

# Women, Children and Development

4.1 One of the six basic principles of governance laid down in the United Progressive Alliance government's National Common Minimum Programme (NCMP) is "to empower women politically, educationally, economically and legally." In the light of this, it is necessary to assess how women and children actually fared in the process of development during the Tenth Plan and what correctives need to be applied.

4.2 The Tenth Plan has set certain monitorable targets for women and children. These are:

- All children in school by 2003; all children to complete five years of schooling by 2007.
- Reduction in gender gaps in literacy and wage rates by at least 50 percent by 2007.
- Reduction of Infant Mortality Rate (IMR) to 45 per 1000 live births by 2007 and 28 by 2012.
- Reduction of Maternal Mortality Rate (MMR) to 2 per 1000 live births by 2007 and to 1 per 1000 live births by 2012.

Other objectives are:

- Arresting the decline in the child sex ratio.
- Increasing the representation of women in premier services and in Parliament.
- Universalisation of the Integrated Child Development Services (ICDS) scheme.

4.3 Though some of these targets are set for beyond the Tenth Plan, the Mid-Term

Appraisal has been conducted in the light of these targets.

4.4 The goals appear almost impossible to achieve. It took two decades to reduce the gender gap in literacy from 26.62 in 1981 to 21.69 in 2001. But the Tenth Plan envisages a reduction by 50 per cent in five years.

4.5 The burning issues relating to women and children are the adverse child sex ratio, persistently high infant, child and maternal mortality ratios, wide gender gaps in literacy and in wage rates, escalating violence against women and the rising incidence of female foeticide and infanticide.

4.6 Other important concerns are the feminisation of poverty and the exploitation of women in low paid, hazardous and insecure jobs in the unorganised sector and in the export processing or special economic zones. According to the NSS 55<sup>th</sup> Round (1999-2000), women casual workers in urban areas are more vulnerable to poverty compared to not just their male counterparts but also to workers — both female and male — in other employment categories.

4.7 The mid-term appraisal of women and child development has found glaring gaps and inconsistencies on the ground in the light of the promises made in the Tenth Plan and the NCMP. A high-powered inter-ministerial review (under the chairpersonship of the Prime Minister) of gender justice will bring the Tenth Plan back on track regarding its commitment to gender justice. Alternatively, a Prime Minister's Mission on Women, Children and Development can be considered.

## PROGRESS IN THE TENTH PLAN

### WOMEN'S PROGRAMMES

#### Swyamsidha

4.8 The Swyamsidha programme, a recast version of the Indira Mahila Yojana (IMY), organises women into self-help groups (SHGs) for income-generation activities. It also facilitates access to services such as literacy, health, non-formal education, water supply, etc. The Tenth Plan outlay for this scheme was Rs. 200 crore, which has been used for mobilising women into self-help groups (SHGs) and training them, capacity building, promotion of thrift, and access to micro-credit. The scheme, at present, covers 650 blocks (including 238 IMY blocks) and promotes 53,100 SHGs, benefiting 9,29,000 women and needs to be expanded to cover more than 6,000 blocks in the country. The target of the Department of Women and Child Development (DWCD) was to cover 2,000 additional blocks during the Tenth Plan at the rate of 400 blocks per year. However, only 650 blocks were covered up to the end of the second year of the Tenth Plan. There is no information available on the status of the SHGs already created under the scheme, and this makes it imperative that vigorous standards of evaluation be followed, especially to assess the usefulness of the scheme itself.

#### Swa-Shakti

4.9 Swa-Shakti involves the setting up of women's SHGs in rural areas, especially among farmers and agricultural labourers, and ensuring them access to credit for income-generation activities. The Tenth Plan outlay for this scheme is Rs. 75 crore and it also receives funding from the World Bank and the International Fund for Agricultural Development (IFAD). The scheme is being implemented in 57 districts of Bihar, Chhattisgarh, Gujarat, Haryana, Jharkhand, Karnataka, Madhya Pradesh, Uttar Pradesh and Uttaranchal. The target of creating SHGs has been exceeded, with 17,640 groups benefiting 3,00,000 women being formed up to 2003-04 against a target of 16,000 SHGs benefiting 2,40,000 women. However, the scheme needs to be evaluated.

4.10 Swyamsidha and Swa-Shakti are similar-sounding schemes with similar objectives. In the interest of rationalisation, therefore, these schemes need to be merged. Swa-Shakti, being externally funded, will lapse after June 2005. Other schemes like Swawlamban and Support to Training cum Employment Programme (STEP) – training programmes for women with the objective of earning a livelihood in the non-traditional and agro-based sectors respectively – can also be combined with Swyamsidha. It is imperative that these small schemes be combined into one substantial scheme for SHGs for women.

#### Rashtriya Mahila Kosh

4.11 The Rashtriya Mahila Kosh (RMK), or the National Credit Fund for Women, - was established in 1993 to extend micro-credit to SHGs. While schemes like Swyamsidha help get the SHGs started, the RMK extends credit to the SHGs. The Tenth Plan outlay for the RMK is Rs. 148 crore.

4.12 Although the RMK has been able to maintain a high recovery rate of about 90 per cent of the funds lent, it has not utilised a large proportion of available funds. It has become a regular practice to invest a major portion of its funds, considered as surplus, in interest-earning time deposits in commercial banks. Between 1 November 2002 and 15 September 2004, Rs. 79.00 crore was invested as bank deposits, whereas only Rs. 43.68 crore was sanctioned for micro-finance, out of which only Rs. 29.55 crore was disbursed. There has, thus, been a mismatch between the purpose and outcome of the scheme and remedial measures need to be taken to correct this or else further expansion of its corpus would result in undesirable parking of funds.

4.13 The RMK routes its funds through Non-Government Organisations (NGOs). Hence, there is a need to evaluate the credibility of the chosen NGOs, before the funds are committed. A committee of independent specialists in micro-finance and gender studies needs to be constituted to investigate and recommend measures to get the RMK back on stream. Experiences of how NGOs such as the Self Employed Women's Association (SEWA)

which have organised women's micro-credit, need to be taken on board.

### **Hostels For Working Women**

4.14 The Hostels for Working Women scheme aims to promote greater mobility for women in the labour market by providing safe and cheap accommodation to those from the lower income strata living away from home. The Tenth Plan outlay for this scheme is Rs. 85 crore but its utilisation during the first two years of the Plan period is unsatisfactory. During 2002-03, the utilisation was Rs. 6.00 crore against an outlay of Rs. 15.00 crore and during 2003-04 the utilisation was Rs. 5.14 crore against an outlay of Rs. 10.00 crore.

4.15 One of the reasons for this low utilisation is that NGOs are not able to avail funds due to strict norms of funding. Two factors that adversely affect implementation are slow pace of construction of hostels by the organisations to which grants have been released, and lack of suitable proposals from organisations for financial assistance.

4.16 The norms for financial assistance under the scheme discourage the NGOs, who find the cost and risk sharing unreasonable. For instance, at present 50 per cent of the cost of land (the land has to be acquired before the proposal for a government grant is submitted) and 25 per cent of the construction cost has to be borne by the NGO. During the past few years, there have been very few proposals from metropolitan cities where the need is acute, but the acquisition of land is a problem. Norms for assistance under the scheme must be changed to make it easier for the interested NGOs to avail financial assistance. It may even be necessary to overhaul the entire scheme. Public-private partnerships may be one way to go. Procedures have to be simplified now so that NGOs can access this scheme.

4.17 For adolescent girls, there is need for hostels with subsidised boarding and lodging facilities. This helps retain them in school and discourage early marriage because parents often push young girls into marriage because of lack of facilities for education.

### **Short-stay Homes**

4.18 The Short-Stay Homes Scheme provides temporary shelters for women and girls who are victims of violence whether it is domestic, work-related, or societal. A sum of Rs. 75 crore has been allocated for this scheme in the Tenth Plan in the form of grant-in-aid to the Central Social Welfare Board (CSWB). Against the target of constructing 560 short-stay homes during the Tenth Plan, only 106 have been constructed till 2003-04. The shortfall is, therefore, substantial. A total of 32 short-stay homes were constructed during 2003-04 by utilising Rs. 12.80 crore. Gross underachievement is disturbing at a time when violence against women is increasing across the country and the victims desperately need these short-stay homes as places where they can get temporary security and live with dignity until their rehabilitation is complete.

### **Swadhar**

4.19 The Swadhar scheme extends rehabilitation services to women in difficult circumstances. It provides food, shelter, clothing and care to destitute women, widows left in religious places, women survivors of natural calamities, trafficked women, women victims of political and communal violence who do not have family support or are living in difficult circumstances.

4.20 The Tenth Plan outlay for Swadhar is Rs. 100 crore. The progress under the scheme is not satisfactory. Only 35 projects have been sanctioned so far and utilisation of funds has also not been up to mark. Though the outlays were Rs.14.46 crore and 14.02 crore in 2002-03 and 2003-04 respectively, only Rs. 3.90 crore was utilised in 2002-03 and Rs. 1.05 crore in 2003-04. Such under-utilisation of funds defeats the objectives and concerns with which the scheme had been launched. This scheme needs to be reformulated to make it work. Women in difficult circumstances in "disturbed areas" like Jammu and Kashmir, the north-east and in riot or pogrom affected areas may need a reformulated Swadhar, which is compatible with adaptation to local requirements and conditions.

## CHILDREN'S PROGRAMMES

### Integrated Child Development Services and Crèches

4.21 The Integrated Child Development Services (ICDS), launched in 1975, aims at the holistic development of children up to six years of age with a special focus on children up to two years, besides expectant and nursing mothers. This is done through a package of six services – health check ups, immunisation, referral services, supplementary feeding, non-formal pre-school education and advice on health and nutrition. Up to 2003-04, ICDS had been operationalised in 5,262 blocks against the target of 5,652 blocks to be operationalised by the end of the Tenth Plan to benefit 41.5 million persons comprising 34.4 million children and about 7.1 million pregnant and lactating mothers through 6.49 lakh anganwadi centres.

4.22 The Tenth Plan outlay for ICDS is Rs. 10391.75 crore. The significance of ICDS can be gauged from the fact that 75 per cent of the DWCD's Tenth Plan outlay is earmarked for this scheme. However, the quality of implementation of the scheme varies from state to state. A comparative evaluation study conducted in 1992 by the National Institute of Public Cooperation and Child Development (NIPCCD) found the health and nutritional status of pre-school children and nursing and expectant mothers in ICDS areas much better than in non-ICDS areas.

4.23 The NCMP envisages universalisation of ICDS and anganwadi centres in each settlement. A Supreme Court order, in Writ Petition (Civil) No. 196/2001, also directs the government to increase the number of anganwadi centres to 14 lakh and to revise the cost norm of Rs. 1 per child per day for supplementary nutrition, which was fixed way back in 1991. At present, there are 6.49 lakh operational anganwadi centres. Extension of centres to each settlement will require about 14 lakh centres, which amounts to more than double of the existing number.

4.24 Given the importance of ICDS in the survival and development of children and its

centrality within the programmes of the DWCD, it merits a serious discussion, including a critique and suggestions.

- Women are both productive workers contributing to the economy as well as mothers and homemakers. There are around 106 million women (NSS 55<sup>th</sup> Round, July-June 1999-2000) in the workforce, out of which around 40-45 per cent are in the reproductive age group. Day-care support services are an essential requirement for these women. Though an estimated 30 million children under six need day-care, there are only 12,470 crèches catering to 3,12,000 children and this has remained more or less stagnant over the last three plans. The existing crèche facilities need to be expanded exponentially. This can partly be attained if the obligatory legal stipulation for provision of crèches at the place or site of work is strictly enforced. The government also has to play a major role in this.
- The ICDS programme does not have the critical component of day-care in the package of services provided, though lip service has been paid from time to time. This has prevented ICDS from achieving its objectives. For example, IMR cannot be brought down effectively without focusing on infant nutrition, but this has always remained the weakest part of the ICDS programme and is linked to the lack of day-care. Children under two years need to be fed frequently, appropriately and with loving care, which is not possible if the mother is at work. Day care could meet this need. An illustration of the lack of awareness about this is that even though anganwadi workers maintain as many as 17 records, none of these contain the occupation or the work status of the mother! One consequence of the lack of day-care is its impact on the education of the girl child, since she is made to stay home to take care of younger siblings. Another issue that

needs to be addressed is that disabled children must be encouraged to attend the crèches and crèche workers have to be trained for care of such children.

- Universalisation of ICDS, one of the goals of the NCMP, needs to be completed in five years time. Universalisation cannot and should not be interpreted merely in terms of doubling the number of centres to 14 lakh. The nature of change and quality improvement is as important. Children in the 0-14 years age group constitute 33.8 per cent of the population. A larger share of public expenditure, including investment expenditure, is required to be allocated for them.
- Lack of food security and poor nutritional status affects the physical growth, intelligence, behaviour and learning abilities of children and adolescents, especially during the development of the brain in the 0 to 3 years period. Malnutrition - understood as specific deficiencies of essential nutrients (vitamins and minerals) and prevalent in the form of goitre (inadequate intake of iodine), anaemia (iron deficiency) and vitamin A deficiency - is widespread. According to the National Family Health Survey, 1998-99, the incidence of malnutrition among children is as high as 47 per cent. Unfortunately, most states are unable to meet the supplementary nutrition component of the ICDS because of financial constraints. Food is either not available at the ICDS centres, or not in adequate quantities. A suggestion that the Centre could share the cost of supplementary nutrition in the ICDS programme could be considered. Supplementary nutrition can be supervised by women's SHGs on behalf of the panchayats. An annual cost estimate of supplementary nutrition is given in Annexure 4.1.
- One criticism of the ICDS programme relates to centres in remote areas inhabited by tribal people where the

distances are formidable and the food is inadequate. For instance, in Jharkhand, there may be one ICDS centre for a village comprising four to five tolas (settlements). The tolas may be located at a distance of two-three km from each other, making it difficult for children to reach the centre. The facilities and the provision of food are never adequate to serve all the children in the village. This variable needs to be separately addressed.

- Pre-school education for children in the three to six years age group is a weak component of ICDS. The anganwadi workers need to be trained to be able to fulfil this requirement. The 93<sup>rd</sup> amendment of the Constitution, in effect, accorded elementary education the status of a fundamental right, but left out pre-school education. The exclusion of the latter would deprive many children in the three to six age group of pre-school education, which may lead to greater school dropout rates and other problems. District-level strategies must be designed for pre-school education. In addition, the State Councils for Educational Research and Training (SCERTs) must train the anganwadi workers to meet the needs of pre-school education.
- In order to meet the Tenth Plan goals relating to reduction of IMR and MMR, there must be a good maternal and childcare clinic at every block headquarters. The medical kits and services of the anganwadi centres are inadequate to meet the clinical needs of maternal and childcare. The inherent risks of motherhood need to be recognised, the kits need to be upgraded. There may not be a strict detailed division of labour between the anganwadi workers and the auxiliary nurse midwives (ANMs) on the ground and the two need to work together in tandem so as to ensure better results in the immunisation of children and in pre-natal, neo-natal and post-natal care for mothers and infants.

- For the ICDS to achieve its objectives, an effective synergy is required between the DWCD and the Ministry of Health and Family Welfare, the Department of Education, the Department of Drinking Water Supply and other ministries/departments to meet the requirements of health, sanitation, drinking water, pre-school education, etc.
- Finally, accountability should remain with the state departments of WCD, but with increasing attempts to involve the panchayati raj institutions (PRIs) as partners.

#### STRENGTHENING DELIVERY MECHANISMS

4.25 The success of any scheme ultimately depends on the effectiveness of the delivery mechanism at the field level. Various government agencies, autonomous bodies, public enterprises, PRIs and NGOs are involved in the implementation of the different schemes/programmes for women and children. Schemes such as Swyamsidha, Swa-Shakti, and Hostels for Working Women are implemented with the involvement of all these agencies at different levels. Schemes like Swadhar and the RMK are entrusted mainly to NGOs and operate through SHGs. The involvement/participation of women in the implementation process is established through SHGs, which have proved to be an effective medium at the grass-root level for the welfare and development of women and children. SHGs managed by and involving women are also being encouraged to participate in the implementation of specific schemes.

4.26 The NGOs/voluntary agencies continue to play an active role in the implementation of schemes that supplements/complements the efforts of the government. The NGOs mobilise women into SHGs and enhance their capacity, especially under Swyamsidha, Swa-shakti and RMK. Training programmes are organised for women under Swawlamban and STEP. NGOs are also operating the Working Women Hostels, and implementing Swadhar. The PRIs can ensure transparency and strengthen social audit of the schemes by playing the role of a watchdog.

The ICDS programme, which is implemented mostly through the district/block/field-level functionaries like Child Development Project Officers, Supervisors, Anganwadi Workers and Helpers needs the direct involvement of PRIs and SHGs to mobilise children and women to avail of the services. Involvement of the PRIs and SHGs in the delivery of services like immunisation, supplementary nutrition and pre-school education at the anganwadi centres will go a long way in maximising the benefits of the ICDS programme. The PRIs can also be directly involved in mobilisation of SHGs and in promoting micro-credit activities among women.

#### FINANCIAL RESOURCE POSITION

4.27 The outlay for the Tenth Plan for the DWCD has been allocated keeping in view the priorities and commitments of the Plan. The Tenth Plan outlay for DWCD is Rs. 13,780 crore, which is 36.72 per cent higher than the Ninth Plan outlay. The details of the outlays and expenditures are given in Annexure 4.2. The data suggests that the child development programmes alone have been provided 89.65 per cent of the total Tenth Plan outlay as compared to 88.70 per cent in the Ninth Plan outlay. This is mainly because of the fact that ICDS alone gets the bulk of the total outlay of the DWCD. If the outlay provided for 2005-06 is included, the DWCD will have a projected expenditure of 67.47 per cent of the total outlay by the end of the fourth year of the Tenth Plan. The progress of expenditure in child development in the Tenth Plan has been equally satisfactory at 71.07 per cent. However, in the case of women's development, the utilisation of funds may not touch even the 50 per cent mark by the end of the fourth year of the Tenth Plan. This is disappointing in view of the commitment to the empowerment of the women. Hence, there is an urgent need for reactivating the implementation of the schemes for the socio-economic empowerment of women.

4.28 At the level of the states, the programmes of the DWCD succeed where the implementing machinery is effective and the states are able to supplement the efforts of the

Union government. Critical reviews of DWCD at the State level reveal some persistent lacunae. Some States and Union Territories are yet to set up an exclusive department/directorate for women and children, or for that matter, a State Commission for Women. So far 24 States/union territories have set up a State Commission for Women. The performance of States/Union Territories with regard to the Women's Component Plan (WCP) is, on the whole, unsatisfactory. Also, a flagship scheme like ICDS has suffered a setback because of the inability by the states to provide the funds to meet the supplementary nutrition component of the scheme.

#### OTHER AREAS OF CONCERN

##### Child Trafficking

4.29 Child trafficking is not merely confined to trafficking for commercial sexual exploitation, but can be for organ transplants, begging, entertainment (camel jockeying and circus), child labour and domestic work, drug peddling, and participation in armed conflicts, to name a few. For the vast multitude of homeless and street children, a more comprehensive policy on adoption and foster care of children must be formulated, which should be in consonance with the Convention on the Rights of the Child (CRC).

##### HIV-AIDS

4.30 There is no data indicating the extent to which children are affected by HIV/AIDS, although mother-to-child transmission is a serious problem. Also, there are instances where parents are HIV negative but children have been found to be HIV positive because of artificial insemination or use of used syringes/needles. The Naaz Foundation India Trust, an organisation that runs a care-home for HIV-positive orphaned children and abandoned women, has come across instances of children getting infected due to vaccination. Semen for artificial insemination needs to be screened for HIV. Mother-to-child transmission rates can be brought down with drug treatment, but often the drugs are not available in many hospitals. To reduce the incidence of transmission due to breast-feeding, HIV-positive

women should be provided with alternatives like soya milk for their children. Emphasis needs to be laid on well-accepted HIV/AIDS preventive measures such as the use of condoms, given multiple partner sexual behaviour. Social exclusion follows once HIV is detected. The problem of discrimination against HIV positive children while accessing public services like hospitals, schools, playgrounds, and other facilities needs to be addressed, perhaps with some special legislation.

##### Restraining Child Marriage

4.31 The Child Marriage Restraint Act of 1929 (as amended in 1949 and 1978) needs to be reviewed and amended, but this must be preceded by an investigation of contemporary trends. The problem is not so much a continuation of traditional cultural practices, but the emergence of new complex causes. These are growing insecurity of girls and increasing violence against them, adolescent pregnancy resulting from sexual ignorance and neglect, increasing drop-outs from post-primary schooling due to various reasons, and deep neglect of the physical and cultural development of girls, with no provisions for games/sports, healthy entertainment and reading facilities. The problem of ignorance among girls about how to cope with their nascent sexuality needs to be addressed by the Ministry of Human Resource Development and of Youth Affairs. These Ministries should also implement the recommendations of the 2001 Report of the Working Group on Adolescents for the Tenth Plan.

##### Protecting Girl-child Domestic Labourers

4.32 In pursuance of its mandate to suggest systemic changes, the National Commission for Women (NCW) should, among other things, suggest institutional mechanisms to prevent violence against women and girl children in several fields, for example, in girl child domestic wage labour. Classifying domestic wage labour by girl children as a hazardous occupation may help avoid their exposure to the risks of mental and physical harassment, and sexual exploitation. Such a proposal may be put before the Technical

Advisory Committee under the Child Labour Act that considers proposals to categorise any occupation as hazardous.

### WOMEN'S COMPONENT PLAN

4.33 The Women's Component Plan (WCP) involved efforts to ensure that not less than 30 per cent of funds/benefits were earmarked for women under the various schemes of the "women-related" ministries/departments. The Planning Commission and DWCD have been persuading the Central ministries and departments as well as state governments to draw up WCP, not only to quantify and earmark funds and benefits for women, but also to devise special programmes which directly and exclusively benefit women. Here it is important to note that most of the ministries and departments designated as women-related have not separately provided the women's component and hence cannot be evaluated on their WCP.

4.34 The review of the WCP of the related Central ministries and/or departments for the Tenth Plan reveals that the Department of Education has confirmed a flow of funds of 42.37 per cent of the gross budgetary support (GBS) to the WCP. The Ministry of Labour, which had reported flow of 33.5 per cent of GBS to the WCP in the Ninth Plan, has reported flow of funds of only 5 per cent of GBS during first three years of Tenth Plan. The Ministries and/or Departments of Agriculture and Cooperation, Urban Employment and Poverty Alleviation, Science and Technology/Biotechnology, Information and Broadcasting, Non-Conventional Energy Sources and Small-scale and Agro-related Industries, which had earlier reported on the WCP in their sectoral budgets, have stopped doing so. These Ministries and/or Departments are required to segregate the funds flow to WCP from the total, as was done in the Ninth Plan.

4.35 There are some Ministries and Departments, which have the potential to go beyond 30 per cent of funds under WCP as well as devise and administer "women-related" programmes. These include Education, Health,

Family Welfare, Environment and Forests, Rural Development, Agriculture, Labour, Urban Affairs, Drinking Water Supply, Tribal Affairs, Social Justice and Empowerment, and possibly others. The ministries and departments that have defaulted in providing WCP allocations or whose WCP is less than 30 per cent of GBS are advised to immediately take the necessary steps to make amends. Since WCP is merely an add-on to their existing development programmes, their inability to fulfil this requirement is inexplicable. The Tenth Plan envisaged tying up WCP and gender budgeting to "ensure both preventive and post-facto action in enabling women to receive their rightful share from all the women-related general development sectors". The reality is that women still remain largely untouched by gender-just and gender-sensitive budgets as well as WCP. This stagnation needs to be shaken up across the board.

### ASSESSING THE GENDER IMPACT OF ALL PROGRAMMES

4.36 Although, this chapter keeps referring to "women-related ministries and departments", *all* ministries and departments are "women-related". It is, therefore, recommended that every programme across all Ministries and Departments should clearly identify and disaggregate the group of intended beneficiaries or users in terms of gender. The programme should then explore the possibility of undertaking special measures to ensure the participation of women or facilitate access of the services provided to them. The gender pattern of employment generated, as a result of the programme, should be highlighted and measures taken to enhance women's recruitment. Further, in every programme, the extent to which women are decision makers should be specified and measures taken to correct gender imbalances and biases. It should then be possible to arrive at a comparative status of women before and after the programme, on the basis of which it should then be possible to suggest modifications in the programme to enhance gender sensitivity and equity.



#### TOWARDS WOMEN'S EMPOWERMENT

4.37 In keeping with the NCMP's aim of providing good governance through, among other things, the effort "to empower women politically, educationally, economically and legally", it is necessary to review the status of women in 2005. Through the NCMP, the government is bound to taking a series of measures that lead to women's equality and empowerment. An analysis of existing institutions and how to get a level playing field for women by changing institutional rules and practices is, therefore, required. As a first step, the review of laws (which is an ongoing exercise) affecting women and children needs to be accelerated and made more comprehensive.

#### Increasing Women's Participation

4.38 Women are under-represented in the process of the formulation and implementation of the Plan itself. WCP seems an afterthought, simply added on to pre-existing development programmes and projects. The actual experiences of women in empowering themselves need to be first understood and those experiences used as a benchmark.

4.39 A smooth passage for the much-delayed Women's Reservation Bill should now be ensured. To make women's grassroots political participation a living reality, they should be enabled to monitor and audit the various programmes and schemes at the level of the panchayat through a local committee. Given patriarchal domination and women's consequent lack of an independent voice in decision-making, the elected women representatives to PRIs may be restrained in independently exercising their rights and fulfilling their duties. As it is, the disincentives to political participation upon violation of the two-child norm unfairly penalises women since they may have had no choice in decisions regarding the number of offspring. At every step therefore, there is a need to increase the participation of women in the process of formulation and implementation of development planning so that gender equity

issues are accounted for and plans have a positive impact on women.

#### From Self-help Groups to Mass Organisations

4.40 The Tenth Plan emphasises SHGs only as vehicles for savings and credit. The self-help concept should be extended to cover mass-based organisations of women working to help each other. The vast majority of poor women are legitimately concerned about the lack of food, housing, potable water and employment. Their poverty also stems from the absence or paucity of such mass-based organisations and the self-confidence and knowledge that they bring to women. For instance, the Rajasthan-wide Ekal Nari Shakti Sangathan, a 16,000-strong organisation of low-income widows and separated women help each other to reclaim land rights and stop atrocities. The government can help catalyse such organisations by helping to get them registered, providing them with seed money and funding for training in legal awareness, etc. The right conditions need to be created for such organisations of women to emerge and collectively grapple with their problems. But, at the same time, women's dual areas of activity and their need to balance their productive and reproductive roles – a compounded burden which leads to intensification of their workload – should not be ignored. For example, the SHG strategy, while empowering women, has also increased their workload, rendering them more vulnerable to stress. A re-launch of a very focused and intense literacy campaign especially for adolescents and young women in the backward districts will bring these women together and hopefully catalyse women's organisations to collectively grapple with their problems.

#### MITIGATING NEGATIVE IMPACTS OF DEVELOPMENT AND DISPLACEMENT

4.41 The impact of development projects such as mega dams, uranium and open cast (coal) mining etc. on women is well documented. Exposure to pollution from uranium mining in the Jaduguda area in Jharkhand, for example, has resulted in a peculiar problem of infertility

among women, premature delivery and birth of disabled children. It must be remembered that women bear multiple burdens in the process of displacement as a result of large development projects. Not only do they have to find an alternative livelihood, but they are also expected to bear a greater responsibility to rehabilitate all the members of their household in the process of involuntary resettlement. Although environmental and social impact assessments of projects are a requirement, they should be strictly enforced as a pre requisite, with special attention to the gender fallout.

#### GENDER-SENSITIVE RESETTLEMENT AND REHABILITATION POLICY

4.42 The Tenth Plan makes a commitment regarding resettlement and rehabilitation related to large hydel and thermal power plants. The process of involuntary resettlement as a result of such large development projects often leads to loss of land, wage employment, and housing and shelter, calling for gender-sensitive plans toward land-based re-settlement, re-employment and reconstruction of houses. For instance, women should also get legal rights to land allocated as part of a resettlement package. Women's livelihood and economic activities – be they gathering forest produce, working in the fields or selling agricultural, animal husbandry, forestry or fishery produce - need to be enumerated so that the resettlement and rehabilitation plan also makes provision for the restoration of their livelihood and income. Women's views need to be solicited regarding the house, toilets, water and sanitation.

4.43 The process of displacement and involuntary resettlement also leads to increased stress, psychological trauma, increasing exposure to parasitic and vector-borne diseases and to social evils and violence. Endemic infections may lead to the death of children and the elderly in the care of women. Alcoholism, gambling and prostitution and increase in the incidence of sexual abuse and violence as a result of large-scale dislocation of peoples' lives adversely affect women in ways different from that of men. Involuntary resettlement also increases the risk that the affected household may fall into chronic food insecurity. Loss of common property resources (CPRs) like access to forests, water

bodies and grazing lands are often disregarded by planners and are not compensated for. Loss of CPRs leads to women spending more time and energy accessing fuel, fodder and potable water. Involuntary resettlement also leads to loss of social status as a result of loss of community networks and social marginalisation. Women are affected, more deeply and differently than men, because they generally have lower levels of skills and education and have a limited social exposure. Women rely on community networks for emotional and practical support, for example, taking care of the children, and thus the dislocation of community networks can be traumatic for them. Community services and assets need to be restored and social networks and communities need to be rebuilt in consultation and with the active participation of women.

4.44 The fact that the impact of dislocation is different for women needs to be understood and mitigated. Also, in drawing up resettlement and rehabilitation plans, care should be taken to see that widows, elderly persons, divorced women and women-headed households do not suffer a loss of their rights as a result of patriarchal biases. Detailed studies of the impact of development projects, say large dams, on women's lives, especially regarding resettlement and rehabilitation need to be sponsored, which can then be used to formulate a gender-sensitive resettlement and rehabilitation policy. Although the Tenth Plan makes a commitment regarding this, the issue of a gender-sensitive resettlement and rehabilitation policy has not been addressed and this deserves immediate public attention.

#### ADDRESSING CASTE

4.45 Efforts for benefiting scheduled caste/scheduled tribe (SC/ST) women and children from the "women-related" programmes remain unabated. But school dropout rates continue to remain high; children from lower castes such as the *musabar jati* in Bihar do not go to school even today. The location of schools and training centres make them inaccessible to SCs and STs because these groups are socially excluded from certain areas in the community of the village. Untouchability is still alive in many parts of the country. In Rajasthan and Gujarat, dalit children are made to sit separately in the classrooms. In

the Mid-Day meal scheme, parents of upper-caste children have protested against SC/ST women being employed to cook or serve meals. The Ministry of Human Resource Development, together with the Ministry of Social Justice and Empowerment, and with the cooperation of the states, should enforce penalties for such blatant violation of the Constitution and the Scheduled Castes and Scheduled Tribes (Prevention of Atrocities) Act, 1989.

4.46 Despite the law prohibiting manual scavenging, dry latrines still exist in many parts of the country. SC women, working as manual scavengers, are the worst sufferers. They are not provided protective gear and carry the night soil as head-loads, thus getting exposed to the risk of infectious diseases. Though the malaise is visible, the corrective measures are not. The Ministry of Social Justice and Empowerment should hold itself accountable for this condition and present an action taken report before the 2005-06 Union Budget is approved.

#### ADDRESSING MATERNAL HEALTHCARE

4.47 Failure to meet the target of reducing MMR has brought the problem of maternal healthcare to the forefront. Enhancing the quality of maternal health services, among other measures, through appropriate training of the ANM is essential. Training in mid-wifery is critical in rural India where most births take place at home rather than in institutional settings. Pregnant rural women are caught in a bind between the poor quality of public health service delivery on the one hand, and the lack of indigenous expertise to cope with obstetric complications on the other. What the Ministry of Health and Family Welfare needs to do has been developed as the new paradigm for health in the chapter on Health and Family Welfare.

#### THE GIRLCHILD'S DWINDLING NUMBERS

4.48 The high incidence of female foeticide throws up the most disturbing figures. Sex determination before birth is widely prevalent, in spite of the Pre-Natal Diagnostic Techniques

(PNDT) Act, 1994. Certain districts in Punjab and Haryana account for a substantial drop in the decennial child sex ratio. Richer districts tend to account for a larger decline in the child sex ratio. For instance, the South Delhi district has one of the highest records of the decline in the child sex ratio. The incidence of the use of sex determination techniques tends to be more in the most modern and developed districts. This calls into question the argument that the market economy undermines patriarchal authoritarian and male-biased traditional attitudes and spreads egalitarian values. Policy has to address the concern that inculcation of the values of market economy seems to be only enhancing gender inequity as reflected in the female foeticide and infanticide indicators. The Ministry of Home Affairs, in consultation with the states, must stringently implement the PNDT Act to stop any further decline in the child sex ratio.

4.49 There are two important issues of policy associated with this decline in the child sex ratio. One is the obsession with population control, which assumes that all the failures in development can be mono-causally linked to population explosion. The other more recent issue is the intrusion of the two-child norm into the Panchayati Raj Acts of many states, despite its absence from the Population Policy of 2000, leading to disqualification of many elected representatives. Most of the excluded belong to the SCs and STs.\* Some experts have suggested a link between the imposition of the two-child norm and sex selective abortions. Imposition of the two-child norm, then, cannot be the route to population stabilisation, for it may lead to a disturbingly unbalanced population. The reworded sentence in NCMP stating that population stabilisation would be achieved by strengthening primary health care focuses on reducing infant, child and maternal mortality. This philosophy needs to underpin all schemes and all programmes. The Centre, should, therefore urge the chief ministers of the state governments that are implementing coercive population control programmes to immediately withdraw the programme.

\* Thorat, Sukhdeo [2001] "Strategy of Disincentive and Targeting for Population Control – Implication for Dalits and Tribals", Professor of Economics, Center for the Study of Regional Development, Jawaharlal Nehru University, New Delhi. Paper presented in *Colloquium on Population Policies*, organised by Singamma Sreenivasan Foundation, Bangalore & Center for Social Medicine & Community Health, Jawaharlal Nehru University, New Delhi, April 20-21, 2001.

## THE WAY FORWARD

- Expand the day care/crèche services by integrating them into ICDS. These services are essential requirements not only for children below two years age but also for working mothers.
- Complete the universalisation of the ICDS in a time-bound manner. Redesign the scheme to ensure qualitative improvement in the services delivered.
- Provide supplementary nutrition to all children under ICDS. Amend the funding pattern so that the cost of supplementary nutrition is shared by the Central government.
- Strengthen the pre-school education component of ICDS in order to ensure smooth transit of children in the three to six years age group to formal education. Anganwadi workers need to be trained accordingly.
- Formulate and implement sector-specific WCP and gender budgeting in order to ensure gender justice. All ministries/departments should strictly adhere to the plans. Develop a mechanism for regular assessment of the gender impact of all programmes.
- Launch a focused and intense literacy campaign for adolescent girls and young women, especially in the backward districts, in order to bring them together and further catalyse women's organisations towards empowering them with knowledge and political standing.
- Formulate a gender-sensitive resettlement and rehabilitation policy, especially to safeguard the interests of widows, elderly and divorced women plus female-headed households in instances of natural or man-made calamities and displacement.
- Undertake a high-powered inter-ministerial review (under the chairpersonship of the Prime Minister) of gender justice in order to bring the Tenth Plan back on track regarding its commitment to gender justice. Alternatively, consider a Prime Minister's Mission on Women, Children and Development.

Annexure 4.1

Annual cost estimate of supplementary nutrition in the Integrated Child Development Services (ICDS) – at present and at universalisation (a national common minimum programme goal)

AT PRESENT

CHILD/WOMAN	BASIS OF CALCULATION	ANNUAL COST ESTIMATE
Children, 0-6 years	Suppl. nutrition at Rs. 2 per child per day x 300 days x 379.94 lakh children	Rs. 2279.6 crore
Pregnant and lactating women	Suppl. nutrition at Rs. 2.30 p. per woman per day x 300 days x 76.17 lakh women	Rs. 525.6 crore
	<b>TOTAL</b>	<b>Rs. 2805.2 crore</b>

AT UNIVERSALISATION IN FIVE YEARS TIME (AN NCMP GOAL)

CHILD/WOMAN	BASIS OF CALCULATION	ANNUAL COST ESTIMATE
Children, 0-6 years	Suppl. nutrition at Rs. 2 per child per day x 300 days x 84.41 million children*	Rs. 5064.6 crore
Pregnant and lactating women	Suppl. nutrition at Rs. 2.30 p. per woman per day x 300 days x 16.9 million women#	Rs. 1166.1 crore
	<b>TOTAL</b>	<b>Rs. 6230.7 crore</b>

\* The number of children in the 0-6 years age group as per the 2001 census is 168.82 million. With universalisation, we assume that half of this number, i.e., 84.41 million will be attending the ICDS centres, roughly the number of children suffering malnutrition.

# A ratio of 5:1 of children to women attending ICDS centres has been assumed.

## Annexure 4.2

## Sub -Sector-wise Outlays and Expenditure of the Department of Women and Child Development During Ninth &amp; Tenth Plans

(Rs. in Crore at 2001-02 constant prices)

Sl. No.	Sub-sector	Ninth Plan				Tenth Plan			Annual Plans								
		(1997-2002)				(2002-07)			(2002-03)		(2003-04)		(2004-05)		(2005-06)	Total (2002-06)	
		Outlay	%age to Total	Expenditure	%age to Outlay	Outlay	%age Increase over 9th Plan	%age to Total	BE	Actual	BE	Actual	BE	RE	Outlay	Total (Col. 9+11+13+14)	%age to Tenth Plan
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
a.	Welfare & Development of Children	8940.50	88.70	6245.51	69.86	12353.87	38.18	89.65	1942.26	1882.96	2245.25	1805.67	1944.42	1965.19	3125.83	8779.65	71.07
	Central Schemes (CS)	508.71	5.05	198.65	39.05	107.00	-78.97	0.78	17.55	9.64	24.30	9.71	33.07	20.21	30.74	70.31	65.71
	Centrally Sponsored Schemes(CSS)	8431.78	83.65	6046.86	71.72	12246.87	45.25	88.87	1924.71	1873.32	2220.95	1795.96	1911.35	1944.97	3095.10	8709.35	71.11
b.	Welfare & Development of Women	1091.92	10.83	456.68	41.82	1221.10	11.83	8.86	163.79	120.92	175.27	107.62	150.79	134.33	110.81	473.67	38.79
	Central Schemes (CS)	746.15	7.40	409.99	54.95	946.10	26.80	6.87	120.40	89.32	119.18	84.27	111.11	100.51	89.81	363.92	38.46
	Centrally Sponsored Schemes(CSS)	345.77	3.43	46.69	13.50	275.00	-20.47	2.00	43.39	31.59	56.09	23.35	39.68	33.82	21.00	109.76	39.91
c.	Grant-in-Aid and Other Schemes	46.84	0.46	23.49	50.15	205.03	337.68	1.49	15.46	4.80	9.84	4.81	21.19	16.89	17.99	44.49	21.70
	Central Schemes (CS)	46.84	0.46	23.49	50.15	105.01	124.17	0.76	14.48	4.80	9.81	4.81	21.16	16.89	17.96	44.47	42.35
	Centrally Sponsored Schemes(CSS)					100.02		0.73	0.97	0.00	0.03	0.00	0.03	0.00	0.03	0.03	0.03
	Total (CS)	1301.70	12.91	632.13	48.56	1158.11	-11.03	8.40	152.43	103.77	153.30	98.79	165.34	137.61	138.52	478.69	41.33
	Total (CSS)	8777.56	87.09	6093.56	69.42	12621.89	43.80	91.60	1969.07	1904.91	2277.06	1819.31	1951.06	1978.79	3116.12	8819.13	69.87
	<b>Grand Total (CS+CSS)</b>	10079.26	100.0	6725.69	66.73	13780.00	36.72	100.0	2121.50	2008.68	2430.36	1918.11	2116.40	2116.40	3254.63	9297.82	67.47