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Classroom Study Material

**SOCIAL ISSUES**

October 2016 – June 2017

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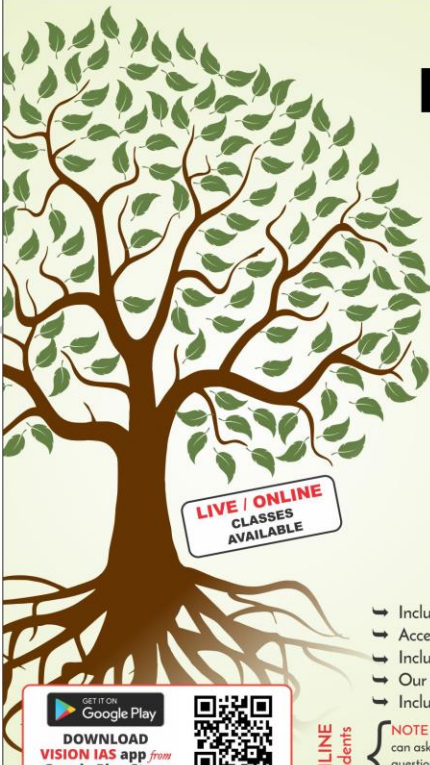
# GS PRELIM cum MAINS 2018

Approach is to build fundamental concepts and analytical ability in students to enable them to answer questions of Preliminary as well as Mains examination

**DELHI**

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# 1. ISSUES RELATED TO VULNERABLE SECTIONS

## 1.1. ISSUES RELATED TO WOMEN

### 1.1.1. WORKING WOMEN ISSUES

#### 1.1.1.1. MATERNITY BENEFIT

##### Why in news?

- The **Maternity Benefit (Amendment) Act, 2017** was recently notified by government which amended some of the provisions related to the duration and applicability of maternity leave, and other facilities in the Maternity Benefit Act, 1961.

##### Key Features of the Act

- The act is **applicable to all establishments employing 10 or more persons.**
- **Duration of maternity leave:** The Act states that every woman will be entitled to maternity benefit of 12 weeks. **The amended act increases this to 26 weeks.**
- Under the Act, this maternity benefit should not be availed before six weeks from the date of expected delivery. **The amendment changes this to eight weeks.**
- In case of a woman who has **two or more children**, the **maternity benefit will continue to be 12 weeks**, which **cannot be availed before six weeks from the date of the expected delivery.**
- **Maternity leave for adoptive and commissioning mothers:** The amendment introduces a provision to grant 12 weeks of maternity leave to:
  - ✓ a woman who legally adopts a child below three months of age
  - ✓ a commissioning mother. A commissioning mother is defined as a biological mother who uses her egg to create an embryo implanted in another woman.
- **Option to work from home:** an employer may permit a woman to work from home even after the leave period.
- **Crèche facilities:** it is a mandatory provision requiring every establishment with 50 or more employees to provide crèche facilities within a prescribed distance.
- **Informing women employees of the right to maternity leave:** every establishment to intimate a woman at the time of her appointment of the maternity benefits available to her.

##### *Why maternity leaves are important?*

- Six month of breastfeeding is important for the infant to develop immunity against diseases. This step will lower the infant mortality rate.
- Also WHO and the Union ministry of health and family welfare guidelines emphasize that a baby needs to be nursed by its mother for a minimum of six months.
- Article 42 of the Constitution guarantees maternity benefits to all working women.

##### Critical appraisal of the amended Act

##### Pros

- The amendment provides a maternity leave of 26 weeks which exceeds ILO's minimum standard of 14 weeks. It will improve India's ranking in terms of the number of weeks for maternity leave.
- The amendments will help 18 lakh women workforce in organised sector.

- They also help women devote time to take care of their babies and enable an increase in the women's labour force participation (WLFPR) rate in India. As **absence of adequate maternity leave and income security** is one of the reasons for women dropping out of the labour force, this will provide protection to women.
- The increase in maternity leave as mandated by law from 12 weeks to 26 would help new mothers bond with their babies and also to enable them to breastfeed leading to enhanced nutrition and immunity for the child.

### Cons

- The amendment recognizes mothers as primary care giver and ignores role of father in childcare. Thus, it perpetuates **gender role stereotypes** i.e. fathers don't need to spend time with new-born. Also it is silent on paternity leave issue.
- As the amendment excludes the men, it may lead employers to pay men more than the women due to different work conditions. It weakens the directive "equal pay for equal work" enshrined in the constitution.
- The amendment ignores single father or transgender who might want to adopt a child.
- The amendment may deter employers from hiring female work force, thus making **women less desirable** as male employees in free market enterprises, perpetuating gender gap in employment.
- Increasing maternity leave from 12 to 26 weeks **could have an adverse impact on the job opportunities** available for women as the amendment requires **the employer to pay full wages during maternity leave**. It could increase costs for employers and result in a preference for hiring male workers.

### Challenges Ahead

- Smaller companies may struggle to meet the increased financial burden of providing longer paid maternity leave.
- The provisions are limited to the organised sector, thus benefitting less than a quarter of working women.
- The women on leave may spend more time on domestic work than nurturing the child defeating the purpose of the amendment.
- Due to longer leaves women will lose touch with work-related developments and will lag behind their colleagues after they resume work.

### Way forward

- **Singapore Model:** the concern that the financial burden will deter employers to hire young married women can be solved by

#### Worldwide practices

- Parents in Britain are eligible to share 12 months of leave after the birth of a child.
- In Asia, Japan offers a year's unpaid leave to each parent. South Korea allows both parents partially paid parental leave for up to one year.
- In Europe, new mothers mostly get between 14 and 22 weeks of paid leave.

#### Paternity leave

- Paternity leave, along the lines of maternity leave, is the paid or unpaid leave given to male employees when they become a parent.
- In India, Public sector grants 15 days of paternity leave while there is no law on paternity leave in the private sector.

#### Importance

- Involvement of both parents becomes crucial in the wake of increasing number of nuclear families.
- Would lead to changes in the relationship and perception of parenting roles.
- Would lead to a gender balanced approach towards care giving and unpaid work.
- May reduce women taking career break due to pregnancy.

#### Challenges

- Lack of awareness and understanding of the importance of paternity leave.
- Could be misused by the employees
- Embarrassment associated with availing paternity leave for men.

adopting this model. In Singapore, **women in the city-state get 16 weeks of maternity leave with the employer paying for eight weeks and the next eight reimbursed to the employer by the government.**

- The role of father in childcare should not be ignored. To ensure equality in employment **amendment should extend to both the parents.** They can share the leaves as it is done in other countries across the world.
- The amendment **should also extend to women working in unorganized sector.**
- Employer should offer **light workload, flexible or reduced working hours, and work from home facility for the first few weeks after the woman resumes work.** This will give them time to pick the pace without getting discouraged after they resume the work.

### 1.1.1.2. LOW LFPR

#### Findings

- **International Monetary Fund working paper:** India has one of the lowest female labour force participation (FLFP) rates among emerging markets and developing countries.
- FLFP is typically measured as the share of women who are employed or are seeking work as a share of the working-age female population.
- Women's participation in the workforce is skewed towards certain sectors. For example
  - ✓ **Unorganised sector** - Ninety percent of Indian workers are employed in the unorganized sector, where not only are wages for women lower, but the inability to provide flexibility, childcare benefits and maternity leaves creates disincentives for women to seek work outside the home.
  - ✓ **Manufacturing and services** - account for just 18 per cent of rural employment for women.
  - ✓ **Agriculture** - dominates at 75 per cent.
  - ✓ **Blue collar jobs** - Women are losing blue collar jobs while gaining white collar ones.

#### Census 2011

- A total of 20.5% women were employed in the organized sector in 2011 with 18.1% working in the public sector and 24.3% in the private.
- The labour force participation rate for women across all age groups was 25.3 in rural sector and 15.5 in urban sector compared with 55.3 and 56.3 for men in the rural and urban sector respectively.

#### Reasons for low labour force participation

- **Increased income of men** - As men in the family start earning more income, women tend to cut back their work in the formal economy to concentrate more on household activities.
- **Caste factor** - In some communities, notably some upper castes, there may be a stigma attached to women working outside the home – especially if it involves work considered 'menial'. It increases family and societal pressures to drop out if the men in the household are earning enough to foot the bills.
- **Safety issues & Harassment at work place** - Women are more vulnerable to exploitation and harassment at work in developing countries like India. They are also unable to effectively fight against harassment.
- Increasing number of **women of working age are enrolling in secondary schools.**
- The **nature of economic growth** in the country has meant that jobs were not created in large numbers in sectors that could readily absorb women, especially for those in rural areas.

### How to bring more women into the workforce?

- Bridging gender gaps in secondary and tertiary education.
- Creating employment opportunities in male dominated sectors.
- Ensuring skill training for women in key sectors.
- Increasing the reach of the financial sector in order to provide services to the women entrepreneurs better.
- Promoting gender diversity policies and practices in private sector organisations
- Strengthening legal provisions for women and the enforcement of these laws
- Addressing infrastructure issues.
- Reshaping societal attitudes and beliefs about women participation in the labour force.
- Reservation can be provided to women in formal sector as provided in Bihar for state government jobs.

### 1.1.1.3. WAGE DISPARITY

#### Why In news

Recently released **Salary Index Report of online service provider Monster** highlights gender pay gap in India.

#### Findings of the Report

- Gender pay gap is as high as 27%.
- Men earned a median gross hourly salary of Rs. 288.68, while women earned Rs. 207.85.
- Sector-wise analysis
  - ✓ Gender pay gap was highest in manufacturing sector (34.9 per cent)
  - ✓ Lowest in the BFSI and Transport, logistics, communication, equally standing at 17.7%
  - ✓ IT services sector has a huge gender pay gap of 34 per cent.



Image : The Hindu

#### Reasons Behind Gender Pay Gap

- Preference for male employees over female employees
- Preference for promotion of male employees to supervisory positions
- **Career breaks** of women due to **parenthood duties and other socio-cultural factors.**
- **Lack of flexible work policies or extended leave**
- **Lack of opportunities in male dominated sectors** - Lack of involvement of women in male dominated sectors for example armed forces.
- Care work by women is undervalued as it is seen as their natural attribute rather than a skill.
  - Glass ceiling effect** faced by women, that is, they face an invisible barrier that prevents them from reaching to higher positions in an organisation.

#### Way forward

- Three powerful accelerators such as digital fluency, career strategy, and tech immersion may help women close the pay gap

- Strong labour market institutions & policies such as collective bargaining & minimum wages may also lower wage gap

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#### 1.1.1.4. WOMEN IN COMBAT ROLE

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##### Why in news?

Recently, India has announced that women will be allowed to occupy combat roles in all sections of its army, navy and air force, indicating a radical move to gender parity in one of the world's most-male dominated professions. This is in line with the gradual induction of women in combat roles in armed forces across the globe- be it United States or Israel.

##### Concerns

- Concerns relating to safety and ensuring dignity of women in the forces. Male-domination in the forces including the composition of armed forces tribunals raise apprehensions over proper treatment of cases relating to sexual harassment.
- Concerns over women's vulnerability on capture and over their physical and mental ability to cope with the stress of frontline deployments.
- It should not be a political gimmick to flaunt sexual equality. Women should be given recognition for their competence so that they have job satisfaction in the services. This would propel them to work hard and also silence the critics.

##### Rationale for the decision

- The policy of composition of army should be driven by single factor of 'ensuring security of the country'. They need the best and fittest people regardless of gender. So the resource pool should not be limited to half of the population by putting a blanket ban on women.
- Landscape of modern warfare itself has changed with more sophisticated weapons, greater focus on intelligence gathering and emergence of cyberspace as arenas of combat. Brute force, often cited as a reason for non-inclusion of women, is less necessary today.
- Modular training for specific assignments can be imparted to women to overcome perceived disadvantages due to availability of sophisticated tools such as simulation arenas.
- Finally, gender cannot be a barrier in front of someone having the desire to render selfless service for the love of the nation. Women are aware of the concerns and still are willing to join services should not be held back.

##### Way Forward

- All matters concerning the security of the country have to be considered in a dispassionate manner.
- The whole concept of women's induction in the services, therefore, has to be viewed in a holistic and objective manner and not only from gender equality perspective.
- Therefore, there should be a gradual integration of women in the services along with continuous and periodical performance auditing of both male and female soldiers. The army of the future could be all the stronger for being all inclusive.

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#### 1.1.1.5. SEXUAL HARASSMENT AT WORKPLACE

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##### Why in news?

- A review meeting on implementation of the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 was held recently.



- It was observed that there were various short comings in terms of manner and results of the implementation.
- The Act drew on the 1997 judgment of the Supreme Court (known as the Vishaka judgment) to codify measures that employers need to take to address sexual harassment at the work place

#### Issues in implementation

- 70% of the women do not report sexual harassment by superiors due to the fear of repercussions.
- According to a 2015 research study, 36% of Indian companies and 25% of multinational companies had not yet constituted their Internal Complaints Committee (ICCs) which is mandatory under the Act.
- Cases remain pending in court for long time enhancing the agony of victims
- The Act does not fix accountability as to who is in charge of ensuring that workplaces comply with the Act.

#### Steps proposed for better implementation

- The Ministry of WCD will set up an **inter-ministerial committee** headed by a senior official of the WCD Ministry.
- This committee will review the progress of disposal of complaints of sexual harassment, get a standardized training module prepared.
- The committee will also make sure that the heads of ICCs of all ministries/departments are given **training on how to handle the complaints**.
- Ministry of WCD recently launched an online complaint management system titled Sexual Harassment electronic-Box (SHe-Box) for the effective implementation of the SH Act, 2013.
- This will enable a monitorable and transparent system of grievance redressal under the Act.
- Monthly reporting to WCD ministry on the number of complaints received, disposed, pending and action taken etc.
- It was also decided that the Act, the rights of a woman official and the responsibility of the ICC must be given adequate publicity through different methods including the websites of the ministries/departments/attached offices

#### Provisions of Sexual Harassment Act

- It widens the definition of 'aggrieved woman' to include all women, irrespective of age and employment status, and it covers clients, customers and domestic workers.
- It expands 'workplace' beyond traditional offices to include all kinds of organisations across sectors, even non-traditional workplaces (for example those that involve telecommuting) and places visited by employees for work.
- It mandates the constitution of the internal complaint committee (ICC) — and states the action to be taken if an ICC is not formed — and the filing of an audit report of the number of complaints and action taken at the end of the year.
- It lists the duties of the employer, like organising regular workshops and awareness programmes to educate employees about the Act.
- If the employer fails to constitute an ICC, or does not abide by any other provision, they must pay a fine of up to ₹50,000. If the offender is a repeat offender, the fine gets doubled. The second offence can also lead to cancellation or non-renewal of his licence.

### 1.1.2. DISCRIMINATION AGAINST WOMEN

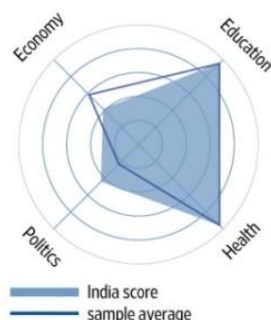
India has substantially improved its rank in the WEF's Global Gender Gap index - moving from 108th to 87th position within a year.

- It has closed its gender gap by 2% in a year: its gap now stands at 68% across the four pillars
- The major improvement, however, has been in education, where it has managed to close its gap entirely in primary and secondary education.

### At a glance

India **87** rank  
out of 144 countries

### Scores at a glance



### Key indicators

GDP (\$ billions)	2,073.54
GDP per capita (constant '11 intl. \$, PPP)	5,730
Total populations (thousands)	1,311,050.53
Population growth rate (%)	1.15
Population sex ratio (female/male)	0.93
Human capital optimization (%)	57.73

	2016		2006	
	Rank	Score	Rank	Score
<b>Global Gender Gap Index</b>	<b>87</b>	<b>0.683</b>	<b>98</b>	<b>0.601</b>
Economic participation and opportunity	136	0.408	110	0.397
Educational attainment	113	0.950	102	0.819
Health and survival	142	0.942	103	0.962
Political empowerment	9	0.433	20	0.227
Rank out of	144		115	

- India is also among a group of countries that have made key investments in women's education but have generally not removed barriers to women's participation in the workforce.

#### 1.1.2.1. DECLINING CSR

As per the Census, 2011 the child sex ratio has shown decline from 927 females per thousand males in 2001 to 918 females per thousand males in 2011. Some of the major cause can be attributed to

- **Sex selection**- It was introduced in India as a method to control population growth, however in recent times it has resulted in misuse for determining the sex of the baby.
- **Female foeticides** - Over the past 25 years, more than 15 million girls have been eliminated because of determination of foetal sex before birth.

#### Challenges

- Patriarchal mindset still prevalent in India where preference is given to son over daughter.
- Mushrooming of illegal practice among ultrasound centers in neighbouring states of Rajasthan, Uttar Pradesh, Punjab, Delhi where parents are told about the sex of foetus in lieu of some.

But these challenges have not deterred government to put efforts in this direction. Few of the initiatives are:

#### Guidelines for female foeticides

Supreme Court issued a series of directions to control the crime of female foeticide. Barely 3,000 cases have been filed against violators of the act over the past 21 years though half a billion medical crimes have been committed.

- **To maintain a centralised database**– All the States and the Union Territories in India shall maintain a centralized database of civil registration records from all registration units so that information can be made available from the website regarding the number of boys and girls being born.
- **Fast track court**-The Courts which deal with the complaints under the Act shall be fast tracked and the concerned High Courts shall issue appropriate directions in that regard.

- **Constitution of a Committee** having three HC Judges that can periodically oversee the progress of the cases.
- Effective implementation of the the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994.
- **The awareness campaigns** with regard to the provisions of the Act as well as the social awareness shall be undertaken.
- **All India Radio and Doordarshan** functioning in various States to give wide publicity pertaining to the saving of the girl child, highlighting the grave dangers the society shall face because of female foeticide.
- **Incentive Schemes-** directed that States and Union Territories, which do not have any incentive schemes for the girl child, shall frame the same.

### Checking Pre-Natal Sex Selection

The Supreme Court had recently directed the government to constitute a nodal agency to monitor and trigger search engines to crack down on online pre-natal sex determination advertisements.

#### About the step taken

- The step has been taken as part of the **Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act (1994)** which states that **no one shall be permitted to propagate sex selection in India.**
- Nodal agency would give advertisements on TV, radio and in newspapers, that if anybody comes across anything which identifies a girl or a boy [at pre-natal stage], it should be brought to the notice of the nodal agency.
- Once it is brought to the notice, the agency shall inform the search engines and they, after receiving the information, are obliged to delete it within 36 hours and inform the nodal agency.

#### Beti Bachao Beti Padhao

Alarmed by the sharp decline, the Government of India has introduced Beti Bachao, Beti Padhao (BBBP) programme to address the issue of **decline in CSR in 100 gender critical districts.** The overall goal of the Beti Bachao, Beti Padhao Scheme is to **Celebrate the Girl Child & Enable her Education.**

#### Initiatives to check decline in child sex ratio

- Beti Bachao, Beti Padhao Yojana,
- Sukanya Samridhi Yojana,
- Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act (1994)
- The Girl Child Protection Scheme of Andhra Pradesh government
- Aapki Beti, Humari beti by Haryana government.
- Ashray scheme of Rajasthan government.
- Sivagami Ammaiyar memorial girl child protection scheme of Tamil Nadu government.
- Mukhya Mantri Kanya Suraksha Yojana of Bihar government.

#### Ministry of WCD

- Promote registration of pregnancies in first trimester in Anganwadi Centres (AWCs)
- Undertake training of stakeholders
- Community mobilization & sensitization
- Involvement of gender champions
- Reward & recognition of institutions & frontline workers.

#### Ministry of Health & Family Welfare

- Monitor implementation of Pre-Conception and Pre-Natal Diagnostic Techniques (PCP&DT) Act, 1994
- Increased institutional deliveries
- Registration of births

#### Ministry of Human Resource Development

- Universal enrolment of girls
- Decreased drop-out rate
- Girl Child friendly standards in schools
- Strict implementation of Right to Education (RTE)
- Construction of Functional Toilets for girls.

The initiative **has two major components**:

- Mass Communication Campaign and
- Multi-sectoral action in 100 selected districts (as a pilot) with adverse CSR, covering all States and UTs.

### Mass Communication Campaign

- It aims at ensuring girls are born, nurtured and educated without discrimination to become empowered citizens of this country.
- It interlinks National, State and District level interventions with community level action in 100 districts, bringing together different stakeholders for accelerated impact.

### Multi-Sectoral intervention

- Coordinated & convergent efforts are undertaken in close coordination with MoHFW and MoHRD to ensure survival, protection and education of the girl child.
- The District Collectors/Deputy Commissioners (DCs) lead and coordinate actions of all departments for implementation of BBBP at the District level.

#### Improvement in Haryana

- Haryana for the first time in past 2 decades has crossed 900-mark in **Sex Ratio at Birth (SRB)**. SRB in December 2016 was recorded at **914**.
- The **SRB** refers to the number of girls born per 1000 boys.
- As per the **Census 2011**, it has the **lowest** sex ratio of **877** females to that of 1000 males as compared to national average of **943**.
- It also recorded the lowest **child sex ratio** (0-6 years) of **834** among all the states compared to national average of **919**
- It has been possible due to the convergence of various schemes and acts such as BBBP, PCPNDT Act, Aapki Beti humari beti scheme, Haryana Kanya Kosh, promotion of **Geeta Phogat, Babita Phogat** winning laurels for the country in sports

### Way forward

- It is high time to understand that no society can flourish if half of its population is discriminated.
- Inter-state co-ordination is necessary to crack down upon unholy nexus between doctors, quacks and illegal ultrasound centres.
- Educating girls and encouraging them to be at par with boys will help to achieve the goal of higher sex ratio in the long run.

### 1.1.2.2. MATERNAL/NEO-NATAL HEALTH

The latest Lancet series on maternal health reveals that nearly one quarter of babies worldwide are still delivered in the absence of a skilled birth attendant and one-third of the total maternal deaths in 2015 happened in two countries: India and Nigeria

#### Maternal deaths in India

- 45,000 mothers (15 per cent) died during pregnancy or childbirth in India while Nigeria shouldered the maximum burden of 58,000 (19 per cent) maternal deaths.
- According to the World Health Organization (WHO) India's MMR, which was 560 in 1990, reduced to 178 in 2010-2012. However, as per the MDG mandate, India needs to reduce its MMR further down to 103.

#### Reasons for High MMR in India

- **Institutional delivery**: Institutional delivery rates in rural and urban areas were 28.9% and

67.5% respectively as per NFHS-III in 2005-06.

- **Women not getting Antenatal Care:** More than one out of every three women (34%) in India did not receive an ante-natal check-up for births in the three years preceding the survey. Only 7% received antenatal checkup in third trimester.
- Postnatal care is grossly deficient.
- **Teenage pregnancy and their risk of dying:**
  - ✓ Despite the Child Marriage Restraint Act (1978), 34 percent of all women are married below the legal minimum age of marriage (ie 18 years);
  - ✓ Girls aged 15-19 are twice as likely to die from child birth as women in their twenties; those under age 15 are five times as likely to die.
- **Women lack awareness** of the importance of pregnancy care and delivery/taking place in a healthcare facility (poor health education).
- **Women's lack of decision-** making power within the family (gender bias).
- **Lack of awareness of location** of health services (poor health awareness).
- **Cost-** direct fees as well as the cost of transportation, drugs and supplies (poverty).
- **The poor quality of services**, including poor treatment by health providers also makes some women reluctant to use services.

### Solutions

- An improved, accountable health care system at primary level is essential for decreasing maternal mortality to the desired level.
- Make the antenatal, intra-natal and postnatal services available to women, located close to them. For this, linking hospitals by an emergency transport and good referral system of network is needed.
- Ensure delivery by skilled attendant nurses or doctors.
- Peripheral/ Village level interventions specifically directed towards major causes of maternal deaths are required.

Government has taken various initiatives to positively affect infant mortality rate and death due to pregnancy and childbirth complications. Some of which are discussed below

### The Janani Suraksha Yojana

The scheme was launched in 2005. It is **world's biggest conditional cash-transfer scheme, aimed to promote institutional delivery instead of delivering babies at home** and improve India's infant and maternal mortality rates.

- Under the scheme **pregnant women choosing to deliver at the hospital and Accredited Social Health Activist who motivated her to take the decision get cash incentives** — Rs.1,400 for the woman and Rs.600 for the ASHA in rural areas and Rs.1,000 and Rs.200 respectively in urban areas. **The cash incentive** reduces financial barriers to accessing institutional delivery.

### How it helps in Reducing Socio-Economic Disparities

- First, the increase in utilisation of all three maternal healthcare services (viz, Full antenatal care, Safe Delivery, Postnatal Care) between the two rounds was remarkably higher among illiterate or less educated and poor women.
- Secondly, the usage of all three maternal healthcare services by the OBC, Dalit, Adivasis and Muslim women increased between the surveys.
- There was generally a narrowing of the gap between the less educated and more educated women and between the poorer and richer women.

**Latest study**

- As per a study the Janani Suraksha Yojana (JSY), based on analysis of the **60th and 71st round of NSSO data**, achieved a successful feat of **22% increase in women delivering in government hospitals** between 2004 and 2014.
- The study found that fertility rates in Indian women have steadily declined (from 2004 when it was 2.88 per woman to 2.4 in 2014).

**Other initiatives**

- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)**: It aims to provide assured, comprehensive and quality antenatal care, free of cost, universally to all pregnant women on the 9th of every month.
- **Mothers Absolute Affection**: It aims to ensure that adequate awareness is generated among masses, especially mothers and related family of newly born child, about the benefits of breastfeeding. Programme will focus on initiation of breastfeeding within an hour of birth, exclusive breastfeeding for the first six months, and continued breastfeeding for at least two years.

**1.1.2.3. MEDICAL TERMINATION OF PREGNANCY (AMENDMENT) BILL, 2014****Why in News?**

- In February 2017, the Supreme Court of India declined the plea of a woman to abort her foetus detected with Down syndrome. The whole issue set a debate about a **woman's right to choice over her body** and termination of foetus, which is considered as a life after a certain period of pregnancy in Medical Termination of Pregnancy Act 1971.

**Issue Involved**

- Medical Termination of Pregnancy Act 1971 (MTP Act), allows a woman to terminate her foetus till the 20th week of pregnancy. However, in certain exceptional circumstances, court relaxes the aforesaid time period and allows termination of pregnancy **only if** the foetus poses danger to the woman's life or is detected with an abnormal deformity.
- To detect any abnormality in foetus, a pregnant woman can undergo the medical test only after 18-week period of her pregnancy. However, the report of the test itself can take 2-3 weeks to arrive; meanwhile, the pregnant women would have crossed the time limit allowed to opt for abortion.
- Medical professionals are of the opinion that approx. 2-3 percent foetus out of 26 million new lives, can be detected to be abnormal even after 20 week period and therefore, the cap on the time period for termination of pregnancy should be relaxed.
- Due to rigid framework of the Act and myriad aspects of social stigma (pregnancy before marriage, complication in abortion etc.) attached to the issue, around 10 women every minute in India die due to pregnancy-related complications.
- Moreover, MTP Act, 1971 is indifferent to the institutional services for delivery; for example, there are grave shortages of gynaecologists at Community Healthcare Centres. This compels the rural women to choose expensive and unsafe methods of abortion.

**Significance of the Medical Termination of Pregnancy (MTP) (Amendment) Bill 2014**

- Medical Termination of Pregnancy (MTP) (Amendment) Bill 2014 is intended to extend the legal limit for abortion from the present **20 weeks to 24 weeks** and will also allow for abortions-on-demand up to 12 weeks.

- The earlier act (MTP 1971) was guided by the objective of population control and preventing high mortality related to pregnancy; whereas, the new amended law would take into consideration a woman's choice and autonomy over her body by extending the time limit to go for abortion.
- The proposed bill would amend certain clauses by including special ground of 'substantial foetal abnormalities' for termination of foetus.
- The amended bill would cut the role of judiciary in case of any abnormality found in the foetus after the 20 week time period and would authorise the health care provider to terminate pregnancy
- Furthermore, the proposed bill has amended the definition of 'termination of pregnancy' by differentiating the medical and surgical methods. This would allow women to use and procure abortion-related medicines.

### Way ahead

- In the proposed amendment, all the stakeholders must be consulted so that sex selective abortion and high mortality rate can be curtailed due to rigidity of the law.
- Since the passage of the MTP Act in 1971, the socio and medical circumstances have undergone various changes; therefore, the law governing this aspect must address the medical and social realities of the present context.
- Till now, abortion is seen from medical and legal perspective, rather than a matter related to meanings of the family, the state, motherhood and sexuality of younger woman. Therefore, need of the hour is to look at the proposed law through a broader lens, where the right to choice of women over her body and the right of the foetus to be born, would be justified.

## 1.1.2.4. PERSONAL LAWS AND GENDER JUSTICE

### Why in News?

There has been a rising concern about gender justice due to issues arising in personal laws.

- Muslim Personal Laws- Recent debates on '**Triple Talak**' and its validity in **Shayara Bano v Union of India case**.
- Hindu Personal Laws- A court's judgement that wife's refusal to stay in a joint family amounts to cruelty to husband.

The source of Muslim personal law is **Muslim Personal Law (Shariat) Application Act 1937**.

It makes the "Sharia" applicable to the Muslims of India. However, the **absence of a definition of Sharia**, has led to chaos with seminaries and scholars issuing conflicting fatwas on the same issue.

### Introduction

- **Personal Laws** are a set of laws in India that govern various aspects of a person's life like family, marriage, divorce, inheritance, etc. due to plurality of faith in India, the laws regulating personal matters were left to be governed according to an individual's faith.
- Various Personal laws have left women vulnerable due to their depiction as the weaker gender of the society.
- There is a provision in Indian Constitution under the DPSPs to have a **Uniform Civil Code (Article 44)** and do away with the diversity in laws governing the personal aspects of an individual's life.

**Article 44-** The State shall endeavour to secure for the citizens a uniform civil code throughout the territory of India.

### Unjust Laws in Various Religions

- The concern towards gender justice is directed towards the Muslim community and projects Hindu (& other) law as egalitarian, uniform and gender-just. However, this is not peculiar to any single religion
- There have been questions raised against the validity of three aspects of Muslim personal law:
  - **Polygamy**- is rampant among Muslim men.
  - **triple talaq**- Muslim women have no similar right to talak. She would need to go to a Darul Qaza and prove the atrocities committed by her husband in order to get a divorce.
  - **nikah halala** (a practice under which a woman who wishes to remarry her former husband must first consummate a nikah with another man).
- Among Hindus various concepts have been questioned for their potential of leaving women vulnerable like:
  - **Dowry**- the money or goods given to the bride or her in-laws, at the time of marriage.
  - **Property Rights**- Only recently, Delhi High Court announced that the eldest daughter can be the karta of the Hindu Undivided Family property.
  - **Bigamy**- A Hindu second wife is devoid of her rights and also divested from her status as "wife".

### UCC as a Solution

- As per the mandate under the Article 44, the Uniform Civil Code is seen as the panacea to all these problems.
- Uniform Civil Code can be a well laid out scheme of laws and regulations governing the personal aspects of an individual's life.
- It is expected to provide a stable system of judicial procedures dealing with the personal matters along with uniformity and gender just framework.
- The laws can be well deliberated and debated with the involvement of all the stakeholders. For example, recently the law commission released a questionnaire on UCC to know people's opinion on the issue.
- A diverse country like India where customs not only vary but may also be opposed to each other may take refute to legal pluralism which promotes the idea of multiple sources of law as this will accommodate cultural relativism- a cornerstone of human rights.
- Like in Goa, UCC may guarantee a **unified legal structure** for the whole country irrespective of religion or ethnicity.

### Limitations of UCC

- The non-existence of a blueprint of what we call the Uniform Civil Code has given way to heedless back-and-forth squabble with no ground for substantial debate and a lot of space to arouse the ignorant masses.
- It has been a rather **vague conception that Uniform Civil Code** would necessarily imply gender-just laws, something that is far from the original intent behind this directive principle of state policy.
- Given the diversity of the country, having a UCC can be a bigger problem than a panacea. Where on one hand the Fundamental Rights provide equality of all to propagate and follow one's own religion and religious practices, any step that affects their right to exercise their customary laws may prove otherwise.



- When the problem is the unjust laws the solution may lie not in a single framework accommodating all personal laws but in countering the laws that are demeaning to women.

### Way Forward

- Our laws are not uniformly gender-unjust. They contain specific forms of gender injustice and each must be addressed within its own specificity.
- However, gender justice is not limited to any one religion and has a wider base than perceived.
- Our Constitution provides us the yardstick for testing its gender discrimination. Supreme Court verdicts provide scope to challenge specific gender unjust provisions.
- India is a secular nation and secularism is a liberating, and yet uniting, principle enshrined in the Constitution. It upholds the right to a life of dignity and equality and therefore binding on all.
- In a country as diverse as India, implementing UCC may be a challenge and can take long time to build consensus and be implemented. In the meanwhile, it might be necessary to codify the personal laws of different religions such that the discriminating rules and the laws adverse to gender equality maybe repealed.

### 1.1.2.5. SURROGACY

#### Why in News?

- The Union cabinet recently has approved the introduction of a Surrogacy (Regulation) Bill, 2016 that seeks to ban commercial surrogacy and allow only infertile couples to bear a child using a surrogate mother.
- There is a huge rise in incidents concerning exploitation of surrogate mothers, abandonment of children born out of surrogacy and rackets of intermediaries importing human embryos and gametes.

#### Issues involved

- **Surrogates' exploitation in terms of health, financial & post natal care** - there have been instances where surrogates have died as a result of complications during pregnancy and the unavailability of good post-natal care.
- **Improper Contracts** - contracts between surrogate mothers, who are often poor, and the intended parents are sometimes structured in a manner that the former assumes all medical, financial and psychological risks, absolving the liability of the latter.
- **Commercialization of Surrogacy** - According to a study by the Confederation of Indian Industry (CII), the size of India's surrogate motherhood industry was \$2.3 billion a year.
- **Abandonment of surrogate babies** - There are cases of babies born with **disabilities** or an **unplanned twin** being abandoned by the intended parents.
- There are some **countries that do not recognize commercial surrogacy** and hence the surrogate baby is caught in the legal battles, hence no citizenship/legal rights to the surrogate baby.
- **Ethical concerns/views:**
  - Some consider it as a **moral duty to alleviate the "curse" of infertility** from the women who purchase their services.

#### COUNTRY & POSITION

**Australia** Recognises only altruistic surrogacy through close relatives and friends

**China** Any form of surrogacy is banned

**UK** Recognises only altruistic surrogacy through blood relatives

**US** Mixed—Allows commercial surrogacy in some states, doesn't recognize any form of surrogacy in others

- While others consider that surrogate arrangements **depersonalize reproduction and create a separation of genetic, gestational, and social parenthood**.
- **Change in motives for creating children** i.e. children are not conceived for their own sakes, but for another's benefit.

### Provisions of Proposed Bill

- Single men and women, heterosexual couples who choose not to opt for marriage, gay couples, transgender persons, single parent cannot have baby through surrogacy. Non-resident Indians or People of Indian Origin card-holders will **not be allowed to take recourse to a surrogate mother in India**.
- Legally wedded Indian couples can have a surrogate child **only after five years of legal marriage** and will require a medical certificate as proof of infertility (Age of couple: 23-50 for females and 26-55 for males.). Also, they could seek "**altruistic**" surrogacy, but only through "close relatives".
- The bill makes it **mandatory for surrogate mothers to be married** and be a close relative of the couple wanting a child. She should also have given birth to a healthy child before bearing a baby for another couple.
- A woman can only bear one surrogate child.
- Violating the law can earn 10 years in jail term or fine of 10 Lakh rupees.
- **A national surrogacy board chaired by the health minister** will be created to oversee implementation.
- The rights of surrogate mother and children born out of surrogacy will be protected.

### Pros

- Prevent exploitation of women, especially poor women who were forced to get into this business for the survival of their family.
- It protects women from repeated surrogate pregnancies for monetary gains.
- Carrying a child poses a risk to any mother's health and even life because most deliveries happen by caesarean section.
- The vast majority of surrogates are poor or illiterate women who may have only a weak grasp of their contractual rights.

### Cons

- A total ban on commercial surrogacy will push the industry underground and render surrogate mothers even more vulnerable.
- Proposed surrogacy bill remains silent on the fate of the frozen embryos.
- It does not address the modern social reality where singles, homosexuals or live-in couples might wish to have a biological child through the surrogacy route.
- It does not take into account the livelihood matters of poor women who are involved in surrogacy business.
- There could be the possibility of coercion of daughters-in-law in families.

#### 228<sup>th</sup> Law Commission Report on Surrogacy

- It has recommended **against Commercial Surrogacy**.
- **Right to privacy** of donor as well as surrogate mother should be protected.
- **Sex-selective surrogacy should be prohibited**.
- Cases of **abortions should be governed by the Medical Termination of Pregnancy Act 1971 only**.
- One of the intended parents should be a donor as well, because the bond of love and affection with a child primarily emanates from biological relationship.
- Legislation itself should recognize a surrogate child to be the legitimate child of the commissioning parent(s) without there being any need for adoption or even declaration of guardian.

### Way ahead

Surrogacy is both a need (for the infertile couples) as well as has become the source of income for many (poor women). So before putting a blanket ban one should strive for more empathetic ways and means to deal with the issue along with strict regulations should be put in place to end the commercialization of surrogacy.

### 1.1.3. CRIMES AGAINST WOMEN

According to latest NCRB data, crimes against women have more than doubled over the past 10 years. Crimes against women include physical as well as mental cruelty to women such as insult to modesty of women, cruelty by husband and relatives, assault on women with intent to outrage her modesty, kidnapping etc. In 95% cases, offender is known to victim. Andhra Pradesh has reported the most crimes against women (263,839) over the past 10 years.

Although the year 2015 witnessed a reduction in crime against women as compared to 2014 that cases of rape have fallen by 5.7%. Still the situation is grim as:

- There has been a marginal **increase of 2.5%** in other sexual offences against women. The category includes offences such as sexual harassment, assault or use of criminal force to women with intent to disrobe, voyeurism, and stalking.
- **Kidnapping and abduction of women** also increased in 2015. Forcing a woman into marriage continues to be the chief reason to kidnap her.
- Delhi has the highest rate of crimes against women overall.

#### 1.1.3.1. GENITAL MUTILATION

##### Why in news?

The SC sought response from the Centre and four states on a PIL seeking ban on female genital cutting (FGM).

##### Background

- It is commonly called khatna and **practised by Dawoodi bohras, a muslim sect.**
- The custom is inflicted on young girls, when they are six or seven-year old.
- Carried out mostly by untrained midwives, it involves cutting off the clitoral hood, in the belief that it will curb a women's sexual drive.
- **FGM is banned in 24 African countries.** Many western countries, including the United Kingdom and the US have also outlawed the practice.
- **In December 2012, the UN General Assembly adopted a unanimous resolution to eliminate the practice.**

##### Provisions in India

- Section **320** (causing grievous hurt), **323** (punishment for voluntarily causing hurt), **324** (voluntarily causing hurt by dangerous weapons or means), **325** (punishment for voluntarily causing grievous hurt) of **IPC** aim to curb such practises.
- Section 3 & 5 (committing penetrative sexual assault on a child), Section 9 (aggravated sexual assault) and 19 (reporting an offence) of POSCO ACT also aim to abolish violent acts like FGM.

##### Way forward

- **Goal 5 of Sustainable Development Goals** calls for elimination of all harmful practices, such as child, early and forced marriage and female genital mutilation

Karol Bagh 1/8-B, 2<sup>nd</sup> Floor, Apsara Arcade, Near Gate 6, Karol Bagh Metro, Delhi-110005  
Mukherjee Nagar: 103, 1<sup>st</sup> Floor, B/1-2, Ansal Building, Behind UCO Bank, Delhi-110009

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- To end such forms of violence against women awareness generation is required with the help of NGOs and by using medical explanation of harmful effects of such physical practises.

### 1.1.3.2. DOMESTIC VIOLENCE ACT

- Recently Ministry of statistics and program implementation (MoSPI) has released a report titled '**Women and Men in India 2015**' which says that **domestic violence shares highest share in crime against women.**

#### Fact File

- Women continue to face **most risks from their families.**
- Among all registered cases of serious crimes against women, the largest share 36% of all cases was under "**cruelty by husband and relatives**"
- The next largest share was "assault on women with intent to outrage her modesty" (24 per cent)
- Increase in rape, kidnapping and abduction and assault on women
- Rapes** - In 2014, almost 44 per cent of all victims were in the age group of 18-30 years, whereas one in every 100 victims was under six years of age.

#### Recent changes

- The **definition of Domestic Violence has been modified** - it includes **actual abuse** or the **threat of abuse** that is **physical, sexual, verbal, emotional and economic** and **further harassment by way of unlawful dowry demands to the woman or her relatives.**
- Widened the scope of the term WOMEN** - The Act now covers "**live-in partners**", **wives, sisters, widows, mothers, single women** are entitled to get legal protection under this Act.
- Right to Secure Housing** i.e. right to reside in the matrimonial or shared household, *whether or not she has any title or rights in the household.* This right is secured by a residence order, which is passed by a court.



#### BLEAK PICTURE

Disposal of crimes committed against women in 2014

	Cases reported during the year	Total cases for investigation	Cases in which chargesheets submitted	Total cases disposed of by police	Disposed cases as percentage of total cases for investigation
Rape	36,735	51,623	30,840	35,590	69
Attempt to commit rape	4,234	4,672	2,781	3,369	72
Kidnapping & abduction of women	57,311	84,685	26,044	49,150	58
Dowry Deaths	8,455	13,270	7,653	8,597	65
Assault on women with intent outrage her modesty	8,235	10,164	6,462	76,388	76

Source: Women and Men in India - 2015, 17th issue, MoSPI

#### Changes in Domestic Violence Act

- The Supreme Court has struck down the words "adult male" from the pertinent provision in the DV Act to lay down that a woman can also file a complaint against another woman, accusing her of domestic violence.
- Reasoning of Court**
  - ✓ Since the perpetrators and abettors of domestic violence can also be women, insulating them would frustrate the objectives of the Act. Under this immunity females and minors can continue to commit domestic violence.
  - ✓ It discriminates between persons similarly situated and, thus, violates A.14 of the Constitution.

#### Significance of the Change

- It makes DV **gender neutral** which according to some experts (including the bench) would help in serving the purpose of the law in a better way.
- However, there are concerns from some corners that it would encourage husbands to file counter cases against their wives through their mothers or sisters.
- There are also apprehensions about putting juveniles under the Act. There is no criminal provision under DV Act and thus no question of dealing with juvenile Board.
- Relief under DV Act is almost always financial - maintenance, compensation and alternate residences - which can all be claimed only against an adult.

- The Court can *pass protection orders to prevent the abuser from aiding or committing an act of domestic violence* like entering a workplace or any other place frequented by the abused, attempting to communicate with the abused, isolating any assets used by both the parties, etc.
- It provides for *appointment of protection officers* and *NGOs to provide assistance* to the woman for medical examination, *legal aid and safe Shelter*.
- Punishment of *one year maximum imprisonment* and Rs. 20,000 each or both to the offenders is mentioned.
- Provides for *breach of protection order* or interim protection order by the respondent as a *cognisable and non-bailable offence punishable with imprisonment* which may extend to one year or with fine which may extend to Rs. 20,000 or with both.
- *Non-compliance or discharge of duties by the protection officer is also sought to be made an offence under the Act with similar punishment.*

#### Reasons/Issues Involved

- **Urban areas**- more income of a working woman than her partner, abusing and neglecting in-laws etc
- Violence against young widows esp **in rural areas** - most often they are cursed for their husband's death and are deprived of proper food and clothing; they are not allowed or encouraged for remarriage in most of the homes, cases of molestation and rape attempts of women by other family members in nuclear families or someone in the neighbourhood.
- **Other Reasons** - Orthodox & Patriarchal mindset- male domination and control over women; Economic reasons- demand for dowry; infertility or desire for male child; Alcoholism.

#### Criticism/Misuse of the Domestic Violence Act

- **Gender biased and not gender neutral**- Increasing number of **false cases**.
- Excludes abuses pertaining to marital rape.
- Verbal abuse and mental harassment- scope of subjective interpretation by abused
- Lack of awareness esp in rural areas where there is more need of such Acts.
- Judicial system resorting to mediation and counselling even in cases of extreme abuse. Also, Insensitivity by male police officers, judicial magistrates during hearings, etc
- Absence of economic, psychological and support system for victim women
- Insufficient budgetary allocation to States- the States could not assign 'Protection Officers' because of the already overburdened department.

#### Way forward

- Protection should be provided to the abused women from domestic violence
- NGOs relating to women empowerment should be encouraged to protect women from domestic violence.
- Women should be financially empowered through various government schemes and programmes.
- Faster delivery of cases
- The PRIs should also play a progressive and empathetic role towards such cases- should participate in stopping domestic violence
- More sensitivity training to be given to officers concerned at every stage.
- More awareness drive esp. in rural areas.

### 1.1.3.3. CYBERCRIME

#### Why in news?

- Cybercrimes against women are increasing and recently government has taken several steps to prevent cybercrimes.
- As per the **NCRB data under cybercrimes**, 758 cases of publication or transmission of obscene, sexually explicit content (under section 67A, 68B and 67C of IT Act) has been registered in 2014.

#### What is cybercrime?

- Cybercrime is a criminal activity that **involves a computer and a network**.
- Offences committed against people with a criminal motive to cause physical or mental harm, or loss to the victim directly or indirectly, **using modern telecommunication networks** such as Internet and mobile phones.
- Cybercrimes **threaten a nation's security and financial health**.

#### Issues/ Challenges faced

- Cyber- crimes against women are **rising at alarming rate** and it may pose as a major threat to the security of a person as a whole.
- **Issues regarding women are not addressed in the IT Act 2000** -The act has termed certain offences as hacking, publishing of obscene materials on the internet, tempering the data as punishable offences, but the threat to the security of women in general is not covered fully by this Act.
- IT Act 2000 does not mention the typical cybercrimes like cyber staking, morphing and email spoofing as offences.
- **The cases of online harassment against women are not maintained by the government**
- **Social networking sites** are being used **to circulate offensive content** which is derogatory to dignity of women.
- Women are also experiencing **revenge-porn**, the distribution of **non-consensual photography**, often involving nudity and sex.
- Cases of men recording and sharing their raping of girls and women are increasing.
- **Internet has become a trafficking platform**- social media is used by traffickers to sell people whose photographs they share, without their consent.

#### Steps taken by the Government in Preventing Cybercrimes Against Women

- **Cyber Crime Cells have been set up** in States and Union Territories for reporting and investigation of Cyber Crime cases.
- Government has set up **cyber forensic training and investigation labs** in the States of Kerala, Assam, Mizoram etc. for training of Law Enforcement and Judiciary in these States.

#### Cybercrimes which specially target women:

- **Harassment via E-Mails:** It is very common type of harassment through sending letters, attachments of files & folders i.e. via e-mails; most common now in the form of using of social sites i.e. Facebook, Twitter etc.
- **Cyber-Stalking:** It means expressed or implied physical threat that creates fear through the use to computer technology such as internet, e-mail, phones, text messages, webcam, websites or videos.
- **Dissemination of Obscene Material:** It includes Indecent exposure/ Pornography (basically child pornography), hosting of web site containing these prohibited materials.
- **E-Mail Spoofing:** A spoofed e-mail may be said to be one, which misrepresents its origin. It shows it's origin to be different from which actually it originates- This method is often used by cyber criminals to extract personal information and private images from unsuspecting women, these images etc. are then used to blackmail those women.
- **Cyber Pornography**

- **Programmes on Cyber Crime investigation** – Various Law schools are engaged in conducting several awareness and training programmes on Cyber Laws and Cybercrimes for judicial officers.
- **Training is imparted to Police Officers and Judicial officers** in the Training Labs established by the Government.
- The Scheme for **Universalisation of Women Helpline** has been approved to provide 24 hour emergency and non-emergency response to all women affected by violence.

#### Way forward

National Commission for Women has submitted a report which recommended for **opening of more cyber cells, dedicated helpline numbers** and imparting of proper legal help, setting up forensic labs and technical training law enforcement agencies like police and judiciary to combat cybercrime.

#### 1.1.4. OTHER GOVERNMENT INITIATIVES

Various government initiatives include:

- **“Pink” initiatives in Kerala** where Kerala State Road Transport Corporation (KSRTC) will roll out Pink-Coloured Buses exclusively for women in Thiruvananthapuram inspired by Pink taxis driven by women in Kerala’s cities. Its aim is to provide safe and comfortable public transportation to women especially during peak hours when buses are overcrowded.
- **TREAD (Trade Related Entrepreneurship Assistance and Development) Scheme** by Ministry of Micro, Small and Medium Enterprises (MSME) to promote women entrepreneurs via trade related training, information, counseling activities related to trades, products, services and financial aid.
- **Kanyashree Prakalpa Scheme of West Bengal government** - It aims to improve status of adolescent girls from disadvantaged families (annual family income not more than Rs. 1, 20,000) through small cash transfers for increased educational attainment by incentivizing schooling of all teenage girls, prevention of child marriage and financial inclusion.
- **Tejaswini Project in Jharkhand** to empower adolescent girls and young women with basic life skills and further provide opportunity to complete their secondary education and acquire market driven skills.
- **Mahila Shakti Kendra**, mentioned in budget 2017-18 speech, will be set-up at village level in 14 lakh ICDS Anganwadi Centres to provide for one stop convergent support services for empowering rural women with opportunities for skill development, employment, digital literacy, health and nutrition. It will also increase access of essential services for women.
- **Mahila Police Volunteer** under which Haryana, in first such initiative by a state, inducted the first batch of 1000 Mahila Police volunteers. It aims to create a safe and enabling environment for women by keeping an eye on situations where women in the village are harassed or their rights and entitlements are denied or their development is prevented.

#### 1.1.5. DRAFT NATIONAL POLICY ON WOMEN 2016

##### Why in news?

Government released the draft National Policy on Women 2016.

##### Need for a new policy

- Nearly a decade and half has passed since the National Policy for the Empowerment of Women (NPEW), 2001 was formulated, which laid down a comprehensive progressive

policy for the advancement, development and empowerment of women with appropriate policy prescriptions and strategies.

- Several paradoxical trends have been observed in the past few years. The growing acknowledgement of gender rights and equality is juxtaposed against increase in reporting of various forms of violence against women such as rape, trafficking, dowry etc.
- The new millennium and the dynamics of a rapidly changing global and national scenario have ushered in new facets of development and growth giving rise to complex socio-economic and cultural challenges for women in a society with deep rooted cultural and social beliefs about gender roles.
- The concept of women empowerment has seen changes, from being recipients of welfare benefits to the need to engage them in the development process.
- There is need therefore to formulate a new policy that can guide the transformative shift required for making gender rights a reality, addressing women's issues in all its facets, capturing emerging challenges and ultimately positioning women as equal partners of sustained development progress that the country is experiencing presently.

#### **National Policy for Women Empowerment (2001)**

The goal of the National Policy for Women Empowerment (2001) is to bring about the advancement, development and empowerment of women. Specifically, the objectives of this Policy include-

- Creating an environment through positive economic and social policies for full development of women to enable them to realize their full potential
- The de-jure and de-facto enjoyment of all human rights and fundamental freedom by women on equal basis with men in all spheres – political, economic, social, cultural and civil
- Strengthening legal systems aimed at elimination of all forms of discrimination against women
- Changing societal attitudes and community practices by active participation and involvement of both men and women.

#### **Priority Areas identified by the Draft**

- **Health including food security and nutrition:** Among various measures, it points to greater recognition for women's reproductive rights by shifting the focus from female sterilisation to male sterilisation.
- **Education:** A mission mode approach for literacy amongst women is envisaged.
- **Economy:**
  - Efforts for assessment of the incidence of poverty by gender estimates will be done as household estimates do not provide gender poverty estimates.
  - Relation between gender and poverty dynamics will be addressed, for instance, increasing the participation of women in the workforce, recognizing women's unpaid work in terms of economic and societal value, ensuring the rights of women to immovable property.
- **Governance and Decision Making:** Not just quantity but quality of women's representation will be improved through greater capacity building on aspects of decision making and women's rights and legislations.
- **Violence against women:**
  - Efforts to address all forms of violence against women will be continued with a holistic perspective through a life cycle approach in a continuum from the foetus to the elderly. So it will start from sex selective termination of pregnancy, denial of education, child marriage and will cover violence faced by women in private sphere of home, public spaces and at workplace.



- Engaging men and boys through advocacy, awareness generation programmes and community programmes will also be undertaken.
- **Enabling Environment:**
  - Gender perspective in housing policies, planning of housing colonies and in the shelters both in rural and urban areas will be given a priority.
  - Ensuring access to safe drinking water and sanitation, gender parity in mass media and greater participation in sports have also been identified as priority areas.
- **Environment and Climate Change:**
  - As women are highly affected by climate change, environmental degradation, distress migration and displacement in times of natural calamities, policies and programmes for environment, conservation and restoration will compulsorily incorporate gender concerns.
  - An integral part of this discourse will be to enable equitable ownership control and use of natural resources and secure the asset base of marginalised poor women to counter poverty and climate shocks.
- Apart from these, certain **emerging issues** have also been identified. Some of those include:
  - A review of the personal and customary laws in accordance with the Constitutional provisions. This will enable equitable and inclusive and just entitlements for women.
  - Recognizing special needs of single women including widows separated, divorced, never-married and deserted women. A comprehensive social protection mechanism will be designed to address their vulnerabilities, create opportunities and improve their overall conditions.
  - Creating ecosystem for women to participate in entrepreneurial activities, take up decision-making roles and leadership in all sectors of the economy.
  - As more women are taking the recourse of artificial reproductive techniques, efforts will be made to ensure the rights of these women adopting these techniques i.e. surrogates mothers, commissioning mother along with children born as a result will be protected.
- Further, the policy also talks about-
  - Formation of inter-and intra-institutional partnerships that facilitate convergence and generating a data system which is gender disaggregated for better planning and policy formulation.
  - Setting up Gender Budgeting Cells set up in Ministries, state government Departments, Panchayats and urban local bodies to conduct in-house gender audit of requisite policies, programs and schemes.

### Implementing the policy

- In translating the policy framework, **specific, achievable and effective strategies for implementation** will be required to be made at the national, state and local government level, in PSUs, corporates, business, trade unions, NGOs and community based organizations.
- An **inter-ministerial Action plan** will be formulated with action points with respect to the policy prescriptions in the Policy document, where definitive targets, milestones activities, timelines (short term, medium term & long term) and outcome indicators will be given along with the Ministries/ departments responsible for implementing the actions.
- An **inter-ministerial committee** will be set up to periodically monitor the achievements and progress made under the Action plan.

## 1.2. ISSUES RELATED TO TRANSGENDERS

Transgender community still faces prejudice in India. The term 'transgender' refers to all those who differ in behaviour and appearance from the usual gender stereotypes. It includes transsexuals, transvestites (cross-dressers), intersexed individuals and gender queers. In the Indian context, it also includes social identities such as hijras, kinnars, aravanis, jogtas, Shiv-shaktis and aradhis.

### Problems faced by transgenders

- **Social stigma:** since birth transgenders are segregated from society and lack social integration.
- **Education:** they lack access to formal schooling. Further, there is lack of special schools for them.
- **Employment:** They represent less than 1% of total workforce.
- They are shunned by their own family.
- Politics and decision making processes have been out of their reach.

However, in recent times, transgender community has become more vocal about their rights and even different organs and levels of government is trying to incorporate their issues and concerns

One of the major issues, other than above, they face is the criminalizing of homosexuality under Section 377 of the India Penal Code (See picture right).

Although, Delhi High Court decriminalized homosexuality but it was overturned by Supreme Court in **Koushal vs Naz Foundation** case. Thus, it recriminalized homosexuality.

### Developments since Koushal Judgement

- The Gujarat High Court held Gujarat Government's failure to grant a tax concession to a film depicting homosexuality as unconstitutional.
- In NALSA case (2014), the Supreme Court held that transgenders should be treated as a 'third gender' for accessing public services. They will have right to self-identification of their gender as male, female or third-gender and are entitled to all the fundamental rights granted under the Constitution. It also provided them with reservation in admissions to educational institutions and jobs as they were treated as socially and economically backward classes.
- The Allahabad High Court decided that transgenders would be entitled to be treated as the "head of a household" under food security legislation.
- A 'third gender' option is now available in railway reservation forms, ration card applications, passport applications among other services.
  - Delhi government has decided to introduce "transgender category" in forms for registration of birth and death certificates.
- Kerala became the first state to have a policy for transgenders which aimed to end the societal stigma towards the sexual minority group, ensure them non-discriminatory treatment and enforce their constitutional rights. This policy goes beyond welfare and favours right-based approach unlike Transgender welfare boards of Tamil Nadu, Maharashtra and West Bengal

SECTION 377 SAYS
➤ "Whoever voluntarily has carnal intercourse against order of nature with any man, woman or animal" can be punished with up to life term
WHAT DELHI HC HAD SAID
➤ 377 counter to Constitutional values and notion of human dignity
➤ Almost unanimous medical and psychiatric opinion that homosexuality not a disease or disorder
➤ Moral indignation not a valid basis for over-riding fundamental rights. Constitutional morality outweighs public morality
WHAT THE SC HAS SAID
➤ Delhi HC extensively relied upon the judgments of other jurisdictions (foreign countries), which "cannot be applied blindfolded for deciding constitutionality of Indian law"
➤ HC "overlooked that a minuscule fraction" of country's popn is LGBT
➤ "Concerned legislature free to consider desirability and propriety of deleting Section 377 IPC from the statute book or amend the same"

- Kerala State Sports Council also organized India's First Transgender Sports meet. This move enforces efforts to grant rights to TGs on the ground as sporting categories have always been on gender binary lines.
- Christian transgenders may get equal property rights soon as Section 44 of Indian Succession may be amended to include transgenders, giving them equal rights as men and women on ancestral property. After bill is passed to this effect, transgenders can take recourse to legal measures if discriminated against in property rights
- Government of Odisha became the first state which conferred the Below Poverty Line status to transgenders in Odisha benefitting around twenty two thousand transgenders in Odisha. It has also decided to cover the transgenders under the National Food Security Act.

#### Kerala's Transgender Policy

- It covers all the categories of TGs, including male to female TGs and intersex people.
- It emphasises the right of the minority group to self-identify themselves as man, woman or TG
- It also ensures them equal access to social and economic opportunities, resources and services, right to equal treatment under the law, right to live life without violence and equitable right in all decision making bodies.
- It also recommends the setting up of a TG Justice Board with state Minister for Social Justice as its chairperson.
- It proposes criminal and disciplinary action against police in cases of violation of TG's human rights

Central government has also introduced **The Transgender Persons (Protection of Rights) Bill, 2016** in Lok Sabha to protect the rights of transgenders further.

#### Provisions of the Bill

- **Definition of a transgender person:** The Bill defines a transgender person as one who is (i) neither wholly female or male; (ii) a combination of female and male; or (iii) neither female nor male.
- **Prohibition against discrimination:** It protects transgenders from discrimination or denial of service in essential areas such as education, employment, healthcare, access to public places, goods and services, right to movement, settlement and ownership among others.
  - **Right of residence in the household:** This is important to prevent discrimination right at the beginning. The person may be placed in a rehabilitation center on the orders of a competent court if the family is unable to care for the transgender person.
  - **Health care:** The government would take steps to provide health facilities to transgender persons including separate HIV surveillance centres, sex reassignment surgeries, etc.
- **Certificate of identity for a transgender person:** This will be issued by the District Magistrate on request. This certificate will be used as the basis for recording gender in all official documents and will be the basis for conferral of rights as a transgender person.
- **Welfare measures by the government:** The government will take measures to ensure the full inclusion and participation of transgenders in mainstream society via rehabilitation, vocational training, employment schemes etc.
- **Offences and Penalties:** The Bill recognizes the following offences:
  - **begging, forced or bonded labour;**
  - denial of use of a public place;
  - denial of residence in household, village, etc.;
  - physical, sexual, verbal, emotional and economic abuse.
  - These offences will attract imprisonment between six months and two years, and a fine.

- **National Council for Transgender persons (NCT)** will be set up to advise the central government on the formulation and monitoring of policies, legislation and projects with respect to transgender persons.

#### Its Critical Appraisal

- The Bill completely eliminates the option of identification as either male or female but includes the identity as only 'part male' or 'part female'.
- Compulsory certification coupled with onerous procedure for certification stands in violation of the self-identification principle.
- Unlike the previous private member bill, the new bill does not provide the definition of discrimination.
- There is simply no punitive mechanism in place as far as potential violation of the duty against discrimination is concerned.
- Also, there have been a number of instances where transgender individuals have been disproportionately targeted under the general law related to beggary.
- The new bill does not cover reservation provision which was earlier dealt in the previous bill and even the NALSA judgement.

#### Way Ahead

- Transgender is a crucial gender identity issue which not only requires action by the government and civil society but requires their integration in the mainstream society.
- International Examples: Ireland, Argentina, Malta, Colombia and Denmark allows the transgender community to self-determine gender without undergoing medical treatment or sterilization.

Gender equality in true sense can be achieved only if we incorporate all the genders in its definition.

### 1.3. ISSUES RELATED TO CHILD

Children are one of the most vulnerable communities in India lacking in political, social and economic rights. They suffer from a gamut of issues like poor child education and health care, child labour, child marriage etc. **Article 23 of the constitution** gives the right to people (especially children) against exploitation and the State's duty to protect it. Subsequent sections discuss issues associated with children and some steps taken by the government

#### 1.3.1. NATIONAL ACTION PLAN FOR CHILDREN, 2016

##### Why in News?

- National Action Plan for Children, 2016 (NAPC) was launched by Ministry of Women and Child Development (WCD).

##### Need of the initiative

- The National Policy for Children was adopted by the Government of India (GOI) in 2013.
- NPAC links the 2013 Policy to actionable strategies under its priority areas.

##### National Policy of Children 2013

- It recognizes a child to be a person below the age of 18 yrs.
- It recognizes that **children are not a homogenous group** and require different responses.
- It aims to give a social safety net to family to help nurture child.
- It says that every child has universal, inalienable and indivisible human rights.
- It has four priority areas:
  - **Survival, health and nutrition**
  - **Education and development**
  - **Child Protection**
  - **Child Participation**

- It aims to coordinate all stakeholders including GOI and civil society organizations to address child rights.

India brought the National Policy of Children in 2013 for emerging issues and also proposed a National Action Plan to implement it.

### Provisions of the Action Plan

Some of the provisions of the National Child Action Plan of 2016 are as follows-

- **On Child Survival, Health and Nutrition**
  - ✓ It will help in the improving child health by universalizing the maternal and child healthcare.
  - ✓ It will also give emphasis on new born care by initiatives like universal immunization.
  - ✓ It will prevent mental and physical disabilities through timely measures for pre-natal, peri-natal and post-natal care of mother and child.
- **On Education and Development**
  - ✓ It will provide universal and equitable access to quality Early Childhood Care and Education (ECCE) for all children below six years of age.
  - ✓ It will promote affordable and accessible quality education up to the Secondary level for all children.
- **On Child Protection**
  - ✓ It will help strengthen legislative, administrative, and institutional redressal mechanisms for Child Protection at all level.
- **On Child Participation**
  - ✓ It will ensure that children actively participate in planning and implementation of programmes concerning them.

### Significance of the Action Plan

- NPAC will take **Sustainable Development Goals (SDGs) in account** and provide a roadmap to achieve them.
- NPAC puts focus on **emerging concerns for children** such as online child abuse, children affected by disasters and climate change etc.

According to the 2013 Policy, NPAC will form a **National Co-ordination and Action Group (NCAG)** under the Ministry of WCD. It will coordinate, implement and monitor the plan.

## 1.3.2. CHILD ADOPTION

India has the largest population of children in the world. Adoption is a **solution for both childless couples and the homeless children**. It can be an **alternative option to surrogacy** which is considered to be exploitative.

### 1.3.2.1. ADOPTION REGULATIONS 2017

#### Why in news?

Government recently notified **Adoption regulations 2017** framed by Central Adoption Resource Authority (CARA) to replace the 2015 adoption guidelines. It will help in streamlining the process of adoption.

**Section 68 of the Juvenile Justice Act 2015** makes CARA responsible to

- Promote in-country and interstate adoptions.
- Frame regulations on adoptions.
- Promote intercountry adoptions as per **Hague Convention on Intercountry Adoption**.

### Need of these regulations

- While the 2015 guidelines had no legal powers, the **2017 regulations will have enforcement powers.**
- The regulations **will lay timelines for stakeholders** to clear the adoption procedure, application of birth certificates, passports, petitions etc.

### What does the regulation say?

- Intercountry and intra-country adoption procedures have been defined clearly.
- CARA will report and facilitate all adoptions under the JJ Act, 2015 through **CARINGS.**
- For safeguards, CARA would maintain adoption records and ensure post-adoption follow up.
- Currently **only biological parents or adoptive parents are recognized** leaving out the step parent of any legal responsibility. The regulation –
  - ✓ **Defines the step parent legally**
  - ✓ Allows birth certificate of the adopted child to have their name in it.
- **District Child protection Unit (DCPU)** will maintain a panel of professionally qualified or trained social workers.
- Couples with more than three children shall not be eligible for adoption except in special needs.

### Significance of the regulation

- It is a part of reforms towards a **Uniform Civil Code as per the Constitutional Article 44.**
- It would **remove the challenges faced by CARA and adoption agencies** to streamline adoption process.
- It makes the **adopted children legal heirs in matters of inheritance of property.**

### Challenges

- **Lack of proper implementation** can make the adoption process exploitative for children.
- **Capacity building of the workforce** is a prerequisite for the success of the regulation.

### 1.3.3. CHILD ABDUCTION

Union ministry of women and child development (WCD) has drafted the **Civil Aspects of International Child Abduction Bill, 2016**

- Once approved will facilitate prompt return of any **child under 16 who has been “wrongfully removed to or retained in other state which is not his/her habitual residence.”**
- The bill will provide an enabling legislation to implement the provision of the **Hague convention.**

#### Features of the bill

- The draft mandates setting up the Central Authority who shall be an officer of the Central Government not below the rank of **Joint Secretary** to the Government of India.

#### About Hague convention

The Hague Convention seeks “to protect children internationally from the harmful effects of their wrongful removal or retention and to establish procedures to ensure their prompt return to the State of their habitual residence, as well as to secure protection for the rights of access.”

Ninety-four states are party to the Hague Convention on Civil Aspects of International Child Abduction.

India is not a signatory to the Hague Convention. A country has to have a domestic law in place before it can become a signatory.

- Applications can be made to the Central Authority for assistance in securing the return of such child.
- The central authority would have the power to decide all the cases in this matter.
- The Central Authority shall while inquiring into any matter referred to have all the powers of a civil court.
- The Central Authority may apply to the High Court (**First strike principle**) within whose territorial jurisdiction the child is physically present or was last known to be present for an order directing the return of such child.
- The central authority may exchange information relating to any such child, with the appropriate authorities of a Contracting State.
- The Central Authority shall submit an annual report to the Central Government through the Ministry of WCD.

#### Way forward

- The bill can be further improved on the lines of other countries and their experience. In the US and Europe, inter-parental child abduction is a serious offence where the accused parent can go to jail on charges of abduction.
- The bill is a right step in direction towards ending the trauma for children facing this issue. It should be discussed and debated and made into a law as soon as possible.
- Incorporating following changes as suggested by 21<sup>st</sup> Law commission in its first report
  - including one-year jail term for wrongful retention or removal of a child from the custody of a parent.
  - The offenders may include one of the parents or family, relatives and others.
  - three months' punishment for wilful misrepresentation or concealment of fact as regards the location or information about the child or for voluntarily prevent the safe return of the child.

#### 1.3.4. CHILD ABUSE

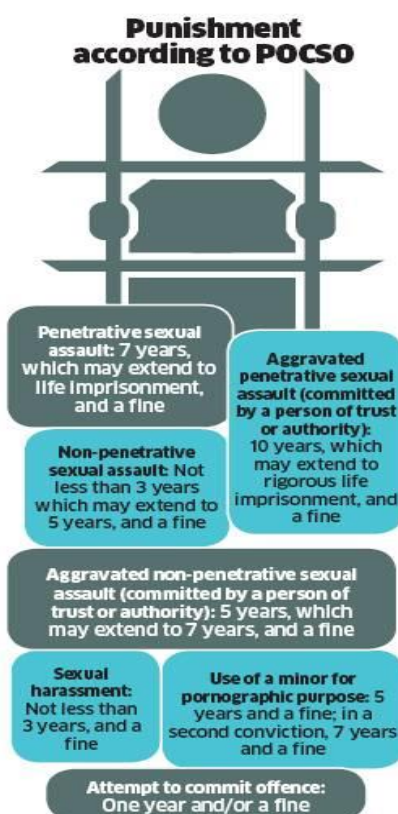
National Crimes Record Bureau statistics state that a total of 48,338 child rape cases were recorded from 2001 to 2011. India saw an increase of 336% of child rape cases from 2,113 cases in 2001 to 7,112 cases in 2011.

#### Issues

- These figures are under reported as majority of child rape cases are not reported to the police.
- It is known that about nine of 10 rapes and sexual assaults are carried out by people known to the victim.
- The insensitivity and unhelpful attitude of police, lawyers and untrained hospital staff makes prosecution and conviction difficult.
- In absence of support the children regularly become victims of other forms of sexual assault too.

#### Why Child rapes are increasing?

- **A rise in reporting:**
  - ✓ Reporting of child abuse and rape cases have



increased due to the lowering of the stigma attached.

- ✓ The rise of social media has created awareness about child abuse.
- ✓ Many instances of celebrities opening up about being abused in their childhood (for instance, the actor Kalki Koechin) have also motivated many parents to report.
- **New criminal laws:**
  - ✓ The introduction of **POCSO in 2012** and the Criminal Law (Amendment) Act in 2013 was instrumental in higher reporting of rape against children.
  - ✓ The definition of rape now includes many more sexual actions than were earlier classified as sexual assault.
  - ✓ Age of consent for girls has been raised from 16 to 18 years. This means boys who have consensual sex can be charged with rape.

### Need for Special Law for Child Rape – POCSO

The government has enacted POCSO Act to deal with sexual assault, sexual harassment against children while safeguarding the interests of the child at every stage of judicial process.

#### Why in News?

- Increasing instances of child molestation and rape in Indian cities.
- In 2015 Madras HC suggested the centre for considering castrating child sexual abusers as a punishment.
- Consequently SC in 2016 advised Parliament to consider a law for harsher punishment for such crimes.

#### Significance of POCSO Act

- It gives exclusive definition to the crime of sexual offences against children and fulfils the mandatory obligations of India as a signatory to the United Nations Convention on the Rights of The Child, acceded to on December 11, 1992.
- It enjoins the National and State Commissions under the Commissions for Protection of Child Rights, 2005 to ensure the effective implementation of its provisions.

#### Challenges

- Despite Supreme Court's direction in 2013 none of the **regulatory or monitoring bodies** can be said to be fully functional.
- The provisions of POCSO are **not properly applied by the police** and other parties. Consequently, child offenders get away despite a stringent law. There is a need for greater awareness, training and familiarization of application of the law by police.

Some other steps that government is taking are discussed below:

#### Ban on Child Pornography

##### Apex Court's Stand:

- The Centre shall file affidavit **to suggest ways and means to curb** child pornography.
- Innocent children can't be made prey to this kind of painful situation and **a nation cannot afford to carry on any experiment on children in the name of liberty** or freedom of speech and expression

- The Indian Penal Code and the Information Technology (IT) Act prohibit the production or transmission of so-called "obscene material" even though there is no law explicitly prohibiting pornography.
- Publishing or transmitting obscene material electronically can carry a three years sentence, if an offender is convicted under the IT Act.



- It said that **one needs to draw a distinct line between art and obscenity** and child pornography cannot be justified in the name of freedom of speech and expression.
- The apex court said that **parameters regarding pornography has to be decided** and it has already held in other cases that freedom of speech and expression as envisaged under article 19 (1)(a) of the Constitution is **not "absolute"** and is subject to reasonable restrictions.
- It asked the Centre **to seek advice from the experts and suggestions from the National Commission for Women (NCW)** on banning of websites dealing with adult and child pornography.

#### Aarambh Initiative

- It is the country's first-ever hotline to curb sexual abuse of children through the Internet and to remove child pornographic content online unveiled.
- **Aim:** To eliminate the scourge of online child pornography and further the cause of child protection in online spaces.
- It is a network of organizations and individuals working on child protection in the country, has collaborated with the U.K.-based Internet Watch Foundation (IWF).

#### Government's Stand

- Additional Solicitor said that agencies like Interpol and the CBI are taking necessary steps to block sites which specifically deal in child pornography.
- The government has also maintained that it cannot (and will not regulate all pornography) but block only child pornography.
- It is possible to ban child pornography but it is not possible to ban pornographic websites as they are not under any country's jurisdiction

#### Why it is difficult to ban porn?

- The method of blocking the URLs of such websites is usually ineffective as most such websites continue to operate by simply changing their URLs.
- Most servers are located outside India.

### 1.3.5. JUVENILE DELINQUENCY

Juvenile delinquency refers to a large variety of disapproved behavior of children and adolescent which the society does not approve of, and for which some kind of admonishment, punishment or corrective measure is justified in the public interest. It covers a multitude of different violations of legal and social norms, from minor offences to serious crimes, committed by juveniles.

#### Causes for Juvenile delinquency

- **Individual factors** – It includes certain personality traits like feeling of insecurity, fear, lack of self-control, emotional conflict etc.
- **Family** – Broken homes, father's work habits, cohesiveness of the family, relations between parents, affection of siblings, standards of home, parent's discipline and affection etc. play a very important role in defining the behavior of a child. These factors are undergoing changes due to urbanization, globalization and cultural changes.
- **School and Peer group relations** – After family, the child spends most of its time in the school and with his friends. It can supplement the role of family in enhancing values.
- **Movies**- Cinema and Television has emerged as strong attractions for children in recent times. Thus, its content needs to be moderated according to the needs of the children.
- **Persistent unemployment and low incomes**- It increases the likelihood of their involvement in any kind of criminal activities and unethical behavior.

Juvenile delinquencies can be associated with following consequences:

- **Lack of good economic opportunities** – Their past record may hurt their chances of good employment, housing and stable future.
- **Low social status** – They along with their families may be looked down upon by the society resulting into further family tensions as well as social conflicts.
- **Increase in crime rates** – The present delinquencies if not corrected may fuel further cases of unacceptable behavior from the same families or neighborhoods.

### The Juvenile Justice (Care and Protection of Children) Act, 2015

#### Key Provisions

- The Act replaces the Juvenile Justice (Care and Protection of Children) Act, 2000.
- It addresses children in conflict with law and children in need of care and protection.
- Juvenile Justice Boards (JJB) and Child Welfare Committees (CWC) will be constituted in each district.
  - ✓ The JJB will conduct a preliminary inquiry to determine whether a juvenile offender is to be sent for rehabilitation or be tried as an adult.
  - ✓ The CWC will determine institutional care for children in need of care and protection.
- Special provisions have been made to tackle child offenders committing heinous offences in the age group of 16-18 years.
- The Juvenile Justice Board is given the option to transfer cases of heinous offences by such children to a Children's Court (Court of Session) after conducting preliminary assessment.
- The existing Central Adoption Resource Authority (CARA) was given the status of a statutory body to enable it to perform its function more effectively. This would further help in streamlining adoption procedures for orphan, abandoned and surrendered children
- Several new offences committed against children, which were so far not adequately covered under any other law, are included in the Act. These include:
  - ✓ sale and procurement of children for any purpose including illegal adoption, corporal punishment in child care institutions,
  - ✓ use of child by militant groups,
  - ✓ offences against disabled children and,
  - ✓ Kidnapping and abduction of children.

#### Critical Analysis

- JJ Act commits the state to provide education, skill development, counselling, behaviour modification therapy and psychiatric support for inmates. But juvenile homes in India are yet to acquire the expertise to undertake such activities.
- There are differing views on trying juveniles as adults. Some argue that the current law does not act as deterrence for juveniles committing heinous crimes. Another view is that a reformatory approach will reduce likelihood of repeating offences.
- Further, activists also cite the evidence of adult prisons not offering a reformatory experience for inmates and the higher rates of criminal recidivism among ex-prisoners.
- It violates the UN Convention on the Rights of the Child which requires requires all signatory countries to treat every child under the age of 18 years as equal. However, many other signatories like UK, France, Germany do the same.
- The Supreme Court has called for a broader interpretation of the definition of the expression "children in need of care and protection" in the Juvenile Justice (Care and Protection of Children) Act, 2015, as it does not specifically include children of victims of sexual abuse and trafficking in its scope.

### Way Forward

The enactment of the JJ Act was the easier part. If the promise of reformatory, rather than retributive, punishment is to be met, central and state governments must address the gaping lacunae in the implementation of well-intentioned laws.

### 1.3.6. CHILD MARRIAGE

### 3 in 10 married in teens, 9 in 10 women by age 25

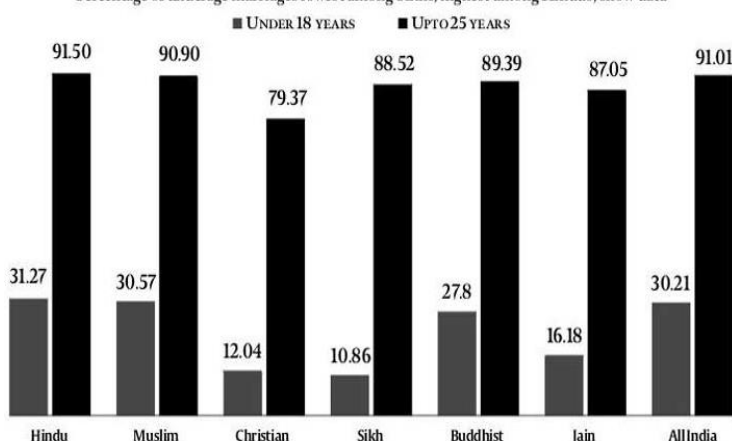
#### Why in News?

The Census 2011 reveals that child marriage is rampant in India, with **almost one in every three married woman** having been wed while she was still under the age of 18 years.

#### Key Findings

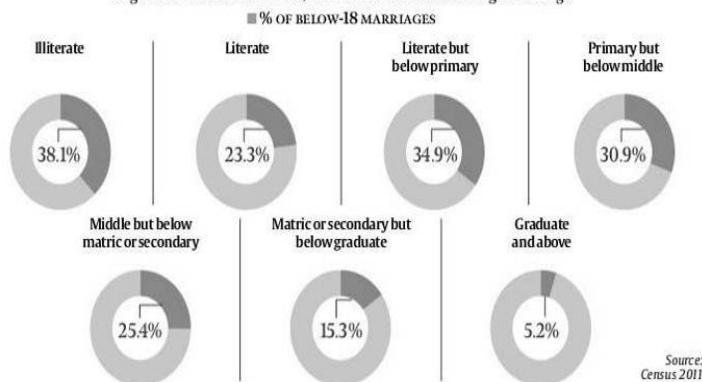
- 78.5 lakh girls (2.3% of all women or girls who were ever married or were married in 2011) were married while they were not yet 10 years of age.
- 91% of all married women were married by the age of 25 years.
- **Alarming 30.2% of all married women (10.3 crore girls) were married before they had turned 18.**
- **As per Census 2001 data,** 43.5% of all married women had been married while they were under the age of 18 years.
- **Religion Breakup**
  - ✓ 31.3% of Hindu married women were married before the age of 18 years down from the 45.1% recorded by Census 2001.
  - ✓ Whereas Muslim women married before the legal age stood at 30.6%, down from 43.1% in 2001.
  - ✓ Among Christian married women, 12%, and 10.9% of married Sikh women, were married under the age of 18 years.

Percentage of underage marriages lowest among Sikhs, highest among Hindus, show data



#### EDUCATION AND MARRIAGE

Higher the level of education, smaller the share of underage weddings



#### Basic facts

- Child marriage is **more prevalent in rural areas** (48%) than in urban areas (29%).
- In general, rates of child marriage are **highest in the central and western parts of India** and lower in the eastern and southern parts of the country.
- In certain states like Bihar and Rajasthan, approximately 60% of females are married as children.
- Other states having rate of child marriage higher than national average: Jharkhand, UP, West Bengal, MP, Andhra Pradesh, Karnataka, Chhattisgarh and Tripura.
- However, even in states with overall low prevalence of child marriage, there are often pockets of high prevalence.

- **Literacy:** While 38.1% of illiterate married women were married below the age of 18, 23.3% of literate married women got married below the legal age.

### Reasons for child marriage

- **Education opportunities:** low quality of education, inadequate infrastructure and lack of transport.
- Although there is widespread awareness of the Prohibition of Child Marriage Act 2006 (PCMA) and the illegality of child marriage, individually people feel that the traditions and norms are stronger than the law and the institutions and rarely report cases.
- Girls are often seen as a liability with limited economic role.
- The **dowry amount** increases with the age and the education level of the girl. Hence, the “incentive” of the system of dowry perpetuates child marriage.
- Law enforcement to prohibit child marriage is relatively weak.

### Implications of Child Marriage

- Early marriage deprives children of access to education and therefore to better opportunities in the future.
- It limits the child’s freedom of decision and contributes to intergenerational cycle of poverty.
- Child marriage is often associated with multiple health risks - young brides have limited access to, and use of, contraception and reproductive health services and information.
- The majority are exposed to early and frequent sexual relations and to repeated pregnancies and childbirth before they are physically mature and psychologically ready.
- Domestic violence thrives in an environment where women feel powerless and lack access to vital resources and decision making powers.
- Child marriage violates the rights of boys and girls and undermines efforts to achieve sustainable development.
- It also affects society as a whole since child marriage **reinforces a cycle of poverty and perpetuates gender discrimination, illiteracy and malnutrition as well as high infant and maternal mortality rates.**

### Government Strategy and Action

- The **Prohibition of Child Marriage Act, 2006** makes it illegal for girls to marry under 18 years and for boys under 21 years.
- Child marriage is a punishable offence with a fine up to INR 100,000, or up to two years of imprisonment, or both. It is a **non-cognizable and non-bailable offence.**
- Dowry was prohibited in 1961 by **the Dowry Prohibition Act**, with a fine up to INR 15,000, or the dowry amount, whichever is higher, and imprisonment for between six months and five years.
- Other laws that may provide protection to a child bride include the **Juvenile Justice (Care and Protection of Children) Act, 2000, the Domestic Violence Act, 2005, and the Protection of Children from Sexual Offences Act, 2012.**
- Recently, Rajasthan government in collaboration with UNFPA and UNICEF started a district-level Abhiyan Yatra named “Sajha Abhiyan” for complete elimination of child marriages in the State.
  - Research by National Commission for Protection of Child Rights (NCPCR) has revealed that Rajasthan has reported the highest incidence of child marriages.
  - The yatra will bring the community on a united platform to work towards making the State child marriage-free.

### Way forward

- It is necessary to put in place progressive efforts to prevent child marriages in India, by adopting an **integrated approach**-where **the process of changing social norms is supported by the availability of alternative opportunities for children, the creation of an enabling environment, and structural improvements including effective implementation of the legislation.**
- An effective approach would **target individuals at the family and community level; NGOs, groups operating at various levels and government officials at the institutional level.**

### 1.3.7. CHILD LABOUR

According to the 2001 census, there were 12.6 million child workers between the ages of 5 and 14 in India. In 2011, this number fell to 4.35 million. The National Sample Survey Office's survey of 2009-10 put the number at 4.98 million.

#### 1.3.7.1. CHILD LABOUR (PROHIBITION AND REGULATION) AMENDMENT ACT, 2016

##### Salient features of the Act

- The Act amends the Child Labour (Prohibition and Regulation) Act, 1986, which prohibits the employment of children younger than 14 in 83 hazardous occupations and processes.
- The amendment:
  - ✓ Extends this ban on employment of children under 14 across all sectors,
  - ✓ Prohibits the employment of adolescents aged 14-18 years in hazardous occupations and
  - ✓ Introduces more stringent jail term and fines for offenders: a jail term of six months to two years and a fine upto Rs 50,000
- The Act brings down the list of hazardous occupations from the earlier 83 to just three: mining, inflammable substances, and hazardous processes under the Factories Act, and the centre will decide which processes are hazardous.
- The Act has a provision of creating **Rehabilitation Fund** has also been made for the rehabilitation of children.

##### Pros

- The Act is aligned with the statutes of the International Labour Organization (ILO) convention.
- Since there is complete ban on child labour (children under age 14), they can get compulsory primary education in light of Right of Children to Free and Compulsory Education Act, 2009.
- It takes into account the realities of family enterprises where children help their parents in miscellaneous ways.

##### Cons

- Children under 14 years will be allowed to work in family businesses, outside of school hours and during holidays, and in entertainment and sports. This can be blatantly misused by many and lead to "victimization of children" in their poverty.
- The definition of 'family' has not been defined. As UNICEF India has commented, this could lead to more children working in unregulated conditions.
- Even in family enterprises, there is no skilling done. It is mostly against child's will and is almost slavery. So care has to be taken while implementing the law to not go against the spirit of the law.

- Dilution of penalties against parents and guardians who “force” children into child labour can go against the spirit of the law, i.e., to prevent child labour.

#### Other Notable Points

- The number of child laborers decreased by 65% - from 1.26 crore to 82.2 lakh (aged between 5 – 14 years) between Census 2001 to and Census 2011. This is due to programmes like RTE, MNREGA, Mid Day Meal scheme. So the scourge of child labour can only be eliminated with overall development and creation of opinion, along with rehabilitation. The Child Labour Bill and penalties are only a spoke in the wheel.
- 50% of child labour is in Bihar, UP, Rajasthan, MP and Maharashtra. Over 20% is in UP alone. So special focus is needed here.

### 1.3.7.2. NATIONAL CHILD LABOUR PROJECT (NCLP)

#### Why in news?

Kailash Satyarthi expressed disappointment over an increment of just 8% for the **National Child Labour Project** in the Budget. It is a project of Ministry of Labour with aim to suitably rehabilitate the children withdrawn from employment thereby reducing the incidence of child labour in areas of known concentration of child labour.

#### The NCLP Scheme seeks:

- To eliminate **all forms of child labour through**
  - ✓ Identification and withdrawal of all children in the Project Area from child labour,
  - ✓ Preparing children withdrawn from work for mainstream education along with vocational training
  - ✓ Ensuring convergence of services provided by different government departments/agencies for the benefit of child and their family
- To contribute to the **withdrawal of all adolescent workers** from Hazardous Occupations and their **Skilling and integration** in appropriate occupations through facilitating vocational training opportunities through existing scheme of skill developments
- **Raising awareness** amongst stakeholders and target communities, and orientation of NCLP and other functionaries on the issues of ‘Child Labour’ and ‘employment of adolescent workers in hazardous occupations/processes’
- Creation of a **Child Labour Monitoring, Tracking and Reporting System**.

#### Target Group

- All child workers below the age of 14 years in the identified target area.
- Adolescent workers below the age of 18 years in the target area engaged in hazardous occupations.
- Families of Child workers in the identified target area.

#### Strategy

- To create an enabling environment in the target area, where children are motivated and empowered through various measures to enroll in schools and refrain from working

#### 100 Million for 100 Million

The Campaign organized by the Kailash Satyarthi Children’s Foundation aims to mobilise 100 million youth for 100 million underprivileged children across the world, to end child labour, child slavery, violence against children and promote the right of every child to be safe, free, and educated, over the next 5 years.

- Households will be provided with alternatives to improve their income levels.
- It will be implemented in close coordination with State, District administration and civil society.
- Elimination of Child Labour is joint responsibility of the Ministry of Labour and Employment and the State Governments.

#### Expected Outcomes

- Contribute to the identification and eradication of all forms of child labour.
- Contribute to the identification and withdrawal of adolescents from hazardous occupations and processes in the target area.
- Successful mainstreaming into regular schools of all children who have been withdrawn from child labour and rehabilitated through the NCLPS.
- Adolescents withdrawn from hazardous occupations to have benefited from skills training wherever required and linked to legally permissible occupations.
- Better informed communities, specific target groups and the public at large as a result of the Social Mobilization Programme and Awareness about the ill effects of child labour.
- Enhanced capacities to address the issue of child labour through training of NCLP staff and other functionaries.

#### 1.3.7.3. RATIFICATION OF ILO CONVENTION

India recently has ratified the ILO Convention 182 on the worst forms of child labour and Convention 138 on Minimum Age of Employment. It will have various impacts towards ending the child labour-

- **Zero tolerance towards exploitation of children** - the government will take immediate, urgent and effective measures to prohibit and eliminate the worst forms of child labour likely to harm the health, safety or morals of children.
- **Fix minimum age** - It requires India to ensure that no one under the fixed age is admitted for work in any occupation except in cases of light work and artistic performance
- **Prohibiting worst forms of child labour** – It will require India to prohibit the worst forms of child labour including slavery, debt bondage, serfdom, forced or compulsory labour etc.

Ending child labour has various other positive outcomes such as reduced dropping out rates, reduced stress on children of economic roles, right to adequate playtime and safe childhood etc. But ultimately the success on eliminating exploitation against children depends on the level of social empathy, political will and the implementation of resources invested in the development and protection of children. It can be solved only if the reasons driving exploitation of child, such as poverty unemployment, lack of social security net, inadequate enforcement of law, are resolved.

### 1.4. ELDERLY ISSUES

Although India's demography is still inclined towards youth population, it is estimated that by 2050, 20% of the Indian population would be above 60 (presently it is only 6%). The number of Indians above the age of 60 increased 35 percent from 2001 to 2011. India's age dependency ratio is also increasing from 10.9% in 2001 to 14.2% in 2011. The factors responsible for this are reduction in mortality due to economic well-being, better health care system, good medicines, etc. and reduction in fertility.

India already has the **second largest elderly population** in the world. The state with the maximum percentage of elderly is Kerala with 12.6% of the population. The elderly population is facing several issues as discussed:

- **Health insurance** – According to NSSO, **incidence of diseases as well as hospitalization rates are much higher in older people** than the total population. 10% of elderly in India suffer from depression and 40-50% require psychiatric or psychological intervention at some point. However, only less than 1% of elderly population in India has health insurance.
- **Infrastructure regarding elderly population is poor.** Eg. Very low numbers of Government run elderly recreation homes. There is a **supply shortfall in affordable senior care homes.**
- **Lack of social security** and pensions for majority of the elderly population. On the other hand, lesser people of working age means lower number of working people leading to lower tax base and lower tax collection. 65 per cent of the elderly in India are dependent on others for their financial requirements and undergo financial crisis.
- **Migration and displacement for work** by the youth population from the rural to the urban areas leads to changing demography in **rural areas with increasing solitary elderly population.** 71 percent elderly reside in villages while 29 percent reside in cities.
- With the increasing trend of nuclear families in the society and with fewer children in the family, the care of older persons in the families gets increasingly difficult.
- Even though the **Maintenance and Welfare of Parents and Senior Citizens Act** gives the police a major role, they are overburdened and insufficiently trained to handle elderly cases. Data on elderly living in a region is not available thus hindering any disaster management activities related to elderly. For eg. Chennai disaster.
- The proportion of literates among elderly increased from 27% in 1991 to 47% in 2011. Government projections suggest a **feminization of the elderly population** occurring, with 51% of the total likely to be women by 2016.

#### **Maintenance and Welfare of Parents and Senior Citizens Act, 2007**

- It makes it a legal obligation of children and heirs to provide maintenance to senior citizens and parents, by monthly allowance.
- Senior citizens who are unable to maintain themselves shall have the right to apply to a maintenance tribunal seeking a monthly allowance from their children or heirs.

**Article 41-** “The state shall, within the limits of its economic capacity and development, make effective provision for securing the right to public assistance in cases of old age”.

There are various **global policy guidelines** to encourage governments to design and implement their own policies from time to time, like:

- The Madrid Plan of Action and the United Nations Principles for Senior Citizens adopted by the UN General Assembly in 2002
- The Proclamation on Ageing and the global targets on ageing for the Year 2001 adopted by the General Assembly in 1992
- The Shanghai Plan of Action 2002 and
- The Macau Outcome document 2007 adopted by UNESCAP

The Government of India is a signatory to all these documents demonstrating its commitment to address the concerns of the elderly.

#### **Evolution of Policies in India**

- Social security is the **concurrent responsibility** of the central and state governments.
- The well-being of senior citizens is mandated in the **Constitution of India under Article 41.**
- A formal centrally managed **social security scheme- the National Social Assistance Programmed (NSAP)** came into effect on 15th



August 1995. It included the **National Old Age Pension Scheme (NOAPS)** as an important part.

- The Central Government launched the **Indira Gandhi National Old Age Pension Scheme**, a modified version of the NAOPS.
- Subsequently, **The National Policy on Older Persons 1999** was announced by the Government of India.
- An **Integrated Programme for Older Persons has been implemented since 1992**, which provides for the improvement of quality of life of the senior citizen by providing basic amenities like food, clothing, shelter etc. It provides **90% of financial assistance to the non-governmental organizations** for establishing and maintaining old age homes and mobile medical units.
- The Ministry of Social Justice and Empowerment piloted landmark legislation the **"Maintenance and Welfare of Parents and Senior Citizens" Act 2007** was promulgated by the States and Union Territories in stages.
- The **National Programme for Healthcare for Elderly, 2010**, was launched to provide for preventive, curative and rehabilitative services to elderly people.
- **The Draft National Policy on Senior Citizen, 2011**, also, focused on various aspects related to old age like Income security, healthcare, safety security, housing, productive aging, welfare, multigenerational bonding, etc.

#### National Policy on Older Persons 1999

- It envisages State support to ensure financial and food security, health care, shelter and other needs of older persons, equitable share in development, protection against abuse and exploitation, and availability of services to improve the quality of their lives.
- It also covers issues like social security, intergenerational bonding, family as the primary caretaker, role of Non-Governmental Organizations, training of manpower, research and training.

#### Why we Need a Policy?

- The demographic profile depicts that in the years 2000-2050 population of people in their 60 years and above will increase by 326% and those in the age group of 80+ by 700% - the fastest growing group.
- **1/8th of the Worlds Elderly Population** lives in India. Most of them will never retire in the usual sense of the term and will continue to work as long as physically possible.
- There is a **challenge of old age income security** because ability to produce and earn declines with age. The absence on savings will result in sharp **declining in living standards that for many can mean destitution**. 65 per cent of the elderly in India are dependent on others for their financial requirements and undergo financial crisis.
- Increase in life span also results in **chronic functional disabilities** creating a need for assistance required by the Oldest Old to manage simple chores.
- There are further categories among the old age people who need further special attention, viz.
  - **Elderly women**- Women experience **disproportionately higher rates of chronic illness** and disability in later life than men. They **suffer greater non-communicable diseases and experience lower social and mental health status**, especially if they are single and/or widowed.
  - **Rural Poor**- The absolute poor in India **cannot be expected to participate in long term savings schemes for old age** and they do not. The poverty in rural areas for older persons is increasing and needs attention.
- Also, due to dissolving institution of joint family and migration and displacement for work by the youth population, the elderly are more vulnerable.

### Criticism

- The state is seemingly shying away from its responsibility by not implementing strong guidelines for the protection of the elderly. For example, acts like Maintenance and Welfare of Parents and Senior Citizens Act, 2007 do not endow any obligation of establishing old age homes on the government.
- There is a lack of well-established and structured pension system in the country. Majority of old people are excluded from such financial help all together as it is not universal in nature.
- There is a lack of awareness about the prevalent schemes and programmes among the elderly. Besides this, difficulties are faced by illiterate poor elderly in providing documentary proof like identity proof, age proof and recommendation of Panchayat members. This has led to emergence of middlemen, bribery, corruption and caste favourism.
- There needs to be a better planning in terms of disbursement of benefits. The programmes are plagued with leakage and inability in identifying right beneficiaries.
- The Indian pension market, the regulation and supervision of the pension schemes are very complex and fragmented in nature. There is an urgent need to develop a clear regulatory and supervisory framework to avoid conflicts and have cost effective regulatory mechanism in place.

### Way Forward

- India is experiencing a demographic transition, which will have impact on the individual, family, community, society at large and the nation. The increase in the number of elderly people in the country calls for responsible policies and programmes for their protection and care.
- The foremost step that requires urgent attention is to **sensitize people**, especially the younger generation, towards the needs of our elderly population. Changing social matrix has had a crucial impact on the way youngsters treat and look at their elders. The government, through various school level and other programmes, may do so.

## 1.5. ISSUES RELATED TO DIFFERENTLY ABLED

The Council of Social Development recently released **India Social Development Report 2016** with theme "**Disability Rights Perspective**" addressing the fundamental elements of non-derogable rights of the differently abled people. Social development report 2016 provides adequate data for government to prepare a databank for disabled population and prepare adequate niche schemes for men, women, children and elderly. It will also help fulfill obligations of the Convention on the Rights of Persons with Disabilities of which India is also a signatory. Its key findings are:

- Men formed 56% of the Persons with Disability (PWDs). Also 70% of the disabled population was rural.
- 45% of all PWDs in India are illiterate. 38% of all male PWDs and 55% of all female PWDs are illiterate. For each category of disability, a greater proportion of women are illiterate than men

#### Facts & Figures

- Over 1 billion people in the world have some form of disability, that's 1 in 7.
- More than 100 million disabled persons are children.
- Children with disabilities are almost four times more likely to experience violence than non-disabled children.
- 80% of people with disabilities live in a developing country.
- 50% of disabled persons cannot afford health care.

- Out of total out of school children in primary education, one-third are children with disabilities.
- Movement disability in children went down by 11 percent because of polio immunization program.
- 'Mental illness' constituted the lowest proportion, this may be a result of under-reporting due to the stigmatising nature of psycho-social disabilities, coupled with poor diagnoses
- Sikkim, Odisha, J&K and Lakshadweep had the highest percent of disability, while Tamil Nadu, Assam and Delhi had the lowest proportions of the PWDs.
- At the national level, only 2% of the PWDs were enrolled in any vocational course. Lack of social services and transport were the top obstacles to the PWDs accessing health care facilities.

Persons with Disability Act, 1995 defines Disability under seven categories: blindness, low vision, leprosy-cured, hearing impairment, loco motor disability, mental retardation and mental illness. 2011 Census says 2.21% are disabled in India.

### Issues around Disability in India

- Disability is not being measured properly in India.
  - ✓ Not all censuses in India have measured Disability.
  - ✓ The ones that have measured have used different definitions for disability making comparisons difficult.
  - ✓ Changes in definition makes someone disabled in one census and not disabled in another.
- India looks at disability from medical or pathological angle only.
- Most developed countries look from social angle, highlighting institutional and social arrangements preventing those with impairments from leading normal lives.
- Census depends on self-reporting of disability; this may leave out mental disability and even physical disability.
- Lack of Institutional and Infrastructural Support for the disabled in India.

### Issues related to blind people

In April 2017, Union Health Ministry changed the definition of 'blindness' through a notification to tune it with the globally accepted definition of the blindness, as recommended by the World Health Organisation. Previously, according to **National Programme for Control of Blindness (NPCB) 1976**, a person was categorised as blind if he is unable to count fingers from a distance of **six metres** is.

#### National Programme for Control of Blindness and Visual Impairment 1976

- Centrally Sponsored scheme with the goal to reduce the prevalence of blindness from 1.4% to 0.3% of total population by 2020.
- It envisions developing and strengthening the programme for "Eye Health" and prevention of visual impairment; through provision of comprehensive eye care services and quality service delivery.
- Strengthening and up-gradation of infrastructure for eye health care.
- To enhance community awareness on eye care and

- New Definition of Blindness
  - ✓ According to the World Health organisation, a person who is unable to count fingers from a distance of **three metres** would be considered blind.
- Moreover, the name of the scheme, 'National Programme for Control of Blindness' has been changed to 'The National Programme for Control of Blindness and Visual Impairment.

### Significance of New Definition

- National Programme for Control of Blindness (NPCB) 1976 definition was based on **economic blindness** meaning the impairment hampering the ability of a person to earn the wages. Whereas, the WHO-definition is much broader and is based on **social blindness** as well, that is the blindness which hampers day-to-day interaction of the person.
- This initiative would reduce the counts of blind people from 1.20 crore (as per National Blindness survey 2007 data) to 80 lakh.
- This initiative brings uniformity of blindness criteria also aid the medical researchers to calculate the national burden of blindness in comparison to other countries.
- Changing the criteria is also driven by India's goal to reduce blindness prevalence in the country to 0.3% of the total population by 2020, in line with the WHO's Vision-2020 goal.

### 1.5.1. GOVERNMENT INITIATIVES FOR THE DISABLED IN INDIA

- Persons with Disability (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995.
- India signed the UN Convention on Rights of Persons with Disability.
- Term "divyang" is being considered in place of "viklang" to change mindset. The term would help in raising self-confidence and subsequent empowerment. However, some have criticized this move as
  - Mere change of terminology is not going to bring about any change in the manner in which people with disabilities are treated.
  - It will only invoke sympathy and underline that charity is what is needed
  - disability is not a divine gift and would only tend to create myths
- Kerala became first state to conduct a census of its own called Kerala Disability Census for 2014-15. Other states must follow example.
- The new Rights of Persons with Disability proposes to increase job reservations for the disabled from 3 percent to 5 percent.
- It also seeks to widen scope of disabilities covered under the bill from seven to nineteen.

#### 1.5.1.1. RIGHTS OF PERSONS WITH DISABILITY BILL, 2016

The Parliament passed The Rights of Persons with Disability Bill, 2016 which will replace Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995. It will make India compliant with United Nations Convention on the Rights of Persons.

#### Salient features of the bill

- Instead of seven disabilities specified in the Act, the Bill covers 19 conditions.
- Persons with at least 40% of a disability are entitled to certain benefits such as reservations in education and employment, preference in government schemes, etc.
- The Bill confers several rights and entitlements to disabled persons. These include disabled friendly access to all public buildings, hospitals, modes of transport, polling stations, etc.
- In case of mentally ill persons, district courts may award two types of guardianship. A limited guardian takes decisions jointly with the mentally ill person. A plenary guardian takes decisions on behalf of the mentally ill person, without consulting him.
- The bill provides for setting up of National and State Commissions for persons with disabilities. The Commissions will be required to:
  - ✓ identify any laws, policies or programmes that are inconsistent with the Act;
  - ✓ inquire into matters relating to deprivation of rights and safeguards available to disabled persons and recommend appropriate remedial measures;

- ✓ monitor implementation of the Act and utilization of funds disbursed by governments for the benefit of disabled persons, etc.
- The bill provides for setting up of Central and State Advisory Boards on disability. The functions of these advisory boards will include:
  - ✓ advising the government on policies and programmes with respect to disability;
  - ✓ developing a national/state policy concerning persons with disabilities;
  - ✓ recommending steps to ensure accessibility, reasonable accommodation, non-discrimination, etc.

### Concerns

- The Parliament is imposing legal and financial obligations on states and municipalities with regard to disability, which is a State List subject.
- The Bill allows discrimination if it is a proportionate means of achieving a “legitimate aim”. This makes it open to subjective interpretation.
- Provision for a Chief Commissioner of Disabilities, instead of National Commission as proposed in 2014, which has only recommending powers and lack of provision to ensure that he/she is also disabled person.
- The Bill overrides the Mental Health Act, 1987 with respect to guardianship provisions. This may result in the safeguards against misuse of guardianship, being lowered.
- The Bill is inconsistent with other laws in some cases. These include conditions for termination of pregnancy and the minimum penalty for outraging the modesty of a woman.

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### 1.5.1.2. ACCESSIBLE INDIA CAMPAIGN (SUGAMYA BHARAT ABHIYAAN)

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#### Why in news?

- Government launched Accessible India Campaign (Sugamya Bharat Abhiyan) as a nation-wide flagship campaign for achieving universal accessibility for persons with disabilities.
- The campaign targets three separate verticals for achieving universal accessibility namely the built up environment, transportation eco-system and information & communication eco-system.
- Theme of the international day of Persons with disabilities 2015 was - Inclusion matters: access and empowerment for people of all abilities.

#### Aims and Objectives of the program

- It is aimed at making transport, government buildings, tourist spots, airports, railway stations and internet technology friendly for differently-abled people.
- The campaign has ambitious targets with defined timelines and will use IT and social media for spreading awareness about the campaign and seeking commitment of various stakeholders.
- At least 50% of all the government buildings of National Capital and all the State capitals, all international airports and railway stations of A1, A and B category, at least 10% of government transport carriers and 50% of public documents will be made fully accessible for persons with disabilities soon.

#### Steps to be taken under this program

- Ramps in public buildings
- Provision of toilets for wheelchair users
- Braille symbols and auditory signals in elevators or lifts

- Ramps in hospitals, primary health centres and other rehabilitation centres.

#### Initiatives & Few proposed measures

- Government will create 'Accessible police stations', 'Accessible hospitals' and 'Accessible tourism' respectively across the country
- For enhancing accessibility of Television programmes – incorporation of features like captioning, text to speech and audio description
- A web portal and mobile application for creating a crowd sourcing platform to get information about inaccessible areas
- An Accessibility Index is also underway to measure the level of disabled friendliness of a system
- Separate institute for deaf and dumb persons and development of new brail language
- The government has decided to set up a special University for persons with disabilities with the cost of Rs. 1700 crore.

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#### 1.5.1.3. MARRAKESH TREATY

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##### What is Marrakesh Treaty?

- The Treaty is to facilitate Access to Published works by Visually Impaired Persons and Persons with Print Disabilities.
- It is also called "Books for Blind" treaty.

##### Highlights of the treaty:

- The treaty allows for copyright exceptions to help for the creation, export and import, sharing, translation of the books in any format for accessible versions of copyrighted books and other works for the people with impaired visibility.
- The treaty is expected to alleviate the "book famine" experienced by 300 million people suffering from such disability, according to WHO.

##### Implementation of Treaty

- World Intellectual Property Organisation (WIPO), a United Nations Organisation based in Geneva, administers the Marrakesh Treaty and leads an alliance of private and public partners known as the Accessible Books Consortium (ABC).
- The ABC has established a free centralized electronic database of accessible books produced by libraries for the blind around the world. It is a library-to-library service.

##### India and Marrakesh Treaty

- India was the first country to ratify the Marrakesh Treaty back in July 2014 and has set an example for other countries to follow.
- India has 63 million visually impaired people, of whom about 8 million are blind, according to WHO.
- India has begun implementation of the Marrakesh Treaty through a multi-stakeholder approach, which includes collaboration among key players such as government ministries, local champions like the DAISY Forum of India, and the private sector.
- In line with Marrakesh treaty, India launched Accessible India Campaign (Sugama Bharat Abhiyan) and has set up Sugama Pustakalaya, which has 2,00,000 volumes.

**(Note: It is not to be confused with Marrakesh Agreement signed at the end of Uruguay round of discussions for establishing WTO.)**

**Way forward**

- A holistic approach of planning towards physical infrastructure should be adopted.
- Empowering the disabled persons by imparting them education and job.

**1.6. CASTE RELATED ISSUES**

Caste based inequalities is a reality of Indian society. Over the past few years, caste has been one of the centerpieces of many issues plaguing Indian society. For example caste based agitations were being seen in one state after the other. Agriculture dominant castes like Patels, Kapus, Jats and now Marathas are demanding quota for themselves and reforms in reservation policy of India.

**Issues with Reservation policy of India**

- **Stagnant:** The reservation policy which was initiated as a temporary provision (for 10 years) for Scheduled Castes(SC) and Scheduled Tribes (ST) in our Constitution in 1950, has expanded its coverage and has now become an almost a permanent feature.
- The existing reservation policy has **failed to assimilate lowest castes/tribes** within the mainstream economy and society.
- **Political Mobilization:** Over the years, political parties has utilized caste-based reservation as vote bank politics for their electoral gain.
- **Inter-caste conflicts and tensions:** The tool of reservation has failed in removing caste differences and has promoted the caste divide and caste conflicts.
- **Dissatisfaction:** The communities excluded from reservations harbor animosity and prejudice against the castes included in the reservation category.
- **Class within Castes:** The creamy layer of reserved category has benefited most leaving mostly on the fringes devoid of any benefits and poor.
- The poor among general categories are resentful and frustrated, and tend to blame reservations for all their problems.

Despite all the problems stated above, the reservation policy is needed for social empowerment of disadvantaged section of society and reducing discrimination by providing educational and employment opportunities. However, certain reforms are required such as:

**Constitutional Provisions**

- **Article 15(3)** - State can make special provision for women and children
- **Article 15(4)** - State can make special provision for the advancement of any socially and educationally backward classes of citizens or for the Scheduled Castes and the Scheduled Tribes
- **Article 16(4)** - State can make provision for the reservation of appointments or posts in favour of any backward class of citizens
- **Article 46** - To promote the educational and economic interests of SCs, STs, and other weaker sections of society

**Important Supreme Court Judgments**

- **Mandal Case:** Under this, Supreme Court restricted total reserved quota up to 50 percent and excluded advanced section in other backward castes from benefits of reservation
- **Justice O. Chinnappa Reddy in his 1985 judgment:** efficiency cannot be used as a camouflage to let the upper classes take advantage of the backward classes in its name and to monopolise the services, particularly the higher posts and the professional institutions".
- **Jat Reservation:** The Supreme Court ruled that "caste" and "historical injustice" cannot blind a state in according backward status to a community and that new emerging groups such as transgenders must be identified for quota benefits.

- **Better Identification:** New yardsticks need to be developed for the identification of backward group instead of solely deciding on the basis of caste. It should include social and economic criteria.
- **Dis-reservation:** Families of public officials of a certain rank – IAS, IPS, other Central and State civil services, present or former MLAs, MPs, other senior politicians – certain high income professionals like physicians, chartered accountants, managers above a certain rank in the private sector, and businessmen and others above a certain income should be dis-reserved.
- **Self-proclaimed backwardness:** The perception of a self-proclaimed socially backward class of citizens cannot be a constitutionally permissible yardstick for determination of backwardness.
- **Support to poor:** No child with ability and desire should ever be denied opportunities for higher education on account of poverty or birth. Scholarships, free tuition, soft loans and other mechanisms must be strengthened.
- **Develop Capabilities:** Apart from providing admission to colleges and jobs, capabilities of the deprived and excluded section should also be developed.
- **Assimilation:** The benefits should flow to the vast majority of underprivileged children from deprived castes; not restricted to few elites.

In this context, one suggestion of moving away from caste based reservation has also come into picture because caste-based reservation has not been completely successful in bringing up the weakest member of the group. It prevents us from transcending caste and it also causes resentment against the beneficiary group, and existing prejudices and stereotypes against the group are reinforced. Thus, an evidence-based approach is being seen as an alternative for affirmative action.

Under Evidence based approach, the policy framework is explicitly linked to **empirical information** relating to disadvantage. It requires collection, maintenance and analysis of data of all citizens. It may include social as well as economic indicators. Its merits and demerits are:

- **Better Identification:** The individuals genuinely in need of support or preference can be identified cutting across the caste boundaries.
- The major advantage of such an approach is that it highlights the **fundamental reasons why affirmative action is being undertaken** – namely, various sorts of social and economic disadvantage.
- **Reduces caste-based politics:** It helps to **de-essentialise identity markers** like caste or religion.
- **Reduce inter-caste conflicts:** It provides a rational explanation why specific castes or communities are entitled to compensatory discrimination.
- **Assimilation:** It might also help target the benefits better by prioritizing the weakest members of a weak group.
- **Disadvantage:** The only downside is that such approaches become data dependent, and are vulnerable to the failings of the data sources, and to the fallacy of data.

India has changed a lot since the reservation policy was introduced. The deficiency of data and technology had made the then government to adopt simple approach of caste-based reservation. However, with the availability of sufficient data through census and real time updation technologies using Aadhaar number, evidence based approach could be utilized. It will help in better targeting and thus providing benefits to real beneficiary.



### 1.6.1. SOCIO ECONOMIC AND CASTE CENSUS (2011)

In 2011, caste based data collection was started for the first time. Socio-economic caste census (SECC) 2011 ranks the households based on their socio-economic status. This database, released for rural areas in 2015, can be utilized for identification of beneficiaries for various socio-economic welfare schemes.

#### Socio Economic and Caste Census (2011)

- SECC was conducted **both in urban and rural areas** in the country, to collect socio-economic and caste data of households.
- It was conducted by MoRD, Ministry of Urban Development, Ministry of Housing and Urban Poverty Alleviation, The Office of the Registrar General and Census Commissioner and the State Governments.
- It used different committee methodologies in urban and rural areas –
  - ✓ **NC Saxena committee (for rural areas)** – It was established to suggest design of new BPL census. It recommended a **three-fold classification of households (HHs)** -
    - **Excluded** - These HHs would be **identified by assets and income** and would be excluded from welfare benefits of the Government.
    - **Automatically included** – It would include HHs with extreme social destitution and would be automatically included for government benefits.
    - **Others** – They would be ranked on the basis of multiple deprivation indicators and would be eligible for graded benefits. Eg. Presence of an able and literate adult etc.
  - ✓ **SR Hashim committee (for urban areas)** –
    - It also followed a three step approach like NC Saxena.
    - Only difference is that **both committees used different parameters for classification**. Eg. In urban areas pucca houses with greater than 4 rooms **was excluded** whereas in rural areas it was three rooms or more.
- **Major findings of SECC are** – Only rural SECC has been publicly released till now.
  - ✓ About 19% of India's rural population was having **at least one of seven socio-economic parameters** of deprivation.
  - ✓ 30% of rural HHs are landless and derive income from manual, casual labour.
  - ✓ The second most common form of deprivation was literacy with 23.5% rural HHs having no literate adults above the age of 25.

For better usage of data to target beneficiaries, an Expert group headed by Sumit Bose was set up which recently presented its report regarding criteria for allocation of resources to states and identification of beneficiaries under various pro-poor programmes using SECC data.

#### Background

- Identifying the poor is the **first crucial step** in designing any welfare program. Since Independence, India has used a **poverty-line method** to count the number of poor.
- Families below the poverty line (**BPL**) are eligible for several government benefits like subsidized food (through the Public Distribution system), pensions, and self-employment programs, etc.
- Presently in India BPL is determined according to **Suresh Tendulkar committee**. It is based on a poverty line basket which includes both **food items** (determined using calorific norms) and **non-food items** (clothing, education, rent, etc). As per this committee poverty line stood at **Rs 27** and **Rs 33** for rural and urban area with total poor population estimated at **27 crore (22% of population)**.

### Findings of the report

- It recommends replacing Below Poverty Line (BPL) by multidimensional SECC for different govt. schemes.
- It recommends using SECC data for **all schemes of central and state governments** to ensure targeting of right beneficiaries.
- The panel made recommendations on the use of SECC data for various programs of the MoRD -
  - ✓ **MNREGA** – Its focus should shift to the regions with a greater concentration of deprived households and landless manual labourers.
  - ✓ **National Rural Livelihood Mission (NRLM)** - Committee noted that NRLM faces issues due to a lack of capacity and insufficient human resources. So it recommended
    - Using SECC data to plan for **poverty free Panchayats**.
    - Resource allocation to states under NRLM **using an index with deprivation parameters** like -
      - Female headed households with no adult member
      - SC/ST households with no literate adult
      - Landless households deriving major part of income from manual casual labour.
 Initially, allocate 70% resources using this index and later scale it to 80% and 100%.
  - ✓ **Pradhan Mantri Awas Yojana (Gramin)** - Presently, resource allocation is based on 75% weight to SECC housing deprivation data and 25% to the head count ratio of poverty.
    - ✓ The committee recommends 100% weight to SECC housing deprivation data.
  - ✓ **National Social Assistance Program (NSAP)** – Committee recommends -
    - ✓ Assistance under NSAP to be decided by SECC data.
    - ✓ Starting programs, including widow pension, school fees and medical insurance for disabled children.
    - ✓ Increase pension under NSAP as per Consumer Price Index.
    - ✓ States should provide at least an equivalent contribution as Centre towards NSAP.

### Significance of the report

- The report gives broad guidelines to implement SECC data.
- The report notes that **using SECC would help to** -
  - ✓ Improve the efficacy of programme interventions and its improved outcomes.
  - ✓ Streamline programme administration.
  - ✓ Expand coverage of the programmes and reduce duplication of benefit and fraud in them.
  - ✓ Dynamic monitoring of the living standards of beneficiaries over time.
  - ✓ Better targeting of vulnerable sections of the society and enabling expansion of coverage.
  - ✓ Better budgetary planning and allocation of resources for various programmes.

### Why SECC is better than Poverty line method

- While poverty line method identifies number of poors, SECC identifies who actually are the poor. Hence it is more **targeted** and **precise**.
- It will even help in fine tuning the beneficiaries list by excluding undeserving candidates' especially affluent people and thus tackle fraud and duplication issue.
- The BPL approach was narrow as it focused on **income** and **consumption expenditure** on the other hand SECC gave a **holistic** and **complete picture**.

- Binary approach of BPL method either include the households in all schemes or exclude them from all however if SECC will be used each household will be mapped on different deprivation factors and if found deprived they will be eligible for that specific scheme. For example some households may be eligible for food subsidy while other may be eligible for LPG subsidy. So SECC will help in eradicating not only poverty but also **various deprivations**.

#### Way forward

- SECC data must be regularly updated and verified to remove beneficiaries especially those who were on the fringes and have overcome their deprivation, which would put additional burden on public resources.
- SECC provides government with suitable opportunity to single out “**actual deprived**” people and aid in alleviation of poverty in the long run.

### 1.6.2. UNTOUCHABILITY IN INDIA

#### Why in news?

- HRD ministry constituted one-man commission under **Ashok Kumar Roopanwal** to look into the case of untouchability in educational institutions and suggest measures to prevent such.

#### What is Untouchability?

- Untouchability is the derogatory practice of avoiding any contact with the people belonging to any group deemed to be socially unclean (lower caste) by the comparatively influential castes in the society.
- In the long-run these people are left bereft of any opportunity to climb up the social ladder and are overall excluded from the society.
- It is seen as the direct product of caste system in India.

#### Provisions against Untouchability in India

- **Article 17:** criminalises Untouchability. It is one of the very few fundamental rights against an individual provided by the constitution.
- For the eradication of untouchability, the **Untouchability Offences Act** was passed by Indian Government in **1955** in which any person forcing the disabilities of untouchability can be sentenced to six months imprisonment or a fine of Rs. 500/- or both for his first offence.
- However, the above act faced certain shortcomings in dealing with untouchability. Therefore, it was revamped as **Protection of Civil Rights Act, 1976**.
- **Section 8 in Representation of People’s Act,**

#### Suggestions of Commission:

- **Counselling Centres** with professionally counselors should be set up.
- The university should evolve an **appellate mechanism** for students to appeal of excesses in the university.
- **Monitoring Committee needs to be** constituted to provide guidance on the matters related to the subjects studied by the students. Immediately report to Vice Chancellor on serious issues.
- **Equal opportunity cell** headed by the **Anti-discrimination Officer** as per the **UGC (Promotion of Equity in Higher Educational Institutions) Regulations 2012** should be made functional.
- **Grievance Redressal Committee headed by the Ombudsman** as per the UGC (Grievance Redressal) Regulations 2012 should be made effective and should dispense grievances weekly.
- **A strong induction programme, a local guardian system** for outstation students and suitable student volunteers to act as mentors and help freshers are needed for better acclimatization.
- Remedial teaching for academically weak students.
- **Strict compliance of Hostel Admission Rules** and Regulations in allotting hostel accommodation and supervision.

1951, states that the people found guilty of committing offence under the **Protection of Civil Rights Act, 1955**, will be disqualified from contesting elections.

- **Section 3 in The Protection of Civil Rights Act, 1955**, lists down punishments for enforcing religious disabilities.

### Challenges

- There is a lack of awareness among the people regarding their rights and equality. The situation is improving yet it would need much more courage and awareness.
- There have been instances where people who have raised their voices against discrimination have faced social boycott and sometimes more violent repercussions.
- This has led to a fear among people in using the constitutional safeguards for equality or to claim justice. Many of them do not have financial resources to exercise their claims.
- People have accepted untouchability and caste discrimination as the part of their life. Due to innate economic, social and political problems faced by them they have given up all hopes and do not wish to stand up for their rights.

### Way Forward

Untouchability is a social problem that needs to be tackled more socially than legally. Changes have been seen in terms of people's attitude towards the issue. The overall improvement will be incremental in nature. What the current situation needs is persistent efforts in the direction of betterment.

## 1.7. TRIBAL ISSUES

Tribal community in India face many issues. With India emerging as a fast developing global economy, competitive demand for land and natural resources is putting immense pressure on forests. Simultaneously, there are growing demands from forest dependent communities for increased autonomy in forest management.

Issues that have been under the spotlight this year are discussed under subsequent sub-sections.

### Health Concerns

Some of the biggest barriers to tribal health are Infant mortality rate, child mortality rate, poor maternal health, child sex ratio, malnutrition, high prevalence of anaemia, malaria, fluorosis, sickle cell disease etc. Considerable cut in budgetary allocations for health care and programmes for tribal development poses a challenge to ensure basic health care to tribal people.

### Tribal Policy intervention in Health

- The Health Ministry decided to hold the workshop on "Best Practices in Tribal Health" in tribal heartland at Shodhgram village in Maharashtra's Gadchiroli district, recognising different and unique health needs of tribal communities.
- ICMR has started the **screening programmes for sickle cell disease** in 18 states and at the end of the programme lakhs of tribal people will know that they carry the disease or the gene for it.
- The State needs to ensure that carriers of sickle cell disease, particularly girls, do not face discrimination. There is also an **urgent need of community-based action and research** for and on the health of India's neo-nates and tribal people.

### Concerns Related to Education

- Tribal children are ill-served by the government schools. The standards of education are abysmally low in State-run tribal schools. Because of this most of the tribal children in govt. schools **lack basic literacy skills**.
- This problem is also rooted in the **lack of trained teachers** especially after 2001, when the government had decided to recruit only teachers from the tribal community.
- Unable to read even the receipt given by an official and obliged to put their thumb impressions on documents which they cannot understand, they are **easy victims of any fraud or misrepresentation** which more educated exploiters are likely to devise.
- Students from Particularly Vulnerable Tribal Groups (PVTG) are losing out on their native culture in the schools.
- The disconnect between the unique tribal way of life - distinct languages and dialects, culture and food habits - and what is **enforced at the Ashram schools** has led to a **loss of identity** and sense of belonging among the tribal children.
- Above this, the teachers, who mostly hail from the more integrated tribes, do not have an understanding of the culture of the PVTGs.

The **vulnerability of tribal populations to exploitation** by minor government officials, as well as moneylenders, landlords, and other agents of vested interests, can largely be traced to their illiteracy and general ignorance of the world outside the narrow confines of their traditional environment.

#### 1.7.1. WORKING OF FOREST RIGHTS ACT

##### What is the Forest Right Act?

- Schedule Tribes and Other Forest Dwellers Act or Recognition of Forest Rights Act came into force in 2006. The Nodal Ministry for the Act is Ministry of Tribal Affairs.
- It has been enacted to recognize and vest the forest rights and occupation of forest land in forest dwelling Scheduled Tribes and other traditional forest dwellers, who have been residing in such forests for generations, but whose rights could not be recorded.
- This Act not only recognizes the rights to hold and live in the forest land under the individual or common occupation for habitation or for self-cultivation for livelihood, but also grants several other rights to ensure their control over forest resources.
- The Act also provides for diversion of forest land for public utility facilities managed by the Government, such as schools, dispensaries, fair price shops, electricity and telecommunication lines, water tanks, etc. with the recommendation of Gram Sabhas.

##### Rights under FRA

- **Title Rights**- ownership of land being framed by Gram Sabha.
- **Forest management rights**- to protect forests and wildlife.
- **Use rights**- for minor forest produce, grazing, etc.
- **Rehabilitation**- in case of illegal eviction or forced displacement.
- **Development Rights**- to have basic amenities such as health, education, etc.

##### Challenges in Implementation of FRA

- A series of legislation- amendments to the Mines and Minerals (Development and Regulation) Act, the Compensatory Afforestation Fund Act and a host of amendments to the Rules to the FRA- undermine the rights and protections given to tribals in the FRA, including the condition of "free informed consent" from gram sabhas for any government plans to remove tribals from the forests and for the resettlement or rehabilitation package.

- The process of documenting communities' claims under the FRA is intensive — rough maps of community and individual claims are prepared democratically by Gram Sabhas. These are then verified on the ground with annotated evidence, before being submitted to relevant authorities.
- There is a reluctance of the forest bureaucracy to give up control with FRA being seen as an instrument to regularise encroachment. This is seen in its emphasis on recognising individual claims while ignoring collective claims — Community Forest Resource (CFR) rights as promised under the FRA — by tribal communities. To date, the total amount of land where rights have been recognised under the FRA is just 3.13 million hectares, mostly under claims for individual occupancy rights.
- In almost all States, instead of Gram Sabhas, the Forest Department has either appropriated or been given effective control over the FRA's rights recognition process. This has created a situation where the officials controlling the implementation of the law often have the strongest interest in its non-implementation, especially the community forest rights provisions, which dilute or challenge the powers of the forest department.
- Saxena Committee pointed out several problems in the implementation of FRA. Wrongful rejections of claims happen due to lack of proper enquiries made by the officials.

### Way Forward

- In spite of its inadequacies, there can be little doubt that the Forest Rights Act (FRA) stands as a powerful instrument to protect the rights of tribal communities. The little progress that has been made in implementation so far has been due to close coordination between tribal departments, district administrations and civil society.
- There is a clear need to strengthen the nodal tribal departments, provide clear instructions to the State and district administrations, and encourage civil society actors.

### 1.7.2. ISSUES WITH PARTICULARLY VULNERABLE TRIBAL GROUPS

A recent Anthropological Survey of India (AnSI) study 'PVTGs - Privileges and Predicaments' has revealed various issues related to Particularly Vulnerable Tribal Groups (PVTGs) in India. It found out that no base line surveys have been conducted for more than half of the PVTGs. Base line surveys help identify the habitat and socio-economic status, so that development initiatives are implemented for communities.

#### Findings of the report

- State governments should conduct such surveys to have data on demographic and socio-economic status of the PVTGs and remove repetition and overlaps in data.
  - E.g. Mankidia and the Birhor in Odisha refer to the same group and are mentioned twice.
  - Some PVTGs are distributed in more than one State and are recognized multiple times like Bihors spread in 4 States.
- The **highest number of PVTGs** are found in Odisha (13) followed by Andhra Pradesh (12).
- All the four tribal groups in Andaman and one in Nicobar Islands are PVTGs.
- There are **regional and State-specific variations in welfare schemes for PVTGs** -
  - While Odisha has exclusive micro-projects for the PVTGs, there are none such for the PVTGs in Gujarat.
  - Sometimes micro projects extend only to some blocks of district and not in others.
- There is a **huge variation in population of PVTGs** –
  - **Senteneles** (Andaman) have the smallest population.

- In the mainland, **Toto of West Bengal and Toda of Tamil Nadu** have less than 2000 persons.
- **Saharia of MP and Rajasthan** are the largest with population more than 4 lakhs.
- **Literacy rate has gone up** from single digit to 30 to 40 % in some PVTGs. Female literacy rate is still considerably lower compared to male counterpart.
- There has been a **considerable increase in the age of marriage among PVTGs** with girl child marriage decreasing significantly.

#### PVTGs

- In 1973, the **Dhebar Commission** created Primitive Tribal Groups (PTGs) as a separate category, who are less developed among the tribal groups. They were later renamed as PVTG.
- States/UTs submit proposals to the **Central Ministry of Tribal Welfare for identification of PVTGs**.
- **Some basic characteristics of PVTGs are:**
  - Mostly homogenous
  - A small population
  - Relatively physically isolated
  - Primitive Social institutions
  - Absence of written language
  - Relatively simple technology and a slower rate of change
- Their livelihood depends on food gathering, Non Timber Forest Produce, hunting, livestock rearing, shifting cultivation and artisan works.
- **Scheme for Development of Primitive Vulnerable Tribal Groups (2008)**
  - It identifies 75 PVTGs as the most vulnerable among the Scheduled Tribes.
  - It gives state governments flexibility in planning initiatives.
  - Activities covered include housing, land distribution and development, agriculture, roads, energy, etc.
  - Additional Funds are available for activities not already funded by any other Scheme of the centre/state.
  - A long term Conservation-cum-Development plan for five years for each PVTG to be established by States. The Scheme is funded entirely by the Central government.

### 1.7.3. ISSUES RELATED TO DENOTIFIED, NOMADIC AND SEMI-NOMADIC TRIBES

#### Why in News?

- The **National Commission for Denotified, Nomadic and Semi-nomadic Tribes** has given its report in 2016.
- While some of these communities want to be classified as SCs/STs and OBCs, others want recognition as DNTs/NTs.

#### Difference between Scheduled, Nomadic and Semi-nomadic Tribes

- The term **“Scheduled Tribe”** appeared first in the Constitution of India. Article 366 (25) defined them as “such tribes or tribal communities as are deemed under Article 342 to be Scheduled Tribes for the purpose of this Constitution.”
- They are called Scheduled because they are included in one of the Schedule of the Constitution.
- They are basically people who lived in tribal areas (mainly forest).
- Nomadic Tribes and Denotified Tribes both are the ones that were regarded as criminal tribes under CTA.
- According to its literally meaning, nomadic tribes are those who wander from place to place.

## Background

- During the British colonial rule, if the local government had reason to believe that a gang or a tribe had “addicted to systemic commission of non-bailable offences” then it was registered as **criminal tribe** under the **Criminal Tribes Act, 1871**.
- Restrictions were imposed on their movement and adult male members of the community had to report to the police on regular intervals.
- Next came the **Criminal Tribes Act, 1924**. Under this act, the local government may establish reformatory schools and separate criminal tribe children from their parents and guardians and place them in such schools.
- The Ananthasayanam Ayyangar Committee (1949-50) gave a comprehensive report on how CTA worked throughout India.
  - It listed **116 tribes in British territories and 200 in Princely States**.
  - It also recommended that the CTA be repealed and a central legislation be established that was applicable to habitual offenders without distinction based on caste, creed and race.
- The CTA was repealed in 1949 and was replaced by the **Habitual Offenders Act, 1951**.
- In 2002, Justice Venkatchaliah Commission recommended for strengthening the programmes for economic and educational development of DNTs. It also recommended constituting a special commission to look into the needs and grievances of the DNTs.
- Consequently, a **National Commission for Denotified Nomadic and Semi-Nomadic Tribes** was constituted in 2005.

## Challenges for the Denotified, Nomadic and Semi-nomadic Tribes

- People of this community continue to be stereotyped. A large number of them have been labeled ex-criminal tribes.
- They also face alienation and economic hardships.
- Most of their traditional occupations such as snake charming, street acrobatics and performing with animals have been notified as criminal activity making it difficult for them to earn a livelihood.
- They do not come under any reserved category therefore they do not enjoy reservation offered by the government in educational institutions or government jobs.
  - After Independence, the erstwhile aborigines were classified as scheduled tribes, the untouchables were classified as scheduled castes and others included in the backward classes.
  - Many of the denotified, nomadic and semi-nomadic tribes are spread among SC/ST/OBC but are still not classified anywhere

## Recommendations

- The present situation calls for an urgent need to look away from the past of denotified tribes.
- The community needs to be included in SCs/STs and OBCs so that they can enjoy much needed reservation.
- Grievance redressal committees need to be setup at the state level in order to identify the problems of this community and provide the required aid.



Even 68 years after Independence, the problems of tribal communities are about **access to basic needs**. These include, but are not restricted to, elementary education, community healthcare, sustainable livelihood support, the public distribution system, food security, drinking water and sanitation, debt, and infrastructure. For them, equality of opportunity remains largely unfulfilled.

Thus, we must recognize their needs and make efforts to fulfill them. The tribals must be developed so that they become a part of India's mainstream and contribute to the country's social, economic and cultural development.

## फाउंडेशन कोर्स सामान्य अध्ययन

**28 Sep | 10 AM**

### इनोवेटिव क्लासरूम प्रोग्राम के घटक

**हिन्दी माध्यम में**

- ▶ प्रारंभिक परीक्षा, मुख्य परीक्षा और निबंध के लिए महत्वपूर्ण सभी टॉपिक का विस्तृत कवरेज
- ▶ मौलिक अवधारणाओं की समझ के विकास एवं विश्लेषणात्मक क्षमता निर्माण पर विशेष ध्यान
- ▶ एनीमेशन, पॉवर प्वाइंट, वीडियो जैसी तकनीकी सुविधाओं का प्रयोग
- ▶ अंतर - विषयक समझ विकसित करने का प्रयास
- ▶ योजनाबद्ध तैयारी हेतु करंट ओरिएंटेड अप्रोच
- ▶ नियमित क्लास टेस्ट एवं व्यक्तिगत मूल्यांकन

- ▶ कॉम्प्रीहेंसिव स्टडी मटेरियल
- ▶ **PT 365** - लगभग 20 कक्षाएं
- ▶ **MAINS 365** - लगभग 20 कक्षाएं
- ▶ **PT** टेस्ट सीरीज - 35 मॉक टेस्ट पेपर
- ▶ मुख्य परीक्षा टेस्ट सीरीज - 25 मॉक टेस्ट
- ▶ निबंध टेस्ट सीरीज - 5 मॉक टेस्ट पेपर
- ▶ सीसैट - 15 मॉक टेस्ट पेपर
- ▶ निबंध लेखन - शैली की कक्षाएं
- ▶ करंट अफेयर्स मैगजीन

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## 2. HEALTH AND DISEASES

### 2.1. HEALTHCARE SYSTEM IN INDIA

#### Why in news?

- According to a report published by Lancet on healthcare **India is the poorest performer in the BRICS nations**.
- National Sample Survey Office(NSSO) released a report titled 'Health in India' This report draws data from the 71st round of the NSS conducted from January to June 2014.
- Recently, WHO has published a study titled '**The Health Workforce in India**', on India's healthcare workforce on the basis of census 2001 data.

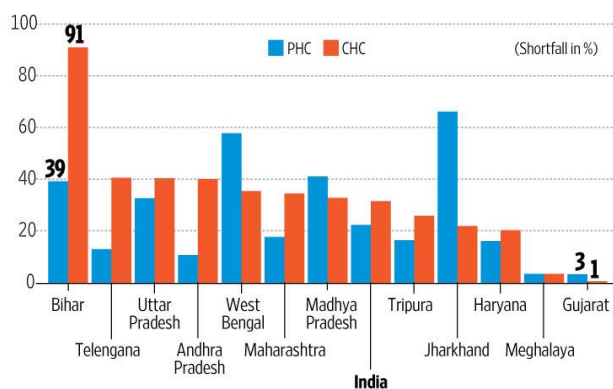
#### Challenges faced by the Indian Healthcare system

##### 1. A weak primary health care sector

- Expansion of public services has been inequitably distributed. There is one government hospital bed for every 614 people in Goa compared with one every 8,789 people in Bihar.
- The care provided in these facilities is also not up to the mark. For example, in 2011, six out of every 10 hospitals in the less developed states did not provide intensive care and a quarter of them struggle with issues like sanitation and drainage.
- Urban areas command 73% of the public hospital beds, even when 69% of India's population resides in rural areas.
- Emergency obstetric care services were not available in more than 70% of community health centres. India's medical research

#### WEAKNESS AT THE START

Numbers are percentage shortfall in primary health centres (PHC) and community health centres (CHC) as on 31 March 2015



#### WHERE ARE THE DOCTORS?

Category	Available (2011-12)	Desired density*	% shortfall
Doctors	691,633	85	49.1
AYUSH practitioners	534,091	49	11.3
Dentists	88,370	15	106
Pharmacists	492,923	70	72.3
Nurses or general nursing and midwifery	743,324	170	177.5
Auxiliary nurse midwives	361,879	85	185

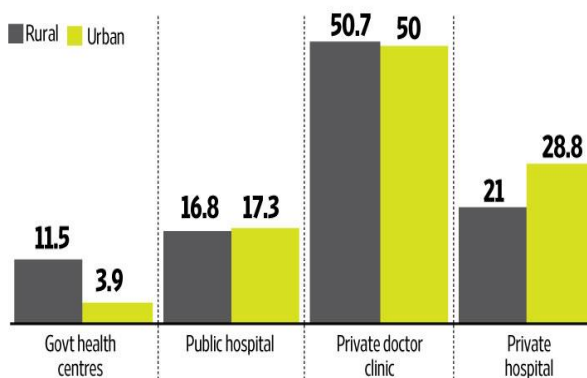
\* (per 100,000 population) as per 12th five year plan

Note: Percentage shortfall refers to the extra percent of personnel required as a proportion of current availability. So in case of doctors, current availability is 57 per 100,000 people and 49% more are required to meet the target of 85. AYUSH=Ayurveda, Yoga and naturopathy, Unani, Siddha, Homeopathy practitioners. Availability excludes the 25% of doctors, AYUSH, pharmacists, and dentists and the 40% of nurses and auxiliary nurse midwives enrolled for training to account for attrition

Source: Lancet

#### PUBLIC APATHY

(Numbers are percentage distribution of spells of ailment treated)



Source: NSSO report—Key indicators of social consumption in India: Health, January-June 2014

infrastructure remains patchy

## 2. Unequally distributed skilled human resources

- Shortfall of specialists across country
- No national policy for human resources for health
- Dominance of medical lobbies such as the medical Council of India has hindered adequate task sharing and, consequently, development of nurses and other health cadres.

## 3. Large unregulated private sector

- Growth of unregulated private sector.
- In 2014, more than 70% of the Outpatient care and more than 60% of the inpatient care was in the private sector.
- Between 2002 and 2010, the private sector contributed to 70% of the increase in total hospital beds across the country.
- Private practitioners have become first point of contact in both rural and urban areas for many ailments including fevers and acute illness, care of neonates, and treatment of disease such as tuberculosis
- Unethical and irrational practices adopted by the private hospital management.

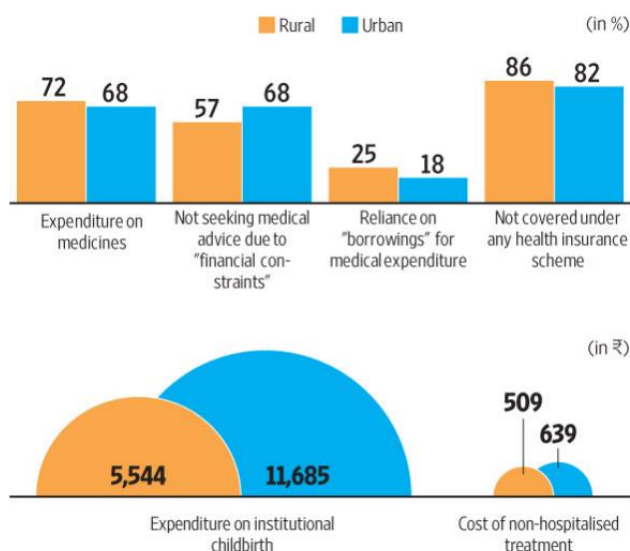
## 4. Low public spending on health

- Even though real state expenditure on health has increased by 7% annually in recent years, central government expenditure has reduced.
- Many state governments are unable to utilize the allocated funds for healthcare services which reflect structural weakness in the system.
- Public health expenditure as a proportion of GDP remains low, at just 1.28% of the country's GDP in 2013–14.

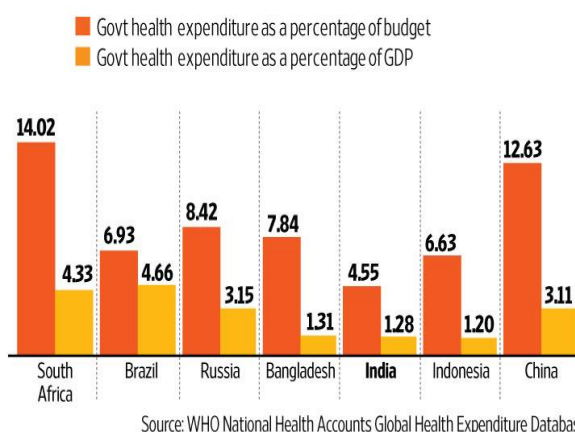
## 5. Fragmented health information systems

- The systems for collecting data have many weaknesses. For instance, although India enacted a law on the mandatory registration of births and deaths in 1969, only 86% of births and 70.9% of deaths were registered in 2013.
- Data gathering is incomplete, and the non-inclusion of the private sector excludes the major provider of health care in India.

### HIGH COST OF HEALTH IN INDIA



### NO COUNTRY FOR SICK PEOPLE



6. **Poor Health Cover and high out of pocket expenditure:** Over 80 per cent of India’s population is not covered under any health insurance scheme. Also, RSBY could only cover 12% of urban and 13% of rural population

• **Reasons for poor health cover**

- ✓ Financial constraint - Biggest hurdle in both rural and urban areas.
- ✓ Non-availability of health facilities - This is a big factor in rural areas due to lower density of private hospitals and poor conditions of govt. hospitals.
- ✓ Rising cost of medicines and cuts in budgetary allocation to government hospitals has led higher expenditure on medicines.
- ✓ The government’s allocation to healthcare as a percentage of GDP has fallen to 1.05% in 2015-16 from 1.47% in 1986-87.
- ✓ Poor financial inclusion and financial literacy has led to low coverage of insurance

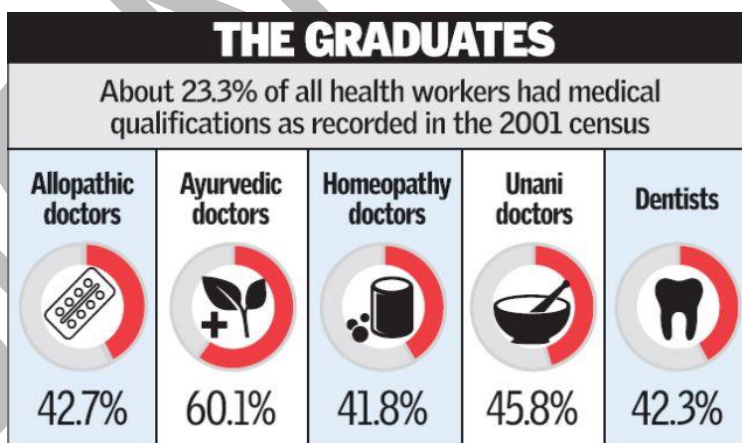
• **High out of pocket expenditure – Reasons**

- Medicines contributes hugely to out of pocket expenditure
- Out of all health expenditure, 72% in rural and 68% in urban areas was for buying medicines for non-hospitalised treatment
- Private Doctors are the most significant source of treatment - 72 per cent of the treatment provided in rural areas and 79 per cent in urban areas was availed in the private sector.
- Also, Higher Expenditure incurred by people in private sector hospitals – On an average rural population spent Rs.5,636 for hospitalised treatment in a public sector hospital and Rs.21,726 at a private sector hospital.

• India spends only a little more than 0.1% of GDP on publicly funded drugs. This is the reason behind the increase in out-of-pocket expenditure on drugs.

• There have been schemes such as the Jan Aushadhi campaign to provide 361 generic drugs at affordable prices and different price regulation policies, but their implementation has been patchy and varied in different states.

7. **Lack of trained health work force** - There are stark contrasts in the distribution of health workers across states, between urban and rural areas and across the public and private sectors.



**LAX IMPLEMENTATION**

Law	Status
Clinical Establishments Act 2010 (provides for registration and regulation of clinical establishments and prescribes minimum standard of facilities and services)	Enacted only in 9 states
National Mental health Care Bill (mandates right to care)	Cleared by cabinet, awaiting passage in Parliament
Medical Devices Regulation Bill, 2006 (provides for quality standards of biomedical equipment manufacturing and marketing)	Yet to be passed

Note: These are just examples and not an exhaustive list

Source: Lancet

This greatly affects both physical and financial access of large sections of the population to health and healthcare and is something that will have to be overcome to achieve Universal Health Coverage For a population of 1.02 billion in 2001, there were just 20 lakh health workers in India.

#### 8. Weak governance and accountability

- Corruption in health care and the fragmentation of governance of health care.
- Inadequate public investment in health, the missing trust and engagement between various healthcare sectors and poor coordination between state and central governments as the main constraints why universal healthcare is not assured in India.
- At the heart of these constraints is the apparent unwillingness on the part of the state to prioritize health as a fundamental public good.

#### Assuring health for India – Way Forward

- There is a greater need of radical restructuring of the healthcare system in India to address challenges including weak primary healthcare and dismally low public spending on health.
- Only a radical restructuring will promote health equity, eliminate impoverishment because of out-of-pocket expenditure and assure health for all Indians by 2022.
- Urgent need to adopt universal health coverage based on massive strengthening of the public health system and radical approaches to health financing.
- India needs to adopt an integrated national health-care system built around a strong public primary care system with a clearly articulated supportive role for the private and indigenous sectors.

## 2.2. NATIONAL HEALTH POLICY 2017

Cabinet has recently approved National Health Policy (NHP) 2017 to address the current and emerging challenges in terms of socio-economic changes and epidemics since the last NHP in 2002.

#### Shifts seen in new policy

- **From communicable to non-communicable diseases:** NHP recognizes need for state intervention to control NCDs as they are reason for more than 60% death in India. Thus policy advocates pre-screening and sets the target to reduce premature mortality via NCDs by 25% by 2025.
- **Collaborating & regulating the private sector** which has grown tremendously since 2002, such that over 2/3<sup>rd</sup> services are provided by it. Although policy seems to be **patient-centric**, as it proposes
  - ✓ **National health care standards organization (NHCSO)** to lay down standards and protocol
  - ✓ **Tribunals** for redressal of grievances
- **Shift from sick-care to wellness:** NHP seeks to invest in preventive healthcare. For this,
  - ✓ **early screening** and diagnosis have been made a public responsibility
  - ✓ commitment to **pre-emptive care** to achieve optimum levels of child and adolescent health through school health programmes and focus on health and hygiene in curriculum
  - ✓ advocates 2/3<sup>rd</sup> or more allocation of health budget for Primary Health Care
  - ✓ assuring comprehensive primary health care through the Health and Wellness Centers'

- **Intersectoral approach** involving various ministries such as MoEf, MoHWS, MoA, MoUD, MoHRD, MoWCD etc.
- **Urban Health Case:** prioritizes addressing the primary health care needs of the urban population with special focus on poor populations, convergence among the wider determinants of health – air pollution, vector control, reduction of violence and urban stress.

### Provisions of health policy, its positive impact and related issues

Provisions	Positive impact	Related Issues
Strengthening role of public sector by increasing public health spending to <b>2.5% of GDP</b> by 2025 from current 1.15%. States should spend 8% of more of their budget towards health by 2020.	<ul style="list-style-type: none"> <li>• Will increase spending which has become nearly stagnant in recent years.</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of capacity to use higher level of funds</li> <li>• Still Much lower than even other developing countries' spending on health</li> <li>• Central budgets also must reflect steady rise annually</li> </ul>
Affordable quality healthcare for all by ensuring following <ul style="list-style-type: none"> <li>• Universal access to drugs and diagnostics, emergency and essential health services</li> <li>• providing every family with a health card for PHC services</li> <li>• secondary and tertiary care services through a combination of public hospitals &amp; strategic purchasing in healthcare deficit areas from accredited non-governmental healthcare providers.</li> <li>• Establish public health management cadre in all states</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce disease burden of India (from current 1/5<sup>th</sup> of the burden in world)</li> <li>• would bring people from diverse professional backgrounds acknowledging need for multi-disciplinary approach</li> <li>• Enable detection of state-specific health hazards and contain them before they spread.</li> </ul>	<ul style="list-style-type: none"> <li>• Would require more human resources and funds</li> <li>• Need of more trained doctors and nurses and does not confront the pervasiveness of fake doctors constituting 'half' of the doctors here (WHO report)</li> <li>• District hospitals need to be strengthened and sub-district hospitals need to be upgraded</li> </ul>
Mainstreaming <b>AYUSH</b> systems by <b>three-dimensional integration</b> encompassing cross referrals, co-location and integrative practices across systems of medicines in both rural and urban areas.	<ul style="list-style-type: none"> <li>• Stresses need of backing claims of traditional medicine focusing on pluralism and drawing upon diverse systems of medicine.</li> </ul>	<ul style="list-style-type: none"> <li>• Still treated as subordinate to allopathic professionals</li> </ul>

### Other issues with NHP 2017

- It leaves too much to the states on maintaining standards. Present situation gives free hand to states to reject even necessary acts such as The Clinical Establishments Act 2010 was passed by Parliament with the aim of regulating clinical standards and ending quackery.
- It does not speak about social determinants of health.

### Targets under NHP 2017

- Increasing life expectancy to 70 years from 67.5 years by 2025
- reduce infant mortality rate to 28 by 2019
- reduce under five mortality to 23 by 2025
- reduce Total Fertility Rate to 2.1 at the national and sub-national levels by 2025
- Maternal Mortality Ratio from current levels to 100 by 2020
- Reduce neo-natal mortality to 16 and stillbirth rate to "single digit" by 2025.

**Karol Bagh** 1/8-B, 2<sup>nd</sup> Floor, Apsara Arcade, Near Gate 6, Karol Bagh Metro, Delhi-110005  
**Mukherjee Nagar:** 103, 1<sup>st</sup> Floor, B/1-2, Ansal Building, Behind UCO Bank, Delhi-110009

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- It does not talk of public health education (which is outside MCI mandate) it just talks about medical education, paramedical education etc.
- Various progressive measures under Draft NHP 2015 such as Right to Health, increasing public spending by 2020 and imposing health cess have been ignored.

Thus, to achieve SDG on health, i.e., health and well-being to all by 2030, there would be need for greater and stronger Centre-state coordination and commitment for effective implementation.

## 2.3. NON-COMMUNICABLE DISEASES

### Why in news?

**Lifestyle diseases** have emerged as the biggest cause of deaths in India.

#### Obesity

- India is the **third most obese** country in the world according to an independent research body. It has emerged as the new killer disease making the young vulnerable to long-term chronic diseases like cardiovascular issues, diabetes and blood pressure fluctuations.
- Obesity is plaguing **children, who often become overweight** due to factors like lack of physical activity, unhealthy eating habits, increasing reliance on convenience foods and hormonal issues.
- With **13 per cent Indians** found to be suffering from obesity, the country faces a major risk of a **heart disease epidemic**.
- Obesity in young people is leading to premature heart attacks - People in their late 20s and early 30s are being diagnosed with heart diseases.

#### Diabetes

- WHO report and Lancet study shows in India, cases increased from 11.9 million in 1980 to 64.5 million in 2014. By 2030, India is expected to be the diabetes capital of the world.
- Diabetes is a non-communicable disease associated with high blood sugar levels either due to inadequate insulin production or body not responding to insulin or both.
- **Types:** Type 1: little or no insulin production; Type 2: body shows insulin resistance; Gestational: associated with females during pregnancy; and pre-Diabetes: blood sugar not high to be Type 2
- **Causes:** Rapid urbanization, sedentary lifestyle and unhealthy diet. Obesity is chief risk factor.
- **Symptoms:** common are increased urination, thirst and hunger.
- **Effects:** Can lead to complications like blindness, kidney failure or loss of limbs, risk of heart attack, pregnancy complications etc.

### Findings of the Report

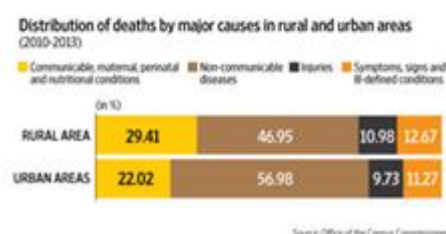
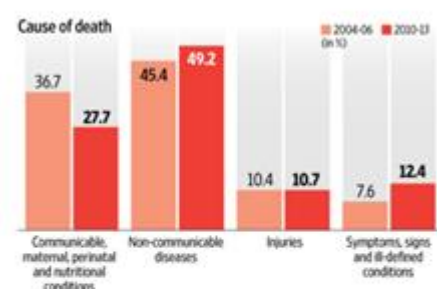
- New data reveals that one in two deaths in the country, estimated in the period 2010-13, are due to non-communicable diseases (NCDs). NCDs accounted for 45.4% of deaths in 2004-06, the figure rising to 49.21% in 2010-13.
- **Rural-Urban Difference** - In rural areas, deaths due to NCDs were 46.9%, much lower than urban areas where their contribution is 57%.
- **Cardiovascular diseases** are the biggest killers within NCDs. They account for 23.3% of all deaths. This has increased from 19.9% in 2004-05.
- Premature births and low birth weight have emerged as the main reasons for deaths of children below the age of 29 days, the new data revealed.
- **The top 10 causes of deaths** in India have remained the same since 2004-06, with a slight change in order. Cardiovascular diseases are followed by ill-defined causes, respiratory diseases, malignant and other neoplasms (cancers), and perinatal conditions (complications related to pregnancy)

- **Lower death due to communicable diseases** - In 2004-06, 36.7% of deaths occurred due to communicable diseases and lack of nutrition. This went down to 27.74% in 2010-13.

- **Burden of NCDs and their risk factors in India**

- ✓ Four types of NCDs—cardiovascular diseases, cancer, chronic respiratory diseases and diabetes make the largest contribution to morbidity and mortality due to NCDs.
- ✓ Four behavioural risk factors are responsible for significant proportions of these diseases—tobacco use, unhealthy diet, physical inactivity and harmful use of alcohol.
- ✓ Major metabolic risk factors are obesity, raised blood pressure, raised blood glucose and raised blood total cholesterol levels.
- ✓ The World Economic Forum estimated that India stands to lose \$4.58 trillion before 2030 due to NCDs and mental health conditions.

Non-communicable diseases have emerged as the leading cause of deaths in India, accounting for as many as half the deaths between 2010 and 2013.



Source: Office of the Census Commissioner

### Steps taken by government

- WHO has developed a comprehensive Global Monitoring Framework and Action Plan for prevention and Control of NCDs (2013-2020). The Framework includes a set of nine voluntary targets and 25 indicators which can be applied across regional and country settings.
- India is the first country globally to adopt the NCD Global Monitoring Framework and Action Plan to its National Context. The Government of India is implementing various NCD programmes as under through the State Governments:-
  - National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS).
  - National Programme of Health Care of Elderly (NPHCE).
  - National Iodine Deficiency Disorders Control Programme (NIDDCP).
  - National Programme for Control of Blindness (NPCB).
  - National Mental Health Programme (NMHP).
  - National Programme for Prevention and Control of Deafness (NPPCD).

From 2013-14 onwards, the interventions up to the district level for prevention, detection, diagnosis and treatment under NCDs programmes have been brought under the umbrella of National Health Mission (NHM). A flexi pool of funds for Non-Communicable Diseases (NCD) has been created.

### Way forward

- The focus of addressing NCDs should be behavioural change at the family and community levels, promoting healthy dietary practices, physical activity, prevention of smoking, alcohol

#### Sugar Tax

- A tax on sugary beverages raising their price would result in a proportionate reduction in their consumption, that would advance the fight against obesity, which has more than doubled since 1980. About half a billion adults were obese in 2014, roughly 11 percent of men and 15 percent of women.
- Use it to subsidize what people pay for fresh fruits and vegetables to improve diets or other health services.



and pollution, starting early in life. This will require the engagement of sectors outside health.

- The recently adopted Sustainable Development Goals offers an excellent opportunity to bring focus on NCDs and multi-sectoral action. A tactical partnership between the public and private sectors can help the government ameliorate the debilitating conditions that communities are currently facing.
- Change in dietary pattern required with more fiber and protein and less of sugar and starch.
- Increase taxes on sugary drinks for prevention of diseases such as diabetes
- Early detection and effective treatment must be routinely available in primary healthcare centers
- Urban planning should support safe and pleasurable physical activity.

## 2.4. ISSUES RELATED TO NUTRITION

### 2.4.1. GLOBAL NUTRITION REPORT

#### Rankings

- On stunting, India ranks 114 out of 132 countries, with the incidence of stunting at 38.7%.
- On wasting, India ranks 120 out of 130 countries, at 15.1%.
- On the prevalence of anaemia in women of reproductive age, India ranks 170 out of 185 countries at 48.1%.

#### MISSING NUTRITION TARGETS

Indicator	Rate (in %)	Global Rank (lower is better)	Asia Rank	Position of nutrition indicators compared to World Health Assembly targets
Under 5 stunting	38.7	114 <sup>th</sup> out of 132	34 <sup>th</sup> out of 39	Off track
Under 5 wasting	15.1	120 <sup>th</sup> out of 130	35 <sup>th</sup> out of 38	Off track
Under 5 overweight	1.9	11 <sup>th</sup> out of 126	6 <sup>th</sup> out of 37	On track
Anemia in Women	48.1	170 <sup>th</sup> out of 185	45 <sup>th</sup> out of 47	Off track
Exclusive breastfeeding	46.4	48 <sup>th</sup> out of 141	12 <sup>th</sup> out of 40	Insufficient data
Adult overweight/obesity	22	21 <sup>st</sup> out of 190	10 <sup>th</sup> out of 47	Off track
Adult diabetes	9.5	104 <sup>th</sup> out of 190	16 <sup>th</sup> out of 47	Off track

Source: Global Nutrition Report 2016

#### Salient points

- India almost doubled the rate of stunting reduction in the past 10 years compared with the previous decade. This is highly significant as India is home to more than one-third of the world's stunted children.
- It is not just stunting and wasting, but conditions like diabetes and overweight among adults are also indicators of malnutrition.
- The past decade has seen a steady build-up of momentum around nutrition with the
  - ✓ setting up of the SUN (Scaling Up Nutrition) secretariat in the UN;
  - ✓ the World Health Assembly adoption (in 2012) of the 2025 global targets for maternal, infant and young children's nutrition, and
  - ✓ 2015 Sustainable Development Goals which centre-stage the ending of all forms of malnutrition for all people by 2030, to name a few.
- Out of six Indian states that have an independent state nutrition mission only two states have clear, measurable time-bound targets for improvements in nutrition outcomes.
- One reason the nutrition missions are not backed up by targets is likely that they are typically housed in the state health department or department of Women and Child Development. Issues that fall in the domain of other departments do not get articulated in plans or missions.
- Hence there is need for multi-sectoral missions or agencies, with clearly defined and measurable targets and monitorable action points for all sectors.

### Twin Burden of Over and Under Nutrition

According to National family health survey 2015-16 (NFHS-4),

- 38.4% of children under the age of five are stunted and 21% are wasted
- 9.5% overweight and 3% obese

However, low body mass indices were more prevalent in rural areas and obesity & overweight were more prevalent in urban areas. Also overweight children suffers from nutrient deficiency as they consume food rich in fats, sugar, salt, calories and ignore the requirement of micro-nutrients. Thus, putting them at risk of chronic diseases like hypertension.

Another related issue that is coming up is the prevalence of undergoing surgical procedures to get thinner instead of working at getting fitter.

### Way Forward

- Right now there is a confluence of positive factors that must be harnessed for impactful and positive transformation. Several programmes already announced by the government like Swachh Bharat, 'Beti Bachao, Beti Pado', etc. are critical nutrition-sensitive factors that address hygiene, sanitation and education.
- The three structures that must be prioritised are:
  - ✓ the **ICDS**, which caters to the needs of pregnant and nursing mothers and children under the age of six;
  - ✓ the **mid-day meal** scheme, which directly feeds approximately 120 million schoolchildren every day; and
  - ✓ the **public distribution system**, which makes available subsistence rations to above and below poverty line families.
- Borrowing from best practice in countries that have made quick and significant progress in combating malnutrition, it is recommended that a **Nutrition Mission** be created to orchestrate and sequence the work both in nutrition-specific and nutrition-sensitive areas so that the impact from each of these is embedded in positive and productive outcomes.

## 2.5. NFHS-4

The first set of the Fourth National Family Health Survey Report was released in early 2016. It covers data for only 13 states. NFHS-4 covers all states and UT and will provide estimate at district level which will help in better policy formulation considering wide intra-state disparities.

### What is the National Family Health Survey?

- It is a large scale household sample survey conducted in a representative sample of households in India under the stewardship of Ministry of Health and Family Welfare.
- It is the main source of detailed health statistics in India.
- The first round of NFHS Survey took place in 1992-93. Three surveys have been conducted so far, third being in 2005-06.
- The International Institute for Population Sciences (IIPS) Mumbai, is the nodal agency for the survey.

### Highlights of the Fourth Survey

- **States Covered:** The 13 states covered are Andhra Pradesh, Goa, Bihar, Haryana, Karnataka, Madhya Pradesh, Meghalaya, Sikkim, Tamil Nadu, Telangana, Tripura,

Uttarakhand and West Bengal plus Union Territories of Andaman and Nicobar Islands and Puducherry.

- **Infant Mortality**
  - ✓ IMR declined from 57 to 41 per 1,000 live births. It has reduced in all the states and Union Territories covered. All states have below 51 deaths per thousand births.
  - ✓ But it varies from 10 in Andaman to 51 in Madhya Pradesh.
- **Sex Ratio and Female Literacy**
  - ✓ Nine out of eleven states showed a declining sex ratio. These states are Goa, Meghalaya, UK, Tripura, TN, Sikkim, MP, Karnataka, Haryana, Bihar, and WB.
  - ✓ Only Uttarakhand saw its sex ratio rise. Meghalaya saw it stabilize.
  - ✓ Women's literacy has risen in all these eleven states. It has increased by 12.5% in all these states since the last survey.
  - ✓ Goa tops the list in women's literacy rate with 89% literacy rate.
- **Fertility Rate**
  - ✓ Women are having fewer children - FR varies from 1.2 in Sikkim to 3.4 in Bihar.
  - ✓ All First Phase States/UTs except Bihar, Madhya Pradesh and Meghalaya have either achieved or maintained replacement level of fertility
- **Institutional Deliveries**
  - ✓ Children delivered in a medical institution under supervision increased by 40%.
  - ✓ In Bihar, it rose to three-fold, Haryana and MP also showed substantial increase.
- **Immunisation**
  - ✓ Full immunization coverage among children age 12-23 months varies widely
  - ✓ 6 out of 10 children have received full immunization in 12 of the 15 States/ UTs.
  - ✓ Coverage of full immunization among children has increased substantially in the States of Bihar, MP, Goa, Sikkim, West Bengal and Meghalaya.
- **Nutrition**
  - ✓ Fewer children under five years of age are now found to be stunted, showing intake of improved nutrition.
  - ✓ But in Bihar, MP and Meghalaya more than 40% of children are stunted.
  - ✓ Anaemia has also declined, but still remains widespread. More than half of children are anaemic in ten of the 15 States/UTs.
  - ✓ Each state with the exception of Puducherry showed a sharp rise in obesity levels in both men and women.
- **Water and Sanitation**
  - ✓ Indian families in the First Phase households are now more inclined to use improved water and sanitation facilities.
  - ✓ Over two-thirds of households in every State/Union Territory have access to an improved source of drinking water.
  - ✓ More than 50% of households have access to improved sanitation facilities in all First Phase States/UTs except Bihar and MP.
- **Stress:** Since the last survey the number of people suffering from hypertension is more in rural India than in Urban India.
- **Child Marriages**
  - ✓ Child marriages saw a reduction since the last survey in the eleven states.
  - ✓ It has reduced by 13.17 % for females and 6.7% for males.
- **Awareness of HIV**
  - ✓ Awareness about HIV/ AIDS among women has been reducing substantially.
  - ✓ The percentage of women with comprehensive knowledge of HIV/AIDS in MP declined from 20.3% to 18.1%.

- ✓ Similarly, in Bihar, it decreased from 11.7% to 10.1%.
- **Women's Empowerment**
  - ✓ Marked increase in the percentage of women in the age group of 15-49 years having a savings account that they use themselves.
  - ✓ Goa at 82.8% has the maximum number of women who manage their own finances. But Tamil Nadu has shown a 83% increase from previous survey.
  - ✓ Bihar tops the list of women owning property with women owning up to 58% property while West Bengal has the least number of women owning property.

## 2.6. NATIONAL INDEX FOR PERFORMANCE OF HEALTH OUTCOMES

### Why in news?

- NITI Aayog launched the index on "Performance of Health Outcomes".

### About the index

- Index is developed with technical assistance from World Bank.
- It will help rank the states on the basis of their performance on measurable health parameters.

### Rationale behind this Index

- India has committed to SDG 2030 which also include **Goal 3** related to ensuring healthy lives and promoting the well-being for all at all ages.
- Even National Development Agenda 2015 identified **Health (others areas were Education, Nutrition, Women and Children)** as priority sector. To achieve the agenda it was imperative to take rapid steps.
- Though it is a shared responsibility of both Centre and State, **Health** being a state subject, its implementation largely lies with the state.
- So, in order to motivate states to take corrective measures by providing true picture of ground reality and to improve health outcomes in India, NITI Aayog came up with this index.

### Salient features of the index

- It comprises of a set of indicators grouped into relevant domains and sub-domains such as **Health outcomes, Governance & Information** and **Key inputs/processes**.
- The maximum weightage is awarded to measurable **Health outcomes**.
- Indicators have been selected based on their continuous availability of the data.
- Composite index would be calculated and any change in index from base year to reference year will show incremental improvement in that state.
- It will rank various States on the basis of their performance on measurable health indicators like infant mortality rate, sex ratio at birth and functional 24x7 public health centres.
- Indicators have been selected based on their periodic availability through existing data sources like SRS etc.
- This index aims to bring improvements in the social sector outcomes, which have not kept pace with the economic growth in India.
- Monitorable indicators that form a part of Sustainable Development Goal in Health have been included in order to align these initiatives.
- Data will be entered and results published on a dynamic web portal hosted by NITI Aayog.
- The index is meant to capture the annual incremental improvements by States, rather than focus on historical achievements.

## Impact

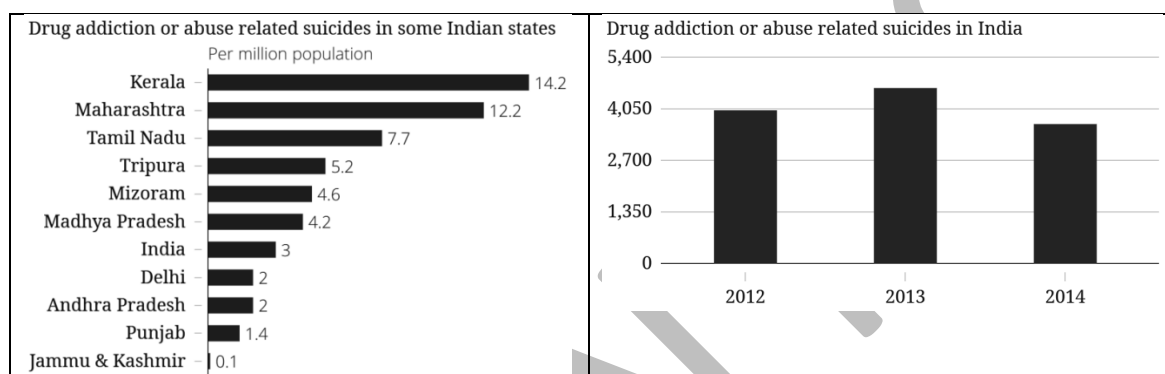
- It will be used to improve health outcomes and improve data collection systems.
- It will assist in State level performance monitoring, serve as an input to performance based incentives and improve health outcomes, also meeting the citizens' expectations.

## 2.7. DRUG ADDICTION

### Why in news?

As per the recent data, compiled by **National Crime Records Bureau** and tabled in **Rajya Sabha**, **Drug Abuse problem** is not restricted to North Indian States only.

### Highlights of the report



- As per the report India, witness on an average **10 suicides** per day due to drug abuse.
- There were **3,647** such suicide cases in India in 2014. In 2012 more than **4000 cases** were reported while in 2013 it was more than **4500**.
- However, going against the popular belief Punjab witnessed just **1.4 suicides per million** as compared to Kerala which had **14.2 suicides per million**.
- Though Maharashtra reported the highest suicides (1372/3647), Kerala topped the list in terms of incidence rate. Delhi reported **2 cases of suicides** per million people.
- As per the **NCRB** more than **25,000 people** committed suicides due to drug abuse last 10 years.

### Factors responsible for drugs abuse

- **Social factors:** Easy availability of drugs; Unstable home environment like regular fighting among parents resulting in child getting detached with parents; inadequate parents supervision – both parents either ignorant/working spending less time with their children; use of drugs by peer groups/friends. Sometimes teenagers consider it cool to use drugs as it will enhance their prestige among their peer groups. Some take it as a part of culture for **heavy drinking and partying**. Lastly, highly competitive environment in schools and colleges makes teenagers more susceptible towards drug abuse.

### In Punjab

- It is estimated that 4 out of 10 men are addicted to some drug and up to 50% of those are young farmers.
- While 15% of those are addicted to poppy husk (known as bhukki), 20% are addicted to synthetic drugs manufactured by Pharmacy companies.
- The Punjab Opioid Dependence Survey, found that 230,000 people in the state were drug users; 836 drug users per 100,000 people in the state.
- Children as young as 12 years of age are seen to be involved in the drug trade. Drugs are openly sold and easily available.

- **Economic factors:** Poverty and unemployment (lack of other viable employment opportunities) also sometimes push an individual towards drug addiction. For example – agrarian distress in Punjab
- **Political factors:** Drug business is very lucrative. Hence even political leaders are involved with drugs mafia in providing drugs to susceptible group especially young generations. This is what is happening in Punjab where political leaders themselves were involved in drugs business. Plus, there is a steady supply from across the border from Afghanistan
- **Other factors:** Sometimes people resort to drug abuse to overcome various problems like stress, anxiety disorders, physical ailment or even other form of mental disorder. Also pain relieving **opioids** and **sedatives** are easily available from chemists without prescriptions. The habit of landowners (such as in Punjab) supplying raw opium to farm labourers to make them to work harder, that has contributed to the problem.

### Impact

- **Social**
  - ✓ Drug abuse results in **family violence, divorces, abuses** and related problems.
  - ✓ On a larger scale it is a threat to **social fabric of society** as it results in increase in crime rate. For example drug abusers indulge in various kinds of crimes: petty crimes (like snatching money for buying drugs) or even heinous crimes (rape, murder under the influence of drugs).
  - ✓ Patients including their family members go through mental trauma, feel stigmatized and often are ostracized by the society.
  - ✓ Lucrative nature of drug trafficking fuels crime as rival drug gangs fight for control of the drugs business.
- **Economic**
  - ✓ One of the most important is the **cost of government drug enforcement policies**. This money could have been used for various social welfare programs.
  - ✓ It also results in **lost human productivity**, such as lost wages and decreased production that results from illnesses and premature deaths related to drug abuse.
  - ✓ Family member has to **spend a lot of resources** including time and money for rehabilitation of their beloved ones.
- **Physiological**
  - ✓ Physiological effects of drug abuse vary by the **type of drugs**.
  - ✓ Drugs like **Amphetamines**, though elevate a person's mood, but high amounts can cause drowsiness, nervousness and anxiety in the user.
  - ✓ With prolonged use of some drugs, especially **narcotics** such as **opium or heroin**, the user body build a tolerance towards it. Now over the time, the body requires higher doses to maintain the same effect causing vicious cycle of drug abuse.
  - ✓ If abuser stops taking the drug, the body experiences **withdrawal symptoms**, such as feeling **weak, sick, getting hyper and aggressive**.

### Solutions

- Youths are the asset of the country and no nation cannot afford to see them falling to drug abuse. Hence strict **multi-pronged strategy** integrating demand reduction, harm reduction and supply reduction is required to curb this menace.
- Following **integrated approach** at **De-addiction centre** by providing treatment using not only through **allopathy** but also through **homeopathy, Ayurveda, acupuncture**.
- Effective and affordable rehabilitation centres should be open up across the country especially in states with high prevalence incidence of drug abuse.

- Focus on high-prevalence drug groups such as **sex workers, transportation workers and street children** and focus on their rehabilitation.
- **Creating awareness** among various stakeholders through workshops, conference, nukkad naatak, especially among **parents, school students, other susceptible groups** about the ill effects of drug abuse, prevention methods, that it can be cured through regular de-addiction counseling and monitoring, etc.
- Including a **subject** in school curriculum about **ill effects of drug abuse and preventive methods** will go a long way in solving this issue.
- Maintaining a strict vigil at **major transit route on international border** in lucrative drug smuggling trade. Like easily availability of drugs in Punjab is because it shares border with Pakistan and Afghanistan.
- A **zero-tolerance policy** towards drug cartels, syndicates and peddlers.
- Lastly common people must understand that anybody can become drug abuser. Hence society must **not ostracize and abuse** drug abusers, rather they must intervene positively by atleast bringing the patient to de-addiction centre.
- Providing clean needles, sterilization equipment etc. to drug users has proved to be effective in Manipur and other countries in reducing secondary damage like spread of AIDS and Hepatitis C.
- Preventing diversion of legal cultivation of opium and opiate pharma drugs, checking illicit cultivation of opium and closing porous borders.
- Collaboration with international bodies such as MoU has been signed between the Punjab's Health Department, a Special Task Force (STF) and the UNODC (United Nations office on Drugs and Crime) to root out drug menace from the state. The strategy will be three fold – supply control, prevention through awareness in schools and involving mothers, rehabilitation

## 2.8. MENTAL HEALTH

### Why in News?

- A new WHO study has revealed that 4.3% of the global population was living with depression in 2015 showing an 18% rise in the last decade.

### Background

- World Health Day 2017 has the **theme of “Depression: Let’s talk”**.
- A **study by Lancet, has projected** that a \$147-billion investment in scaling up treatment for depression and anxiety could result in improved labour force participation and productivity worth \$399 billion.

### Findings of the study

- **Depression is the single largest contributor to global disability** (7.5 per cent of all years lived with disability in 2015).
- It is a **major contributor to suicides** and the second leading cause of death among 15-29 year olds globally.
- WHO says **depression can be long lasting and recurrent with characteristics like** sadness, interest loss, feelings of guilt and low self-worth, disturbed sleep or appetite, tiredness and poor concentration.
- **Depression among younger generation is because of** competition in education, career prospects, parental pressures, and interpersonal relationships.

- Common mental disorders are rising, particularly in low-income countries where nearly **half of the population affected by depression lives in South East Asia and Western Pacific regions.**
- **Women are more prone to depression than men.** Rate of depression peaks among older adults.
- Depression occurs in children and adolescents below the age of 15 years too.
- Less than half of those affected by depression in the world receive treatments due to the **lack of resources and trained healthcare providers apart from prevalent social stigma.**
- People are often not correctly diagnosed, and others who do not have the disorder, are often misdiagnosed and prescribed antidepressants.

### Steps taken by governments

- Government of India has launched a **National Mental Health Policy 2014** –
  - Universal access to mental healthcare institutions.
  - Strengthen leadership in the mental health care.
  - Gives out role for central and state governments, local bodies and civil society organizations.
- Government has recently come out with **Mental Health care Act 2017** with the aim of avoiding discrimination and improving their autonomy in their decisions.
- Karnataka government has launched a **dedicated helpline called Arogyavani** that acts as a counselling and redressing any type of grievances.

### 2.8.1. MENTAL HEALTHCARE ACT 2017

#### Background

The Act has been notified to harmonise the country's mental health laws to the UN Convention on Rights of Persons with Disabilities, to which the country is a signatory.

The **Act defines "mental illness"** as a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognise reality or ability to meet the ordinary demands of life, mental conditions associated with the abuse of alcohol and drugs.

#### Important provisions of the Act

- **Rights of person with mental illness**- every person shall have a right to access mental health care and treatment from mental health services run or funded by the appropriate government at an affordable price, free for homeless and BPL.
- **Advance Directives:** given by mentally ill person regarding her treatment and who shall be her nominated representative
- **Central and State Mental Health Authority: These bodies are required to**
  - register, supervise and maintain a register of all mental health establishments,
  - develop quality and service provision norms for such establishments,
  - maintain a register of mental health professionals
  - train law enforcement officials and mental health professionals on the provisions of the Act,
  - receive complaints about deficiencies in provision of services, and

#### Challenges in India

- Compared to western countries, the **number of psychiatrists and the number of dedicated mental health institutions in India is very low.**
- **With rising urbanization and globalization,** there is also a small shift towards a nuclear family. With a smaller family, there is a **larger pressure on the children contributing into depression.**
- **Social stigma** because of lower awareness is also a deterrence to help the mentally ill patients.



- Advise the government on matters relating to mental health.
- **Suicide is decriminalized**- person attempting suicide will be treated as mentally ill and will not be treated under IPC
- **Mental Health Review Commission:** will be a quasi-judicial body that will periodically review the use of and the procedure for making advance directives and advise the government on protection of the rights of mentally ill persons.
- Mental Health Review Board to protect the rights of persons with mental illness and manage advance directives.
- The Act also specifies the process and procedure to be followed for admission, treatment and discharge of mentally-ill individuals.
- A person with mental illness shall not be subjected to electro-convulsive therapy without the use of muscle relaxants and anesthesia.

### Significance of the Act

- It is a rights-based approach for the health of mentally ill patients providing various rights such as access to health care facilities and providing advance directives for their treatment.
- It is a step forward in making health as a fundamental right.
- Decriminalisation of suicide implies that the government has accepted that the people trying to commit suicide need help and not punishment
- Bringing depression and mental illness into public discourse which is considered as a taboo in India will help in early detection of the patients and can decrease in chances of suicide.

### Challenges

- The amount spent on mental healthcare is just 0.06% of health budget is very low to provide for infrastructure as envisaged in the Act.
- Moreover, India has just 3 psychiatrists per million (global norms is 56 per million) is very low to look for very high and ever increasing number of cases. Also there is lack of counselling centres.
- Poor infrastructure at district and sub-district level will create burden on state government and the Implementation will vary across states with Bihar and UP are expected to lag behind.
- Advance directives clause will be an issue as in many cases patients will not be able to take rational decisions
- The Act does not focus on health and condition of existing patients in different mental institutions across the country.
- The present Act could make psychiatrist uncomfortable, as it is bringing in too much control.
- Concerns with Mental health care decisions in the hands of non-experts. Mental Health Review Board, which has six members out of which only one is a psychiatrist.
- The over inclusive definition of mental illness might harm the large chunk of psychiatric patients who might feel stigmatized.
- Public Health being a state subject will put immense financial pressure on states for implementation.
- Centre bringing such a law on state subject will impact the cooperative federalism model.

### Way forward

- The Mental Health Care Act has some unprecedented measures aimed towards a sea change for the betterment regarding access to treatment for the mentally ill across the country and particularly so for the underprivileged.

- The issues with the Act have to be resolved. States need to be consulted before finalizing it as act.
- Care has to be taken that the Act does not create impediments in psychiatric treatment in the country.
- It must be ensured that the large chunk of psychiatric patients is able to avail mental health care facility without any stigmatic feeling and hindrance.
- There is a dearth of funds and functionaries in the country. **Budgetary allocations and private funding to fill this gap need to be done.**
- Also the policies **should be target and time specific.** The mental health needs to be tackled on a mission mode.
- Improving awareness among parents and counseling them too about depression.

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## 3. EDUCATION

### 3.1. FRAMING NEW EDUCATION POLICY

#### Why in news?

Government has constituted **Dr. K. Kasturirangan committee** to prepare final draft of National Education Policy.

Earlier, the draft of New Education Policy 2016 was made public after T.S.R. Subramanian submitted its report for evolution of a National Education Policy. Two previous education policies had come one in 1968 and another in 1986, under Indira Gandhi and Rajiv Gandhi govts respectively. The National Education Policy (NEP) of 1986 was revised in 1992.

#### Why India needs a new education policy?

- Globally average spending on education is 4.9% of GDP while in the case of India it is just 3.4%.
- Dearth in the availability of good quality teachers.
- Insufficient focus on research and creativity.
- Money laundering in the name of capitation fees.
- Poor employability of graduates.
- Political interference especially in the higher education.
- Insufficient focus on teaching values and morality.
- Despite having number of premier education institutes, only one features in the top 500 world universities.

#### Key recommendations of Subramanian panel

- Increase **public spending** on education from 3% to 6% of GDP
- Compulsory **certification for teachers** in government and private schools
- Expand **Mid-Day Meal scheme** to secondary schools.
- **Teacher Entrance Tests (TET)** for recruitment
- Discontinue **no detention policy** after class V
- Extend 25% **EWS quota** in private schools to minority institutions
- Allow top **foreign universities** to open campuses in India
- An All-India service **Indian Education Service (IES)** should be established
- Reduction of UGC role to disbursement of scholarships and fellowships & separate law for management of higher education.
- Consolidation or merging of small, non-viable schools {But it violates RTE act having access to school at walking distance of max 1 Km below Std 5<sup>th</sup>}.

#### Important observations from TSR Report

- The quality of instruction or learning in the school system has declined despite improvement of infrastructure facilities in them.
- The inadequate stress in early childhood has “severely contributed to poor learning outcomes at successive secondary and higher education periods”
- There are serious gaps in teacher motivation and training, sub-optimal personnel management in the education sector.
- The education sector is facing “crisis of credibility” due to outside interference, absence of accountability, unregulated commercialization and lack of standards.

#### Salient Features of the draft new education policy

- **Pre-school Education:** Pre-school education has not received the necessary attention in the past as Government schools do not provide pre-primary education, according to the draft National Education Policy. The following policy initiatives will be taken:
  - ✓ Pre-school education for children in the age group of 4 to 5 years will be implemented.

- ✓ To strengthen the pre-school education in Anganwadis, steps will be taken in consultation with states to frame curricula and develop learning materials.
- ✓ State Governments will prepare cadres of pre-primary teachers.
- ✓ All primary schools will cover pre-primary education.
- **Learning outcomes in School Education**
  - ✓ Norms for learning outcomes will be developed and applied uniformly to both private and government schools.
  - ✓ Within the parameters prescribed by the RTE Act, States will have the flexibility to design and plan for the infrastructure keeping in view the local conditions.
  - ✓ The present provisions of no-detention policy will be amended, as it has seriously affected the academic performance of students. The no detention policy will be limited up to class V and the system of detention will be restored at the upper primary stage.
- **Skills in Education and Employability**
  - ✓ Skill development programmes in school and higher education system will be reoriented
  - ✓ A detailed plan for the creation of skill schools for improving employment opportunities for secondary school students in special focus districts will be prepared.
- **Teacher Development and Management**
  - ✓ A transparent and merit based norms and guidelines for recruitment of teachers will be formulated in consultation with the state governments.
  - ✓ At the National level, a Teacher Education University will be set up covering various aspects of teacher education and faculty development.
  - ✓ A separate cadre for teacher educators will be established in every state.
  - ✓ For higher education, a national campaign will be launched to attract young talent into the teaching profession. In order to attract young talent into teaching profession, a career growth of research students, such as M.Phil & Ph.D scholars, will be created.
- **Regulation In Higher Education**
  - ✓ An independent mechanism for administering the National Higher Education Fellowship Programme will be put in place.
  - ✓ A Central Educational Statistics Agency (CESA) will be established as the central data collection, compilation and consolidation agency with high quality statistical expertise and management information system which will be used for predictive analysis, manpower planning and future course corrections.
  - ✓ An expert committee will be constituted to study the systems of accreditation in place internationally. It will draw from the experiences of some of the best practices followed by countries having well performing systems and will suggest restructuring of NAAC and NAB as well as redefining methodologies, parameters and criteria.
- **Open and Distance Learning & MOOCs**
  - ✓ The National Institute of Open Schooling (NIOS), in collaboration with Ministry of Skill Development & Entrepreneurship, will redefine itself to address the large potential demand for vocational education. The issues of management, monitoring and oversight of NIOS will be addressed appropriately.
  - ✓ A quality assurance mechanism for accreditation of all universities/institutions offering ODL / MOOCs will be put in place to ensure quality, promote, innovation and reshape and modernise the ODL / MOOCs courses and programmes.
- **Research, Innovation and New Knowledge**
  - ✓ A clear reorientation of research agenda of National University of Educational Planning and Administration (NUEPA) will be undertaken to reflect actual issues on the ground.

- ✓ Steps will be taken to promote generation of new knowledge and their applications and introduction of these new domains into the curricula of higher education to consolidate and strengthen India's position as a soft power.
- **Financing Education**
  - ✓ The government will take steps for reaching the long pending goal of raising the investment in education sector to at least 6% of GDP as a priority.
  - ✓ Instead of setting up new institutions, which require huge investments, priority of the Government will be to expand the capacity of existing institutions.
  - ✓ In order to encourage excellence and efficiency, performance-linked funding of higher education institutions will be implemented.
- **Language and Culture in Education**
  - ✓ All states and UTs, if they so desire, may provide education in schools, upto Class V, in mother tongue, local or regional language as the medium of instruction.
  - ✓ Indian culture, local and traditional knowledge will be given adequate space in the school education.
  - ✓ Educational institutions will instil among students civic sense, discipline, punctuality, cleanliness, good conduct, empathy towards elderly.
  - ✓ Keeping in view special importance of Sanskrit to the growth and development of Indian languages and its unique contribution to the cultural unity of the country, facilities for teaching Sanskrit at the school and university stages will be offered on a more liberal scale.
- **Inclusive Education and Student Support**
  - ✓ Curriculum will cover the issues of social justice and harmony and legal measures in order to avoid social discrimination.
  - ✓ With the objective of encouraging merit and promoting equity, a National Fellowship Fund, primarily designed to support the tuition fees, learning materials and living expenses for about 10 lakh students will be created.
  - ✓ A zero tolerance approach on gender discrimination and violence will be adopted.

Apart from this, priority has also been given to **Curriculum Renewal and Examination Reforms, Protection of Rights of the Child & Adolescent Education, Use of ICT in Education and Self - Development through Comprehensive Education.**

#### Way Forward

It is no exaggeration to say that new policy measures are imperatively needed to revamp and upgrade the entire education sector. Band-aid solutions, ad hoc measures, or ushering in new miscellaneous schemes are not approaches that will transform the sector for the better.

At the same time, this draft policy needs wider consultation such as on issues related to addressing the fears of minorities and issues pertaining to commercialization of education. It needs to be recognized that investing national energies on quality and inclusivity is possibly the only route that can lift the country from an also-ran status to being on the international stage.

### 3.2. RTE ACT

Parliament made education a right under Right to education Act in 2010. RTE aims to provide primary education to all children from 6-14 years of age. However, even after 7 years, the provisions and implementation of act are associated with several issues.

### 3.2.1. ISSUES RAISED BY CAG REPORT

- **Disbursal of less funds by central government** - funds demanded by state governments were consistently curtailed by the Centre's Project Approval Board (PAB) hampering implementation.
- **Gaps in financial management** - mismatch is found in the unspent balances at the end of the year with opening balances of succeeding years showing mismanagement of account books.
- **Retention of huge balances by state governments and non-adherence to expenditure norms by them**
- **Compliance issues with provisions of RTE** - Regular household surveys have not been conducted by local authorities in 21 states/ UTs to maintain/update record of children from their birth till they attain age of 14 years.
- **Children with special needs** – transport, aid and appliances were not provided as envisaged in the act to all the eligible children with special needs
- **Ineffective National advisory council** – Council largely remained and not in existence since November 2014. It has responsibility of advising on the implementation of the Act

### 3.2.2. SECTION 12 (1) (C)

#### Why in News?

- The report 'State of the Nation: RTE Section 12 (1) (c)' highlights the status of implementation of the Section 12 (1)(c) of RTE Act.
- The report is a collaborative effort of the RTE resource centre at IIM Ahmedabad, Central Square Foundation, Accountability Initiative (Centre for policy research) and Vidhi Centre for legal Policy.

#### What is Section 12 (1)(c) of RTE Act?

- RTE Section 12(1)(c) mandates private unaided schools (except minority and residential schools) to keep 25 percent of the seats (at entry level) reserved for children belonging to economically weaker sections.
- This was aimed to increase educational opportunities and to create inclusive schooling system.

#### Findings of the Report

- Even after six years of implementation of the right to education (RTE) Act, children from economically weaker section are still struggling to find their seats in schools.
- Low State Fill Rate - According to data from District Information System for Education (DISE), the state fill rate – share of available seats filled by the mandate – is a low 15.12 percent in 2014-15
- Inter-State Variation - The report shows that states amongst themselves have large variation in their seat fill rate, from zero percent in Andhra Pradesh to 44.61 percent in Delhi.
- No Implementation in majority of the states - Out of 34 states and UTs, 18 show zero schools implementing the provision. These include states like Andhra Pradesh, Haryana, Kerala, West Bengal and Punjab.

#### Reasons of Poor Implementation

- Slow reimbursement of fees from state governments to the private schools, which takes up to two years.

- Lack of awareness about the rule among the citizens especially in the rural area.
- Unwillingness on the part of private schools and even the states to incur additional expenses.
- Most states have either unclear rules or guidelines or are not implementing this provision.
- Provision of child support and child tracking is almost non-existent after admission in school.

### 3.2.3. SECTION 16 OF RTE ACT

#### Why in news?

- In reply to HRD ministry, at least 18 state governments want this section to be repealed.
- Recently, T S R Subramanian panel appointed to suggest Education policy also recommended that the government should bring back the pass-fail system from Class VI.
- Rajasthan and Delhi have also passed Bills to reverse the no-detention policy. These are waiting for the governor's assent.

#### What is Section 16 of RTE?

- As per Section 16 of RTE Act, the students up to class VIII are automatically promoted to the next class without being held back even if they do not get a passing grade.
- This has been implemented as part of the **Continuous and Comprehensive Evaluation (CCE)** under the RTE Act to ensure all-round development of students.

#### Background

- Detention system led to increased dropouts among students, especially from economically and socially weaker sections, who cannot afford costly private education.
- So to overcome this, no detention policy was brought in so that an environment free from fear, anxiety and stress can be provided to children in order to learn and grown on their own pace and at the same time dropouts can be reduced as well.
- Many government school teachers and principals opined that it has become a challenge to ensure minimum learning levels among the children.
- Because of this clause students have developed a lackadaisical attitude towards study and at the same time parents also didn't bother as their children cannot be held back in the class.
- **The 2014 Annual Status of Education Report (ASER)** has found that every second Class V student in rural India can't read the text of a class three levels below.
- Even Niti Ayog has called for the revision of this provision of the Act.

#### Way Forward

- The RTE Act made a range of other promises such as upgrading infrastructure, upgrading quality of teaching and regular assessment through CCE. It has to go hand in hand.
- The poor learning outcomes of schools are caused by many factors such as poor student teacher ratio, lack of training of teachers, monitoring, availability of basic infrastructure, school and home environment etc.
- Government can't implement only the no-detention in letter and spirit and not adhere to other parameters.
- Bringing back the old pass-fail system without making proper course correction in other areas will undermine the egalitarian promise of the RTE.

- At the same time, to give sufficient time to all the stakeholders to understand the policy, the no-detention policy should be implemented in a phased manner so that all stakeholders understand what it entails instead of interpreting it as zero assessment.

### 3.2.4. OUT OF SCHOOL CHILDREN

#### Why in News?

- NSSO has released a report that shows that **education is viewed as unnecessary** which is a major reason for increasing school drop-outs.
- The number was almost double for those who dropped out to **supplement family incomes or attend to domestic chores**.

According to a report by UNESCO (**e-atlas on out of school children in the world in 2015**), India has 47 million youth of secondary and higher secondary school-going age dropping out of school.

An overall **increase in gross enrolment ratio** at almost every level of education in India confirms that the **educational system has become more accessible** yet the number of drop out due to various reasons have increased.

#### Highlights of the Report by NSSO

- There is an **alarming number of children who are indifferent to studies**. As many as 34.8% children in rural India and 22.8% in urban India lack interest in education.
- Out of school rates are **highest for children in the poorest wealth quintile (36%)**.
- Among dropouts and non-attendees overall (5-29 years), as many as 36% cited the **need to supplement household income as the prime reason** for not pursuing studies. For boys over the age of 15, there is a spike in the drop-out rate owing to the need to earn.
- The percentage of non-attendees **citing domestic chores as a reason** has spiked between 2004-05 and 2011-12. This is especially true **for girls** over the age of 15. Women are forced to assist with domestic chores at an early age, thus discontinuing with their education both in rural and urban India.
- The children who have never attended educational institution in the age group of 9-15 report a higher share of **non-workers** and a lower share of **main workers** than those who have attended at some

Percentage of students who are currently not attending any educational institution by broad reason

Age Group	School too Far	To Supplement Household Income	Education Not Considered Necessary	To Attend Domestic Chores
5-9	4.10	0.5	11.20	0.8
10-14	3.30	16.1	32.30	13
15-19	1.8	35	17.40	24.40
20-24	1.20	39.30	12	29.20

#### Provisions in RTE for OOSC

**Section 4** provides children above six years, who have either not been admitted to any school or, having been admitted have not completed elementary education and have dropped out, the right to be admitted to a school in a class appropriate to his or her age for completing elementary education.

The Act facilitates a child admitted to an age appropriate class to be **given Special Training** to enable him or her to be at par with other children.

**Section 10:** This provision casts a **moral responsibility on every parent/guardian** to admit their children/wards to school, and ensure that children are not deprived of their right to elementary education

**National Commission for Protection of Child Rights (NCPCR) / State Commission for Protection of Child Rights (SCPCR)** would monitor out-of-school children to facilitate their access & participation in the schooling system.



time. These numbers seem to suggest that even a cursory brush with education increases the probability of finding work as well as finding it for a longer time.

- The proportion of girls not attending an education institution is higher than boys, and the gap increases with age, their proportion among non-workers is also higher than boys.
- Overall, the share of population in the 5-19-year age **group not attending an educational institution** currently is **less than 30%**. While the share of children above the age of 8 years who have never attended school does not go beyond 13%, **drop-outs start increasing at an alarming rate after the age of 14 years**.
- Besides this problem of non-attendance, those who attend schools are **unable to perform** even basic tasks such as reading a paragraph or solving elementary arithmetic problems.

#### Recent Steps taken by Govt to Improve Education

- National Literacy Mission 1988
- Right of Children to Free & Compulsory Education 2009 (between age group of 6-14 years)
- Mid-Day Meal Scheme- providing food to students
- Swachh Bharat Abhiyan- installing toilets in schools.

#### Problem

- The number for out-of-school children (OOSC) put out by various official sources in India, show wide variations.
- There is a problem with the **definitions** and **the methods of estimating** 'never enrolled' as well as 'dropped out' children. There is no standard definition of OOSC. For example, in Karnataka, a child that is consistently absent for a week is considered to have dropped out, while in Gujarat, she would have to be consistently absent for 2 months to qualify as such.
- In addition, there are **discrepancies and inefficiencies in the overall system of collecting and collating data** compound the problems.
- The budget allocation for education sector in India is one of the lowest in the world. Besides this, the situation has been worsened by the decline in foreign aid to education over the same period.
- The steps already taken by the government to ensure attendance like '**mid-day meal scheme**' seem to have less than expected effect. It could bring the children to the school but **may not be enough to capture their interest and provide education**.
- The quality of education in India has consistently been below average and this may be a major factor behind driving students away from schools, even if they do not have to work or earn money to support their families.

#### Way Forward

- Not even a decade has passed since Right to Education was inserted into the Part III of Indian Constitution. Yet quality education could not be deemed as a fundamental part of living by the people of the country. Rather the situation has worsened as in a similar survey conducted almost a decade ago, only one in every four persons cited lack of interest in education as a reason for non-attendance.
- The NSSO report's findings that a significant proportion of out-of-school children find education unnecessary might be on the same page with industry reports that find India's graduates unemployable. The government needs to work on laying down a proper education policy with specific focus on trouble areas and simultaneously increasing budget allocation.

### 3.3. HIGHER EDUCATION SYSTEM IN INDIA

The recent suicide by three female students of a private medical college in Tamil Nadu leaving behind a note blaming their college for excessive fees, no proper classes or teachers and there being "**nothing to learn**" highlights the serious maladies afflicting private education in India.

In case of higher education in India, following can be observed –

- The gross enrolment ratio in higher education in the country (23.6 percent) is lower than not only the developed economies like the US (89.1 percent) but also the developing countries like China (29.7 percent) and Russia (76.1 percent). These low enrolment ratios are indicative of a large group of students who don't enter the higher education.
- The aspect of quality of education and curriculum is also put to the test by the low employability of students graduating out of universities. An assessment in 2016 found only 18% of engineers to be employable in the software services sector in a functional role.
- The third aspect relates to the use of technology platforms for increasing access to affordable education with low internet penetration; developing world-class institutions which are still a challenge.
- Other issues include predominance of private sector (Almost 59 percent of students in higher education are in private institutions), skewed sectoral and regional growth of institutions, lack of research orientation and the growing financial burden in form of educational loans.
- **Lack of Interdisciplinary focus** - Considering the fact that most of our societal problems cannot be solved by experts from a single academic discipline, there is a need for better coordination and synergy between experts from different academic disciplines.

#### 3.3.1. HIGHER EDUCATION FINANCING AGENCY (HEFA)

Recently the Union Cabinet has approved the creation of the Higher Education Financing Agency (HEFA) to give a major push for creation of high quality infrastructure in premier educational institutions.

- For this purpose, the HRD Ministry has signed a deal with Canara Bank to set up a **Higher Education Financing Agency (HEFA)** that would **eventually take over UGC's financial powers**.
- This is a step towards educational reforms where the University Grants Commission (UGC) will not have any financial powers and will eventually function only as a certification body.
- The HEFA will start funding higher educational institutions, including IITs and IIMs, by the start of the next academic session.

##### About HEFA

- It will be jointly promoted by the identified Promoter and the **Ministry of Human Resource Development**.
- It would be formed as a SPV within a PSU Bank/ Government-owned-NBFC (Promoter). It would leverage the equity to raise up to Rs. 20,000 crore for funding projects for infrastructure and development of world class Labs in IITs/IIMs/NITs and such other institutions.
- It would also mobilise CSR funds from PSUs/Corporates for **promoting research and innovation** in these institutions on grant basis.
- It would finance the civil and lab infrastructure projects through a 10-year loan.
- The principal portion of the loan will be repaid through the 'internal accruals' (earned through the fee receipts, research earnings etc.) of the institutions. The Government would service the interest portion through the regular Plan assistance.

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- For joining as members, the Institution should agree to escrow a specific amount from their internal accruals to HEFA for a period of 10 years. This secured future flows would be securitised by the HEFA for mobilising the funds from the market.
- All the Centrally Funded Higher Educational Institutions would be eligible for joining as members of the HEFA.

### Significance

- HEFA marks the beginning of a market-linked education financing structure in India and a departure from the traditional grant-based system of funding higher educational institutions.
- The agency is expected to ease pressure on the government, which currently is the sole funder of such institutions.
- HEFA will instil accountability in higher educational institutions. As the institutes need to pay back, a market force-driven fee structure is required. But for charging more fees, it needs to provide better facility, better infrastructure for which they need to borrow. The cycle will instill accountability.
- It would provide the much needed funds to boost research oriented infrastructure.
- It may eliminate the issues which came up while UGC was handling finances such as **mishandling of issues** related to Deemed Universities and its **failure to revamp the higher education** curriculum for years.

### Concerns

Since the institutions will borrow money and return it, they have to be revenue-surplus, which may make a fee hike the first possibility. This will be detrimental for students coming from poor economic backgrounds.

### 3.3.2. INSTITUTIONS OF EMINENCE

#### Why in news?

India has taken a firm step towards building 20 world-class educational institutions, which will be termed **Institutions of Eminence**.

**Features** of such institutions include:

- It should preferably be **multi-disciplinary** and have both teaching and research focus of an exceptionally high quality.
- Apart from the regular courses, it should also offer various **inter-disciplinary courses**, including in areas of emerging technology and interest as well as those of relevance to the development concerns of countries like India.
- There should be a **reasonably good mix of domestic and foreign students**.
- There should be a **transparent merit based selection in admissions**, so that the focus remains on getting meritorious students.

The global ranking of prestigious Indian institutes have gone down with Indian Institute of Science (IISc) Bangalore, along with six top-ranked Indian Institutes of Technology (IITs), dropped in the latest QS World University Rankings 2016-17

#### **Factors responsible for decline in ranking**

- India's relatively low numbers of PhD-qualified researchers, which has an impact on the research productivity and impact of India's universities.
- Nine of India's universities also fall for faculty/student ratio.
- Lack of innovation and new ideas in institutions
- Absence of world class teaching institutions
- Old curriculum and less practical work in engineering colleges etc.

- The **faculty student ratio** should not be less than **1:10** after three years of declaration as a World Class Institution
- The Institution should have a **world-class library** with subscriptions to reputed journals in the areas of its course offerings.
- It should have student amenities comparable with that of globally reputed institutions.
- The Institution should have reasonably **large owned campus** with adequate space for expansion etc.

## Ready With Strategy

WHAT WILL MAKE INSTITUTIONS 'EMINENT'	SELECTION NORMS
<p><b>RESERVATION POLICIES</b> will apply only to govt institutions conferred the status</p> <p><b>THE INSTITUTIONS WILL BE</b> multi-disciplinary but unitary, meaning they will not affiliate with colleges or use the word 'university' for description</p>	<p><b>NO UGC INSPECTION FOR</b> these institutions, which will follow a disclosure-cum-review mechanism with the review by the EEC, which may rope in foreign experts. EEC will review the institutions once in three years for adherence to their implementation plan until they achieve the top 100 global ranking slot for two consecutive years</p> <p><b>FAILURE TO MEET GOALS</b> could mean withdrawal of any or all additional incentives given to an institution or replacing the status to ordinary deemed to be university status affiliated to a state university</p>
<p><b>ELIGIBILITY CRITERIA</b></p> <p><b>For existing pvt institutions,</b> initial corpus fund of ₹60 cr to be hiked to ₹150 cr in 10 years</p> <p><b>For greenfield institutions,</b> an initial corpus of ₹60 crore to be hiked to ₹150 crore in a decade</p> <p><b>Institution to be accredited</b> by NAAC or its international equivalent</p>	



### Institutions of eminence

- **The UGC (Institutions of Eminence Deemed to be Universities) regulations, 2017** will govern all such institutions that are conferred with this status, ensuring their complete academic, administrative and financial autonomy.
- These regulations will **override all other UGC regulations** and free the institutions of UGC's restrictive inspection regime, the regulatory control over fee and curriculum.

### Issues with Institutions of eminence

- Institutions of eminence should be based on meritocracy and free from reservation criteria but, this would require a change of mindset in the society.
- Such institution though out of control of UGC can still face political interference and bureaucratic red tapeism.
- In the long run maintenance of such institutions with proper quality standards would be an issue.
- To sustain such institutions quality teachers would be required but at present there is lack of attraction for teaching among educated youth.
- The issue of brain drain also needs to be tackled post completion of education from such institutions.

### Other requirements to be considered

- Need an infusion of fresh ideas and teaching mechanisms to create a new educational infrastructure that not just delivers knowledge, but also encourages new thinking and boosts the spirit of innovation in the new generation.
- Need to adopt to create a global culture to have world-class educational institutions, borrow ideas in pedagogy from the best institutions around the world and move from a top-down mode of education to a more organic culture of learning.
- Need educational institutions that not only create skilled human resource but also boosts indigenous research and development, power the country's intellectual and entrepreneurial leadership, and instill scientific thinking among the masses.
- Need institutions that can become a major draw for international students to help obtain the twin purposes of earning foreign reserve and spreading the country's soft power.

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### 3.4. OTHER ISSUES RELATED TO EDUCATION

#### 3.4.1. INTEGRATED SCHOOLS

##### Why in News

- Two years have passed since Rajasthan government had started integrated schools by merging primary and secondary schools in the same compound which are called “Adarsh” schools.
- These schools provide students access to one institution that offers education from Classes I to XII.

##### Background

- Rajasthan was facing a situation where there were nearly 1.83 primary schools per gram panchayat but only 0.37 secondary schools per gram panchayat, thus access to schools at secondary level was severely less.
- Also many schools did not have infrastructure in the form of lack of classrooms, benches etc.
- Primary schools were supervised by block level officers with around 250-300 schools under each officers making them inaccessible by parents if they had any problem with the school.

##### Benefits

- Rationalization of number of schools in the area leading to better availability of infrastructure and better accessibility to schools.
- Lessen the problem of teacher shortage.
- Trust in the public schools has increased as reflected in the return of 15 lakh students to the public school system reversing earlier trend.
- 66 per cent of students in the government system are now transitioning to Class XI as opposed to 50 per cent previously.

##### Conclusion

This initiative has shown an innovative approach which can be emulated in other states facing similar problems.

#### 3.4.2. MOTHER LANGUAGE AS MEDIUM OF INSTRUCTION IN SCHOOL

##### Why in news?

- Recently, Karnataka government wants union government to make amendment in constitution empowering states to make mother language compulsory in primary school.

##### Advantages of teaching in mother tongue

- Education in the mother tongue helps students absorb subjects quickly.
- Children are more likely to enroll and succeed in school.
- Children tend to develop better thinking skills in formative years.
- Improved learning outcomes during primary school.
- Parents are more likely to participate in their children’s learning.
- Protecting and preserving local languages.
- Expand the reach of education as it helps rural children who are not familiar with English language.

Article **350A** of Indian constitution which deals with interest of **Linguistic Minorities** says that every state and local authority must provide adequate facilities for instructions in local language at primary stage and President is empowered to issue direction for the same.

### Disadvantages of teaching in mother tongue

- Students with no English background will face difficulty transiting to higher education like engineering/ medical, etc where teachings are mostly in English.
- English is largely recognized as a universal language so if students are taught in mother tongue they will face problems connecting with the world as English always acts like a bridging language.
- In this fluid world one should be well versed with English language to grab opportunities in life.

### Way ahead

- There should be judicious blend of English and mother tongue for a child which not only will help him/her grab the subjects but also prepare him/her to face hostile world outside one's comfort zone.

## 3.5. STEPS FOR IMPROVING QUALITY OF EDUCATION

### 3.5.1. SCHOOL EDUCATION QUALITY INDEX (SEQI)

- **Niti Aayog** has organised the first regional workshop on School Education Quality Index (SEQI) to improve the learning outcomes among school children.

#### About SEQI

- **The SEQI is a composite index that** will report annual improvements of States on key domains of education quality, conceptualized and designed by NITI Aayog and the MHRD.
- The larger vision of the index is to shift the focus of States from inputs towards outcomes, provide objective benchmarks for continuous annual improvements, encourage state-led innovations to improve quality and facilitate sharing of best practices.
- In order to precisely report the quality of education imparted across India, the **SEQI is divided into two categories: 1.Outcomes and 2.Governance Management.**
- These are further divided into **three domains of Outcomes (Learning, Access and Equity)** and **two domains of Governance & Management (Governance Processes and Structural Reforms)**. Currently the index has 34 indicators and 1000 points, with the highest weightage given to learning outcomes (600 out of 1000 points).

#### Universal education goals of India

- In its **Global Monitoring Report, 2016**, **UNESCO** claimed that India will achieve
  - ✓ Universal primary education by 2050.
  - ✓ Universal lower secondary education (grades 6-8 in case of India) by 2060
  - ✓ Universal upper secondary education (grades 9-12 in case of India) by 2085.
- However, UNESCO have **made these projections based on past linear trends and assumptions** and it has not involved the HRD ministry in this exercise.
- But already near universal access and enrolment has been achieved at the primary and upper primary level through implementation of **RTE Act and Sarva Shiksha Abhiyan.**
- The national average of Gross Enrolment Ratio (GER) has also increased over the years.

### 3.5.2. PISA

#### Why in News?

- The **HRD Ministry** has decided to take part in **PISA (Programme for International Student Assessment)** again from 2021.

### What is PISA?

- It is a global evaluation system launched by **OECD (Organisation for Economic Cooperation Development)** in 2000.
- It tests the learning levels of teenage students (15 year olds) in **reading, mathematics and science**.
- The test is carried out every three years.
- India boycotted the test after 2009 due to its poor performance.
- PISA's data can be used to improve India's school system and bring them at par with the global standards.

### 3.5.3. NEW DELHI DECLARATION ON EDUCATION

The main aim of the 'New Delhi Declaration on Education' adopted by BRICS nation at 4th meeting of BRICS Ministers of Education was to ensure inclusive and equitable quality education and promote life-long learning opportunities for all. In this context various steps were mooted

SDG Goal 4: Ensure inclusive and quality education for all and promote lifelong learning.

- Develop an enabling framework to promote research cooperation and knowledge transfer
- Facilitate mobility of students and scholars, and encourage exchange of teaching faculty.
- Identify a nodal institution within each country and create an institutional network to share ICT policies, Open Educational Resources, e-Libraries
- Use of ICTs for improving access to education, enhancing the quality of teaching-learning process, teacher development, and strengthening educational planning and management
- Expand technical and vocational education and skills development programmes
- Initiate actions to formulate country-specific targets within the broader scope of the **SDG4** and corresponding targets.

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## 4. MISCELLANEOUS ISSUES

### 4.1. OPEN DEFECTION AND SANITATION

#### Open Defecation

##### What is it?

- Open defecation refers to the practice whereby people go out in fields, bushes, forests, open bodies of water, or other open spaces rather than using the toilet to defecate.
- The practice is rampant in India and the country is home to the world's largest population of people who defecate in the open and excrete close to 65,000 tonnes of faeces into the environment each day.

##### Key Facts

- As per **UNICEF report** Around 564 million people defecate in the open.
- **India** accounts for 90 per cent of the people in South Asia and 59 per cent of the 1.1 billion people in the world who practice open defecation.

##### Current status of open defecation

- AS per recently released Swachhta Status Report in 2015, more than half of the rural population (52.1 per cent) of the country and 7.5% of urban population still defecates in open.
- **Gujarat and Andhra Pradesh** are the first states to have become open defecation free (ODF) in urban areas.
- **Kerala has become the third State** to be declared Open Defecation Free(ODF), Sikkim was first and Himachal Pradesh was second to be declared ODF.
- In rural areas, approximately 100,000 villages have also been declared ODF.
- A total of 405 out of the 4,041 cities and towns have so far claimed to have become ODF.
- The mission has managed to construct 36% of individual toilets, 30% community toilets and 9% public toilets.
- The government has set a target of making 334 more cities ODF by March next year.

##### Problems associated with open defecation

- **Malnutrition-** About 43 per cent of children in India suffer from some degree of malnutrition.
- **Diarrhoea and worm infection** are two major health conditions that affect school-age children impacting their learning abilities.
- Open defecation puts at **risk the dignity of women** in India. Women feel constrained to relieve themselves only under the cover of dark for reasons of privacy to protect their dignity and make them more prone to physical attacks.
- **Cripples national development-** workers produce less, live shorter lives, save and invest less, and are less able to send their children to school.

##### Challenges faced

- **Traditional practice-** It is deeply ingrained in society. Sanitation is not a socially acceptable topic, and hence, people do not discuss it.
- **Poverty-** Many of the poorest people will not prioritize toilets and besides, many are living in rented homes without toilets.
- **Lack of acceptance-** Society does not view the lack of a toilet as unacceptable. Building and owning a toilet is not perceived an aspiration.



- **Seen as government's responsibility-** Construction of toilets is still seen as the government's responsibility, rather than a priority that individual households should take responsibility.
- **Gap between knowledge and practice-** Even when people are aware of the health risks related to poor sanitation.

### Way forward

The challenge is to motivate people to see a toilet as fundamental to their social standing, status and well-being. The success of Swachh Bharat Mission is dependent upon behavioral changes and thus there is a need to engage with the community and facilitate the efforts by the people and involved organisations.

### Swachh Bharat Mission

**Swachh Bharat Mission** was launched on 2 October 2014 to make India clean and open defecation free by 2019, Mahatma Gandhi's 150th birth anniversary. It has slowly developed into a people's movement with greater awareness and participation and increased inter-departmental coordination. The programme is divided into two categories -- Swachh Bharat Mission (Gramin) and Swachh Bharat Mission (Urban).

- The Ministry for Drinking Water and Sanitation is looking at the rural part of the scheme.
- The Urban Development Ministry is implementing the programme in urban areas.

### Efforts by the government to make it a success

- Cash incentive for building toilets are being provided by the government.
- Creating solid waste management facilities.
- Efforts and focus on bringing behavioral changes. For instance-
  - ✓ Roping in celebrities to promote toilet use.
  - ✓ City surveys to instill a sense of competition among cities.
  - ✓ Using technology like Hike Messenger Group which has local administrators from the respective states showcasing their achievements in implementing the scheme.
- Creation of a portal by the ministry where all the information is available about the projects.
- Sanitation Messengers (Swachhata Doot)- who are village level motivators work to strengthen communication machinery at the village level with participatory social mobilization.
- Swachh Survekshan 2017, conducted by Quality council of India with aim of capturing the outcomes in making India open defecation free, streamlining waste management, has declared Indore as the cleanest city of India.
- Swachh Swasth Sarvatra' initiative was launched to build on and leverage achievements of two complementary programmes – Swachh Bharat Mission (SBM) and Kayakalp – of the Ministry of Drinking Water and Sanitation and Ministry of Health and Family Welfare.

### Challenges to the mission

- **Swachha Bharat Kosh**, a fund created for SBM programs hasn't taken off well.
- Private participation by way of CSR is less as interested private companies do not have detailed project report.
- Lack of funds
- Municipal bodies are not fully engaged with citizens or even the mission.
- Struggle involved in bringing behavioral changes in rural population.

### 4.1.1. SHIFT IN SANITATION POLICY

The recent shift in centre government's advise to state government of improving faecal sludge management as against traditional sewerage systems is a welcome move. This shift would take

efforts from just construction of individual and community or public toilets level to that of total sanitation level. According to World Bank, India lost the equivalent of 6.4 per cent of GDP due to inadequate sanitation.

Earlier, government policy has been to support the development of large, centralised technical systems through underground sewerage projects in urban areas. This shift from networked system towards septic tanks and pit latrines (onsite sanitation) systems is essential to ensure public health as 40% of total urban households is not connected to sewage treatment plants.

The Tamil Nadu government has prioritised septage management (management of onsite systems) and in 2014, issued the Septage Management Operative Guidelines. These guidelines required local bodies to secure the full sanitation chain: ensuring proper construction of septic tanks and regular emptying by desludging operators.

#### Road ahead

- There should be convergence of this system with AMRUT and the smart cities schemes to ensure funding for faecal sludge management.
- The government needs to clearly specify the role and responsibility of households and the municipality with regard to building, operating and clearing septic tanks, for better regulation
- Similar responsibility must be allocated for the health and safety of workers and operators
- The government also needs to develop guidelines for land and environmental clearances for treatment facilities and standards for discharge and reuse of the treated water and other products of the treatment plants.

## 4.2. HUMAN DEVELOPMENT REPORT 2016

#### Why in news?

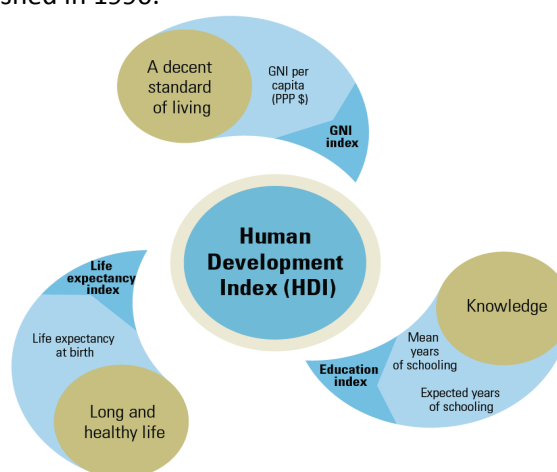
The latest Human Development Report, 2016 was released in March 2017 by United Nation Development Program (UNDP).

#### Background

- First Human Development report was published in 1990.
- This approach was developed by economist **Mahbub Ul Haq** and Nobel Laureate **Amartya Sen**.
- It introduced a new approach called **Human Development Approach** which is about expanding the richness of human life (**focus on their health, education, etc.**) rather than simply the richness of the economy (GDP) in which human beings live.

#### Major Highlights of the report

- **Norway** is ranked 1st (score: 0.949) in HDR 2016 report followed by **Australia** at 2nd (score: 0.939) and **Switzerland** at 3rd (score: 0.939).
- As per the report **1.5 billion** people still lives in multidimensional poverty. **54%** of them are concentrated in South Asia only and **34%** in Sub-Saharan Africa.



- Moreover **South Asia** has the **highest level of malnutrition** in the world (**38%**) and **lowest public health expenditure** in the world as a percentage of GDP (**1.6%**).
- Even the largest **gender disparity** in development was in **South Asia**, where the female HDI value is 20% lower than the male value.

### India related Facts

- HDI: With HDI value of **0.624**, India is ranked at **131<sup>st</sup>/188** countries. In 1990 India's HDI value was **0.428** (witness an increase of **45.8%** over 25 years). This improvement is **second** among BRICS countries after china (Improvement of 48%). Last year India was ranked at **130<sup>th</sup> position**.
- It is placed in "**medium human development**" category alongside countries such as **Congo, Namibia and Pakistan, Bangladesh, Myanmar, Kenya, etc.**
- Among the **SAARC countries**, India is behind **Sri Lanka (ranked 73<sup>rd</sup>)** and the **Maldives (ranked 105<sup>th</sup>)**, both of which figure in the "**high human development**" category.
- **Inequality**: When India's HDI is adjusted for inequality its value drops by 27%, from 0.624 to 0.454.
- **Health**: India's life expectancy at birth is **68.3 years**. For very high human development countries average life expectancy at birth is **79.4 years**.
- **Education**:
  - ✓ India's expected years of schooling is **11.7 years** while the very high human development countries have an average of **16.4 years**.
  - ✓ India's Mean years of schooling is **6.3 years** while the very high human development countries have an average of **12.2 years**.
- **Gender**:
  - ✓ India's **Gender Development Index** value is **0.819** and it is ranked below Bangladesh (0.927), Nepal (0.925), Bhutan (0.900).
  - ✓ India's **Gender Inequality Index** value is **0.530** (ranked 125<sup>th</sup>) again falling behind Bangladesh, Nepal and Bhutan among others.
- **Multidimensional Poverty Index**: Its value is **0.282**.
- **Maternal Mortality Rate** for India is **174** (deaths per 100,000 livebirths). For very high human development countries average is **14**.
- **Infant Mortality Rate** for India is **37.9** (per 1000 live births) while for very high development countries have an average IMR of just **5.4**.
- Overall Between 1990 and 2015, India's **life expectancy at birth** increased by **10.4 years**, mean years of schooling increased by **3.3 years**, expected years of schooling increased by **4.1 years** and **Gross National Income per capita** increased by about **223.4%**.
- HDR report applauded India's progressive laws, especially **Right to Information, National Food Security, and Right to Education Act**.
- The report also praised **India's reservation policy** though it could not eradicate **caste based exclusions**.
- It even commended the Indian grassroots group **Mazdoor Kisan Shakti Sangathan** for popularising **social audits** of government schemes.

### Barriers to universalism-universal human development

- Legal and political institutions can be used and abused to perpetuate group divisions. Laws are discriminatory in other cases because they prevent certain groups from access to services or opportunities.

- Some social norms can also be discriminatory, prejudicial and exclusive. Social norms in many countries reduce the choices and opportunities for women and girls, who are typically responsible for more than three-quarters of unpaid family work.
- Perhaps the most direct mechanism of exclusion is violence. Motivations include consolidating political power, safeguarding the well-being of elites, controlling the distribution of resources, seizing territory and resources and favouring ideologies based on the supremacy of one identity and set of values.
- The top 1 percent of the global wealth distribution holds 46 percent of the world's wealth. Inequalities in income influence inequalities in other dimensions of well-being, and vice versa. Given today's inequality, excluded groups are in a weak position to initiate the transformation of institutions.



In a globalized world, national policies for universal human development must be complemented and supplemented by a global system that is fair and that enriches human development. The components which include-

- **Stabilizing the global economy** by focus on regulating currency transactions and capital flows and coordinating macroeconomic policies and regulations.
- Applying fair trade and investment rules - set rules to expand trade in goods, services and knowledge to favour human development and the Sustainable Development Goals.
- Adopting a fair system of migration - that protect the rights of and promote the opportunities for migrants, to establish a global mechanism to coordinate economic (voluntary) migration and to facilitate guaranteed asylum for forcibly displaced people.
- Assuring greater equity and legitimacy of multilateral institutions - examine the representation, transparency and accountability of multilateral institutions. Some policy options include increasing the voice of developing countries in multilateral organizations and improving transparency in appointing heads of multilateral organizations.
- Coordinating taxes and monitoring finance globally - moving towards a global automatic exchange of information (such as a global financial register) would facilitate the work of tax and regulatory authorities tracking income and detecting illicit financial flows, which may be mobilized for human development.
- Making the global economy sustainable - Sustainable development activities at the national level must be complemented with global actions, as in moves to halt ozone depletion in the 1990s.
- Ensuring well-funded multilateralism and cooperation - Increasing official development assistance from traditional donors, expanding the participation of developing countries through South-South and triangular cooperation, and exploring innovative options for financing would be useful.

- Globally defending people's security- restructuring current mechanisms towards prevention in addition to short-term responses to shocks, prioritizing field operations and coordinating better internally and externally with civil society and the private sector.
- Promoting greater and better participation of global civil society

### Action agenda for universalism

The Report suggests a five-point action agenda to ensure human development for everyone.

- Identifying those who face human development deficits and mapping where they are - Such mapping can help development activists demand action and guide policymakers in formulating and implementing policies to improve the well-being of marginalized and vulnerable people.
- Pursuing a range of available policy options with coherence - Human development for everyone requires a multipronged set of national policy options: reaching those left out using universal policies, pursuing measures for groups with special needs, making human development resilient and empowering those left out. Policies in every country have to be pursued in a coherent way through multistakeholder engagement, local and subnational adaptations and horizontal (across silos) and vertical alignment (for international and global consistency).
- Closing the gender gap - Gender gaps exist in capabilities as well as opportunities, and progress is still too slow for realizing the full potential of half of humanity.
- Implementing the Sustainable Development Goals and other global agreements (Paris Agreement on Climate Change).
- Working towards reforms in the global system - To move towards a fairer global system, the agenda for global institutional reforms should focus on global markets and their regulation, on the governance of multilateral institutions and on the strengthening of global civil society.

## 4.3. MIGRANTS IN INDIA

Economic Survey 2016, pointed out that there are 9 million people annually migrate within the country, whereas Census 2011 and National Sample Survey Organisation has highlighted that migrants constitute 30 percent of national population as well as total working force.

### Analysis of migration pattern in India:

- Based on the census 2001 data, it emerged that number of migrants in India is very low and not increasing. According to census -2001 data India has 33 million economic migrants, constituting around 8.1% of workforce with low urbanization rates being one of the reasons. In China, nearly 25% of workforce is migrant labour.
- However new studies- analyzing 2011 Census data (using Cohort-based Migration Metric (CMM) and gravity models) and railway passenger traffic flows data provided by the Ministry of Railways- have contradicted census data and shown that stock of migrants in India is far more.
- Major findings of the study include-

#### Patterns of flow observed in the new studies consistent with popular conception:

- Less affluent states see more people migrating out while the most affluent states are the largest recipients of migrants.
- The cost of moving for people is about twice as much as it is for goods.

- **Indians are increasingly on the move-** As opposed to annual average of about 3.3 million suggested by successive Censuses, new studies show that annually inter-state labour mobility averaged from 5 million to 9 million people.
- **Migration is accelerating-** the annual rate of growth of labour migrants nearly doubled relative to the previous decade, rising to 4.5 per cent per annum in 2001-11 from 2.4 per cent in 1991-2001.
- This acceleration has been accompanied by the surge of the economy indicating that the returns to migration might have increased sufficiently to offset the costs of moving, resulting in much greater levels of migration.
- **Language not a barrier –**
  - ✓ Internal political borders impede the flow of people. The flow within states is four times the flows across states.
  - ✓ However, language does not seem to be a demonstrable barrier as common language between the origin and destination state is not significant in explaining the flow of the migrants.

### Limitations of Census 2001 data and earlier studies in estimating the size of Migrant Workforce in India

- Migration trends in India tends to be circular in nature both in short term and long term migration streams and are not captured properly by Census.
- Female migration for work is concealed in 'reason-for-migration' statistics because the principal reason given to the enumerator is 'marriage' or 'moved with household.' According to the new studies, female migration for work not only grew far more rapidly than the female workforce, but increased at nearly twice the rate of male migration.
- Commuter migration for work across the rural-urban divide is also substantial in India, exceeding 10 million people in 2009-10. Further, slow pace of Indian urbanization is rooted in the demographic divergence between rural and urban natural growth rates and not necessarily in low or stagnant rates of migration.

**Migrant:** The Census definition of a migrant is as follows: "When a person is enumerated in census at a different place than his/her place of birth, she/he is considered a migrant".

**Circular migrants:** Individuals who migrate from place to place for temporary periods.

### Issues faced by migrants

One of the major issue faced by Migrants is that they could not get the benefits of welfare schemes if they migrate to other states for example around 45 percent of total migrants exclude form PDS (Public Distribution System), financial inclusion, and Sarva Shiksha Abhiyan. Other issues faced by them include:

- One legislation known as Inter-State Migrant Workers Act, 1979 which aims to safeguard migrants, is obsolete and is hardly enforced anywhere.
- Lack of credible data on incidence of seasonal migration poses serious constraint in framing an effective policy. Census and NSS that have a significant impact on policy making also are unable to capture seasonal and circular migration.
- Migrants may also be missed out in BPL Surveys.
- They are unable to participate in the formal electoral system and are denied a fundamental citizenship right - their right to vote.

Ministry of Housing and Urban Poverty Alleviation (HUPA) set up a working Group on Migration (headed by Partha Mukhopadhyay) in 2015, to recommend various policy matters for social

welfare measures and administrative actions for the development of migrants.

#### Recommendation of the working Group

- Caste based enumeration of migrants should be adopted, so that they can avail the attendant benefits in the States to which migration takes place. For example, a migrant of Scheduled Tribe community of Arunachal Pradesh can avail the intended benefits in Punjab and Haryana by interstate operability of PDS
- States should move away from the requirement of domicile status to prevent any discrimination in work and employment for the migrants.
- The vast network of the Post Offices, banking system and Payment Banks, need to be strengthened in order to reduce the cost of transfer of money and to avoid informal remittances channels.
- To achieve the financial inclusion goals, banks must simplify the documentation procedure and follow the guideline of RBI with regards to Know Your Customer norms (KYC).
- Furthermore, underutilised **Construction Workers Welfare Cess Fund** should be used to promote rental housing, working Women Hostels for the benefits of migrants.

#### Other suggestions

- Panchayats could act as a resource pool for migrants residing in their area, maintaining a register of migrant workers and working with NGOs to cut transaction costs and upgrade the workers' skills
- Awareness campaigns should be started aiming at addressing the issue of stereotypes and misapprehensions about migrants and also encouraging migrants to raise their political voice
- The challenges of moving into new communities that speak different languages and have different cultures need to be understood and addressed. Here, the issues of the locals must also be appreciated.

### 4.4. HOMELESS HOUSEHOLDS

- Census 2011 defines families that do not live in buildings and reside by roadsides, on pavements, in Hume pipes, under flyovers and staircases, on railway platforms, and in the open at or near places of worship.

#### Issue Involved

- From 2001 to 2011 there was an increase in the **homeless households**, whereas, decrease in **homeless** population.
- Rural homelessness declined by 30% to 8.3 lakh people, while urban homelessness grew by 21% to 9.4 lakh people.
- Majority of the homeless are either migrant workers with no home or nomadic tribes who ply their trade on the streets.

#### Housing For all by 2022: National Mission for Urban Housing

- Implement by Ministry of Housing & Urban Poverty Alleviation.
- Mission will target SC/ST, women, EWS, for affordable housing
- Slum rehabilitation of Slum Dwellers with public private partnership using land as a resource.
- Promotion of affordable housing for weaker section through credit linked subsidy.
- A Technology Sub-mission to facilitate adoption of modern, innovative and green technologies.
- Promote social and economic equality e.g. preference will be given to differently able and senior citizen.

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- Existing government actions are punitive rather than rehabilitation e.g. Houseless often seen as beggar and vagrants which is criminalised in many states.

### Causes of Increasing Houseless Households in cities

- Rural–Urban disparity in social Assistance programme.
- Shrinking agricultural land in general and income in particular.
- Lack of incentives in other rural occupations e.g. cottage and household industries.
- Lack of Infrastructure in city to deal with migration.
- Rising aspiration to earn an adequate income and later on failure to with growing economic pace of urban life.
- Low minimum wages to support a basic rented accommodation
- Over-crowded and temporary night-shelters.
- Social and traumatic reason e.g. disaster, family break-up or domestic violence (most victims are women).

### Challenges faced by them

- Since their **identification is difficult**, they are usually not able to enjoy benefits of government schemes. They are mostly left at the care of NGO, who have less resources and little accountability.
- Existing government actions are punitive. For instance, houseless are often seen as beggar and vagrants which is **criminalized** in many states and face regular police harassment
- **Personal security**, quiet, and privacy, especially for sleeping, bathing, and other activities
- They are often faced with many **social disadvantages**, reduced access to private and public services, gaps in their personal infrastructures, and reduced access to vital necessities
- Safekeeping of bedding, clothing, and possessions, which may have to be carried at all times
- Increased risk of suffering from **violence and abuse**.
- Children don't get suitable environment for their growth, education and overall development.

#### Persons in Destitution (Protection, Care and Rehabilitation) Model Bill of 2016

- Ministry of Social Justice and empowerment is the nodal agency for formulation and implementation of bill.
- It defines destitution as a state of poverty or abandonment arising from economic or social deprivation including age and infirmity, homelessness, disability and sustained unemployment
- It aims to provide the whole range of basic service like food, shelter, healthcare and rehabilitative framework for homeless, beggars and destitute people with disabilities.
- It de-criminalises begging (**except for repeat offences**).

### Measures for rehabilitation

- The government should work in collaboration with NGOs to provide night shelters, clothing, bedding, and clean sanitary facilities
- The 25 percent quota for weaker section in schools must be strictly implemented and children of such families must be enrolled in schools
- The houseless families should be regularly diagnosed with seasonal diseases and be provided with adequate healthcare facilities at zero prices
- Local administration must be made accessible so that prompt remedial action could be taken for any act of discrimination and harassment against them
- Development of satellite towns to discourage migration to already overcrowded urban metropolis.



## 4.5. BONDED LABOUR

India has the highest number of modern slavery in the world in absolute numbers totaling 18.35 million, as per Global slavery Index 2016 by Walk free foundation of Australia. Most of the Bonded Labour comprises of socially and economically weaker sections of society like SC's, ST's, Poor etc.

**BONDED LABOUR definition as per ILO convention, 1954 (Article 2)**: All work or service which is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily.

### Background

- As per **Article 23** of Indian Constitution specific provision declaring traffic in human beings, **begar** and similar forms of **forced labour** is made a punishable offence.
- To pursue above objective law named Bonded Labour System (Abolition) Act, 1976 was enacted.
  - ✓ The act contains provisions for economic and social rehabilitation of freed bonded labourers and protection under forced eviction.
  - ✓ It is the State government responsibility to identify, release and Rehabilitate bonded labour.

### Issues related to bonded labour

- Poor enforcement of bonded labor law
- Unawareness in officials of existence of an act against bonded labor
- Ability to support and rehabilitating fewer victims
- Fewer perpetrators punished due to under resourced police and judiciary

Recognising the importance of this issue, the scheme related to bonded labor was revamped and labour ministry recently announced plans to identify, rescue and help bonded labourers by 2030.

### 4.5.1. REVAMPED BONDED LABOUR SCHEME, 2016

This scheme has been launched for rehabilitation of Bonded Labourers and is also known as “**Central Sector Scheme for Rehabilitation of Bonded Labourers, 2016**”.

#### Need for Revision of earlier scheme?

- There was lack of regular monitoring including court cases and convictions.
- Inadequate and unattractive rehabilitation packages.
- Scheme did not address the needs of special category beneficiaries like differently abled, children and women rescued from trafficking and sexual exploitation including prostitution, trans-genders, etc.
- Lack of institutionalized mechanism to keep an account of the other major benefits listed in the existing scheme such as agricultural land, dwelling unit, skill training, education etc.

#### Key Features of the Scheme

- The revised scheme is a **Central Sector Scheme** (earlier it was **central sponsored scheme**). So the State Government is not required to pay any matching contribution for the purpose of cash rehabilitation assistance.
- **Survey:** Rs 4.50 lakh will be provided per district for survey of bonded labourers.
- **Financial assistance:**
  - ✓ One lakh per adult male beneficiary.

- ✓ 2 lakh for special category beneficiaries such as orphan children, women, etc.
- ✓ 3 lakh in cases of bonded or forced labour involving extreme cases of deprivation or marginalization such as trans-genders or women or children rescued from brothels etc.
- Release of rehabilitation assistance is linked to conviction of accused.
- **Bonded Labour Rehabilitation Fund:** it will be created at District level by each State with a permanent corpus of at least Rs. 10 lakh at the disposal of the District Magistrate for extending immediate help to the released bonded labourers.
- **Funding source:** Labour and employment ministry will release the fund to District National Child Labour Project Society which in turn will release the fund to implementing agencies including the district administration.
- The benefits prescribed above shall be, in addition to, other benefits for which the beneficiary is entitled to under other such schemes.

### Way forward

- It is so deeply embedded in India's socio-economic culture marked by caste class relations that it requires a holistic approach for law enforcement as well as comprehensive rehabilitation mechanism for social, psychological, educational and economic rehabilitation.
- Generating awareness, holding public debate primarily focusing on changing mindset of the people followed by effective implementation of scheme are some of steps for total annihilation of this barbaric practice.
- Media support may also help put pressure on authorities to pursue the cases of bonded laborers.


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