connectivity to markets and services, ensure every village has electricity, and set up a Union Health & Family Welfare Center to serve basic health needs. These efforts support the Bangladesh Delta Plan 2100 objective of reducing regional poverty by extending social services and livelihood support to underdeveloped areas. Better connectivity and services in Raypur will also fulfill the 8FYP mandate to use infrastructure as a tool to reduce spatial inequality. Overall, by transforming Raypur's educational and infrastructural landscape, the plan seeks to lift this union out of its multidimensional deprivation, epitomizing the SDG ethos of "leaving no one behind".

Dhankhola Union: Although Dhankhola was not identified among the bottom-tier unions, it still requires sustained development to maintain and improve its socio-economic status. The union's relatively strong performance (high literacy and PQLI) should be consolidated by introducing advanced livelihood programs, such as agricultural diversification and small enterprise support, in line with SDG 8 (Decent Work and Economic Growth). Continuous improvement of services (e.g. modernizing schools, enhancing local healthcare outreach) is also recommended, reflecting the Perspective Plan 2041 aim to achieve zero extreme poverty

and high living standards for all communities. By proactively investing in Dhankhola, the upazila ensures this union remains on track and can share best practices with neighboring areas, contributing to district-wide balanced growth and social justice.

Kazipur Union: Kazipur is a top-performing union in Gangni, with a PQLI of ~83+, making it one of the most advanced rural areas in the upazila. The development strategy for Kazipur should focus on sustaining its health and education successes while addressing critical service gaps that threaten long-term sustainability.

A priority recommendation is to establish Kazipur as a local hub for agricultural innovation and agro-processing, generating jobs, enhancing value addition, and supporting the national vision for a skill-based, innovation-driven economy by 2041. At the same time, maintaining high-quality social outcomes will require continued investment in education and healthcare, through improved teacher training, modern school facilities, and expanded digital access via community internet centers, consistent with the 8FYP's vision of inclusive technology and education growth.

However, the **most urgent concern** is the extremely poor availability of basic services. Current data reveals that only 2% of households have access to drainage and organized waste management, leaving 98% unserved. This gap creates severe risks of flooding, sanitation crises, and environmental degradation, which could undermine Kazipur's otherwise strong development profile. To address this, the plan should prioritize:

- Establishment of drainage infrastructure to reduce waterlogging and improve resilience
- Community-based waste management systems to ensure safe collection and disposal (supporting SDG 6 – Clean Water and Sanitation).
- Awareness and civic engagement programs to strengthen local participation in maintaining environmental sustainability (linked to SDG 16 – Inclusive Institutions).

By combining these interventions with its existing strengths, Kazipur can not only secure its own progress but also act as a mentor and support hub for less-developed unions, reflecting the spirit of SDG 17 (Partnerships for the Goals). In policy terms, ensuring Kazipur's continued trajectory while closing gaps in waste management and drainage directly supports the Perspective Plan 2041's call for inclusive growth that lifts all regions, preventing intra-district disparities and reinforcing resilience at both local and regional scales.

Solution from PRA Report

Haravanga

Waterlogged area names: Molla Para, Halsana Para–Eidgah/GorosthanPara, in front of Adarsha Secondary School, Haravanga Pashchim Para, Amin Master Para, Haravanga Pashchim Para (densely populated).

Local Union Parishod member's (Mohibul) recommendation: If drains and culverts are constructed, the problem will be solved.

Saheb Nagar

Waterlogged area names: Sahebnagar Purbo Para (East Para Jame Mosque area), Madrasa Para, Dokkhin Para, Sardar Para, Sahebnagar Forayezi Para, Sahebnagar Government Primary School area (backside).

Local Union Parishod member's (Helal) recommendation: If drains and culverts are constructed, the problem will be solved.

Sholataka Union: Sholataka, like Kazipur, enjoys strong human development outcomes (PQLI ~82.9 with high literacy and no recent infant mortality). The recommendation for Sholataka is to fortify its role as a model union in social development. This includes implementing pilot projects such as e-governance at the Union Parishad (digital service centers) and climate-smart village initiatives (rainwater harvesting, solar lighting), which align with the Delta Plan 2100's long-term resilience and sustainability goals. At the same time, resources should be allocated to sustain education and health excellence, for instance, grants for school improvements or funding to upgrade the local clinic, in accordance with the Perspective Plan's call for continuous human capital enhancement even in better-off communities. By maintaining Sholataka's high standards and fostering innovation, the union will continue to meet SDG 11 criteria for sustainable communities and can provide a benchmark for social justice-oriented planning in rural settings.

Gangni Paurashava- Ward 1: Ward 1 of Gangni municipality exhibits low cultural participation and poor housing/urban infrastructure. It is recommended to establish a Neighborhood Community Center in Ward 1, providing library services, a youth recreation space, and venues for cultural activities. This would directly address the ward's cultural capital gap and is supported by the Delta Plan's urban policy, which urges addressing social exclusion in underserved urban zones through community facilities and participatory engagement.

Additionally, Ward 1 needs targeted upgrades to its urban services: improvements in drainage, waste management, and low-income housing conditions. Upgrading housing for vulnerable families here follows the 8FYP's inclusive housing strategy for disadvantaged groups and the Perspective Plan's principle of *"equity and social justice for all"* in urban development. Ensuring clean water, sanitation, and resilient housing in Ward 1 will help meet SDG 11 by making the city area inclusive and safe.

Gangni Paurashava, Ward 2: Ward 2, identified as facing multidimensional deprivations (likely pockets of low literacy, health issues, and service gaps), requires a comprehensive, justice-oriented intervention. A holistic urban poverty alleviation program is proposed for Ward 2. This includes literacy and numeracy classes for illiterate adults (aligning with national *Education for All* efforts), mobile health clinics or satellite health camps to improve healthcare access (reflecting the expansion of community clinics under SDG localization programs), and infrastructure drives to install street lighting, repair roads, and extend municipal water supply. These multi-sector actions mirror the Bangladesh Delta Plan's call for integrated service delivery targeted at areas with low PQLI and high need. The approach also resonates with Perspective Plan directives to strengthen municipal governance in poorer urban neighborhoods, ensuring no ward is left behind in service provision. By transforming Ward 2's living conditions and opportunities, the plan embodies SDG 10 (reducing inequalities) at the city scale.

Gangni Paurashava, Ward 3: Ward 3 has low literacy levels and limited cultural engagement, though its living conditions are moderate. The recommendation is to boost educational outreach in this ward. The municipality should introduce an adult evening school or partnership with NGOs for adult literacy, aiming to eradicate illiteracy in the ward, a step aligned with the national goal of 100% literacy under the Perspective Plan's human capital agenda. Enhancing the local primary school with better facilities and introducing digital learning (community computer labs) would further support youth education, following the 8FYP's push for digital education platforms in semi-urban areas. To enrich cultural life, organizing regular community events (such as ward-level sports, arts, and civic forums) is advised, possibly through the proposed Ward 1 community center serving nearby areas. This composite strategy supports SDG 4 by improving educational quality and aligns with SDG targets for inclusive communities through lifelong learning opportunities. It also implements Perspective Plan guidance to improve literacy and educational access in every locality as a means to social empowerment.

Gangni Paurashava, Ward 4: Ward 4's primary issue is an extremely low CCI, indicating a lack of cultural and community hubs, even though basic living conditions are adequate. The plan recommends converting an existing public building (or constructing a small facility) into a Ward Cultural and Resource Center. This center would host cultural programs (e.g. language courses, music/theater groups) and provide space for community meetings or NGO activities. Such an initiative is in keeping with the Delta Plan 2100's urban strategy of ensuring equitable distribution of amenities for all urban residents. It also reflects the Perspective Plan 2041 urban planning objective of promoting inclusive urban development and avoiding pockets of neglect. By creating a social hub in Ward 4, residents will have greater opportunity for social capital formation, volunteerism, and cultural expression, components of a just city that align with SDG 11 and SDG 16 (peaceful, inclusive societies). Maintaining Ward 4's good infrastructure while enriching its social infrastructure will ensure balanced development.

Gangni Paurashava, Ward 5: Ward 5 has both a low PQLI (due to high infant mortality) and low QOLI (weak infrastructure and basic services). A two-pronged recommendation is put forward. First, improve healthcare access: set up a dedicated Maternal and Child Health Center or strengthen the existing clinic's outreach in Ward 5. Regular maternal health camps, nutrition workshops, and emergency transport for pregnant women should be provided, aligning with the 8FYP initiative to improve maternal and child healthcare infrastructure nationwide and fulfilling SDG 3 in reducing infant mortality. Second, implement an infrastructure upgrading project in this ward's most underserved neighborhoods, paving lanes, installing stormwater drains to prevent flooding, extending electricity to any off-grid pockets, and improving low-cost housing. This echoes the Delta Plan's recommendation to upgrade housing and infrastructure in high-risk or under-served urban zones. It also supports the Perspective Plan's focus on upgrading informal settlements and ensuring all urban citizens have access to basic services like water, sanitation, and waste management. Through these actions, Ward 5 can significantly improve its quality of life, demonstrating the report's commitment to spatial equity and social justice in urban planning.

Gangni Paurashava, Ward 6: Ward 6 similarly endures low PQLI (elevated infant mortality) and low QOLI (poor housing and living conditions). For Ward 6, the plan emphasizes strengthening health and housing. On the health side, a door-to-door health outreach program is recommended: deploy community health workers to visit households, provide immunizations, antenatal care, and health education. This community health approach is in line with Bangladesh's push for universal health coverage and expansion of community clinic

services under the SDGs. On the housing side, initiate a slum upgrading or housing improvement scheme in Ward 6's low-income areas. This could involve providing grants or micro-loans for home improvements (roof, flooring, sanitation) and securing land tenure for informal settlers, measures that resonate with the 8FYP's call for "housing upgrades for low-income groups" and the Perspective Plan's pledge to promote fair access to housing as a matter of social justice. By ensuring safer housing and better health in Ward 6, the municipality will directly tackle urban poverty, thereby contributing to SDG 10 (reducing inequalities) and SDG 11 outcomes.

Gangni Paurashava, Ward 7: Ward 7's quality of life issues stem from weak urban services such as water supply, drainage, and sanitation. It is recommended that Gangni Paurashava prioritize Ward 7 in its municipal service improvement plans. Specifically, extend the piped water network or install additional deep tube wells to ensure all households have safe drinking water (addressing SDG 6: Clean Water and Sanitation). Upgrade the drainage system to mitigate waterlogging in the monsoon, and implement routine solid waste collection. These actions follow the guidance of the Bangladesh Delta Plan 2100, which highlights enhancing public service delivery in small towns (like Gangni) as key to climate resilience and livability. In addition, Ward 7 should benefit from the Perspective Plan's urban emphasis on "strengthening municipal institutions to deliver quality services like water, waste management, and healthcare. As the ward's services improve, community satisfaction and health will rise, contributing to a more equitable urban environment. All improvements should be made with community participation (e.g. citizen committees), reflecting the SDG principle of inclusive, participatory urban management.

Gangni Paurashava, Ward 8: Ward 8, while performing well on human development indices, has noted infrastructure and urban service deficits that drag down its QOLI. The recommendation is to undertake targeted infrastructure projects to bolster Ward 8's resilience and livability. These could include repairing and widening key roads for better connectivity, establishing a dedicated municipal water reservoir or overhead tank to stabilize water pressure, and enhancing street lighting and public safety features. Such investments are in keeping with SDG 11 (making cities safe and sustainable) and the 8FYP's connectivity improvements that indirectly benefit access to markets and services. Moreover, by ensuring Ward 8 receives its fair share of development, the municipality upholds the Perspective Plan 2041 commitment to spatially balanced urban growth, avoiding scenarios where certain wards lag behind in infrastructure. Ward 8 can also be included in any smart-city pilot programs (like automated

water management or GIS-based service monitoring) as it has a solid base to build on. Strengthening Ward 8's infrastructure will consolidate its status and ensure the entire Paurashava moves together toward the Vision 2041 goals.

Gangni Paurashava, Ward 9: Ward 9 is currently the best-performing ward with strong outcomes across all indices and minimal immediate challenges. The key recommendation for Ward 9 is to sustain its high standards and leverage it as a model of good governance and service delivery. The municipal authority should continue investing in Ward 9's maintenance e.g. regular road repairs, maintaining 100% school enrollment, and providing high-quality healthcare through its facilities reflecting the Perspective Plan 2041's aim of achieving developed-country standards of living in all model communities. Additionally, Ward 9 can pilot new initiatives such as green parks, solar-powered streetlights, or e-governance kiosks for citizen services, which align with national visions of a technologically advanced, sustainable urban future. By innovating in Ward 9, lessons can be learned and scaled to other wards. Ensuring that Ward 9 remains inclusive is also important, any marginalized groups in the ward should continue to receive support so that prosperity is shared (echoing SDG 10 on reducing inequality). In summary, the plan treats Ward 9 as a benchmark ward whose practices in service delivery, community engagement, and maintenance can be replicated across Meherpur. This approach will help institutionalize social justice in urban planning, as the successes of Ward 9 inform improvements elsewhere.

7.1.1 Key Problems and Planning Suggestions for Gangni Upazila

Union	Key Problems (Poor & Moderate Indicators)	Planning Suggestions (with National Plan Alignment)
Bamandi	**Moderate:** Drainage (52.78), Waste (63.79) **Poor (CCI):** Reading (15), Activities (26), Higher Education (22), Social Organization (16)	1. Improve drainage & waste management system (Delta Plan 2100 – urban sanitation) 2. Adult literacy & reading programs (SDG 4 – Quality Education) 3. Promote social organization participation (SDG 16 – Institutions, Civic Engagement)
Dhankhola	**Poor:** Drainage (0.00), Waste (0.00) **Moderate:** Entertainment (68.09), Communication (66.29) **CCI Poor/Moderate:** Social Organization (23 – Poor)	1. Establish drainage & waste management (Delta Plan 2100 – Infrastructure Resilience) 2. Improve communication/ICT (Perspective Plan 2041 – Digital Bangladesh) 3. Social organization & civic engagement (SDG 16)
Kathuli	**Poor:** Drainage (33.33), Waste (0.00), Water (37.06) **Moderate:** Education (68.33), Health (53.57), Entertainment (65.71), Security (61.11), Communication (64.29) **CCI Poor:** Social Organization (11)	1. Upgrade water & health services (Perspective Plan 2041 – Health & WASH) 2. Drainage & waste management system (Delta Plan 2100) 3. Strengthen literacy & social organizations (SDG 4, SDG 16)
Kazipur	**Poor;** Drainage and Waste Management **No major Poor**; mostly High except **Moderate (CCI):** Social Organization (14)	1. Improve drainage & waste management system (Delta Plan 2100 – urban sanitation) 2. Enhance social organization & civic networks (SDG 16 – Inclusive Institutions)
Matmura	**No Poor in QOLI**; but PQLI is low (66.49 – Moderate) **CCI Moderate:** Activities (32), Events (42)	1. Improve life expectancy with healthcare (Perspective Plan 2041 – Universal Health) 2. Strengthen cultural participation (SDG 11 – Inclusive Communities)
Raypur	**Poor:** Security (0.00), Drainage (0.00), Waste (0.00) **CCI Poor:** Reading (3), Activities (7), Higher Education (7)	1. Establish drainage & waste management (Delta Plan 2100 – Infrastructure Resilience) 2. Urban safety, waste management and drainage (Delta Plan 2100 – Urban Safety & Sanitation) 3. Cultural awareness & literacy (SDG 4, SDG 11)
Shaharbati	**Poor:** Sewage (0.00), Drainage (0.00), Waste (0.00)	1. Upgrade sanitation & waste management (Delta Plan 2100 – Wastewater Strategy) 2. Promote

Union	Key Problems (Poor & Moderate Indicators)	Planning Suggestions (with National Plan Alignment)
	CCI Poor: Reading (9), Activities (12), Higher Education (18)	education & higher studies (SDG 4) 3. Strengthen cultural/social organizations (SDG 11, SDG 16)
Sholataka	**Moderate:** Communication (77.87 ≈ High) but **CCI Poor:** Social Organization (9)	1. Strengthen social organization participation (SDG 16 – Civic Participation)
Tentulbaria	**Moderate:** Education (62.85), Health (53.41), Entertainment (66.67), Cooking Fuel (66.67), Drainage (69.29), Waste (66.89) **Poor:** Water (29.31) **CCI Poor/Moderate:** Activities (33), Events (49)	1. Expand safe drinking water (Delta Plan 2100 – Water Security) 2. Upgrade drainage/waste (SDG 6 – Clean Water & Sanitation) 3. Improve healthcare & education (Perspective Plan 2041)
Ward 01	Poor: Health (44.57), Sewage (25.00), Drainage (25.00), Waste (40.00) Moderate: Education (71.58), Communication (56.25), Water (68.48) CCI Poor: Reading (13), Activities (11), Higher Education (18), Social Organization (3)	1. Upgrade sewage, drainage, waste management (Delta Plan 2100 – Sanitation Plan) 2. Improve healthcare access (Perspective Plan 2041 – Health & Nutrition) 3. Promote literacy & youth engagement (SDG 4, SDG 11)
Ward 02	Poor: Health (51.04 – Moderate), Activities (12), Social Organization (5) Moderate: Education (71.88), Water (61.54)	1. Enhance health facilities (Perspective Plan 2041 – Universal Health) 2. Expand water access (Delta Plan 2100 – Water Security) 3. Boost cultural & social organizations (SDG 11, SDG 16)
Ward 03	Moderate: Entertainment (60.00) CCI Poor: Reading (18), Activities (19), Higher Education (22)	1. Promote cultural/entertainment (SDG 11) 2. Literacy & higher education encouragement (SDG 4)
Ward 04	Moderate: Sewage (77.78 borderline), Other Facilities (73.15) CCI Poor: Reading (19), Higher Education (21), Social Organization (5)	1. Improve sewage infrastructure (Delta Plan 2100) 2. Promote cultural education (SDG 4, SDG 11)
Ward 05	Poor: Drainage (87.5 ≈ High but Waste 86.36 – High) → No Poor in QOLI, but CCI Poor: Higher Education (16), Social Organization (0)	1. Strengthen social organization engagement (SDG 16) 2. Promote higher education (SDG 4)
Ward 06	Moderate: Health (73.15) CCI Poor: Higher Education (18), Social Organization (1)	1. Improve healthcare (Perspective Plan 2041 – Health) 2. Promote civic engagement (SDG 16)
Ward 07	Poor: Health (0.00), Drainage (0.00), Waste (0.00) Moderate: Education (98.68 ≈ High, but CCI Poor: Reading	1. Immediate health services (Perspective Plan 2041 – Universal Health) 2. Build drainage & waste management (Delta Plan 2100) 3.

Union	Key Problems (Poor & Moderate Indicators)	Planning Suggestions (with National Plan Alignment)
	23, Activities 24, Social Organization 2)	Encourage literacy & civic engagement (SDG 4, SDG 16)
Ward 08	No Poor QOLI, but CCI Poor: Reading (14), Activities (13), Social Organization (4)	1. Libraries & cultural centers (SDG 4, SDG 11) 2. Promote social organizations (SDG 16)
Ward 09	Moderate: Health (88.79 High but borderline), Drainage (90.79 High), Waste (81.03 High). CCI Poor: Social Organization (4)	1. Promote community engagement (SDG 16) 2. Strengthen higher education encouragement (SDG 4)

7.2 Meherpur Sadar Upazila

Overview: In Meherpur Sadar Upazila (which includes both the rural unions and the Meherpur municipal town), planning with social justice means bridging the gaps between well-served and underserved communities. The strategy focuses on lifting up lagging unions like Pirojpur and Buripota (with low literacy and health outcomes), improving cultural and educational facilities in unions like Amjhupi and Kutubpur, and upgrading infrastructure in Amdah and Shyampur. Simultaneously, the wards of Meherpur Paurashava are addressed with targeted urban interventions. This integrated upazila approach is aligned with national frameworks: it supports the Perspective Plan 2041 objectives of expanding education, healthcare, and infrastructure to "all segments of society". It also follows the Delta Plan 2100 emphasis on inter-sectoral integration coordinating land use, education, health, and urban services, to ensure sustainable development in a historically important district center. By addressing each union and ward's specific needs, Meherpur Sadar's plan seeks to ensure that the benefits of development are equitably distributed, echoing the commitment to *"leave no one behind"* enshrined in the SDGs.

Pirojpur Union: Pirojpur has the lowest PQLI in Sadar (≈71.7) driven by the upazila's lowest literacy rate (~73%). The primary recommendation is an education drive to boost literacy and educational quality in Pirojpur. This entails building or expanding secondary schools (especially for girls, if needed), recruiting trained teachers, and running adult education and tutoring programs for communities with historically low literacy. Such efforts directly support SDG 4 (Quality Education) and mirror the 8FYP's allocation of 14.5% of ADP to education and technology as well as its program of expanding rural schools. In addition, partnerships with NGOs could introduce informal education (e.g. night schools) to reach working adults.

Improving Pirojpur's literacy aligns with the Perspective Plan 2041 goal of 100% literacy and human capital development across Bangladesh. With higher literacy, Pirojpur's population will be better equipped to utilize other services and improve their livelihoods, fulfilling the social justice principle of empowering marginalized communities through education. Complementary to education, minor health initiatives like nutrition and hygiene education should be provided (given literacy and health are often linked), ensuring the union progresses holistically.

Buripota Union: Buripota faces a dual challenge of low literacy (~74%) and high infant mortality (~25% of infants, with 3 infant deaths reported). A combined education and maternal health intervention is recommended. On the education front, measures similar to Pirojpur's (school improvement, adult literacy classes) should be implemented, in line with the 8FYP's rural education focus. Equally important, to reduce infant mortality, Buripota needs strengthened maternal and child healthcare: establishing a fully functional Union Health & Family Welfare Center or upgrading it with more midwives, supplying necessary equipment (for safe deliveries and neonatal care), and conducting community health awareness campaigns (on immunization, nutrition, family planning). These actions are directly supported by SDG 3 (Good Health and Well-being) and national initiatives like the expansion of community clinics and universal health coverage programs. The 8FYP explicitly prioritized improved maternal and child healthcare services, and implementing those priorities in Buripota is critical. Furthermore, ensuring safe water and sanitation in every village of Buripota will help reduce child health risks, aligning with SDG 6 and the Delta Plan's integrated approach to health and water security. By focusing on both schooling and healthcare, Buripota's recommendations embody a rights-based approach to development, ensuring the union's children survive and thrive and its youth become literate, productive citizens.

Amjhupi Union: Amjhupi's CCI (~52.7) is low despite decent basic literacy (~86%), indicating a lack of higher education attainment and cultural facilities. The plan proposes to enrich the educational and cultural landscape of Amjhupi. A key recommendation is to establish a degree college or technical training center in Amjhupi, so that students can pursue higher secondary and tertiary education locally. This responds to the absence of advanced educational opportunities and aligns with the Perspective Plan's objective of expanding education access at all levels in rural areas. Coupled with this, setting up a public library or multipurpose community hall will promote reading, cultural activities, and community meetings, fulfilling a need for social capital. These facilities are in line with the Delta Plan 2100 directive to allocate space for educational and cultural infrastructure when planning settlements. Additionally,

leveraging technology through digital learning centers (e.g. Union Digital Center expansion) can introduce Amjhupi's youth to online resources and vocational courses, reflecting the 8FYP's push for digital education platforms. Overall, by investing in a college and cultural center, Amjhupi's human development will advance significantly, contributing to SDG targets on education (SDG4) and fostering an inclusive society (SDG10, reducing the gap in higher education between urban and rural youth).

Kutubpur Union: Kutubpur registers the lowest CCI (~30.2) in the upazila, despite almost universal literacy (~99%). This anomaly points to a severe lack of higher educational qualifications and cultural institutions in the union. Skill and capacity development is the core of the recommendation for Kutubpur. Specifically, establishing a vocational training institute or polytechnic is advised to provide skills training in trades, IT, and services for local youth. This directly supports the 8FYP theme of increasing human capital via vocational programs and aligns with the Perspective Plan 2041 aim of transforming the labor force from labor-intensive to skill-based. Additionally, encouraging the formation of cultural clubs (youth clubs, women's groups, sports associations) and hosting inter-union cultural events in Kutubpur will improve social and cultural participation. A small museum or heritage center could even be explored, given Meherpur's historical significance, to attract cultural interest. These efforts resonate with SDG 8 (promoting productive employment through skill development) and SDG 11 on inclusive communities. The Delta Plan's focus on inter-sectoral integration (education with livelihoods) is also met by linking vocational education to local economic opportunities (e.g. agro-processing, light manufacturing). Through such interventions, Kutubpur's exceptionally high basic literacy can be converted into real human capital with higher education and skill credentials, ensuring the union's population is not only literate but also empowered with knowledge and cultural capital, a true fulfillment of social justice in line with national plans.

Amdah Union: Amdah has the lowest QOLI (~57.5) in Sadar, indicating poor infrastructure and service satisfaction, even though its literacy (~79%) and CCI are relatively high. The recommendation for Amdah centers on infrastructure and service upgrades to raise the quality of life. Priority actions include: improving road connectivity (paving or reinforcing rural roads to connect villages and markets), expanding electrification (targeting any remaining off-grid homes, possibly via solar mini-grids), and ensuring 100% coverage of safe drinking water and sanitary latrines. These measures implement the 8FYP's call to address basic service deficits as a means of poverty reduction. In particular, Amdah's residents expressed dissatisfaction with

roads, utilities, and healthcare, thus, repairing roads, upgrading the local health sub-center (with more medical staff or medicine supply), and enhancing electricity reliability are critical. This approach is bolstered by the Perspective Plan 2041 which explicitly aims to "enhance infrastructure and service delivery in rural and semi-urban areas". The Bangladesh Delta Plan 2100 also supports such actions through its goal of improving livelihood security and resilience for marginal communities via sustainable infrastructure. Moreover, introducing a community-based maintenance system (training local youths to maintain tube-wells, roads, etc.) can ensure long-term sustainability. By significantly upgrading Amdah's infrastructure and services, the gap between Amdah and better-off unions will narrow, reflecting the SDG 10 objective of reducing inequalities in service access.

Shyampur Union: Shyampur, like Amdah, suffers a low QOLI (~57.6) despite relatively high literacy (~79%) and CCI (~81.7). This indicates that Shyampur's development is constrained by inadequate basic infrastructure and economic opportunities. The plan recommends a focus on basic amenities and economic empowerment in Shyampur. On the amenities side, ensure every household has access to clean water (install additional deep tube wells with arsenic filters if needed), improve drainage and flood protection in any low-lying parts of the union, and build new or upgrade existing marketplaces (growth centers) to stimulate commerce. These interventions follow the Perspective Plan's instruction to promote "spatial equity in infrastructure distribution, especially for informal and marginalized communities". On the economic side, programs to support farmers and small entrepreneurs in Shyampur are advised, for example, providing micro-credit, training on modern farming techniques, or cooperatives for handicrafts, aligning with SDG 1 (No Poverty) and national social protection strategies. Such support reflects the Delta Plan's priority on livelihood resilience for vulnerable communities. It is also consistent with the 8FYP's inclusive growth framework, which emphasizes strengthening rural livelihoods and ensuring disadvantaged groups have fair access to resources. By improving services and livelihoods in Shyampur, the union's residents will enjoy a better quality of life and more equitable opportunities, fulfilling the social justice mandate by 2041 that no part of Meherpur remain under-served.

Baradi Union: Baradi was not in the bottom third on any index, but its PQLI (~72.8) was only marginally above the cutoff and its CCI and QOLI are mid-range, indicating room for improvement. The recommendation for Baradi is proactive development support to prevent future lagging. This includes continuing education improvements (perhaps Baradi could benefit from an additional high school or an upgrade to existing schools to include ICT labs, science

labs, etc.) to raise literacy and educational outcomes further. It also involves modest infrastructure projects, such as improving irrigation and drainage for Baradi's agricultural lands, which will protect livelihoods and reflect the Delta Plan's integrated water-land-agriculture approach. Another suggestion is to establish a small library or cultural center in Baradi, potentially as a branch of initiatives in neighboring unions, to ensure residents have cultural and learning opportunities. These efforts align with the government's SDG-focused budgeting, where resources are also directed to communities that, while not worst-off, still have vulnerable populations. By investing in Baradi now, the union's positive trajectory can be maintained and enhanced, which is in line with the Perspective Plan 2041 ethos of "leaving no community behind". It also supports SDG 10 and SDG 1 by ensuring that those just above the poverty or performance threshold do not fall behind due to neglect. Essentially, Baradi's plan is about consolidation and risk reduction, a socially just approach that acknowledges every union deserves attention, not only the poorest ones.

Meherpur Paurashava, Ward 1: Ward 1 of Meherpur town has limited cultural engagement and few community/educational facilities, as identified in the analysis. The recommendation is to develop community infrastructure that fosters social and educational activities. Establishing a city public library or a Ward 1 Community Center is a high priority, possibly repurposing an existing building or utilizing municipal land. Such a center could house a reading room, spaces for after-school tutoring, and venues for cultural programs (e.g. exhibitions, workshops). This aligns with the Perspective Plan 2041 directive to promote inclusive urban development with facilities for education and culture accessible to all urban residents. It also supports SDG 11 by creating safe public spaces that encourage community interaction. In parallel, strengthen Ward 1's basic urban services: improve street lighting, ensure regular waste collection, and upgrade any deteriorated inner roads or drains. These service upgrades follow the 8FYP's call for improved urban living conditions as part of poverty reduction (addressing urban "pockets of poverty" through better services). The Delta Plan's urban component also emphasizes enhancing services like sanitation and education in small cities, which is directly relevant here. By enriching Ward 1 with both community facilities and better services, the residents – including youth and marginalized groups, will feel the benefits of development. This is a tangible step toward urban social justice, ensuring that even the quieter parts of the town have equal access to learning and cultural growth opportunities.

Meherpur Paurashava, Ward 2: Ward 2 in Meherpur Sadar shows average overall performance with some infrastructure gaps but no acute issue flagged. However, to uphold

equity, it's recommended not to overlook Ward 2's needs. The plan calls for preventative improvements in Ward 2, such as upgrading minor roads, extending drainage lines, and possibly building a small community playground or park if one is lacking. These measures, though modest, align with creating a "sustainable community" (SDG 11) by improving livability. It's also advisable to conduct a needs assessment in Ward 2's neighborhoods, for instance, if any slum or low-income area exists, it should receive targeted support (like water points or subsidized housing improvements). This approach is guided by the Perspective Plan's emphasis on equitable urban service distribution so that no ward becomes a neglected corner. Additionally, since Ward 2 did not present critical problems, it could serve as a control or baseline for monitoring: the municipal SDG monitoring cell (if established) can use Ward 2's stable condition to benchmark progress in more challenged wards. By maintaining Ward 2's infrastructure and addressing minor gaps now, the city ensures that small issues do not grow into larger disparities, an application of social justice through proactive governance.

Meherpur Paurashava, Ward 3: Ward 3 has both low literacy and low cultural participation flagged, though living conditions are moderate. For Ward 3, the plan focuses on education and community engagement. The municipal education office should initiate special literacy programs in Ward 3, such as opening an adult literacy center at the local school in evenings (for older adults who missed schooling) and running awareness campaigns to reduce drop-outs. These steps further Bangladesh's SDG 4 commitments and respond to the 8FYP's concern about post-COVID recovery in education by ensuring no urban pockets are left educationally behind. In terms of cultural capital, organizing regular community events (e.g. monthly cultural evenings, debate competitions for youth, or mobile library days) can boost participation. The city can partner with the Shilpakala Academy or local NGOs to bring cultural programs to Ward 3, reflecting the Delta Plan's advice to address social inclusion in underserved urban areas via participatory initiatives. Also, establishing a Ward Education Committee, including teachers, parents, ward councilors, could help sustain educational improvements and ensure community buy-in. By targeting Ward 3's human development needs, the plan advances Perspective Plan 2041 goals of human capital development and inclusive urban growth, ensuring that even within the town, areas of weaker performance are bolstered in line with national development strategies.

Meherpur Paurashava, Ward 4: Ward 4's analysis indicated a very low CCI (lack of cultural/community hubs) but otherwise good living conditions. The recommendation is to fill the cultural infrastructure gap in Ward 4 while maintaining its strengths. Concretely, the city

can establish a satellite campus of the public library or a branch of the Shishu Academy (children's education and cultural center) in Ward 4. This would provide local residents, especially youth and children, with opportunities for reading, arts, and extracurricular learning. It falls in line with the government's Education for All and Digital Bangladesh initiatives (as libraries often serve as digital access points too). On another front, encouraging community-led activities, like forming neighborhood clubs or mother's clubs that meet in donated spaces, can improve social cohesion. These suggestions are supported by the Perspective Plan's call for participatory planning that reflects community aspirations and cultural heritage. Since Ward 4 is otherwise well-provisioned, the plan also emphasizes sustaining its quality services: continue routine maintenance of infrastructure, and ensure that any new developments (housing or commercial) adhere to planned standards to avoid future slum formation. This forward-looking stance aligns with Delta Plan 2100's guidance on managing urbanization and avoiding unplanned sprawl in emerging urban areas. By enriching Ward 4's cultural life and guarding its existing service quality, Meherpur ensures social development keeps pace with economic and physical development.

Meherpur Paurashava, Ward 5: Ward 5 is marked by high infant mortality and weak infrastructure/services, putting it among the more deprived urban pockets. The plan for Ward 5 is twofold: health intervention and service rehabilitation. Firstly, a dedicated Maternal and Child Health (MCH) Center should be established or an existing facility upgraded in or near Ward 5. This MCH center would offer prenatal care, safe delivery services, postnatal check-ups, and child immunizations to directly combat infant and maternal mortality. It reflects national priorities under the 8FYP and SDG 3 to improve maternal health and reduce infant deaths. Outreach programs (like door-to-door visits by health workers and health education in communities) should supplement the center, ensuring residents utilize the services. Secondly, a comprehensive urban improvement project is needed in Ward 5: repairing dilapidated roads and drains, upgrading slum areas with basic utilities, and ensuring all households have sanitary latrines and waste disposal. This approach resonates with the Perspective Plan 2041 urban strategy to strengthen services in poorer urban wards and upgrade housing for the poor. It also aligns with the Delta Plan's notion of climate-adaptive, inclusive urban settlements, for example, raising homes or improving drainage to prevent flood damage in low-lying parts of Ward 5. By converging health and infrastructure interventions in Ward 5, the quality of life can be significantly lifted, demonstrating the report's commitment to equity. These actions

exemplify how the SDGs (specifically SDG 3 and SDG 11) can be localized: through a safer start to life for children and a cleaner, healthier living environment.

Meherpur Paurashava, Ward 6: Ward 6 also exhibits low PQLI (due to infant mortality) and low QOLI (poor housing/living conditions). For Ward 6, the recommendation focuses on community health and housing resilience. The city should implement a "Healthy Ward 6" initiative, which could include monthly free medical camps (with doctors and nurses checking on pregnant women, infants, and chronic patients), nutritional support programs for pregnant/lactating mothers, and distribution of clean delivery kits to expectant mothers. These interventions are inexpensive but effective, and align with Bangladesh's Universal Health Coverage roadmap under the SDGs. To address living conditions, Ward 6 could be prioritized for a Low-Income Housing Improvement Scheme: this might entail providing materials or subsidies for residents to upgrade homes from flimsy kacha structures to semi-pucca, repairing roofs before monsoon, and ensuring climate resilience (like raised plinths for flood-prone houses), in line with Delta Plan recommendations for adaptive housing in vulnerable areas. The Urban Development Directorate (UDD) could pilot a participatory housing project here, where community members help identify the neediest houses. This would fulfill part of the Perspective Plan's social justice agenda by giving the urban poor fair access to safe shelter. Additionally, connecting Ward 6 residents to livelihood programs (perhaps via NGOs offering skills training or microfinance) will help improve their economic capacity to maintain health and housing improvements, tying into SDG 1 (ending poverty) and SDG 8. In summary, turning Ward 6 into a "healthy and habitable ward" addresses immediate needs and builds long-term resilience, in full harmony with national development frameworks that stress inclusive, safe urbanization.

Meherpur Paurashava, Ward 7: Ward 7 has no acute problems noted and enjoys better living conditions, but continued vigilance and improvement are necessary. The plan suggests sustained service excellence and innovation for Ward 7. For instance, since Ward 7 is relatively stable, it could be used to pilot smart city solutions for Meherpur, such as installing solar street lights, implementing a community-based solid waste recycling program, or using a digital system for municipal service requests. These initiatives correspond to the forward-looking aspect of Vision 2041, which envisions technologically advanced, environmentally sustainable cities. They also keep Ward 7 aligned with SDG 11 targets on energy efficiency and sustainable urban management. On the social side, Ward 7 should maintain its achievements by continuous upgrades: if the population grows, plan for expansion of water supply and sewers ahead of time

(the Delta Plan 2100 encourages anticipatory planning to reduce future environmental stress). The ward councilor's office can organize periodic community meetings to gather resident feedback, ensuring participatory governance consistent with SDG 16's principles. While Ward 7 doesn't require heavy intervention, these measures will ensure it remains a high-performing ward and can assist other wards, for example, Ward 7 community groups could mentor those in Ward 5 or 6, fostering solidarity. This approach reflects a social justice mindset: use the strength of well-off areas to support weaker ones, thereby knitting a more cohesive urban fabric.

Meherpur Paurashava, Ward 8: Ward 8 was identified as having infrastructure and urban service deficits that lower its QOLI. The recommendation is a targeted urban service enhancement program. The municipality should focus on upgrading Ward 8's critical infrastructure, such as extending piped water supply to any unserved pockets (backed by SDG 6 and the national policy to ensure safe water for all urban areas), installing additional drainage lines to prevent waterlogging, and repairing any substandard housing clusters perhaps through a community housing fund. These interventions are supported by the 8FYP's urban strategies, which consider improved services and housing as key to tackling urban poverty. Furthermore, Ward 8 could benefit from an increase in community facilities, for example, if it lacks a government primary school or healthcare sub-center, establishing one would be prudent. This aligns with the Perspective Plan's pledge to expand education and healthcare to all urban zones, not just central ones. The plan also encourages linking Ward 8's upgrades to climate resilience, following Delta Plan guidance: using permeable pavement for roads, planting trees for heat reduction, etc., making the ward more sustainable in the long run. By focusing on Ward 8 now, Meherpur can prevent minor deficits from becoming major problems, thus ensuring equitable urban development. Each improvement will bring Ward 8 closer in line with the best-performing Ward 9, reflecting an even spread of development benefits, the hallmark of social justice in city planning.

Meherpur Paurashava, Ward 9: Ward 9 is consistently strong across all indices and serves as a benchmark for municipal performance. The recommendation for Ward 9 is to continue its role as a lighthouse ward while ensuring inclusivity. The city should preserve Ward 9's high standards of public services, for instance, maintain the good road network, keep the high school well-resourced, and possibly upgrade the healthcare facilities to a higher level (e.g. introduce telemedicine or specialized services, since the basics are well covered). This continued investment resonates with the Perspective Plan 2041 vision of attaining developed-country

standards in leading urban centers by 2041. At the same time, Ward 9 can pilot innovative projects that can later be scaled up. For example, a digital “smart ward” system could be trialed where residents report issues via a mobile app and get rapid responses, aligning with the national Digital Bangladesh agenda. Ward 9’s success also imposes a responsibility: to assist less fortunate wards. The plan suggests formal twinning or mentorship between Ward 9 and a weaker ward (e.g. Ward 5 or 6), whereby Ward 9’s ward committee and volunteers support community activities or fundraising in the other ward. This approach is inspired by SDG 17 (Partnerships for the Goals) and the concept of stronger communities helping weaker ones, amplifying social cohesion. By 2030 and beyond, the goal is for all wards to reach the standard currently seen in Ward 9; thus, keeping Ward 9 at its peak and leveraging its capabilities for the greater good exemplifies planning with social justice. In sum, Ward 9’s trajectory will be maintained as per current frameworks, it reflects the outcome that all these national plans strive for: prosperous, inclusive, and well-managed communities.

7.2.1 Key Problems and Planning Suggestions for Meherpur Sadar Upazila

Union	Moderate & Poor Indicators	Planning Suggestions (with National Plan Alignment)
Amdah	**Poor:** Life Expectancy, Drainage, Waste **Moderate:** Health, Entertainment, Security, Communication, Religious, Other Facilities	1. Improve drainage & waste management (Delta Plan 2100 – safe water, sanitation) 2. Community-led waste recycling (SDG 12 – Responsible Consumption & Production) 3. Strengthen health & security (Perspective Plan 2041 – Health & Human Security) 4. Promote cultural/social organizations (SDG 11 – Inclusive Communities)
Amjhupi	**Poor:** Life Exp, Drainage, Waste, Reading, Activities, Events, Social Organization **Moderate:** Health, Sewage, Higher Education	1. Waste management & drainage improvement (Delta Plan 2100 – Urban Services) 2. Strengthen health & sewage (Perspective Plan 2041 – Universal Health & Sanitation) 3. Libraries & reading programs (SDG 4 – Quality Education) 4. Social organization formation (SDG 16 – Strong Institutions, Civic Participation)
Baradi	**Poor:** Life Exp, Drainage, Waste, Social Organization **Moderate:** Literacy, Entertainment, Other Facilities, Reading, Activities, Higher Edu, Events	1. Drainage & waste management facilities (Delta Plan 2100 – Infrastructure Resilience) 2. Improve literacy/education (SDG 4 – Quality Education) 3. Sports & youth centers (Perspective Plan 2041 – Social Development) 4. Cultural engagement (SDG 11 – Inclusive & Safe Public Spaces)
Buripota	**Poor:** Drainage, Activities, Events, Social Organization **Moderate:** Literacy, Health, Entertainment, Security, Communication, Reading, Higher Edu	1. Upgrade drainage (Delta Plan 2100 – Climate Resilient Settlement) 2. Improve health & entertainment (Perspective Plan 2041 – Improved Urban Services) 3. Strengthen communication & literacy (SDG 4 – Education, SDG 9 – Infrastructure) 4. Promote cultural participation (SDG 11 – Sustainable Cities)
Kutubpur	**Poor:** Health, Entertainment, Security, Communication, Drainage, Reading, Activities, Higher Education, Events, Social Organization	1. Expand healthcare (Perspective Plan 2041 – Universal Health Coverage) 2. Improve entertainment & communication (Delta Plan 2100 – Modern Infrastructure) 3. Awareness for culture/reading (SDG 4 & SDG 11) 4. Strengthen social participation (SDG 16 – Inclusive Institutions)
Pirojpur	**Poor:** Life Exp, Health, Waste, Social Organization	1. Upgrade healthcare (Perspective Plan 2041 – Universal Health) 2. Establish waste management (Delta Plan 2100 – Urban Waste Strategy) 3. Promote reading & adult education (SDG 4 –

Union	Moderate & Poor Indicators	Planning Suggestions (with National Plan Alignment)
	Moderate: Literacy, Religious, Other Facilities, Reading, Activities, Higher Education, Events	Education for All) 4. Strengthen cultural participation (SDG 11 – Inclusive Communities)
Shyampur	**Poor:** Security, Drainage, Waste, Social Organization **Moderate:** Literacy, Health, Entertainment, Communication, Religious, Other Facilities, Reading, Activities, Higher Education, Events	1. Improve drainage & waste management (Delta Plan 2100 – Urban Drainage & Waste Strategy) 2. Upgrade health & entertainment (Perspective Plan 2041 – Social Infrastructure) 3. Strengthen security (SDG 16 – Peace & Justice) 4. Promote cultural/social organizations (SDG 11 – Community Participation)

Ward	Moderate & Poor Indicators	Planning Suggestions (with National Plan Alignment)
1	**Poor:** Life Exp, Reading, Activities, Higher Education, Events, Social Organization	1. Healthcare & nutrition (Perspective Plan 2041 – Longevity) 2. Libraries & youth centers (SDG 4 – Education, SDG 11 – Inclusive Cities) 3. Social engagement programs (SDG 16 – Institutions)
2	**Poor:** Life Exp, Reading, Activities, Higher Education, Events, Social Organization	1. Life expectancy improvement via healthcare (Perspective Plan 2041 – Universal Health) 2. Cultural & community events (SDG 11 – Inclusive Communities)
3	**Poor:** Life Exp, Reading, Activities, Higher Education, Events, Social Organization **Moderate:** Literacy	1. Literacy & adult education (SDG 4 – Education for All) 2. Healthcare to raise life expectancy (Perspective Plan 2041) 3. Social organization development (SDG 16 – Civic Participation)
4	**Poor:** Infant Mortality, Reading, Activities, Higher Education, Events, Social Organization	1. Infant health programs (Delta Plan 2100 – Maternal & Child Health) 2. Cultural/educational participation (SDG 4, SDG 11)
5	**Poor:** Life Exp, Sewage, Drainage, Waste, Reading, Activities, Higher Education, Events, Social Organization	1. Upgrade sewage & drainage (Delta Plan 2100 – Urban Sanitation) 2. Healthcare (Perspective Plan 2041) 3. Cultural & literacy engagement (SDG 4 & 11)
6	**Poor:** Reading, Activities, Higher Education, Events, Social Organization **Moderate:** Life Exp, Water, Drainage, Waste	1. Improve water & drainage (Delta Plan 2100 – Resilient Urban Water) 2. Cultural & literacy participation (SDG 4 & 11) 3. Healthcare to extend life expectancy (Perspective Plan 2041)
7	**Poor:** Reading, Activities, Higher Education, Events, Social Organization **Moderate:** Life Exp, Communication	1. Improve communication (Delta Plan 2100 – ICT & Connectivity) 2. Strengthen education & cultural participation (SDG 4, SDG 11)
8	**Poor:** Reading, Activities, Higher Education, Events, Social Organization **Moderate:** Life Exp,	1. Enhance water, drainage, waste management (Delta Plan 2100 – Infrastructure & Sanitation) 2. Communication upgrades (Perspective Plan 2041 –

Ward	Moderate & Poor Indicators	Planning Suggestions (with National Plan Alignment)
	Communication, Water, Drainage, Waste	Digital Bangladesh) 3. Promote cultural awareness (SDG 11)
9	**Poor:** Reading, Activities, Higher Education, Events, Social Organization **Moderate:** Health, Water, Waste	1. Healthcare upgrade (Perspective Plan 2041 – Universal Health) 2. Improve water management & waste management (Delta Plan 2100 – Water/Waste Management) 3. Promote literacy & cultural events (SDG 4 & 11)

7.3 Mujibnagar Upazila

Overview: Mujibnagar Upazila, entirely rural and historically significant, has fewer unions but notable service lags, especially in Mahajanpur. Planning with social justice in Mujibnagar involves a sharp focus on its most underprivileged union (Mahajanpur) while also supporting the other unions to sustain and improve their conditions. The interventions are designed in line with the Bangladesh Delta Plan 2100, which advocates for comprehensive development of vulnerable regions by integrating improvements in education, health, and livelihoods. They also draw on the Perspective Plan 2041 goals of poverty eradication and equitable resource distribution, meaning Mujibnagar's disadvantaged communities must be uplifted to match national averages. Furthermore, the plan in Mujibnagar aligns closely with key SDGs: SDG 1 (No Poverty), SDG 3 (Good Health), SDG 4 (Quality Education), and SDG 10 (Reduced Inequalities) are especially pertinent, given the need to address illiteracy, poor health, and infrastructure gaps. By tailoring recommendations to each union, from Mahajanpur's urgent needs to Bagoan's consolidation, the plan ensures that development is inclusive and justice-oriented, honoring Mujibnagar's legacy with tangible progress in human well-being.

Mahajanpur Union: Mahajanpur is the most underprivileged union in Mujibnagar (and one of the worst in Meherpur District) with critically low literacy (~63–64%), multiple infant deaths (~30% IMR), and poor infrastructure (lowest CCI and QOLI). A comprehensive Union Uplift Program is imperative for Mahajanpur. This program should include:

- Education: Construct at least one new primary school (or renovate and expand existing schools) and ensure they are staffed with trained teachers, possibly incentivized by hardship allowances. Launch adult literacy campaigns to drastically cut illiteracy among adults, leveraging NGOs or government Night School initiatives. These steps directly support the 8FYP's emphasis on primary and secondary education expansion and fulfill SDG 4 goals. The Perspective Plan 2041 vision of expanding education to all segments of society resonates strongly here, Mahajanpur must go from two-thirds illiterate to majority literate in the coming years as a matter of rights and development.
- Health: Establish a fully equipped Union Health Complex or, at minimum, upgrade the community clinic to a 24/7 facility with a doctor or senior paramedic. Introduce maternal health services (antenatal check-ups, skilled birth attendance, postnatal follow-ups) and child health drives (immunization campaigns, vitamin supplementation) to eliminate preventable infant and maternal deaths. Mobile health

clinics can visit remote villages weekly. These measures align with national health priorities under 8FYP (6.7% ADP to health) and SDG 3 targets for reducing child mortality. They also mirror the Delta Plan 2100 objective of improving access to social services (like healthcare) in poor, vulnerable communities.

- Infrastructure: Provide safe drinking water (install deep tube wells with arsenic filters in all villages) and sanitary latrines (through government or NGO sanitation programs) to improve public health. Extend rural electrification to any off-grid hamlets, possibly using solar home systems where grid extension is difficult. Upgrade roads connecting Mahajanpur to the upazila center and nearby markets to all-weather standards, enabling mobility and economic exchange, reflecting the 8FYP's connectivity mandate for remote unions. If Mahajanpur faces flooding or waterlogging, incorporate climate-resilient infrastructure like raised embankments or improved drainage, following Delta Plan guidance on climate adaptation at local levels. These upgrades serve SDG 6 (Water & Sanitation) and SDG 9 (Infrastructure) objectives.
- Livelihoods: Initiate livelihood support programs to tackle poverty. For example, provide agricultural extension services and climate-resilient crops for farmers, support livestock rearing programs, and offer skills training or micro-credit for landless families to start small businesses. This approach is consistent with the Perspective Plan's call for inclusive economic growth and the Delta Plan's stress on sustainable livelihoods for marginal communities. By improving incomes, Mahajanpur's people can better sustain the education and health gains.

All these actions for Mahajanpur are interlinked and should be implemented in a coordinated way. The Perspective Plan 2041 explicitly highlights the need to "equip disadvantaged communities…with access to education, employment, health, and secure housing", essentially a summary of what Mahajanpur requires. The Union Parishad, in partnership with the upazila administration and development partners, should treat Mahajanpur as a priority zone. Success in Mahajanpur would be a landmark for social justice in Meherpur, demonstrating the government's commitment (under 8FYP and beyond) to integrate even the most lagging areas into the nation's development trajectory. Monitoring and evaluation mechanisms (like tracking improvements in PQLI, school enrollment, IMR annually) must be part of the program to ensure accountability, in line with SDG monitoring recommendations.

Monakhali Union: Monakhali has a relatively high literacy (~86%) and the highest QOLI (~87) in Mujibnagar, but its PQLI (~72.5) was slightly lowered by a few infant deaths (IMR

~30 per 1,000). The plan for Monakhali is to strengthen healthcare services while sustaining infrastructure excellence. Specifically, ensuring that the community clinic or health center in Monakhali is fully functional with adequate staffing and medicine can address the sporadic infant mortality, mothers should have access to antenatal care and referral to Mujibnagar or Meherpur hospitals for complicated deliveries. The introduction of an ambulance or emergency transport system in Monakhali would also be valuable so that any critical cases can reach higher facilities in time. These recommendations tie into the 8FYP's strategy of deploying mobile healthcare units and upgrading local health facilities, as well as SDG 3 goals for universal health coverage.

On the infrastructure front, Monakhali should maintain its good roads, water, and electricity supply which contributed to its top QOLI. The union can pilot new resilient infrastructure projects, for example, solar street lights or biogas community plants, aligning with the Delta Plan 2100's push for innovative, sustainable solutions in rural areas. Additionally, Monakhali's strong baseline makes it ideal for introducing digital services (e.g., an Union Digital Center kiosk offering e-government services and ICT training) which advances the digital inclusion aspect of social development. This would support the Perspective Plan's vision of a technologically advanced society and also contribute to SDG 9 (industry, innovation, infrastructure) by bridging the rural digital divide. By continuing to invest in Monakhali, the union can remain a model rural community, one that exemplifies how quality of life can be high outside urban areas when resources and governance are effective. This model can then be shared with Mahajanpur and others, in the spirit of inclusive growth and peer learning encouraged by national policies.

Dariapur Union: Dariapur's indicators are generally average (PQLI ~73, QOLI ~79.9, etc.), meaning it's not severely deprived but also not among the top performers. The recommendation for Dariapur is incremental development to move it from average to high-performing. On education, assess if there are gaps such as a need for additional secondary school or improvements in existing schools' quality (teacher training, facilities). If literacy is slightly below upazila average, implement community-based tutoring for children or literacy drives for adults. These actions follow the 8FYP and SDG 4 pathways for improving educational quality and coverage. On health, ensure the community clinic in Dariapur has outreach to all villages the union's moderate PQLI suggests some health issues, so intensifying immunization, sanitation, and nutrition programs can push Dariapur's health indicators up. In terms of infrastructure, identify any specific needs: for instance, if some villages lack year-round road

access or flood protection, allocate resources to fix those. This resonates with the Perspective Plan's rural infrastructure goal and the 8FYP's rural connectivity component, which emphasizes linking underdeveloped pockets to growth centers.

Additionally, livelihood support can help raise Dariapur's standard of living: introduce agricultural training (since the union is likely agrarian), promote value-chain linkages (like connecting farmers to markets in Meherpur town), and encourage small-scale agro-industries (milk chilling centers, rice mills etc.). This would be in line with SDG 8 and the national objective of diversifying rural economies. Overall, the plan treats Dariapur with a preventive approach tackling any emerging issues before they worsen. This is consistent with the Delta Plan's adaptive planning philosophy: continually monitor and bolster communities so they remain resilient and on track. By doing so, Dariapur can gradually improve its PQLI, QOLI, and CCI to join the ranks of the better-off unions, reflecting true inclusive development under Vision 2041.

Bagoan Union: Bagoan is the best-performing union in Mujibnagar (highest PQLI ~82.3, strong QOLI ~76.4, etc.). The recommendation for Bagoan is to maintain its progress and leverage it for broader upazila development. Bagoan should continue to receive normal development investments, e.g., regular school funding, road maintenance, to preserve its achievements. In addition, the union could be chosen as a site for pilot programs that, if successful, could be replicated in Mahajanpur and elsewhere. For example, a pilot project for climate-smart agriculture (given Bangladesh Delta Plan's focus on climate resilience) could be implemented in Bagoan to further improve farmer incomes and sustainability. Or a community-based tourism initiative might be started, highlighting Mujibnagar's historical heritage (as the provisional government site), Bagoan could host homestays or cultural shows for visitors, creating new income avenues aligned with SDG 8 (tourism development for decent work).

From a social perspective, Bagoan can afford to focus on "higher-order" needs: for instance, establishing a local college if none exists, or a vocational training center to fulfill the Perspective Plan's vision of a skilled workforce by 2041. Ensuring that women and marginalized groups in Bagoan are also benefiting (through women's entrepreneurship programs, for instance) will satisfy SDG 5 (Gender Equality) and SDG 10 even in a well-off union. Moreover, Bagoan's Union Parishad could partner with Mahajanpur's Union Parishad as a mentor, sharing administrative best practices, jointly hosting health camps or fairs, etc. This kind of inter-union solidarity is in the spirit of SDG 17 and the inclusive governance ideals

mentioned in national plans (e.g., the 8FYP's theme of fostering inclusivity and reducing inequality).

In summary, Bagoan will be kept as a centre of excellence in Mujibnagar, continuing all current positive trends and pioneering new initiatives. Its role in the district's social justice framework is to ensure that success is not isolated: Bagoan's human capital, good practices, and innovations must radiate outward. This approach is consistent with the Perspective Plan's call for balanced development and using data (like our indices) to guide resource distribution to where it's needed most, since Bagoan needs less remedial investment, its "share" of attention can justifiably be lower, but its share of influence should be higher. Thus, Bagoan's recommendation is as much about what it can give (knowledge, models) as what it should receive (continued quality services), embodying a mature stage of socially just development where communities help each other.

7.3.1 Key Problems and Planning Suggestions for Mujibnagar Upazila

Union	Key Problems (Poor & Moderate Indicators)	Planning Suggestions (with National Plan Alignment)
Bagoan	Poor: Drainage (0.00), Waste (0.00) Moderate: Literacy (66.51), Life Exp (65.12) CCI Poor: Social Organization (5)	1. Establish drainage & waste management system (Delta Plan 2100 – Urban Sanitation) 2. Improve literacy & life expectancy (SDG 4 – Education, Perspective Plan 2041 – Health & Longevity) 3. Promote civic/social organization engagement (SDG 16 – Strong Institutions)
Dariapur	Poor: Life Exp (36.58), Cooking Fuel (41.83) Moderate: Health (72.32), Security (74.73), Electricity (70.00), Drainage (55.83) CCI Poor: Social Organization (19)	1. Strengthen healthcare & nutrition (Perspective Plan 2041 – Universal Health) 2. Expand clean energy access (Delta Plan 2100 – Modern Energy Transition) 3. Improve drainage & sanitation (SDG 6 – Water & Sanitation) 4. Encourage social organization networks (SDG 16 – Institutions)
Mahajanpur	Poor: Health (0.00), Life Exp (33.63) Moderate: PQLI (63.23), QOLI (56.58) CCI Poor/Moderate: Reading (31), Activities (43), Events (48)	1. Immediate healthcare services (Perspective Plan 2041 – Universal Health Coverage) 2. Expand literacy & adult education (SDG 4 – Quality Education) 3. Enhance cultural participation & youth engagement (SDG 11 – Inclusive Communities)
Monakhali	Poor: Life Exp (39.08) Moderate: Sewage (78.75 borderline) CCI Poor: Social Organization (2)	1. Improve healthcare & life expectancy (Perspective Plan 2041 – Health & Longevity) 2. Strengthen social organization participation (SDG 16 – Civic Institutions) 3. Maintain high service levels via resilience planning (Delta Plan 2100 – Infrastructure & Services)

7.4 Waterlogging Challenges in Meherpur District

Waterlogging is one of the most visible environmental and infrastructural challenges in Meherpur District, with certain unions and municipal wards more severely affected than others. The spatial variation in incidence, from unions such as Amjhupi and Kutubpur in Meherpur Sadar, to Tentulbaria, Kazipur and Kathuli in Gangni, and Mahajanpur in Mujibnagar indicates that localized interventions are necessary alongside district-wide measures. This chapter outlines upazila and paurashava-specific solutions to address these waterlogging challenges in a sustainable, equitable manner.

7.4.1 Meherpur Sadar Upazila

Rural Unions

- Amjhupi Union (10.6%): A high-incidence area requiring expansion of lined earthen drains and retention ponds. Priority should be given to rehabilitating clogged canals and improving outlet connections.
- Kutubpur Union (10.2%): Develop community-based water storage systems and enforce land use restrictions on natural drainage paths. Paved areas should adopt permeable materials to reduce runoff.
- Pirojpur Union (7.3%): Introduce bio-swales along rural roads and establish village-level water management committees to oversee drain maintenance.
- Dariapur and Other Low-Incidence Unions: Focus on preventive measures such as routine cleaning of drains, promotion of rainwater harvesting, and maintaining natural watercourses.

Meherpur Paurashava (Municipal Wards)

- Ward 2 and Ward 5 (Moderate Incidence): Upgrade surface drains with proper slope alignment. Restrict construction on natural channels and designate green buffer zones for rainwater retention.
- Other Wards (Low Incidence): Introduce zoning regulations and enforce regular drain clearance to prevent future waterlogging.

7.4.2 Gangni Upazila

Rural Unions

- Tentulbaria Union (6.2%): Construct new drainage channels connected to nearby khals, supported by low-cost pumping systems during monsoon peaks.

- Kazipur Union: Construct primary drainage channels connecting settlements to nearby khals. Develop small retention ponds at low-lying points to absorb peak monsoon runoff. Prioritize Haravanga and Sahebnagar for immediate interventions, as together they account for over 90% of drainage unavailability.
- Kathuli Union (4.8%): Establish water retention ponds and improve roadside drainage. Local farmers can be engaged to maintain vegetative buffers around water channels.
- Raypur and Matmura (Lower Incidence): Promote bio-swales and encourage households to adopt rainwater harvesting systems to reduce stormwater burden.

Gangni Paurashava (Municipal Wards)

- Ward 8 (Moderate Incidence): Improve drain design and enforce solid waste management to prevent blockages.
- Other Wards (Low or No Incidence): Focus on preventive urban planning, including permeable paving and preservation of existing water channels.

7.4.3 Mujibnagar Upazila

Rural Unions

- Mahajanpur Union (4.0%): Establish retention ponds, desilt existing canals, and develop outfall drainage systems. This area requires urgent structural solutions.
- Monakhali Union (2.3%): Introduce vegetative cover and promote rainwater harvesting at the community level.
- Bagwan Union (2.1%): Construct roadside bio-swales and improve household-level drainage facilities.
- Other Unions (Low or No Incidence): Continue preventive maintenance and community awareness campaigns to sustain low incidence.

7.4.4 District-Wide Cross-Cutting Solutions

- **Structural Interventions:** Expansion and rehabilitation of drains, retention ponds, and canals across hotspot unions.
- **Non-Structural Measures:** Enforcement of land-use planning, awareness campaigns, and capacity building for Union Parishads.
- **Nature-Based Solutions:** Afforestation, bio-swales, and rainwater harvesting to reduce stormwater runoff.

- **Institutional Linkages:** LGED, Paurashava authorities, and Union Parishads should coordinate for integrated planning, with communities actively involved in monitoring and upkeep.

Chapter 8: Other Surveys

8.1 Educational Survey

Education is one of the most important foundations for social and economic development. The quality, accessibility, and availability of educational institutions directly influence literacy, skill development, and long-term human resource growth of a region. In the context of Meherpur District, education plays a vital role not only in improving livelihood opportunities but also in reducing poverty, empowering communities, and ensuring sustainable development.

The Educational Survey conducted in Meherpur aimed to identify the number and types of educational institutions, student enrollment, teacher availability, dropout rates, hostel and transport facilities, and associated challenges. By collecting both quantitative and qualitative information, the survey provides a clear picture of the current educational status in the district.

8.1.1 Name and Location of some prominent educational institutions

The survey identified a number of educational institutions in Meherpur District, ranging from primary schools to colleges and madrasas. These institutions are spread across urban centres such as Meherpur Sadar and Gangni, as well as rural unions like Nurpur and Garadob. Their distribution reflects the mixed educational structure of the district, where government schools, private colleges, and religious institutions (madrasas) coexist.

The presence of multiple primary schools (e.g., Hannanganj, Terghoriya, Gangni Model, Garadob) reflects strong grassroots coverage. Institutions such as Meherpur Government College, Gangni Mohila College, and B M College ensure access to higher education. In addition, madrasas (Al Madina Dakhil, Nur Mohammad Rabeya Darul Ulum) contribute to religious and traditional education, while Shondhani School & Nursing Institute provides specialized health-related education. This diversity demonstrates the district's commitment to a multi-dimensional education system, balancing general, religious, and technical education needs.

Table 26: Name and Location of some prominent educational institutions

Name of Building	Location of Building
Hannanganj Govt. Primary School	Hannanganj, Meherpur
Meherpur Technical Training Center, Meherpur	WPDA Mor, Meherpur
Daffodil School & College	WPDA Mor, Meherpur
Sohir Uddin Degree College	Kathuli Shorok, Meherpur Sadar
Terghoriya Govt. Primary School	Terghoriya, Meherpur Sadar
Meherpur Govt. Mohila College	Meherpur Sadar
Al Madina Dakhil Madrasa	Bashbariya, Gangni
An-Nur Islamiya Model Madrasa & Hefzkhana	Garadob, Gangni
Nurpur Shahid Muktar Ali Govt. Primary School	Nurpur, Meherpur
Ayesha Nagar Dakhil Madrasa	Jatarpur, Mujibnagar
Meherpur Government College	Meherpur Sadar
Gangni Model School & College	Gangni Bazar, Meherepur
Gangni Model Govt. Primary School	Gangni Bazar, Kushtia Road, Meherpur
Dhankhola Govt Primary School	Dhankhola, Gangni, Meherpur
Nur Mohammad Rabeya Darul Ulum Atim Madrasa	College Road, Gangni, Meherpur
Shondhani School & College & Nursing Institute	College Para, Gangni, Meherpur
Shondhani School & College & Nursing Institute	College Para, Gangni, Meherpur
Gangni Mohila Collegepara Govt. Primary School	Collegepara, Gangni, Meherpur
Gangni Mohila College	College Road, Gangni, Meherpur
Shaharbati Govt. Primary School	Shaharbati Bazar, Gangni, Meherpur
B M College	Vatpara (Kuthi), Gangni, Meherpur
Bright Star Pre-Cadet Academy	Vatpara (Kuthi), Gangni, Meherpur
Garadob Government Primary School	Garadob, Gangni, Meherpur
Garadob Secondary School	Garadob bazar
Bashbariya Secondary School	Bashbariya Bazar

Source: Field Survey 2025

8.1.2 Statistics of the Educational Institution

In the following, statistics of some important information are shown for Meherpur District. A total of 25 educational institutions were considered in this study. The maximum recorded land area of an institution is 6000 decimals, whereas the minimum is 2.87 decimals, and the average land area stands at 349.03 decimals.

The maximum number of students recorded is 6300, the minimum is 17, while the average number of students per institution is 877.08. Similarly, the maximum number of teachers in an institution is 130, the minimum is 5, and the average number is 28.28 teachers per institution.

Regarding facilities, hostel facilities are available in 8 institutions, and transport facilities are available in 2 institutions. Regarding student dropouts, one primary institution reported dropouts, while 5 secondary institutions recorded dropouts, though the average dropout rate is relatively low.

Table 27: Statistics of the Educational Institution

Statistic	Area (Decimal)	Number of Student	Number of Teacher	Hostel Facilities	Transport Facilities	Number of Dropout Student (primary)	Number of Dropout Student (Secondary)
Valid	8725.71	21927	707	8	2	1	5
Missing	0	0	0	17	23	0	0
Mean	349.03	877.08	28.28	0.32	0.08	0.04	0.2
Range	5997.13	6283	125	1	1	1	5
Minimum	2.87	17	5	0	0	0	0
Maximum	6000	6300	130	1	1	1	5

On average, each institution in Meherpur has about 877 students and 28 teachers, which indicates a comparatively high student–teacher ratio. Hostel and transport facilities remain limited, available only in a small number of institutions. Dropout rates, though recorded, are very low in both primary and secondary levels, suggesting a relatively stable educational participation trend.

In the following table, the distribution of different types of educational institutions in Meherpur District is shown. A total of 25 institutions were recorded in the survey. Among them, the highest share belongs to colleges, which constitute 40% (10 in number). Primary Schools represent 32% of the total, while Madrashas account for 16%. High Schools are relatively fewer, covering only 8%, and Kindergartens are the least represented with just 4%.

This distribution indicates that higher-level institutions (Colleges) dominate the educational landscape in the district, whereas early childhood institutions (Kindergarten) remain underrepresented.

Table 28: Distribution of Educational Institution

Educational Institution	Frequency	Percent	Valid Percent	Cumulative Percent
Kindergarten	1	4	4	4
Primary School	8	32	32	36
High School	2	8	8	44
Madrasah	4	16	16	60
College	10	40	40	100
Total	25	100.0	100.0	

The dominance of colleges reflects the emphasis on higher education in Meherpur. However, the comparatively lower share of Kindergartens and High Schools suggests a gap in foundational and secondary education facilities. This imbalance could influence long-term educational outcomes, as stronger early education and more secondary institutions are crucial for sustaining enrollment into higher levels.

The distribution of patients visiting healthcare centers in Meherpur District is presented below. A total of 1,390 patients were recorded during the survey.

8.1.3 Hostel Facilities in Educational Institutions

Only 32% of educational institutions in Meherpur District provide hostel facilities, while the majority **(**68%**)** lack such accommodation. This limited provision may affect students from remote areas who require boarding to continue their studies, especially at higher levels.

Hostel Facilities	Frequency	Percent (%)	Cumulative Percent (%)
Yes	8	32	32
No	17	68	100.0
Total	25	100.0	

8.1.4 Transport Facilities in Educational Institutions

Transport facilities are extremely scarce in Meherpur, with only 8% of institutions offering such services. The overwhelming majority (92%) of institutions do not provide transport, creating challenges for students traveling from distant villages and unions. Improving transportation could significantly enhance accessibility and enrollment.

Transport Facilities	Frequency	Percent (%)	Cumulative Percent (%)
Yes	2	8	8
No	23	92	100.0
Total	25	100.0	

8.1.5 Number of Dropout Students (Primary)

In primary schools, 96% of institutions reported no dropout students, while only one institution (4%) reported a single dropout case. This indicates that dropout at the primary level is almost negligible in Meherpur, reflecting strong participation and retention at the foundational stage of education.

Number of Dropout Students (Primary)	Frequency	Percent (%)	Cumulative Percent (%)
No Dropout	24	96	76.7
1 Student	1	4	81.4
Total	25	100.0	

8.1.6 Number of Dropout Students (Secondary)

At the secondary level, 80% of institutions reported no dropout students, while 20% of institutions reported only a single dropout case. Although dropout is slightly higher here than at the primary level, the overall figures still suggest a stable retention rate in secondary education across Meherpur District.

Number of Dropout Students (Secondary)	Frequency	Percent (%)	Cumulative Percent (%)
No Dropout	20	80	80
1 Student	5	20	100
Total	25	100.0	

8.2 Health Facilities Survey

Health facilities are one of the most critical components of social infrastructure, directly influencing the well-being, productivity, and overall quality of life of the population. The availability, accessibility, and efficiency of hospitals, clinics, diagnostic centres, and community health complexes determine how effectively a district can respond to both everyday healthcare needs and emergency situations.

In Meherpur District, health facilities play a particularly vital role due to the district's semi-urban and rural context, where access to advanced medical care is often limited. The Health Facilities Survey was undertaken to assess the distribution of healthcare institutions, patient load, staffing patterns (doctors, nurses, consultants), service availability, infrastructure, and working hours.

8.2.1 Health Centre

In Meherpur District, several healthcare centres provide services ranging from primary healthcare to diagnostic and specialized care. Following table presents the list of surveyed health facilities. The institutions are distributed across different locations, including Mujibnagar, Meherpur Sadar, and Gangni Upazila.

The survey found that healthcare facilities are concentrated mainly in Gangni Bazar, which hosts multiple institutions such as Robiul Islam Memorial Hospital, Raza Clinic, and the Gangni Upazila Health Complex. On the other hand, Mujibnagar and Meherpur Sadar also maintain significant healthcare centres such as Mahajanpur Union Health & Family Welfare Center and Shojia Bishsho General Hospital.

Name of Health Facilities Centre	Location
Mahajanpur Model Union Health & Family Welfare Center	Mahajanpur, Mujibnagar
250 Shojja bishishto General Hospital, Meherpur	Meherpur Sadar
Mukti Diagnostic Center	Mohila College Road, Gangni
Robiul Islam Memorial Hospital	Gangni Bazar, Meherpur
Raza Clinic	Gangni to Kushtia Road Gangni Bazar
Gangni Upazila Health Complex	Gangni Bazar, Meherpur

8.2.2 Patients

The highest proportion of patients 65% (900 patients) reported visiting healthcare centres in groups of two. The second largest share belongs to groups of six patients, comprising 29% (410 patients). Very few respondents reported visiting alone (1%), in groups of three (1%), or in groups of four (1%). Groups of five accounted for only 2% of the total.

This indicates that the majority of patients tend to visit healthcare centres in pairs or larger groups, which may reflect local social practices of seeking treatment collectively, possibly for logistical or cultural reasons.

Number of Patient	Frequency	Percent	Valid Percent	Cumulative Percent
1	20	1	1	1
2	900	65	65	66
3	10	1	1	67
4	20	1	1	68
5	30	2	2	70
6	410	29	29	99
Total	1390	100	100	

The data suggests that healthcare facilities in Meherpur are primarily accessed in shared settings, with very few patients visiting individually. This pattern highlights the importance of considering family- or group-based healthcare demand in planning local health services, such as seating arrangements, waiting areas, and consultation capacity.

8.2.3 Doctors (permanent) in the Healthcare Centre

The survey identified the availability of permanent doctors across healthcare centres in Meherpur District. Out of a total of 41 centres surveyed, the highest proportion 49% (20 centres) had two permanent doctors. Another 24% (10 centres) had five permanent doctors, while 12% (5 centres) had three doctors. Smaller proportions of centres had either four doctors (7%) or just one doctor (5%).

Only one healthcare centre (2%) was found to have no permanent doctor at all. This distribution indicates that while most centers maintain at least two doctors, there is still a noticeable gap in ensuring adequate medical staffing, particularly in rural and union-level facilities.

Number of Doctor(permanent)	Frequency	Percent	Valid Percent	Cumulative Percent
No Doctor	1	2	2	2
1	2	5	5	7
2	20	49	49	56
3	5	12	12	68
4	3	7	7	75
5	10	24	24	100.0
Total	41	10	100.0	

Nearly half of the surveyed centres are staffed with two permanent doctors, which appears to be the common standard across the district. However, the fact that some facilities operate with only one or no permanent doctor reflects staffing shortages that could limit service quality. Expanding the number of doctors per centre, especially in underserved areas, would significantly strengthen the district's healthcare system.

8.2.4 Permanent Nurse

The survey revealed the distribution of permanent nurses across healthcare centres in Meherpur District. Out of 219 centres surveyed, the majority—79% (174 centres)—had two permanent nurses. Another 13% (29 centres) reported having five nurses, while smaller proportions were found with three (3%) or four (3%) nurses.

Only 2 centres (1%) reported having just one permanent nurse, while one centre (0%) had no permanent nurse at all.

This pattern demonstrates that most facilities follow a standard staffing of two nurses, but there is still variation in larger healthcare complexes where up to five nurses were available. The presence of facilities with no nurse or only one nurse highlights gaps that need to be addressed for consistent healthcare service delivery.

Nurse(permanent)	Frequency	Percent	Valid Percent	Cumulativ ePercent
No Nurse	1	0	0	0
1	2	1	1	1
2	174	79	79	80
3	7	3	3	83

4	6	3	3	86
5	29	13	13	99
Total	219	100.0	100.0	

The overwhelming concentration of two nurses per center suggests a district-wide staffing pattern aligned with basic service requirements. However, the fact that some centers reported no nurses indicates critical service gaps that could undermine patient care. Increasing staffing in under-resourced facilities could ensure more equitable healthcare access across Meherpur.

8.2.5 Working Hours of Health Facilities

The survey shows that government facilities like the General Hospital and Mahajanpur Health Center operate the longest (9 hours daily). Private centres such as Mukti Diagnostic and Robiul Islam Hospital provide 7 hours of service, often in the afternoon and evening. The Gangni Upazila Health Complex provides the shortest duration (6 hours), suggesting limited patient access compared to other facilities.

Name of Health Facilities Centre	**Working Hours (Hours/Day)**
Mahajanpur Model Union Health & Family Welfare Center	**9 hours**
250 Shojja Bishishto General Hospital	**9 hours**
Mukti Diagnostic Center	**7 hours**
Robiul Islam Memorial Hospital	**7 hours**
Raza Clinic	**7 hours (avg.) ***
Gangni Upazila Health Complex	**6 hours**

8.3 Archeological Survey

Meherpur District contains a number of significant archaeological and historical sites that reflect both the colonial and liberation history of Bangladesh. These sites are not only of cultural and historical importance but also hold potential for educational and tourism development.

Among them, the Mujibnagar Memorial is the most prominent, as it commemorates the establishment of the Provisional Government of Bangladesh in 1971. Constructed in 1987, this site stands as a national symbol of the Liberation War, drawing visitors from across the country.

Another notable site is the Amjhupi Nilkuthi, originally built in 1778 as an office of the East India Company. It represents the colonial indigo trade system that played a crucial role in the economic and social history of Bengal.

Name of the Archaeological Building	History (Attached)	Location	Year of Construction
Mujibnagar Memorial	Provisional Government of Bangladesh	Mujibnagar, Meherpur	1987
Amjhupi Nilkuthi	East India Company Office	Amjhupi, Meherpur	1778

8.3.1 Facilities and Maintenance of Archaeological Sites

The survey also investigated the facilities, staffing, and preservation status of archaeological and historical sites in Meherpur District. The findings show that both major sites Mujibnagar Memorial and Amjhupi Nilkuthi have attached facilities and are under active preservation.

The Mujibnagar Memorial is well-maintained, with facilities such as toilets, restrooms, guided tours, and administrative support. It employs 132 staff members, including guards, forestry department officials, postal office staff, and cleaners. The site is officially preserved due to its historical importance as the first headquarters of the Provisional Government of Bangladesh, ensuring that future generations can learn from this heritage.

The Amjhupi Nilkuthi provides accommodation facilities and employs 7 staff members, including counter guards and a manager. It is also listed under preservation, reflecting its importance as a colonial relic associated with the indigo trade.

Name of The Archaeological Building	Attached Facilities	Maintenance		Archaeological Preservation Conservation	
		No. of Staff	Staff Type	Yes/No	Reason
Mujibnagar Memorial	Toilet, Restroom, Guide Tour	132	Guard, Forestry Dept, Post office, Cleaner	Yes	Historical memories and the need to preserve them to learn about Bangladesh
Amjhupi Nilkuthi	Accommodation	7	Counter Guard, Manager	Yes	

8.4 Recreation & Open Space Survey

Recreation and open spaces play a crucial role in improving the quality of life of urban and rural communities. In Meherpur District, recreational facilities are limited but include a combination of public parks, playgrounds, cultural centres, and historical landmarks. The survey attempted to identify the existing recreational facilities, their location, and the extent of usage by residents.

The findings reveal that open spaces are often unstructured and multipurpose, such as school fields and open grounds that are used both for sports and community gatherings. Urban centres (Meherpur Sadar, Gangni Bazar, Mujibnagar) have more organized recreational spaces, while rural unions rely heavily on natural areas (ponds, fields, riverbanks) for informal recreation.

Type of Recreation/Open Space	Location/Examples	Facilities Available	Usage/Remarks
Public Park	Meherpur Sadar Park	Seating, walkways, trees	Used for walking, gatherings
Playground	School fields (Meherpur, Gangni)	Sports fields, open grounds	Mainly used by children/youth for sports
Cultural Centre	Shilpakala Academy, Meherpur	Stage, halls	Cultural events, drama, community shows
Historical Landmark	Mujibnagar Memorial	Museum, open lawns	National-level recreation & tourism
Natural Recreation Areas	Local ponds, riverbanks, fields	Informal open spaces	Used for fishing, social interaction

8.4.1 Open Spaces (General Grounds)

The survey shows that small and medium-sized open spaces are frequently used by residents. Open Space–2 records the highest number of visitors (100 daily), reflecting its accessibility and role as a community hub. In contrast, Open Space–3, despite being much larger (11 bigha), attracts relatively fewer visitors (30 daily), suggesting underutilization due to location or lack of facilities.

Name / Type	Location (Coordinates)	Area / Size	Description	Daily Visitors
Open Space – 1	23.769348, 88.635863	30 sq ft	Small open space used for casual gatherings and children's play	60
Open Space – 2	23.765930, 88.634788	13.134 m²	Moderately used open space, often for community interaction and local sports	100
Open Space – 3	23.774950, 88.632454	11 bigha	Large ground serving as an informal playground and social gathering area	30

8.4.2 Cultural & Historical Recreational Sites

The Shahid Minar premises in Meherpur serve as a dual-purpose space—both a memorial and a public gathering area. Although daily visitor numbers are low (20 per day), its cultural and symbolic value make it an important site for special events, commemorations, and community programs.

Name / Site	Location (Coordinates)	Area / Size	Attached Facilities	Description	Daily Visitors
Shahid Minar Premises	23.775201, 88.631481	2900 m²	Shahid Minar	A memorial site serving as both a cultural landmark and public recreation area	20

8.4.3 Large Open Grounds

Despite its massive size (317 bigha), the large open ground records only 15 visitors daily, indicating very low usage. The absence of formal facilities and limited accessibility likely contributes to this underutilization. With proper planning, this space has the potential to be developed into a significant recreational or eco-tourism zone.

Name / Site	Location (Coordinates)	Area / Size	Built Area	Facilities	Description	Daily Visitors
Large Open Ground	23.828459, 88.612332	317 bigha	1200 sq ft	No	Very large natural ground area, used occasionally for social or cultural programs	15

8.4.4 Organized Recreational Facilities

Organized recreational facilities in Meherpur include Malshadoho Recreation Ground and DC Eco Park. Both attract moderate numbers of visitors (45–50 per day). Malshadoho is notable for its swimming pool, which serves as a key attraction for youth. The DC Eco Park, with its lake and rest places, offers a more family-oriented environment. These facilities highlight the district's move toward structured recreational development.

Name / Site	Location	Area / Size	Facilities Provided	Description	Daily Visitors
Malshadoho Recreation Ground, Gangni	Gangni, Meherpur	15 bigha	Swimming Pool	A recreational ground with a swimming pool, serving local residents and youth	50
DC Eco Park, Meherpur	Meherpur District HQ	40 bigha	Rest Place, Lake	A planned eco-park featuring a lake (80 ft × 70 ft) and seating areas for visitors	45

Chapter 9: Conclusion

The socio-economic and spatial survey of Meherpur Zilla provides a holistic understanding of the district's demographic profile, cultural assets, infrastructure base, and development challenges. The findings reveal that while Meherpur possesses rich historical significance, fertile agricultural land, and emerging urban centers, its growth is constrained by persistent inequalities in education, health, infrastructure, and social capital. The disparities between unions and wards underscore the urgent need for targeted and equitable interventions.

This report establishes a strong evidence base for formulating an inclusive and socially just development plan. By integrating household-level data with GIS-based spatial analysis, it identifies priority areas where interventions can have the greatest impact—ranging from literacy programs in low-performing unions to expanded maternal and child healthcare in underserved wards, as well as investments in cultural and community institutions to strengthen social cohesion.

The analysis also highlights the importance of embedding climate resilience, sustainable land use, and improved service delivery into the district's future development trajectory. Aligning with national and global frameworks such as the Bangladesh Delta Plan 2100, Sustainable Development Goals (SDGs), and Perspective Plan 2041, the recommendations of this report chart a pathway that not only addresses present needs but also prepares Meherpur for future demographic, environmental, and economic shifts.

In essence, the Meherpur Zilla Project moves beyond traditional planning by placing equity, sustainability, and social justice at the center of development. If implemented with commitment and inclusivity, it can transform Meherpur into a model district where balanced regional development ensures that no community is left behind, contributing meaningfully to Bangladesh's broader vision of a prosperous and sustainable future.

Annexure

Questionnaire

মেহেরপুর জেলার উন্নয়ন পরিকল্পনা প্রকল্পে আর্থ-সামাজিক সমীক্ষা

নগর উন্নয়ন অধিদপ্তর
৮২, সেগুনবাগিচা, ঢাকা-১০০০, বাংলাদেশ

নমুনা নম্বর.....
ফিজিক্যাল ফিচার আইডি .....
জরিপের তারিখ.....

আপনার বর্তমান অবস্থান রেকর্ড করুন (x, y স্থানাঙ্ক) .....

১। এলাকা ও পরিবার পরিচিতি:

১.১ উপজেলাঃ	১.৪ মৌজার নামঃ
১.২ ইউনিয়ন/পৌরসভাঃ	১.৫ ওয়ার্ড নংঃ
১.৩ গ্রাম / মহল্লার নামঃ	১.৬ রাস্তার নাম/নম্বরঃ
১.৭ বাড়ীর নম্বরঃ	১.৮ বাড়ির ধরনঃ ১। কাঁচা ২। সেমিপাকা ৩।পাকা
১.৯ বাড়ির মালিকানাঃ ১। নিজ ২। ভাড়া	১.১০ ল্যান্ড মার্কঃ
১.১১ সাক্ষাতকার প্রদানকারীর নামঃ	১.১২ মোবাইল নাম্বারঃ
১.১৩ ধর্মঃ ১. মুসলিম ২. হিন্দু ৩. বৌদ্ধ ৪. খ্রীষ্টান ৫. অন্যান্য (উঃ ক.....।)	১.১৪ পরিবারের ধরণঃ ১. একক ২. যৌথ

২। খানার জনসংখ্যা ও আর্থ সামাজিক বৈশিষ্ট্য (HH Pop & Socio – Economic Condition)

খানা প্রধানের পরিবারের মোট সদস্য সংখ্যা	খানা প্রধান ও তার পরিবার সদস্য	বয়স	লিঙ্গ ১= পুরুষ, ২= মহিলা	বৈবাহিক অবস্থা ২. কোড	শিক্ষা ৩। কোড	পেশা	দৈনন্দিন চলাচলের পরিবহন ৫। কোড	উদ্দেশ্য

কোড

১-খানা প্রধানের সাথে সম্পর্ক ১. খানা প্রধান ২. স্ত্রী/স্বামী ৩. পুত্র/কন্যা ৪. পিতা/ মাতা ৫. ভাই/বোন ৬. অন্যান্য (উ.ক.)
২- বৈবাহিক অবস্থা ১. অবিবাহিত ২. বিবাহিত ৩. অন্যান্য (উ ক.....)
৩- শিক্ষা - ১. নিরক্ষর ২. প্রথম-পঞ্চম শ্রেণী ৩. ষষ্ঠ – দশম শ্রেণী ৪. মেট্রিক (এসএসসি) ৫. ইন্টারমিডিয়েট (এইচএসসি) ৬. অনার্স ৭। মাস্টার্স ৮। অন্যান্য .....
৫- বাহনঃ ১. হেটে ২. রিকসা ৩. ভ্যান ৪. সাইকেল ৫. মোটর সাইকেল ৬. গাড়ী ৭. বাস ৮. মাইক্রোবাস ৯. অন্যান্য (উ.ক.)

৩। পরিবারের মাসিক আয় (Income) এবং সঞ্চয়

	খানা প্রধান	স্ত্রী/স্বামী	অন্যান্য (উল্লেখ করুন)	মোট
আয় ১। কোড				
ব্যয় ২। কোড				
সঞ্চয় ৩। কোড				

কোড

১। **আয়**- ১। ১০০০০ এর কম ২। ১০০০০-২০০০০ এর মধ্যে ৩। ২১০০০-৩০০০০ এর মধ্যে ৪। ৩১০০০-৪০০০০ এর মধ্যে ৫। ৪০০০০ এর বেশি
২। **ব্যয়**- ১। ৫০০০ এর কম ২। ৫০০০-১০০০০ এর মধ্যে ৩। ১১০০০-১৫০০০ এর মধ্যে ৪। ১৬০০০-২০০০০ এর মধ্যে ৫। ২০০০০ এর বেশি
৩। **সঞ্চয়**- ১। ৫০০ এর কম ২। ৫০০-১০০০ ৩। ১১০০-১৫০০ ৪। ১৫০০ এর বেশি

৪। সামাজিক অবস্থাঃ

৪.১ আপনার/আপনার পরিবারের সদস্যদের কি বই পড়ার আগ্রহ আছে? ১. হ্যাঁ ২. না

৪.২ আপনি/আপনার পরিবার কি কোন কর্মকাণ্ডে জড়িত? ১. হ্যাঁ ২. না

উত্তর হ্যাঁ হলে উল্লেখ করুন

১.বই/সংবাদপত্র পড়া ২. টিভি দেখা ৩. ঐতিহ্যবাহী গান শোনা ৪. সাংস্কৃতিক বা ঐতিহাসিক স্থান পরিদর্শন ৫. স্থানীয় উৎসবে যোগদান ৬. অন্যান্য .....

৪.৩ আপনি কি আপনার সন্তানদের উচ্চ শিক্ষা অর্জনে উৎসাহিত করেন? ১.হ্যাঁ ২. না

৪.৪ আপনি কি সাংস্কৃতিক বা ধর্মীয় অনুষ্ঠানে অংশগ্রহণ করেন? ১.হ্যাঁ ২. না

৪.৫ আপনি কি কোন সামাজিক সংগঠনের সাথে জড়িত? ১.হ্যাঁ ২. না

উত্তর হ্যাঁ হলে কোনটি?

১. কৃষি সমবায় ২. মহিলাদের দল ৩. যুব ক্লাব ৪. ধর্মীয় ৫। অন্যান্য (উ ক .....)

৪.৬ আপনি অথবা আপনার পরিবারে বিগত পাঁচ বছরে কোন শিশু জন্মগ্রহন করেছে কি? ১. হ্যাঁ ২. না

৪.৭ আপনি অথবা আপনার পরিবারের কোনো সদস্য কি বিগত পাঁচ বছরে এক বা এক বছরের নিচে কোনো শিশুকে হারিয়েছেন? ১. হ্যাঁ ২. না

৪.৮ আপনার পরিবার সর্বশেষ যে বয়স্ক ব্যক্তি কে হারিয়েছেন উনার মৃত্যু কালীন বয়স কত ছিলেন? .....

৪.৯ আপনি কি শিশুর মৌলিক স্বাস্থ্যগত অনুশীলন সম্পর্কে জানেন (যেমন, স্তন্যপান, টিকাদানের সময়সূচী)? ১. হ্যাঁ ২. না

৪.১০ আপনি কি প্রাথমিক স্বাস্থ্যসেবা সম্পর্কে জানেন? ১. হ্যাঁ ২. না

৪.১১ আপনি বা আপনার পরিবারের কেউ কি কোভিড এ আক্রান্ত হয়েছিলেন? ১. হ্যাঁ ২. না

৪.১২ কোভিড পরবর্তীতে জীবনযাত্রার কি কোন পরিবর্তন হয়েছে কি? ১. হ্যাঁ ২. না

উত্তর হ্যাঁ হলে কি ধরনের পরিবর্তন .....

৪.১৩ চিত্ত বিনোদনের ধরণ (টিক চিহ্ন দিন) ১. নিয়মিত ২. অনিয়মিত

৪.১৪ চিত্ত বিনোদনের জন্য কোথায় যাওয়া হয় (টিক চিহ্ন দিন)

১. খেলার মাঠ ২. ভৈরব নদের পার ৩. শপিং মল ৪. সিনেমা হল ৫. নিল কুঠি ৬. পার্ক (নামঃ.....) ৭. অন্যান্য (উল্লেখ করুন.....)

৫। অবকাঠামোগত সুবিধাদি (Infrastructural Facilities)

সুবিধা	অবকাঠামো	বাড়ি থেকে দূরত্ব	প্রাপ্যতা ১। (কোড)	প্রাপ্যতা স্থান ২। (কোড)	সন্তুষ্টি ৩। (কোড)	সন্তুষ্টির মান খারাপ হলে সমস্যাগুলি	অবকাঠামো না থাকলে/ সন্তুষ্টির মান খারাপ হলে, অন্যান্য উপায়
৫.১ প্রাথমিক							
৫.২ হাই স্কুল							
৫.৩ কলেজ							
৫.৪ স্পেশাল স্কুল							
৫.৫ স্বাস্থ্য	ক। কমিউনিটি ক্লিনিক						
	খ। হাসপাতাল						
	গ। মাতৃ সদন						
৫.৬ বিনোদন	ক। পার্ক						
	খ। স্পোর্টস ক্লাব						
	গ। খেলার মাঠ						
	ঘ। সিনেমা হল						
৫.৭ নিরাপত্তা	ক। সি সি টিভি						
	খ। পুলিশ স্টেশন						
	গ। নিরাপত্তা চৌকি						
	ঘ। স্ট্রিট লাইট						
৫.৮ চলাচল	ক। ফুটপাত						
	খ। রাস্তা						
	গ। লেন বিভাজক						
	ঘ। স্পিড ব্রেকার/ গতি রোধক						
	ক। খাবার পানি						

৫.৯ পানির ব্যবস্থা	খ। দৈনন্দিন ব্যাবহারের পানি						
৫.১০ বিদ্যুৎ ব্যবস্থা	ক। বিদ্যুৎ						
	খ। সৌর বিদ্যুৎ						
৫.১১ পয়ঃনিষ্কাশন							
৫.১২ জ্বালানী	ক। পাইপ গ্যাস						
	খ। সিলিন্ডার গ্যাস						
	গ। কেরোসিন						
	ঘ। বায়োগ্যাস						
	ঙ। লাকড়ি						
৫.১৩ ড্রেন							
৫.১৪ বর্জ্য নিষ্কাশন							
৫.১৫ ধর্মীয়	ক। মসজিদ						
	খ। মন্দির						
	গ। গির্জা						
	ঘ। প্যাগোডা						
	ঙ। ঈদ গাহ						
	চ। কবর স্থান						
	ছ। শ্মশান						
৫.১৫ অন্যান্য	ক। কমিউনিটি সেন্টার						
	খ। পোস্ট অফিস						
	গ। বাজার						
	ঘ। শপিং সেন্টার						
	ঙ। ফায়ার সার্ভিস						
	চ। ব্যাংক						

প্রাপ্যতা ১। (কোড)		১। আছে		২। নাই	
প্রাপ্যতা স্থান ২। (কোড)		১। সরকারী	২। বেসরকারি	৩। এন জি ও	৪। অন্যান্য (উল্লেখ করুন)
সন্তুষ্টি. ৩। (কোড)	১। খুব সন্তুষ্ট	২। সন্তুষ্ট	৩। কোনটাই না	৪। অসন্তুষ্ট	৫। খুব অসন্তুষ্ট

৬। প্রাকৃতিক ও অন্যান্য দূর্যোগ (Natural and others Disaster)

৬.১ আপনার এলাকায় জলাবদ্ধতা আছে কি? (টিক চিহ্ন দিন) ১. হ্যা ২. না

৬.২ জলাবদ্ধতা থাকলে তার কারন (টিক চিহ্ন দিন) ০ঃ ১. নিচু এলাকা ২. পানি নিস্কাশনের ব্যবস্থা নেই ৩. পানি নিস্কাশন ব্যবস্থ বন্ধ ৪. অন্যান্য (উ.ক.....)

৬.৩ জলাবদ্ধতা কত সময় পর্যন্ত স্থায়ী হয় (টিক চিহ্ন দিন) ১. ০-১ ঘন্টা ২. ১-৩ ঘণ্টা ৩. ৩-৫ ঘন্টা ৪. ৫ ঘন্টার উর্ধে

৬.৪ আপনার এলাকায় আগুন লাগলে, ১) সাল..... ২) ক্ষতির পরিমান (টাকা)..... ৩) প্রযোজ্য নয়

৬.৫ এলাকার খালগুলো ভরাট হয়ে গেছে কিনা? ১. হ্যাঁ ২. না

৬.৭ এলাকায় নদীভাঙ্গন আছে কি? ১) হ্যাঁ ২) না

৬.৮ আপনার এলাকাতে কোন ধরনের জলবায়ু পরিবর্তন লক্ষ করছেন কি না? (টিক চিহ্ন দিন) ১. হ্যাঁ ২. না

৬.৯ আপনার এলাকাতে কখনও ভুমি ব্যবহারের (Land-use) পরিবর্তন হয়েছে? ১) হ্যাঁ ২) না

উত্তর হ্যাঁ হলে,

৬.১০ পরিবর্তনের ধরন (পূর্বেঃ .....) বর্তমানেঃ.....

৬.১১ কেন ভুমি ব্যবহার (Land-use) এর পরিবর্তন হয়েছে

১. দুর্যোগ (নামঃ.....) ২. অর্থনৈতিক ৩. সামাজিক ৪. অন্যান্য (উ.ক.....)

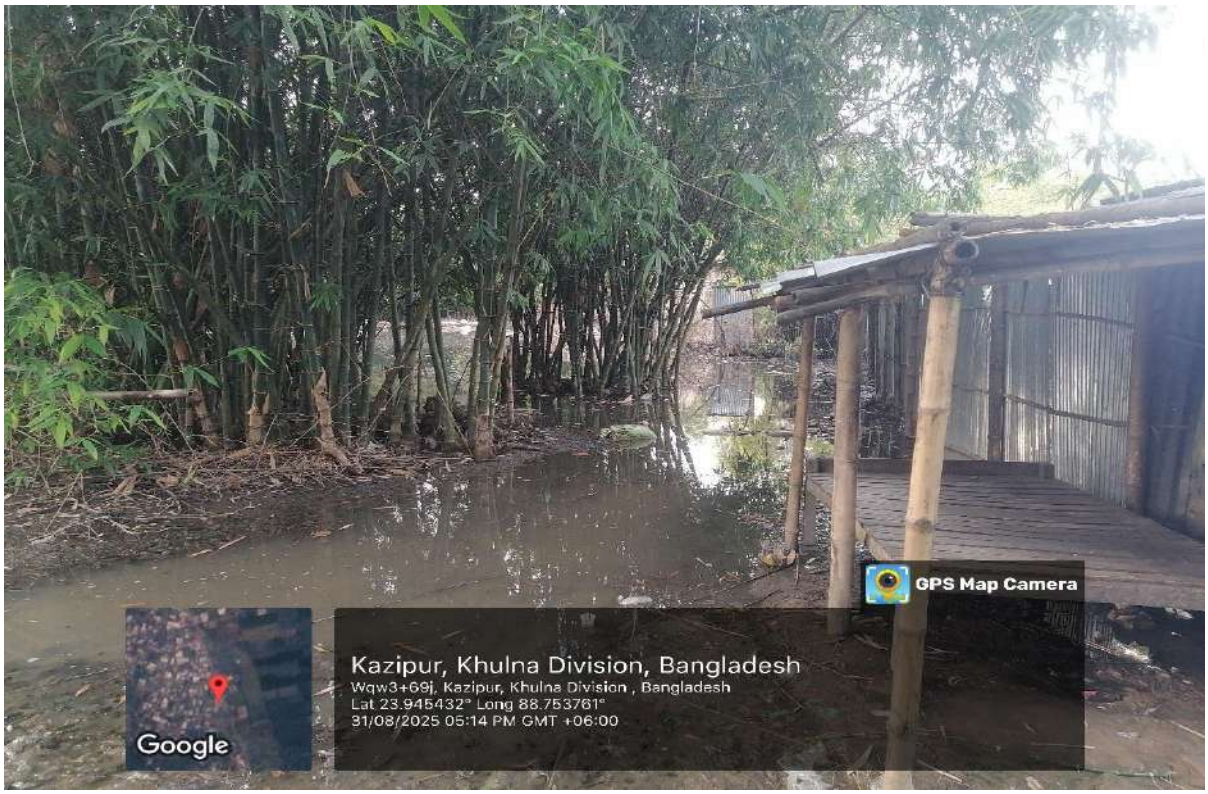
৬.১২ যদি ভুমি ব্যবহারের (Land-use) পরিবর্তন হয় তাহলে সেটা আপনি কিভাবে দেখছেন?

.....

৬.১৩ আপনি আপনার শহরের কি উন্নয়ন চান?

.....

Waterlogging Scenario of Kazipur Union




GPS Map Camera
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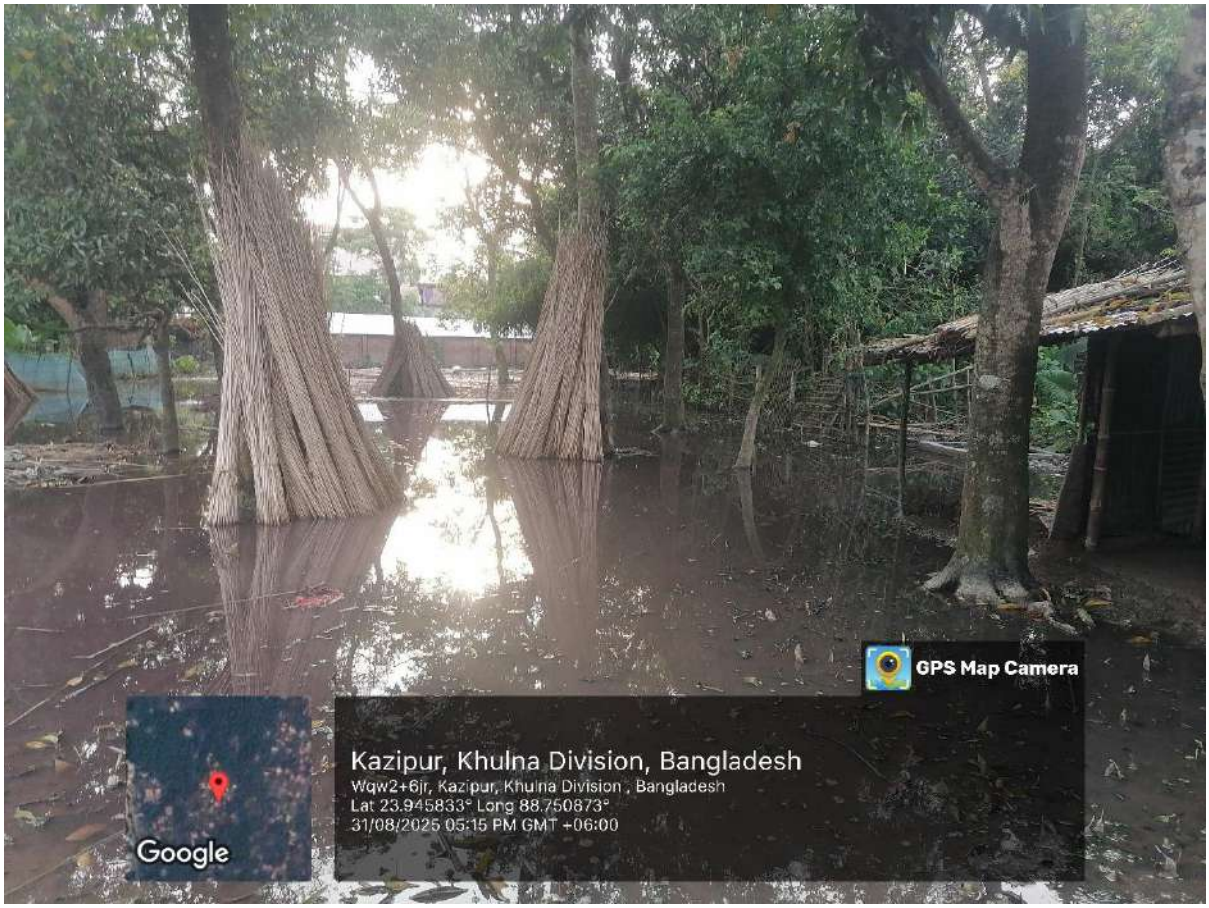
Lat 23.945663° Long 88.751606°
31/08/2025 05:15 PM GMT +06:00
Google


GPS Map Camera
Kazipur, Khulna Division, Bangladesh
Wqw2+6jr, Kazipur, Khulna Division , Bangladesh
Lat 23.945764° Long 88.751277°
31/08/2025 05:15 PM GMT +06:00
Google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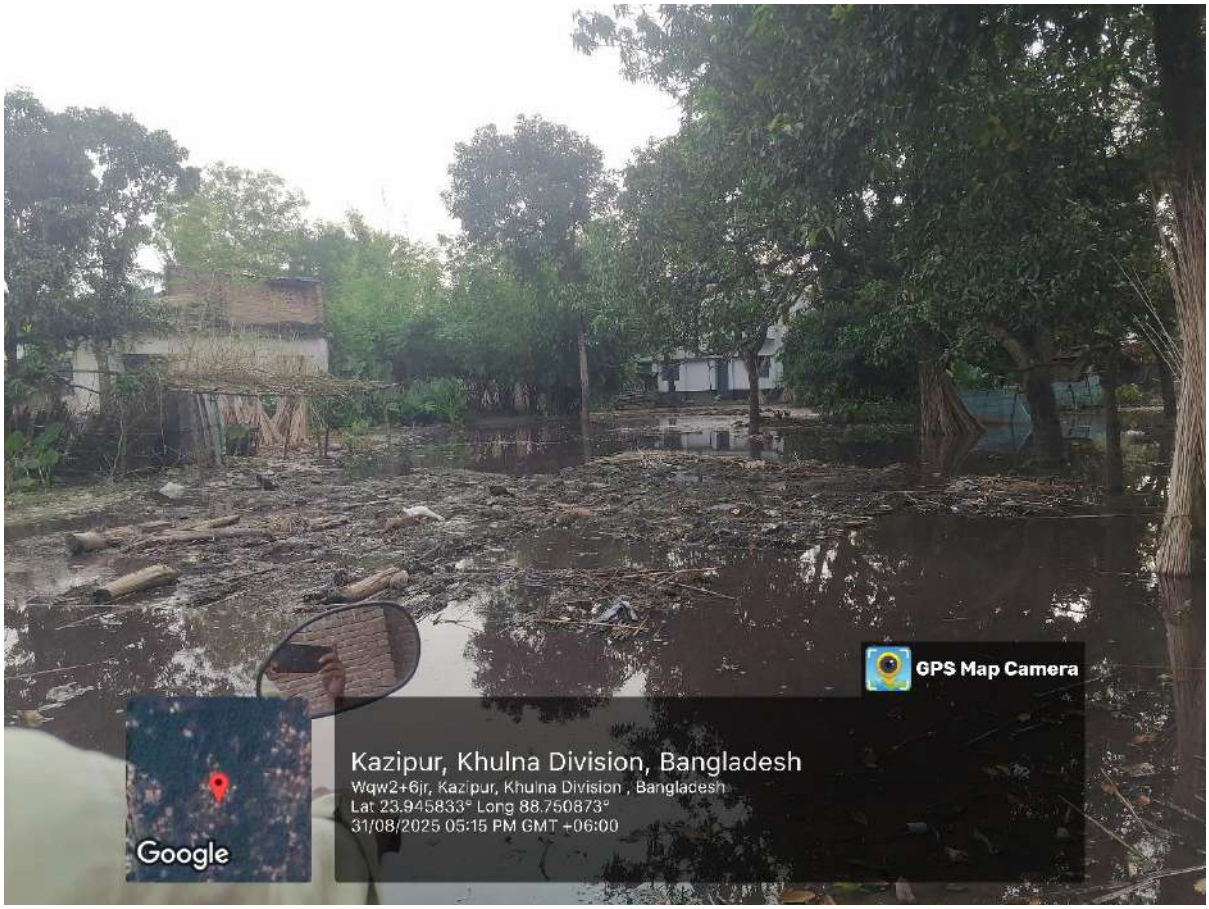
31/08/2025 05:15 PM GMT +06:00
Google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Google


GPS Map Camera
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Lat 23.946471° Long 88.749243°
31/08/2025 05:18 PM GMT +06:00
Google


GPS Map Camera
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Google


GPS Map Camera
Kazipur, Khulna Division, Bangladesh
Wqv3+w5c, Kazipur, Khulna Division , Bangladesh
Lat 23.944914° Long 88.752346°
31/08/2025 05:04 PM GMT +06:00
Google


GPS Map Camera
Kazipur, Khulna Division, Bangladesh
Wqv3+w5c, Kazipur, Khulna Division , Bangladesh
Lat 23.944906° Long 88.752321°
31/08/2025 05:04 PM GMT +06:00
Google


GPS Map Camera
Kazipur, Khulna Division, Bangladesh
Wqv3+w5c, Kazipur, Khulna Division , Bangladesh
Lat 23.944897° Long 88.752311°
31/08/2025 05:04 PM GMT +06:00
Google

Waterlogging Scenario of Haravanga Village


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqh7+r2 Washim House, Harabhanga, Khulna Division , Bangladesh
Lat 23.930085° Long 88.762426°
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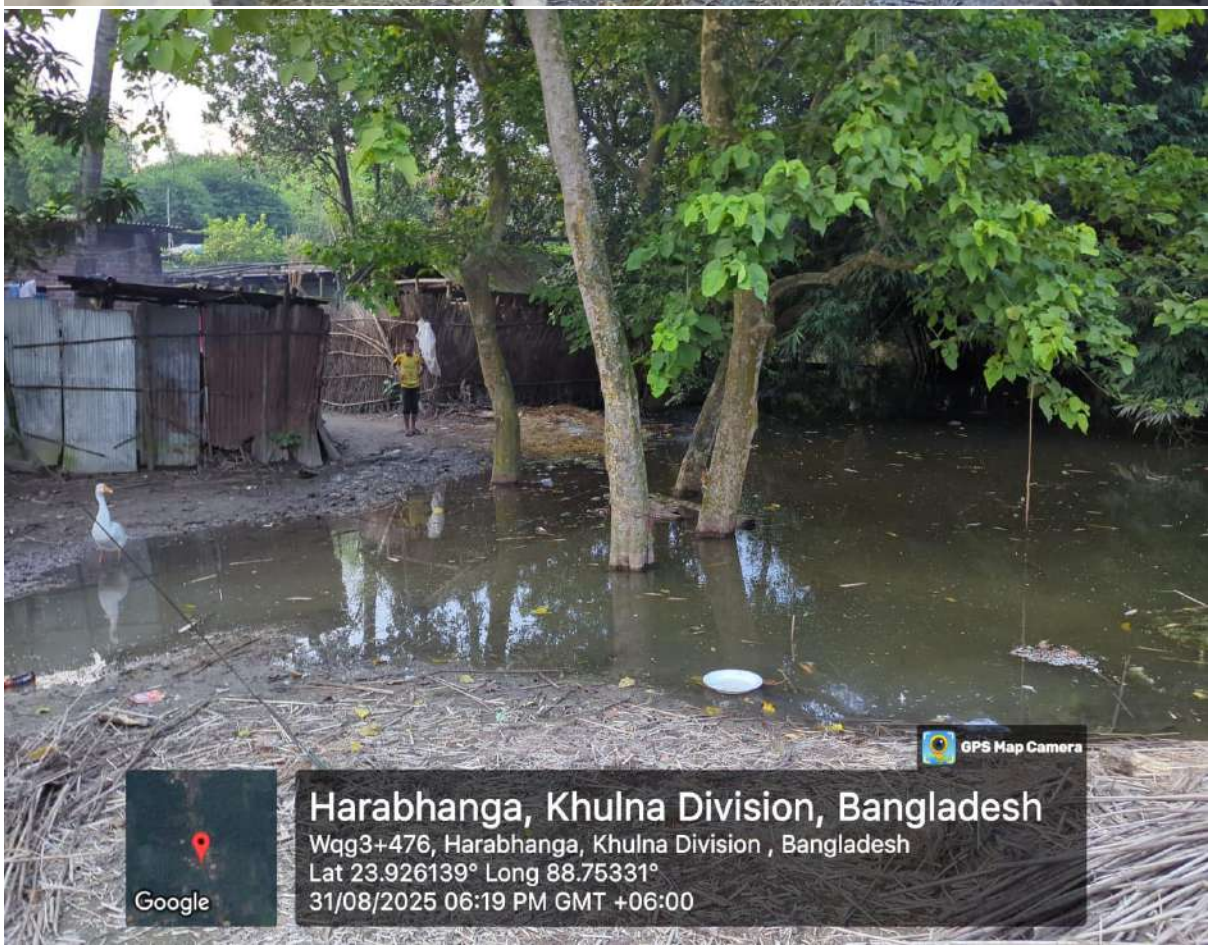
Google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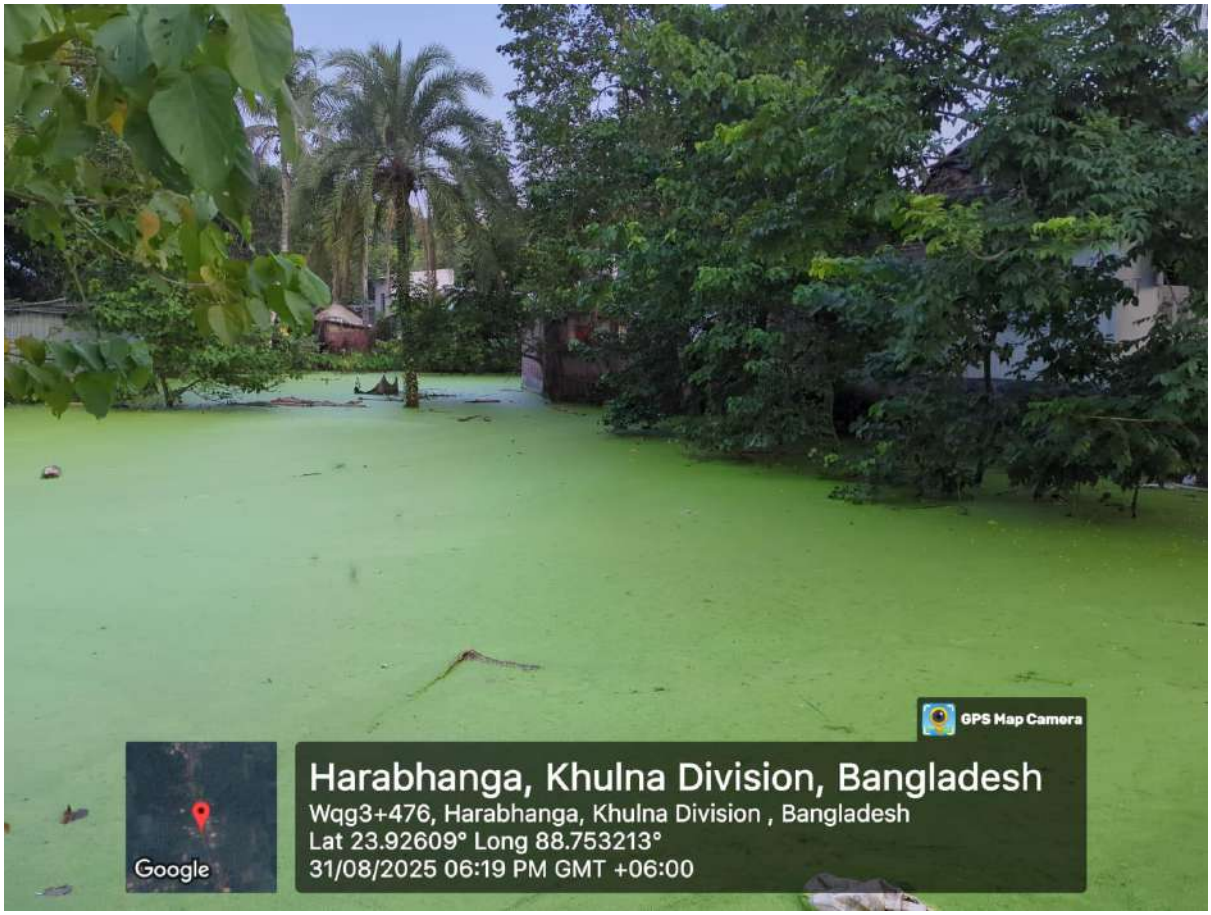
Google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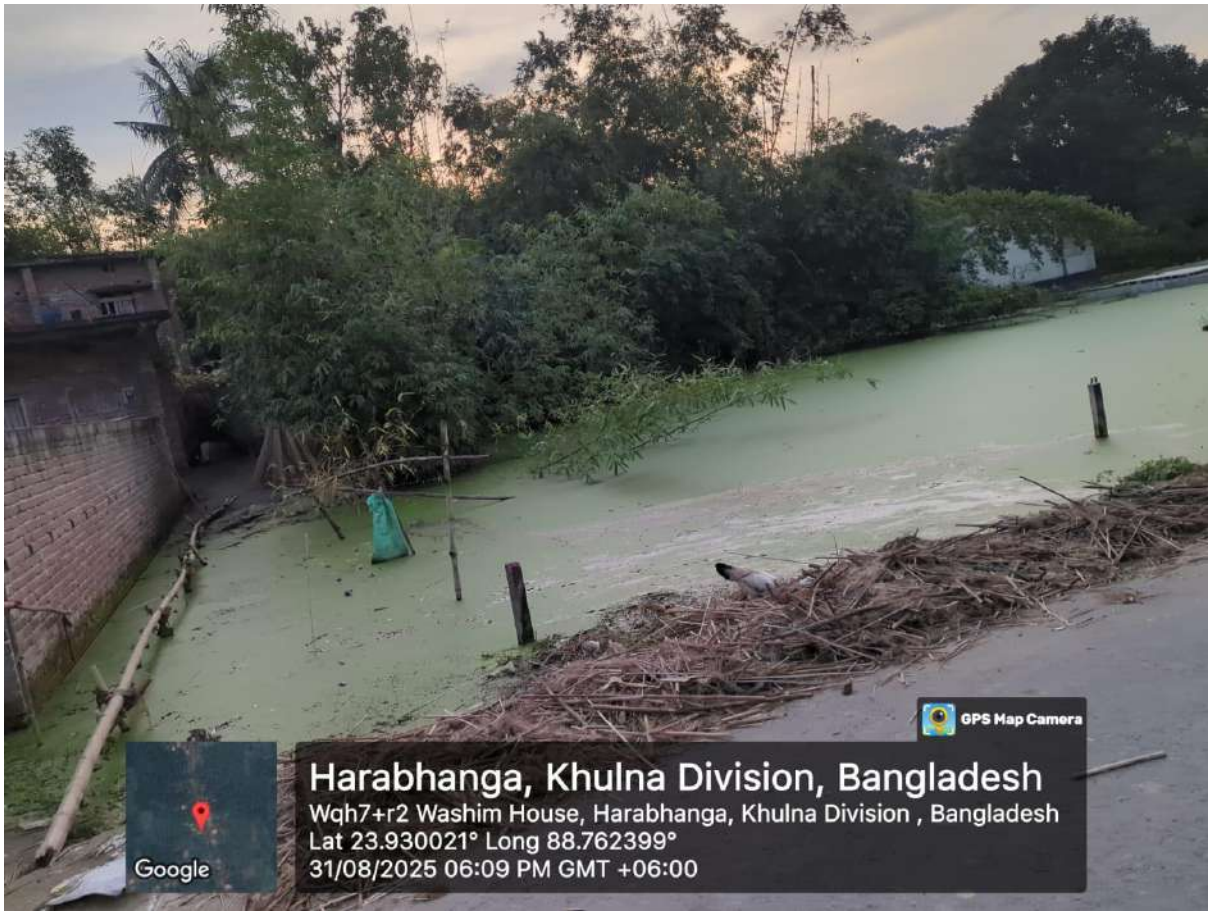
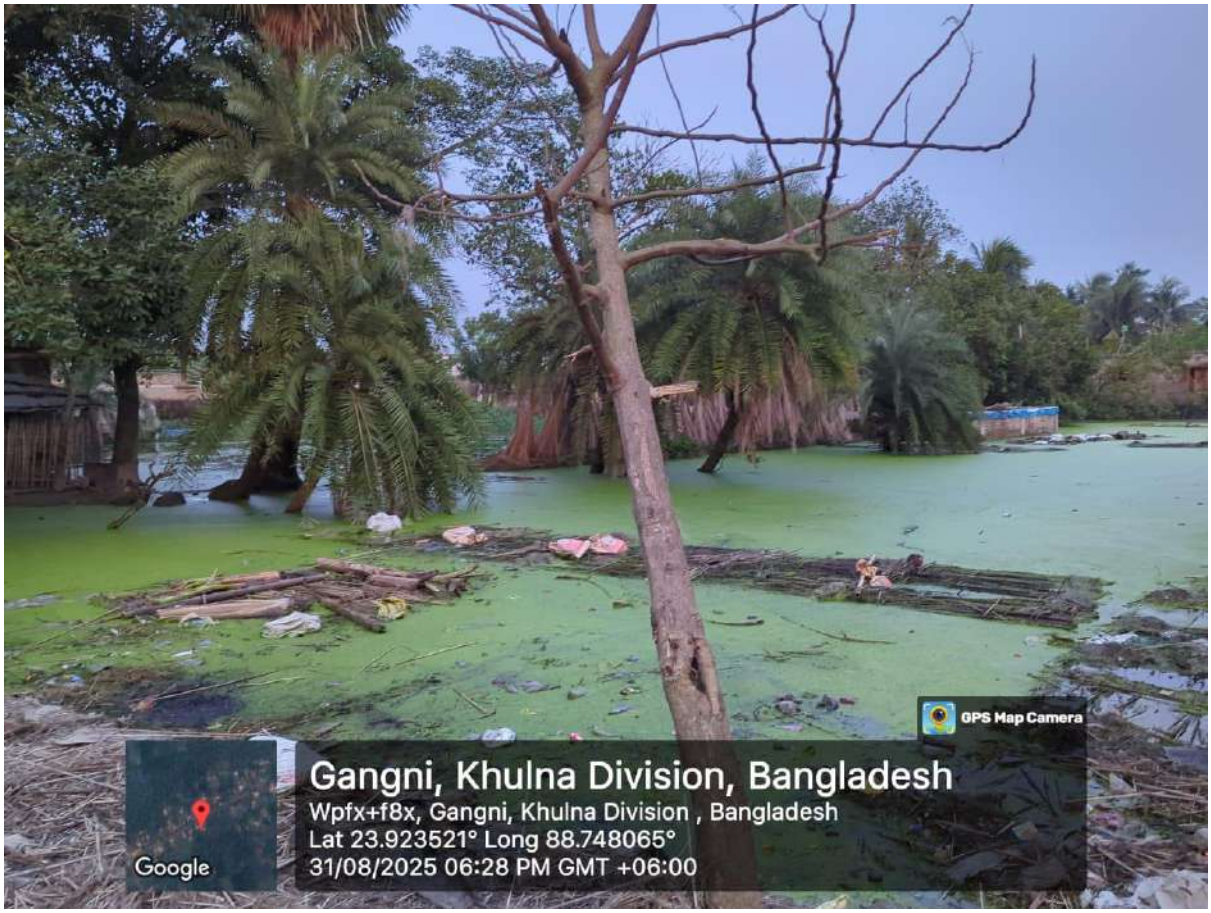
31/08/2025 06:19 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqh6+f79, Harabhanga, Khulna Division , Bangladesh
Lat 23.928912° Long 88.761467°
31/08/2025 06:15 PM GMT +06:00
Google

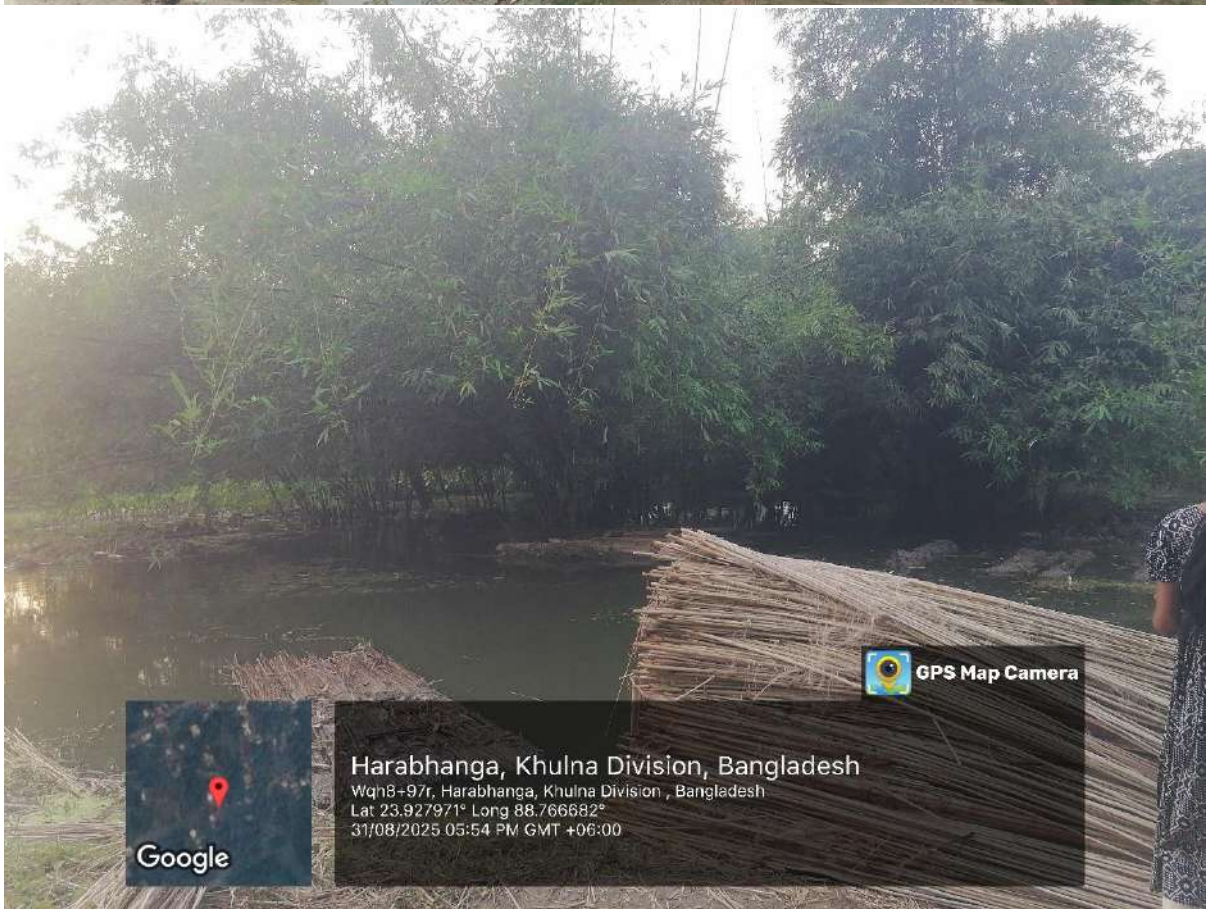

GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqg3+476, Harabhanga, Khulna Division , Bangladesh
Lat 23.926112° Long 88.753388°
31/08/2025 06:19 PM GMT +06:00
Google

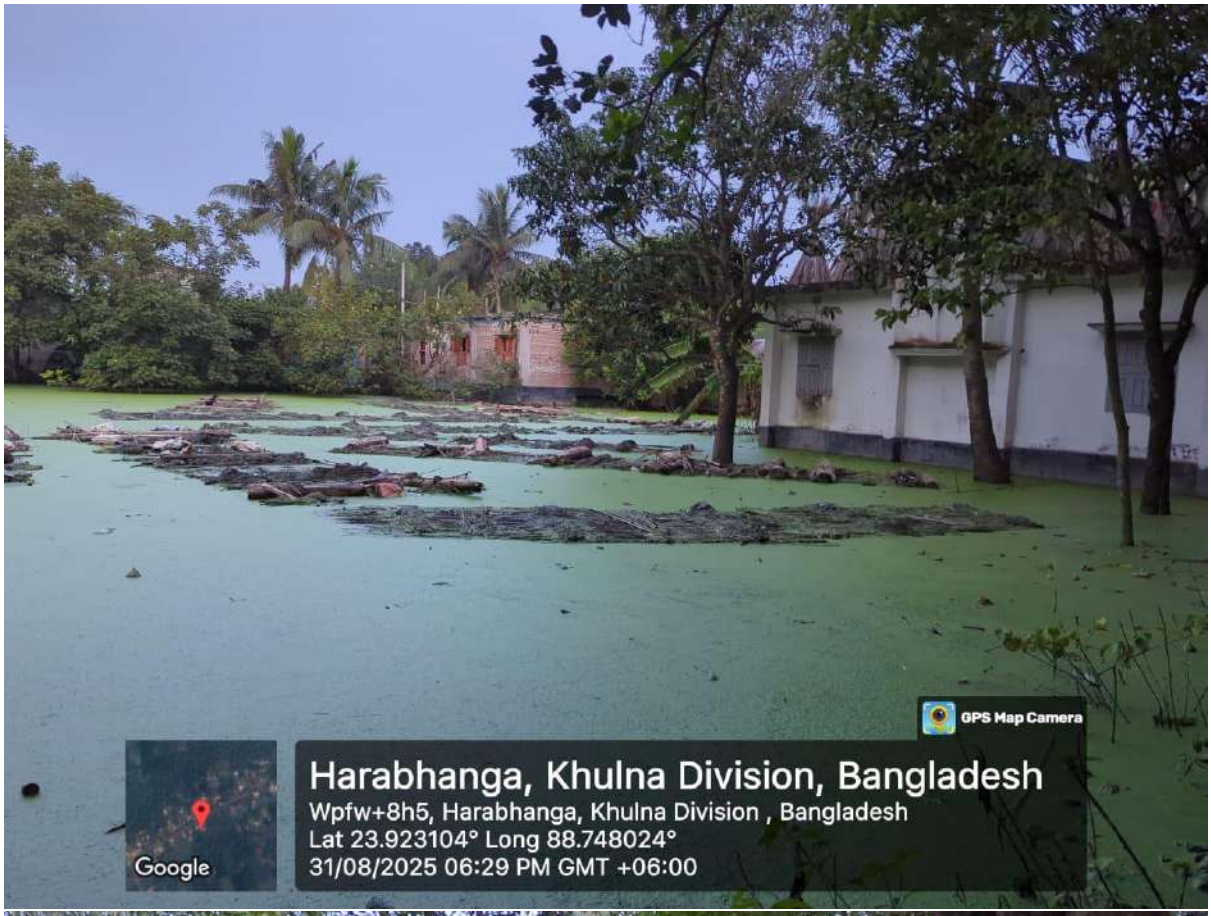

GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqh7+r2 Washim House, Harabhanga, Khulna Division , Bangladesh
Lat 23.930021° Long 88.762399°
31/08/2025 06:09 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqh7+r2 Washim House, Harabhanga, Khulna Division , Bangladesh
Lat 23.930085° Long 88.762426°
31/08/2025 06:11 PM GMT +06:00
Google


GPS Map Camera
Gangni, Khulna Division, Bangladesh
Wpfx+f8x, Gangni, Khulna Division , Bangladesh
Lat 23.923521° Long 88.748065°
31/08/2025 06:28 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqh8+97r, Harabhanga, Khulna Division , Bangladesh
Lat 23.928164° Long 88.76651°
31/08/2025 05:53 PM GMT +06:00


GPS Map Camera
Google
Harabhanga, Khulna Division, Bangladesh
Wqh8+97r, Harabhanga, Khulna Division , Bangladesh
Lat 23.927971° Long 88.766682°
31/08/2025 05:54 PM GMT +06:00

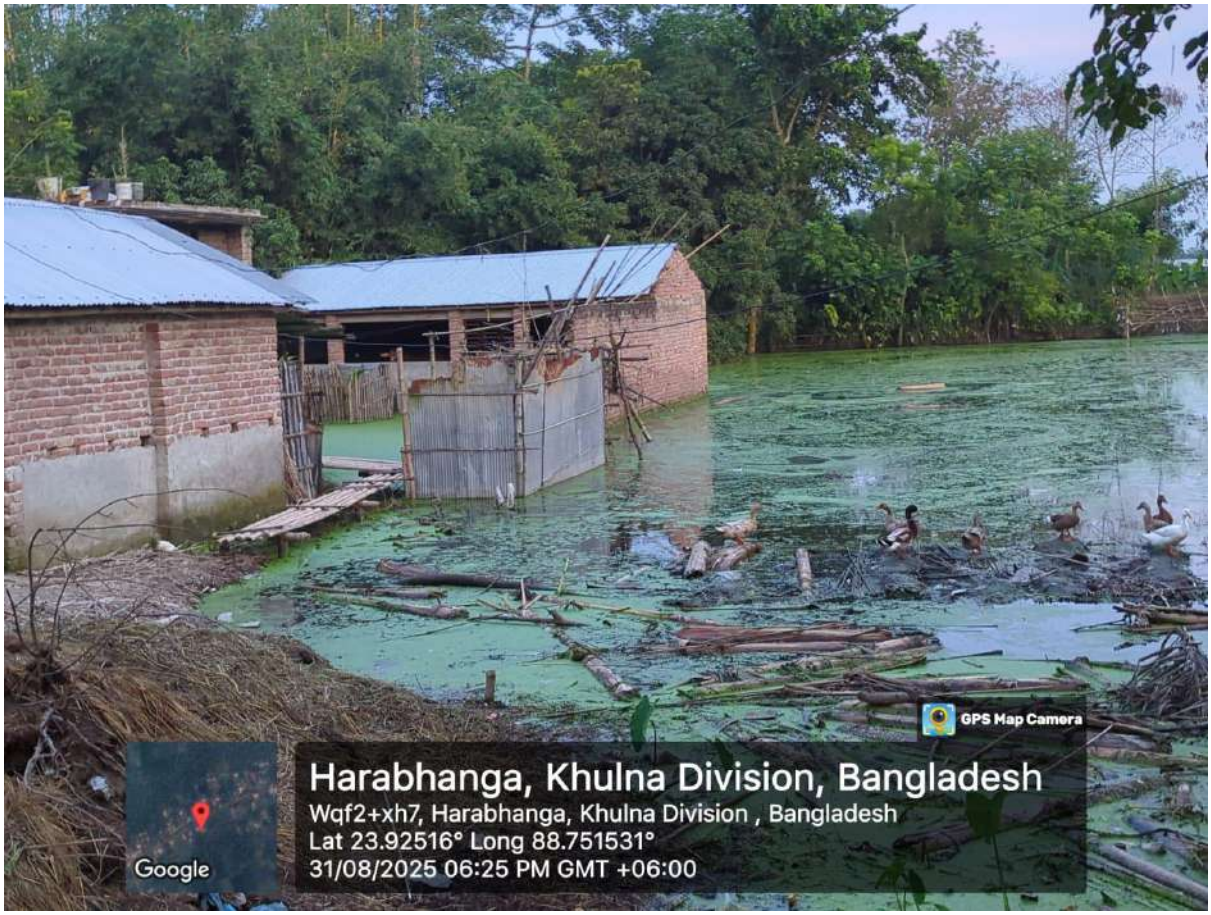

GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wpfw+8h5, Harabhanga, Khulna Division , Bangladesh
Lat 23.923104° Long 88.748024°
31/08/2025 06:29 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wpfw+8h5, Harabhanga, Khulna Division , Bangladesh
Lat 23.923362° Long 88.747867°
31/08/2025 06:28 PM GMT +06:00
Google


GPS Map Camera
Gangni, Khulna Division, Bangladesh
Wpfx+f8x, Gangni, Khulna Division , Bangladesh
Lat 23.923522° Long 88.748066°
31/08/2025 06:28 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wpfw+8h5, Harabhanga, Khulna Division , Bangladesh
Lat 23.923362° Long 88.747867°
31/08/2025 06:28 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqg3+476, Harabhanga, Khulna Division , Bangladesh
Lat 23.925985° Long 88.752377°
31/08/2025 06:22 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqf2+xh7, Harabhanga, Khulna Division , Bangladesh
Lat 23.92516° Long 88.751531°
31/08/2025 06:25 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqg3+476, Harabhanga, Khulna Division , Bangladesh
Lat 23.925976° Long 88.752386°
31/08/2025 06:22 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqg2+6wv, Harabhanga, Khulna Division , Bangladesh
Lat 23.92567° Long 88.75256°
31/08/2025 06:21 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wpfw+8h5, Harabhanga, Khulna Division , Bangladesh
Lat 23.923141° Long 88.748002°
31/08/2025 06:29 PM GMT +06:00
Google


GPS Map Camera
Harabhanga, Khulna Division, Bangladesh
Wqg2+6wv, Harabhanga, Khulna Division , Bangladesh
Lat 23.92563° Long 88.752487°
31/08/2025 06:21 PM GMT +06:00
Google


GPS Map Camera
Google
Harabhanga, Khulna Division, Bangladesh
Wqg2+6wv, Harabhanga, Khulna Division , Bangladesh
Lat 23.925782° Long 88.75276°
31/08/2025 06:20 PM GMT +06:00


GPS Map Camera
Google
Harabhanga, Khulna Division, Bangladesh
Wqg3+476, Harabhanga, Khulna Division , Bangladesh
Lat 23.926139° Long 88.75331°
31/08/2025 06:19 PM GMT +06:00


GPS Map Camera
Google
Harabhanga, Khulna Division, Bangladesh
Wqg3+jvx, Road, Harabhanga, Khulna Division , Bangladesh
Lat 23.9267° Long 88.755639°
31/08/2025 06:18 PM GMT +06:00


GPS Map Camera
Google
Harabhanga, Khulna Division, Bangladesh
Wqg2+6wv, Harabhanga, Khulna Division , Bangladesh
Lat 23.925763° Long 88.752737°
31/08/2025 06:20 PM GMT +06:00