National Report on “A World Fit for Children”

Towards new dawn

Ministry of Women and Child Development
Government of India
2007
1. **Introduction:**

1.1. The report has been prepared in collaboration with the concerned Ministries and Departments involved in children’s issues at the Union level and all the State Governments/Union Territory Administrations take action for gathering information to enable MWCD to prepare an analytical report as per the requirement of UN. The Ministries/Departments and the State Governments/UT Administrations were provided with the guidelines of the UN to prepare their information with participation of civil society, non-governmental organizations and other agencies involved in children’s issues. They were requested to use their own methodology as per their local needs and requirements in gathering information by involving all concerned and to furnish the same to Ministry of Women and Child Development for preparing the National Report.

1.2. India is a large country administered at the Union and State levels. Hence, a National Report was required to be prepared with necessary inputs from all agencies. Though preparation of such a National Report in limited time and space was difficult, the process was completed in a planned manner. Only material information of national value and importance has been included in the report. Other information which could not be included in this report due to its limited length permitted by the UN, shall be included in the Country Report on CRC which has to be submitted to the UN Committee on the Rights of the Child in July 2008.

1.3. Since adoption of WFFC in UNGASS in May, 2002 there have been significant events in the country for children in every sector. As such a lot of information qualifies for mention in this report. A National Plan of Action for Children 2005 has been adopted as per the directions of WFFC the provisions of which are being monitored regularly at the highest level. Certain schemes and programmes have been reviewed and revamped for effective implementation and better coverage. Several schemes and programmes have been introduced at different levels. New ideas and initiatives have been conceptualized for the XI Five Year Plan.

2. **Major National Actions taken for Children and towards the WFFC targets since 2002:**

2.1. Efforts were intensified in the last few years for the development and welfare of children in the country. Significant progress have been made in many fields in assuring children their basic rights as envisaged in the WFFC. Certain developments that took place during last few years since 2002 are mentioned below.

- Considering the importance of the social sector and to accelerate the development process the Department of Women and Child Development was elevated to the status of an independent Ministry at the Union level from 20th February 2006. The consequent changes have helped in giving children’s issues a focused attention and enhanced allocation. Children’s issues were also consolidated and entrusted to MWCD for better and effective implementation.

- Immediately after the adoption of WFFC in 2002 the process was started for formulation of a National Plan of Action for Children as per the national requirements to achieve the targets set in WFFC. The Plan of Action was finalized in 2005 with the approval of the Union Cabinet to give highest level of importance to the issue. The Plan includes goals, objectives and strategies in the areas of education, health, nutrition, water and sanitation, early childhood care, protection of
children in difficult circumstances and in conflict with law, rights of girl child and adolescents, combating trafficking, child labour and HIV/AIDS and Child participation. It also contains the resource mobilization and monitoring of its implementation. Eight major parameters of the Plan are being regularly monitored at the Prime Minister’s level. These parameters include reduction of IMR, CMR, MMR, universal access to safe drinking water and sanitation, elimination of child marriage, elimination of disability due to poliomyelitis and reduction in proportion of infants infected by HIV/AIDS. The State Governments are also preparing their State Plans of Action for Children. About 13 States have already prepared their Action Plans.

- The National Charter for Children was adopted on 9 February 2004 which is a statement of intent embodying the Government’s agenda for development of children. The document emphasizes India’s commitment to children’s right to survival, health, nutrition, standard of living, play & leisure, early childhood care, education, protection of girl child, empowering adolescents, equality, life & liberty, name & nationality, freedom of expression, freedom of association & peaceful assembly, right to a family and right to be protected from economic exploitation and all forms of abuse. The Charter also provides for protection of children in difficult circumstances, children with disabilities, children from marginalized and disadvantaged communities and child victims. While stipulating the duties of the State and the community towards children the Charter also emphasizes the duties of children towards family, society and the Nation. The document provides a passage to achieving the targets of WFFC by ensuring child rights as detailed in the Charter.

- The Government notified the Commissions for Protection of Child Rights Act 2005 in the Gazette of India on 20th Jan., 2006. The Act envisages setting up a National Commission at the National level and the State Commissions at the State level. The National Commission for Protection of Child Rights has been set up in February 2007 by appointment of the chairperson. The other members of the Commission are also being appointed. The Commission has been set up for proper enforcement of children’s rights and effective implementation of laws and programmes relating to children which would help in achieving the targets of WFFC. The National Commission for Protection of Child Rights is a statutory body. The Commission will have a Chairperson and six Members, including two women members, a Member Secretary and other supporting staff. The members would be experts in the fields of child health, education, child care and development, juvenile justice, children with disabilities, elimination of child labour, child psychology or sociology and laws relating to children. The Rules for implementation of the provisions of the Act in respect for National Commission for Protection of Child Rights have also been notified.

- The National Rural Health Mission(2005-12) seeks to provide effective healthcare to the rural population throughout the country with special focus on 18 States, which have weak public health indicators and/or weak infrastructure. It has, as its key components, provision of a female Health Activist in each village; a village health plan prepared through a local team headed by the Health & Sanitation Committee of the Panchayat; strengthening of the rural hospital for effective curative care and made measurable and accountable to the community through Indian Public Health Standards(IPHS); and integration of vertical Health & Family Welfare Programmes and Funds for optimal utilization of funds and infrastructure and strengthening delivery of primary healthcare. It seeks to revitalize local health traditions and mainstream AYUSH into the public health system. It aims at effective integration of health concerns with determinants of health like sanitation and hygiene, nutrition, and safe drinking water through a District Plan for Health. It seeks decentralization of programmes for district management of health. It seeks to improve access to rural people, especially poor women and children to equitable, affordable, accountable and effective primary healthcare. The Goals of NRHM are reduction in Infant Mortality Rate(IMR)
and Maternal Mortality Ratio (MMR); Universal access to public health services such as Women’s health, child health, water, sanitation and hygiene, immunization, and nutrition; prevention and control of communicable and non-communicable diseases, including locally endemic diseases; access to integrated comprehensive primary healthcare; population stabilization, gender and demographic balance; revitalize local health traditions and mainstream AYUSH; and promotion of healthy life styles. NRHM would be instrumental in achieving the targets of WFFC.

- The 86th Constitutional Amendment Act, 2002 provides for free and compulsory education to children in the age group of 6 to 14 years. Prior to the 86th Constitutional Amendment Act the Indian Constitution had a mandated provision of free and compulsory education as a Principle Directive of State Policy. Despite these provisions the country has not been able to achieve the target of universal elementary education. Accordingly a comprehensive centrally sponsored programme called Sarv Shiksha Abhiyan was launched in 2001. Subsequently, the 86th Constitutional Amendment Act 2002 inserted a new Article 21(8) which provides for free and compulsory education to children of the age group of 6 to 14 years being a Right to Education. The same Amendment Act provides for amendment of the Article 45 as Directive Principle of the State Policy to provide provision for early childhood care and protection Bill upto the age of 6 years. It is also made a Fundamental Duty of parents and guardians under New Article 51(a) to provide opportunities for education to children between the age of 6 to 14 years.

- The Juvenile Justice (Care and Protection of Children) Act, 2000 is a comprehensive legislation to provide justice and opportunities to children of India for their growth and development. The Act is based upon the provisions of the Indian Constitution and four broad rights of the UN Convention on the Rights of the Child including right to Survival, Protection, Development and Participation. The Act came into force with effect from 1.4.2001. Certain amendments have been effected in the Act recently. One of the important amendments includes the definition of adoption. It has been felt that adoption needs to be defined under the Act to make the provisions relating to it more meaningful. Therefore, the definition of adoption is introduced through Section 2(aa) “Adoption” means the process through which the adopted child is permanently separated from his/her biological parents and becomes the legitimate child of his/her adoptive parents with all the rights, privileges and responsibilities that are attached to the relationship. It has also been amended that no juvenile in conflict with law can be placed under imprisonment for any term, which may extend to imprisonment for life. The Act has, therefore, been made more child-friendly to protect children from exploitation and violence as provided in the WFFC targets.

- The Ministry of Women and Child Development has launched a new Creche Scheme named “Rajiv Gandhi National Creche Scheme for the children of working mothers” with effect from 1.1.2006 by merging the National Creche Fund with the Scheme of Assistance to Voluntary Organisations for Creche for Working and Ailing Women’s Children and also to revise the financial norms from Rs.18,480/- to Rs. 42,384/- per crèche per annum. The Scheme provides crèche services to the children of age group of 0 to 6 year, which includes supplementary nutrition, emergency medicines and contingency. 30902 creches have been sanctioned upto 31st Jan., 2007. This would strengthen the appropriate services and support to parents in strengthening early childhood development to ensure children’s safety and development, as required under the WFFC targets for healthy lives.

- Elimination of Child Labour is an area of great concern to the Government. Article 24 & 39 of the Constitution provides for the protection of children from involvement in economic activities and of avocations unsuited to their age. As per recent Constitutional Amendment, right to education for children upto 14 years is now a Fundamental Right under Article 21-A. Considering the magnitude and the nature of the problem a gradual and sequential approach has been adopted to withdraw and
rehabilitate children beginning with those working in hazardous occupations and processes. Consistent with the Constitutional Provisions, the Child Labour(Prohibition and Regulation) Act 1986 was enacted seeking to prohibit employment of children below 14 years in hazardous occupations and processes and also regulating the working conditions of children in other employment. In the last five years, the number of hazardous “Occupations” listed in the Schedule of the Act has increased from 7 to 13 and “Processes” from 18 to 57. The Ministry of Labour and Employment has issued a Notification recently under Child Labour(Prohibition and Regulation) Act, 1986 for prohibiting employment of children as domestic servants and in tea shops and dhabas, etc. with effect from 10th October, 2006. As per this notice employment of children as domestic servants or servants in dhabas, restaurants, hotels, motels, tea shops, resorts, spas or in any other recreational centers is prohibited. The measure has been taken with a view to combating child labour in the country which is also a goal of WFFC and to which Government of India is committed.

- The title and certain contents of the Infant Milk Substitutes, Feeding Bottles and Infant foods(Regulation of Production, Supply and Distribution) Act 1992 have been amended in 2002 to encourage exclusive breastfeeding for the first six months of life together with complementary foods up to the first two years and to prohibit all forms of advertising and promotion by means of electronic transmission by audio or visual transmission – in relation to infant milk substitutes, feeding bottles and infant foods. India is the first country in the world having given a legislative framework to World Health Assembly Resolution to promote exclusive breast feeding for the first six months of life and continued breastfeeding together with complementary food for the first two years.

- India has signed and ratified the two Optional Protocols to the Convention on the Rights of the Child on sale of children, child prostitution and child pornography and children involved in armed conflict in 2005. Suitable action is being taken for ensuring implementation of their provisions.

- India has signed two SOUTH ASIAN ASSOCIATION FOR REGIONAL COOPERATION (SAARC) Conventions in 2002 for combating trafficking in the region and on child welfare. The provisions of these Conventions are being implemented. In addition to this India is also signatory to a SAARC Social Charter for addressing all issues pertaining to the social sector, including women and children, in the SAARC region.

- Integrated Child Development Scheme(ICDS), launched in 1975, is now the world’s largest programme providing an integrated approach by converging basic services through community based workers and helpers. The services provided at a childcare center located within the village include a package of services such as, supplementary nutrition, immunization, health checkup, referral services, pre-school non-formal education and nutrition and health education.

- National Programme for Education of Girls at Elementary Level launched in September 2003 is an integral but distinct component of Sarv Shiksha Abhiyan. It provides additional provisions for enhancing the provisions of under-privileged/disadvantaged girls at elementary level through more intense community mobilization, the development of model schools in clusters, gender sensitization of teachers, development of gender sensitive learning materials, early child care and education facilities and provisions of need based incentives like escorts, stationery, workbooks and uniform etc. for girls. For 2006-07 coverage has been expanded to 38748 clusters in 3122 blocks. All educationally backward blocks have been included under the programme.

- The Kasturba Gandhi Balika Vidyalaya scheme launched in 2004 is designed to encourage greater participation of girls in education at upper primary level. Under the Scheme 1180 residential schools at upper primary level have been sanctioned for girls belonging predominantly to...
SC/ST/OBC and Minority communities in educationally backward blocks with higher gender gaps and low female literacy. A minimum of three-fourth of the seats are reserved providing uniforms for the girls from marginalized or minority communities and the remaining are for girls from families below the poverty line.

2.2. In addition to the schemes and programmes being implemented by the Central Ministries and Departments State Governments and Union Territory Administrations are also implementing their own schemes and programmes for children according to local needs and requirements. Schemes and programmes of selected States are mentioned below:

- The Government of Andhra Pradesh is implementing innovative Schemes concerning Nutrition Rehabilitation Centres and establishment of Day Care Centres. The programmes being implemented through District Councils are construction of Women Groups Buildings, sewing machines supplied on 50% subsidy to eligible women, maintenance of one DCC building, maintenance of one Children’s Home, financial assistance extended to the women below poverty line for economic support schemes to raise their income levels, women awareness camps.
- The scheme "Kishor Balika Pathakam" is also being implemented in Andhra Pradesh to engineer change in social attitudes, self-esteem and ensure capabilities, 100% enrolment in elementary education especially for girls and to discourage early marriage. Under the scheme it is proposed to train adolescent girls through bridge courses, skill training programs, exposure visits and workshops.
- The Government of Bihar is running 30 residential schools for Scheduled Castes boys, 21 schools for girls and 15 residential schools for Scheduled Tribes. Students are admitted on the basis of merit in these schools and they are provided free boarding, lodging and education. Secondly, especially for SC, ST school going girls the scheme of providing uniform to girl is being implemented. Under this scheme, two sets of dresses are provided every year at a cost of Rs.250/- per set.
- In Haryana, the State Government has introduced a new scheme for the girl child which is named “LADLI”. The objective of the scheme is to raise the status of the girl child in the family and in society and to change the mindsets of the people for proper rearing of the girl children and ensuring their right to birth and survival. Under the scheme all parents resident of or domiciled in Haryana will be provided financial incentive @ Rs. 5000/- per year for upto five years if their second girl child is born on or after 20th August, 2005 irrespective of their caste, creed, religion, income or number of sons.
- The Government of Tamil Nadu is providing assistance to orphan girls under Annai Teresa Ninaivu Marriage Assistance Scheme. A sum of Rs.10,000/- per beneficiary is given for the marriage of orphan girls where the annual family income of the guardian does not exceed Rs.12,000/-. The bride should be in the age group of 18 – 30 years. Another Scheme is also being implemented for providing free text-books and note books to the children of poor widows. The Cradle Baby Scheme was also launched by the Govt. of Tamil Nadu in Salem with the sole aim of eradicating female infanticide. This Scheme was later extended to Madurai, Theni, Dindigul and Dharmapuri, as these districts are also prone to this practice.
- The State Government of West Bengal is implementing a Scheme for Non Institutional care for Children (NIC). Under this scheme students between the age group of 6 yrs to 18 yrs from BPL families are provided Rs 60/- (sixty) per month for their education. Another scheme of the State Government is the Scholarship for Handicapped Children. Under this scheme an amount of Rs
60/- (sixty) is extended to needy physically challenged students studying below class IX in recognized educational institutions of the State.
3. **Resource trends for children:**

3.1 The Government is emphasizing enhancement of resource allocation and full utilization of allocated resources for the Schemes and programmes for children. A child budgeting review has been initiated for proper governance and accountability. The key objectives of child budgeting are to analyse budgetary provisions on the social sector, to identify the magnitude of budgetary allocations made by the Centre/State Governments on schemes meant for addressing specific needs of children, to examine the trend in child specific expenditure etc. The main agenda for the exercise of child budgeting is to review resource allocations related to children; explore ways to increase budgetary allocations for children; assess budget utilization rates for the social sector and child specific programmes, identify blockages and constraints to effective utilization; identify methods for tracking expenditure and monitoring performance to ensure that outlays translate into outcomes for children.

3.2 Various Schemes and programmes are being implemented by different Ministries and Departments for the benefit of children at the Central level. In order to study the expenditure and allocation trends during the last five years the expenditure meant especially for children has been grouped into four categories, namely, child development, child health, child education and child protection.

3.3 The allocation for child development as a proportion of total child expenditure has gone up from 15.9% in 2004-05 to 18% in 2005-06. The allocation for education continues to dominate in terms of proportion of total resources for children allocated and has increased from 68.3% to 65.9%. The Child Health allocations have slightly risen from 14.7% to 15.2%, Child Protection figures, insignificant as a proportion of total resources allocated for children, show a decline from 1.1% in 2004-05 to 0.9% in 2005-06. The situation as per latest figures for the years 2006 and 2007 is indicated in the Table no.1 given below.

![Sectoral Composition of Total Budget Outlays for Children](image)

**Table No.1**
3.4 Expenditure on Child Development as a proportion of total expenditure of the Union Government has increased to 0.69 % in 2005-06 from 0.43 % in 2001-02. 2005-06(BE) shows a substantial increase. This significant rise in allocations in 2005-06 BE is almost entirely due to the stepped up allocations under the Integrated Child Development Services(ICDS) scheme of Ministry of Women and Child Development.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(RE)</td>
<td>(RE)</td>
<td>(RE)</td>
<td>(RE)</td>
<td>(RE)</td>
</tr>
<tr>
<td>1 Integrated Child Development Services b</td>
<td>1492.54</td>
<td>1726.72</td>
<td>1801.46</td>
<td>1934.4</td>
<td>3315.25</td>
</tr>
<tr>
<td>2 Day Care Centres</td>
<td>21.95</td>
<td>22.1</td>
<td>21.4</td>
<td>29.25</td>
<td>41.5</td>
</tr>
<tr>
<td>3 Contribution to UNICEF</td>
<td>3.83</td>
<td>3.1</td>
<td>3.1</td>
<td>3.1</td>
<td>3.1</td>
</tr>
<tr>
<td>4 NIPCCD</td>
<td>8.4</td>
<td>8.5</td>
<td>10.2</td>
<td>11.75</td>
<td>11.35</td>
</tr>
<tr>
<td>6 Balika Samridhi Yojana</td>
<td>16.0</td>
<td>1.8</td>
<td>0.01</td>
<td>48.0</td>
<td>0.03</td>
</tr>
<tr>
<td>7 Nutrition</td>
<td>9.85</td>
<td>7.59</td>
<td>7.48</td>
<td>8.6</td>
<td>11.53</td>
</tr>
<tr>
<td>8 Central Assistance for State and UT Plans for Nutrition Programme for Adolescent Girls (NPAG)</td>
<td></td>
<td></td>
<td>100.0</td>
<td>0</td>
<td>162.97</td>
</tr>
</tbody>
</table>

**Expenditure on Child Development in Union Budget**

| 1+2+3+4+5+6+7+8 | 1557.74 | 1775.94 | 1948.27 | 2048.66 | 3559.95 |

| Total Expenditure of Union Government c | 364436 | 404013 | 474255 | 505791 | 514344 |

| Expenditure on Child Development as a proportion of Total Expenditure of Union Government (in %) | 0.43 | 0.44 | 0.41 | 0.41 | 0.69 |

Source: Expenditure Budget Volume-II Union Budget, GOI- various years

**Table No.2**

3.5 Expenditure on Child Health by the same measure increased from 0.33 % in 2001-02 to 0.58 % in 2005-06. Union Government’s budgetary provisions for Child Health had a noticeable increase between 2004-05 RE and 2005-06 BE, not merely in current prices but also in constant (1993-94) prices. The increase in this group of allocations comes mainly on account of stepped up allocations for the RCH Project under the Dept. of Family Welfare. The National Maternity Benefit Scheme has been renamed as Janani Suraksha Yojana and merged under RCH Flexible Pool in 2005-06.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(RE)</td>
<td>(RE)</td>
<td>(RE)</td>
<td>(RE)</td>
<td>(BE)</td>
</tr>
<tr>
<td>1 Kalawati Saran Children’s Hospital, New Delhi (Dept. of Health)</td>
<td>13.32</td>
<td>14.5</td>
<td>15.08</td>
<td>17.25</td>
<td>18.07</td>
</tr>
<tr>
<td>2 BCG Vaccine Laboratory, Guindy, Chennai (Dept. of Health)</td>
<td>4</td>
<td>4.6</td>
<td>6.33</td>
<td>6.05</td>
<td>6.15</td>
</tr>
<tr>
<td>3 Reproductive and Child Health Project (Dept. of Family Welfare)</td>
<td>933.36</td>
<td>445.54</td>
<td>442.35</td>
<td>485.93</td>
<td>1380.68</td>
</tr>
<tr>
<td>4 Strengthening of Immunisation Programme &amp; Eradication of Polio (Dept. of Family Welfare)</td>
<td>12.32</td>
<td>460.1</td>
<td>763.2</td>
<td>1017.48</td>
<td>1304.6</td>
</tr>
<tr>
<td>5 Maternal Benefit Scheme (Dept. of Family Welfare)</td>
<td>72</td>
<td>65</td>
<td>40</td>
<td>50</td>
<td>0</td>
</tr>
<tr>
<td>6 Information, Education and Communication Activities (Dept. of Family Welfare)</td>
<td>33.53</td>
<td>50.99</td>
<td>104.18</td>
<td>158.35</td>
<td>121.83</td>
</tr>
<tr>
<td>7 Training, Research and Evaluation (Dept. of Family Welfare)</td>
<td>117.69</td>
<td>128.24</td>
<td>142.53</td>
<td>154.97</td>
<td>170.42</td>
</tr>
</tbody>
</table>

**Expenditure on Child Health in Union Budget**

| 1+2+3+4+5+6+7+8 | 1186.22 | 1168.97 | 1513.67 | 1890.03 | 3001.75 |
| Total Expenditure of Union Government | 364436 | 404013 | 474254 | 505791 | 514344 |

| Expenditure on Child Health as a proportion of Total Expenditure of Union Government (in %) | 0.33 | 0.29 | 0.32 | 0.37 | 0.58 |

Source: Expenditure Budget Vol. II, Union Budget, GOI. Various Years

**Table No.3**
3.6 Expenditure on Child Education increased from 1.37% in 2001-02 to 2.54% in 2005-06, which is mainly on account of Sarva Shiksha Abhiyan under Dept. of Elementary Education and Literacy of Ministry of HRD. Total allocations for child education in the Union Budget registered a significant increase from Rs. 8802.03 Crore in 2004-05 (RE) to Rs. 13045.75 Crore in 2005-06 (BE).

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Elementary Education under Ministry of HRD</td>
<td>3577.05</td>
<td>3764.37</td>
<td>5219.47</td>
<td>7227.88</td>
<td>11219.79</td>
</tr>
<tr>
<td>2 Secondary Education Under Ministry of HRD</td>
<td>1235.6</td>
<td>1232.55</td>
<td>1397.81</td>
<td>1360.42</td>
<td>1591.61</td>
</tr>
<tr>
<td>3 Child Education under Min. of Social Justice and Empowerment</td>
<td>51.61</td>
<td>57.5</td>
<td>64</td>
<td>51.3</td>
<td>77.0</td>
</tr>
<tr>
<td>4 Child Education under Min. of Tribal Affairs</td>
<td>7.5</td>
<td>24</td>
<td>26.38</td>
<td>19</td>
<td>0</td>
</tr>
<tr>
<td>5 Child Education under Min. of Youth Affairs and Sports</td>
<td>116.36</td>
<td>107.2</td>
<td>118.07</td>
<td>143.43</td>
<td>157.35</td>
</tr>
<tr>
<td><strong>Expenditure on Child Education in Union Budget</strong></td>
<td>4988.12</td>
<td>5185.62</td>
<td>6825.73</td>
<td>8802.03</td>
<td>13045.75</td>
</tr>
<tr>
<td><strong>Total Expenditure of Union Government</strong></td>
<td>364436</td>
<td>404013</td>
<td>474254</td>
<td>505791</td>
<td>514344</td>
</tr>
<tr>
<td><strong>Expenditure on Child Education as a proportion of Total Expenditure of Union Government (in %)</strong></td>
<td>1.37</td>
<td>1.28</td>
<td>1.44</td>
<td>1.74</td>
<td>2.54</td>
</tr>
</tbody>
</table>

Source: Expenditure Budget Vol. II, Union Budget, GOI. Various Years.

Table No.4

3.7 The increase for Child Protection, however, is marginal, from 0.027% in 2001-02 to 0.035% in 2005-06.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Prevention &amp; Control of Juvenile Social Maladjustment (under Min. of Social Justice and Empowerment)</td>
<td>11.25</td>
<td>14.4</td>
<td>14.4</td>
<td>18.9</td>
<td>22.69</td>
</tr>
<tr>
<td>2 Child Welfare (under Ministry of Social Justice and Empowerment)</td>
<td>23.8</td>
<td>23.02</td>
<td>21.14</td>
<td>22.66</td>
<td>34.55</td>
</tr>
<tr>
<td>3 Scheme for Rescue of Victims of Trafficking (under MWCD, Min. of HRD)</td>
<td>…</td>
<td>…</td>
<td>…</td>
<td>0</td>
<td>0.25</td>
</tr>
<tr>
<td>4 Improvement in Working Conditions of Child/ Women Labour (under Min. of Labour and Employment)</td>
<td>62</td>
<td>70.56</td>
<td>68.26</td>
<td>98.38</td>
<td>125.05</td>
</tr>
<tr>
<td>5 Initiative to Develop Skills, ITIs &amp; Elimination of Child Labour in 10th Plan</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Expenditure on Child Protection in Union Budget</strong></td>
<td>97.05</td>
<td>107.98</td>
<td>103.8</td>
<td>139.94</td>
<td>182.54</td>
</tr>
<tr>
<td><strong>Total Expenditure of Union Government</strong></td>
<td>364436</td>
<td>404013</td>
<td>474254</td>
<td>505791</td>
<td>514344</td>
</tr>
<tr>
<td><strong>Expenditure on Child Protection as a proportion of Total Expenditure of Union Government (in %)</strong></td>
<td>0.027</td>
<td>0.027</td>
<td>0.022</td>
<td>0.028</td>
<td>0.035</td>
</tr>
</tbody>
</table>

Source: Expenditure Budget Vol. II, Union Budget, GOI - Various Years.

Table No.5

It is evident from the above that though the increase in the expenditure in the child sector is steady there is a definite need for further increase. The trend in State budgets is expected to be similar.
3.8 As shown in the Table no.6 below, the total magnitude of Child Budget within the Union Budget, i.e. the aggregate outlay for child specific schemes as a proportion of total budget outlay by the Union Government, has increased from 2.11% in 2001-02 (RE) to 4.86 % in 2006-07 (BE). It is worth noting here that a substantial part of this increase in the size of Child Budget accrued in 2005-06, which happened mainly because of higher outlays on two schemes- SSA and ICDS. More importantly, even at 4.86 % of the total Union Budget in 2006-07 (BE), the magnitude of Child Budget is quite inadequate if we look at the proportion of children in the population and the deprivations confronting them in various sectors.

<table>
<thead>
<tr>
<th>Year</th>
<th>% of Total Union Govt. Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001-02 RE</td>
<td>2.11</td>
</tr>
<tr>
<td>2002-03 RE</td>
<td>2.06</td>
</tr>
<tr>
<td>2003-04 RE</td>
<td>2.20</td>
</tr>
<tr>
<td>2004-05 RE</td>
<td>2.54</td>
</tr>
<tr>
<td>2005-06 RE</td>
<td>4.17</td>
</tr>
<tr>
<td>2006-07 BE</td>
<td>4.86</td>
</tr>
</tbody>
</table>

Table No.6

3.9 The Planning Commission is preparing the Eleventh Plan Document for the period 2007-2012 in consultation with the concerned Ministries and Departments. A Working Group on Child Development has been constituted by the Planning Commission under the Chairpersonship of Secretary, M/o Women and Child Development to invite inputs for the Plan Document relating to children. The Report of the Working Group has been submitted to the Planning Commission with its recommendations which include a major thrust on child protection. The Plan Document is likely to be finalized shortly.
4. Development and use of monitoring instruments to track WFFC/MDG targets:

4.1 The National Plan of Action for Children, prepared with the objective of achieving the targets set by WFFC, provides for use of monitoring mechanisms. MWCD has been entrusted with the monitoring of the Plan. MWCD has been made responsible for coordination of implementation of child rights at the national and state levels to assess progress towards goals and targets. The provisions of NPAC are required to be implemented by different Ministries & Departments at the Union level and State Governments/UT Administrations. Hence, it was decided to prepare the Plan with the approval of the Cabinet, so that not only is the highest importance given to the document, but also to ensure that implementing authorities give top priority to the targets and goals of the Plan. As soon as the NPAC was launched in August 2005 the Office of Prime Minister decided to monitor eight specified parameters. These parameters included reduction of IMR, CMR, MMR, universal access to safe drinking water and sanitation, elimination of child marriage, elimination of disability due to poliomyelitis and reduction in proportion of infants infected by HIV/AIDS. In order to monitor these parameters MWCD prepared a list of indicators for the eight specified parameters and circulated these to all States/UTs and the concerned central Ministries and Departments for gathering information regarding the State/UT wise targets set, current status with regard to all indicators and important interventions in the last two years and so on. Also comments regarding addition/deletion/substitution/modification of parameters/indicators were also invited from the State Governments and UT Administrations and related central Ministries of Health and Family Welfare, Urban Development and Rural Development. The quarterly monitoring report prepared for each quarter is being forwarded to the Office of Prime Minister regularly. It is expected all concerned authorities would watch the progress and take appropriate action for effecting necessary changes in their action plans for achieving targets. Apart from the monitoring at the level of Prime Minister the monitoring of NPAC is also being done at the level of MWCD. Regular yearly meetings with concerned Ministries & Departments and States/UTs monitor goals, objectives and strategies mentioned in the Plan. National Coordinating Group set under the chairpersonship of Secretary, MWCD for monitoring the implementation of CRC in the country also has the mandate for monitoring the provisions of NPAC. The last meeting of the Group took up issues relating to Child Health. The subsequent meetings of the Group are expected to take up other issues for monitoring their progress.

4.2 Children’s issues are being addressed by the Government in different ways. There are Constitutional provisions, legislations, policies, plans of action, schemes and programmes for children. Child abuse and violence against children was found to be one of the sectors in which there was little data available in the country. Hence it was decided to conduct a national level survey on child abuse. MWCD prepared the background for the study and an NGO called Prayas was entrusted with the work of conducting the study with financial support from UNICEF, Save the Children and MWCD. The study was instituted in 2005 and took about a year to complete. The report of the Study is being released in April, 2007. The findings of the study will be examined by the Government for suitable action and formulation of necessary policies and programmes for abused and exploited children.

4.3 The first Family Health Survey was conducted by Indian Institute of Population Sciences (IIPS) in 1992-93 and its data was viewed as most reliable and authenticated on public health issues in the country. It was conducted with the assistance of WHO. The survey was again commissioned after a period of five years in 1998-99. The findings of the survey proved very useful for the country. The findings and data of NFHS II (1998-99) were used by concerned authorities in the Government for
planning and policy making. The Ministry of Health and Family Welfare had in 2005-2006 again commissioned the study through IIPS. The data has been made available in respect of 29 States.

4.4 The first Country Report on CRC was submitted in 2002 and was followed by oral evidence before the Committee on CRC in January 2004. The Committee appreciated the Report and has communicated its Concluding Observations. The replies to the Concluding Observations and the next report on CRC will be submitted in July 2008 for which the initiative has already been taken by MWCD. Meanwhile India has also signed and ratified the two Optional Protocols to the CRC the report on which are also due by 2007 and 2008.

4.5 When WFFC was adopted in 2002 the full report of Census 2001 was not available. Subsequently, a lot of data on socio economic characteristics of the population, including those for children has been released. This includes data on child population and its distribution, sex ratio, literacy and education, work status and disability. The data is now being widely used in the country for policy and planning.
5. **Enhancing of WFFC Plan of Action and participation:**

5.1 India is a large country, administered at the Union and State levels. Children’s issues are being handled at the Union level by different Ministries and Departments and at state level by State Governments and UT Administrations. All these partners are jointly and independently working for the welfare and betterment of children in the country. In addition to the Government partners the community and voluntary sector also plays an important role in the development of children in the country. The community, NGOs, social workers and experts work for improvement of the status of the child in the country. There are several schemes and programmes in the Government for the financial assistance to NGOs, especially for awareness generation and advocacy. The joint efforts of Government, non-Government organizations and the community result in effective impact. All major initiatives of the Government in formulation of policies, plans and schemes are duly shared with the voluntary organizations and experts for their inputs and suggestions. In the recent past important documents like National Charter for Children, Commissions for Protection of Child Rights, National Plan of Action for Children have been prepared in consultation and association with the voluntary sector. The Offences Against Children Bill and the proposed Integrated Child Protection Scheme are also being prepared with the assistance and guidance of NGOs, experts, social workers, and so on.

5.2 UNICEF projects are being implemented in India through a Master Plan of Operations, which is an agreement prepared after mutual consultation and consensus within the framework of the Basic Agreement signed between India and UNICEF in 1978. India is the largest Country Programme of UNICEF in the world. It is being implemented through various Ministries and Departments dealing with children which includes Ministry of Women and Child Development, Department of School Education and Literacy, Department of Family Welfare and NACO, Ministry of Social Justice & Empowerment, Ministry of Labour, Ministry of Information & Broadcasting, Ministry of Youth Affairs & Sports and Department of Drinking Water Supply (Rajiv Gandhi National Drinking Water Mission). The total allocation for the last UNICEF-GOI Programme of Co-Operation for the period 2003-2007 is US$ 400 million. An additional fund of US $ 100 million has been approved by UNICEF for utilization in the current MPO period. The present MPO aims to achieve the following objectives:

(a) to empower families and communities with appropriate knowledge and skills to improve the care and protection of children
(b) to expand partnerships as a way to leverage resources for children and scale up interventions
(c) to strengthen the evaluation and knowledge base of best practices on children.

The programme contributes towards:

(a) reduction in infant and maternal mortality
(b) improvements in levels of child nutrition
(c) ensuring universal elementary education
(d) enhancing child protection
(e) protection of children and adolescents from HIV/AIDS.

The major activities included in different sectoral programmes are:

- Education
- Child Development and Nutrition
- Child Protection
- Reproductive and Child Health
- Child’s Environment: Water, Environment and Sanitation
- HIV/AIDS
- Advocacy and Partnerships

India is annually contributing US $ 900,000 to UNICEF.

5.3 Child participation is the now being emphasized by the Government in the process of policy formulation and other initiatives taken for the benefit of children. The role of children is important...
and has been adequately addressed in the NPAC. It is expected that all families and programme planners, administrators in government and NGOs and other civil society organizations are aware of child rights and respect the views of children and integrate opportunities for their participation in accordance with their age, in all programmes and services being planned for them. On the occasion of Children’s Day on 14th Nov., 2002 children were given an opportunity to address Prime Minister of India in a function to express their views and expectations. In the year 2003 as part of celebrations for Children’s Day in New Delhi in order to get children's perceptions, groups of children from rural and urban areas comprising girls and boys in equal numbers were asked to write about their future in terms of their expectations from society, parents and other on a 56 metre cloth representing the 56 years of Independence. Children were encouraged to share their ideas about the kind of society in which they would like to live. This activity was also undertaken in every State of the country on the occasion of Children’s Day. After the event, the ideas of children expressed on the cloth were analyzed and classified and displayed for the public. Such information provides valuable inputs for the policy makers who could use this in formulating future plans and programmes for children. This year two children were given the opportunity to share the dais with the Prime Minister in a function held on 14th Nov., 2006 and to speak to the Prime Minister on behalf of the children of the country. In addition to such participation, the Government also gives Awards to exceptional children for their achievements in different fields. Bravery Awards for Children who have displayed exemplary courage are presented by the Prime Minister. There is a National level Award and 35 State level Awards comprising of Gold and Silver medals with cash prize and certificate given annually. Children are also given opportunities to participate in various competitions and festivals being organized in different parts of the country for exposure and learning. A delegation of ten children visited Mongolia in August 2006 to participate in a festival for children organized by the Government of Mongolia. Activities for child participation are also held at the State level. Various activities are undertaken by NGOs for promoting child participation. A Bal Panchayat was organized in Rajasthan for children’s participation in a series of workshops held at different places in the State in which children were given the opportunity to express their view point to the Government. Similarly a campaign was conducted last year against child labour in which hundreds of representations of children were addressed to the President of India. Child Parliaments are also organized in schools for encouraging children to express their opinion on important issues.
6. **Achievement of WFFC Plan of Action and related MDG targets:**

6.1 The current status of the major child indicators are given below:

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name of Indicator</th>
<th>Status as reported to UNGASS in 2002</th>
<th>Current Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Infant Mortality Rate</td>
<td>68 per 1000 live births(NFHS-II)</td>
<td>57 per 1000 live births(NFHS-III)</td>
</tr>
<tr>
<td>2</td>
<td>Under Five Mortality Rate</td>
<td>94.9 per 1000 live births(NFHS-II)</td>
<td>98.1 per 1000 live births (1998-2002)(SRS)</td>
</tr>
<tr>
<td>3</td>
<td>Maternal Mortality Rate</td>
<td>540 per 100,000 live births(NFHS-II)</td>
<td>301 per 100,000 live births (2001-2003)(SRS)</td>
</tr>
<tr>
<td>4</td>
<td>Proportion of Urban Population with access to improved water source</td>
<td>62.3%(includes urban and rural)(NFHS-II)</td>
<td>92%(2004) (M/o Urban Development)</td>
</tr>
<tr>
<td>5</td>
<td>Proportion of Urban Population with access to sanitation</td>
<td>24% (includes urban and rural) (NFHS-II)</td>
<td>64%(2004) (M/o Urban Development)</td>
</tr>
<tr>
<td>6</td>
<td>Proportion of Rural Population with access to improved water source</td>
<td>As at 4 above.</td>
<td>86.8%(2001) (M/o Rural Development)</td>
</tr>
<tr>
<td>7</td>
<td>Proportion of Rural Population with access to basic sanitation</td>
<td>As at 5 above.</td>
<td>32.4%(2005) M/o Rural Development</td>
</tr>
<tr>
<td>8</td>
<td>% of girls enrolment to total enrolment</td>
<td>76.6%(% of girls age 6 to 12 yrs attending school (NFHS-II).)</td>
<td>46.7% (2004-05) 44.4% (2004-05) 41.5% (2004-05) Selected Education Statistics of D/o S&amp;HE, 2004-05</td>
</tr>
<tr>
<td>9</td>
<td>Gross enrolment ratio</td>
<td>98.2% 62.4% 84.8%</td>
<td>108.6% (2004-05) 70.5%(2004-05) 94.2% (2004-05) Selected Education Statistics of D/o S&amp;HE, 2004-05</td>
</tr>
<tr>
<td>10</td>
<td>Drop Out Rates</td>
<td>31.5% 52.3% 62.7%</td>
<td>28.5 % (2004-05) 50.4 % (2004-05) 61.9% (2004-05) Selected Education Statistics of D/o S&amp;HE, 2004-05</td>
</tr>
<tr>
<td>11</td>
<td>Child Labour Estimates</td>
<td>10.40 million (NSSO, 2000)</td>
<td>10.7 million (10 to 14 years)(Census 2001)</td>
</tr>
</tbody>
</table>
Table No.7.

National Family Health Survey Phase-I(1992-93), II(1998-99) and III(2005-06) are conducted at the national level. These surveys contains data on several indicators relating to women and children. The data of NFHS-III at the National and State level is available at Annexure and includes the data of NFHS-I & II for comparison.

6.2 The infant mortality rate is the single most important indicator illustrating the level of human development of a nation or a State. IMR below 10 indicates a high level of development. The major cause of infant and child deaths are premature birth, acute respiratory infections, diarrheal diseases, vaccine preventable diseases where immunization coverage has not reached optimal levels and inadequate maternal and new-born care. The Infant Mortality Rate(IMR) has shown a declining trend from 68 per 1000 live births(NFHS-II) to 57 per 1000 live births in 2005-06(NFHS-III). The National
Rural Health Mission has the objectives to reduce the IMR, CMR and MMR. The objectives are expected to be achieved with community participation and improved health services in the villages.

6.3 Vaccine preventable diseases are the major childhood killer. A reduction in IMR is possible only if all the causes of Infant mortality are addressed simultaneously. The government has set ambitious targets toward achieving universal immunization and the achievements have been impressive in some States. The number of fully vaccinated children in India aged 12 to 23 months has increased from 42% (NFHS-II) to 43.5% (NFHS-III). Pulse Polio campaigns are being held frequently to rid the country of Polio completely.

6.4 The education system of a country is the main edifice on which the future of the nation rests. 48% of India’s adult population was illiterate as per 1991 Census, but improved to 35% in Census 2001. The Government of India has taken several initiatives to eradicate illiteracy, improve quality education and reduce the dropout rate. Some of these initiatives are National Technology Mission, District Primary Education Programme, National Support for Primary Education, Lok Jumbish and Shiksha Karmi in Rajasthan, Bihar Education Project, National Open School, Sarv Shiksha Abhiyan and other State specific initiatives. With the amendment of the Constitution in December 2002, free and compulsory education has been made a Fundamental Right for all children in the age group 6 to 14 years. The Sarv Shiksha Abhiyan is a historic campaign towards improving the performance of the school system through community participation leading to quality elementary education. The primary objective of the programme is to provide free and quality education to all children by 2010. Census of India 2001 indicates an upswing with the total literacy figure crossing 65%. While the male literacy rate has gone up to 75% in 2001 from 64% in 1991, the female literacy rate reached 54% in 2001 from 39% in 1991. Attempts are being made to make available a primary school within one kilometer of each village. The States where the enrolment ratio was lower than the national average were Andhra Pradesh, Assam, Bihar, Haryana, Jammu & Kashmir, Karnataka, Kerala, Nagaland, Punjab, Uttar Pradesh, Chandigarh, Delhi and Lakshdweep at the primary stage and Assam, Bihar, J&K, Jharkhand, Nagaland, Punjab, Sikkim, Uttar Pradesh, West Bengal and Chandigarh at the upper primary stage in the year 2004-05. Although the enrolment ratio in classes I to V was 108.56% the total drop out rate was as high as 28.49%. The drop out rate for girls is lower than that for boys at primary stage, slightly higher at upper primary stage and higher at secondary stage. With the substantial increase in allocation of funds for Sarv Shiksha Abhiyan it is expected that the enrolment ratio will increase and the drop out rate will decrease. The budgetary provision for child education at the Union level has increased from Rs.3577.05 lakhs in 2001-02 to Rs.16895.11 lakhs at elementary education level and from Rs.1235.6 lakhs in 2001-02 to Rs.1964.08 lakhs in 2006-07 at the secondary education level.

6.5 The Mid day Meal scheme is the only nutritional intervention for children studying at primary level in government and government assisted institution. The Scheme was launched in August 1995. At presently, mid day mal having nutritional content of 450 calories and 12 gms of protein is served to children. The programme covers nearly 12 crore children studying in about 0.95 million schools. The Central Government shoulders most of the expenditure incurred under the programme, though the States are also contributing substantially to add value and variety to the mid day meal. Budgetary support for the programme has progressively increased during the 10th Plan period starting with Rs.11000 million in 2002-03 to Rs.53480 million in the 2006-07.
6.6 Adequate nutrition is essential to have a healthy and productive working population. Adequate nutrition of children and adults is increasingly being seen as a basic human right. It is observed that the energy requirement of children up to 12 years is not adequately met. The requirement of Iron and Vit.A for all ages is also inadequate both for boys and girls. There is no significant difference in the number of normal or malnourished children among boys and girls. The incidence of severe malnutrition in the age group of 1 to 5 years is on the lesser side up to 5% and on the higher side is 26%, which is in Bihar. Other States such as Rajasthan, Delhi and Tripura have malnutrition from 6% to 10%. The highest incidence of severe malnutrition in the age of 12 to 18 years was in Himachal Pradesh(16.80%) followed by Arunachal Pradesh (15.03%) and Bihar(13.7%).

6.7 Street children are one of the most vulnerable groups amongst children. Among street children there are children who work on streets but live with their families or have occasional contact with their families on the one hand and on the other those who have no contact at all with their families. Though there is no authentic data as to the number of street children it is estimated that the number is large and mostly concentrated in metro and other cities. An Integrated Programme for Street Children was started to provide shelter, nutrition, healthcare, education and recreational facilities. A Child helpline which is a 24 hour toll free telephone service has been started in major cities of the country for all children in distress. Any child or an adult on behalf of the child can seek assistance on 1098 regarding shelter, medical assistance, protection from abuse, emotional support and guidance.

6.8 The Ministry of Women and Child Development has recognized more than 70 agencies for in-country adoptions. There are also agencies which can do inter-country adoption. These agencies are being regulated by a Central Adoption Resource Agency set up to provide a detailed framework and guidelines for regulating adoption within and outside the country.

6.9 Children being vulnerable are often exploited and subjected to abuse. Percentage of incidence of crimes against children varies from place to place and time to time. The crimes committed by children have shown a declining trend over the years. Juveniles are protected under the Juvenile Justice(Care and Protection)Act 2000.

6.10 The 86th Constitution Amendment Act directs the State to develop programmes for early childhood care for children below the age of 6 years. ICDS is the main programme of the Government which provides services for early childhood development of children in the country. The programme provides basic services of nutrition, immunization, health checkup, education, etc. The programme is being expanded to cover the whole country shortly.

6.11 Elimination of child labour is an area of great concern and of commitment for the Government of India. Articles 24 & 39 of the Constitution provide for the protection of children from involvement in economic activities and from avocations unsuited to their age. After the recent Constitutional Amendment, Right to Education for Children up to 14 years is now a Fundamental Right(Article 21A). Considering the magnitude and nature of the problem, a gradual and sequential approach has been adopted to withdraw and rehabilitate children beginning with those working in hazardous occupations and processes. Consistent with the Constitutional Provisions the Child Labour(Prohibition and Regulation) Act 1986 was enacted to prohibit employment of children below 14 years in hazardous
occupations and processes and also to regulate the working conditions of children in other employment. In the last seven years, the number of hazardous “Occupations” listed in the Schedule of the Act has increased from 7 to 15 and “Processes” from 18 to 57. A National Policy on Child Labour was announced in August 1987. The Action Plan under the Policy is multipronged consisting mainly of legal action, focus on general development programmes for the benefit of families of children and project based action in areas of high concentration of child labour. In keeping with the Policy on Child Labour, the National Child Labour Project Scheme was initiated in the 7th Plan in 12 districts with the objective of withdrawing and rehabilitating children working in identified hazardous occupations and processes. The Scheme was extended to 100 Districts in 13 States in the 9th Plan and will cover 250 districts in the 10th Plan. Under the Scheme, special schools are opened for working children withdrawn from work with the objective of preparing them to join the formal education system. The special schools under NCLP Scheme provide for formal/non-formal education, vocational training, mid-day meal @ Rs. 5/- per day per child and stipend @ Rs. 100/- per month per child. Approximately 3.74 lakh children have already been mainstreamed into the formal education system till June, 2006. 7821 special schools have been sanctioned under NCLP Scheme so far. The International Programme on Elimination of Child Labour (IPEC) is a global programme launched by the International Labour organization in Dec. 1991. India was the first country to join it in 1992. The long term objective of IPEC is to contribute to the effective abolition of child labour. IPEC – India has, during the period 1992-2002 supported 65 action programmes. In addition, under Grants in aid Scheme, the Ministry of Labour also provided assistance to 88 voluntary organizations/NGOs directly to implement projects aimed at providing working children with education and vocational training opportunities in districts which are not covered under any other schemes. The Ministry of Labour and Employment has issued a Notification recently under Child Labour (Prohibition and Regulation) Act, 1986 for prohibiting employment of children as domestic servants and in tea shops and dhabas, etc. with effect from 10th October, 2006. As per this notice employment of children as domestic servants or servants in dhabas, restaurants, hotels, motels, tea shops, resorts, spas or in any other recreational centers is prohibited.

6.12 In the context of the Directive Principles of State Policy laid down in the Constitution of India and Article 47 of the Constitution, food security assumes significance. The policies and programs of the Government of India over the last four decades have been designed to ensure availability of food grains to all sections of society. Food security implies that sufficient food is produced, originates from efficient and environmentally benign technologies which do not compromise on the natural resources, base of crops, forestry and fisheries. The aim is to ensure that every individual has access to a balanced diet. Various Ministries of the Government have been engaged in ensuring food security in a cross sectoral and multi-dimensional approach. The Department of Food and Public Distribution looks after the procurement of food grains and its distribution through various food grain based welfare Schemes which include several Schemes targeted towards children. Mid Day Meal is one of such Scheme as already mentioned. The Scheme covers students of class I to V in the Government Primary Schools/Primary Schools aided by the Government and the Primary Schools run by the local bodies. Food grains (Wheat and Rice) are supplied free of cost @ 100 gms per child per school day where cooked/processed hot meal is being served with a minimum content of 300 calories and 8-12 gms of Protein each day of school for a minimum of 200 days and 3 kgs per student per month for 9-11 months in a year where food grains are distributed in raw form. Another Pilot project called “Nutritional Programmes for Adolescent Girls” is also being implemented since 2002-03 in 51
identified districts. Nutritious/energy food is also being made available to children below 6 years of age and expectant/lactating women under the Integrated Child Development Scheme.

6.13 Habitations with Drinking water facilities as on 1.4.2006 based on the comprehensive Action Plan 1999 and subsequent coverage reported by States is as under:

<table>
<thead>
<tr>
<th>Type of Coverage</th>
<th>Number of Habitations(% in brackets)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully Covered</td>
<td>1380337(97.02%)</td>
</tr>
<tr>
<td>Partially covered</td>
<td>38894(2.73%)</td>
</tr>
<tr>
<td>Not covered</td>
<td>3052(0.21%)</td>
</tr>
<tr>
<td>Uninhabitated/urbanized</td>
<td>38(0.03%)</td>
</tr>
<tr>
<td>Total</td>
<td>1422664</td>
</tr>
</tbody>
</table>

Table No.8

At the all India level 99.79% of rural habitations have full/partial access to safe drinking water. Under Bharat Nirman it is proposed to cover uncovered habitations, slipped back habitations, which had earlier been covered and newly emerged habitations as per the latest survey. It is also proposed to address problems of water quality. As of now the Total Sanitation Campaign is running in 568 districts of the country and coverage of rural population has increased to 40% of households.

6.14 The Press Information Bureau in the Ministry of Information and Broadcasting caters to Print Media through briefings, press releases, backgrounders, features and by arranging interviews with senior decision makers. The Bureau also uses other measures to publicize provisions of child welfare through telecasting spots on children on television from time to time. Campaigns are undertaken by the Ministry of Women and Child Development, Ministry of Health and Family Welfare, Ministry of Education and other Ministries to address social issues such as female foeticide, child abuse, empowerment of girls, falling female sex ratio, domestic violence, child marriage and so on. The Directorate of Field Publicity continues to give priority to publicity on rights of the child. Under this theme different aspects of all round development of children is publicized like health, education, nutrition, child labour, anti child marriage, etc.

6.15 An employment oriented urban poverty alleviation scheme named “Swaran Jyanti Shahri Rojgar Yojana” is being implemented which assists the urban poor in income generation activities. The sub-mission of the newly launched Jawaharlal Nehru National Urban Renewal Mission as well as Integrated Housing and Slum Development Programme provides for improving the basic amenities and infrastructure in urban poor clusters/slums. This also helps in improving the condition of children living in these slums.

6.16 The number of HIV/AIDS cases among children in the age group of 0.14 years is 957 as on 31st Aug., 2006 as per statistics available in the M/o of Health and Family Welfare. To contain the epidemic India has formulated a National Policy for Prevention and Control of HIV/AIDS in 2002 to provide an enabling social environment for the prevention, care, support and protection of victims, provide information and health education, and enlist community participation and international cooperation for addressing this challenge. It is estimated that there are annually between 100,000 to 200,000 infected pregnancies and about 30,000 infected babies are born. Of particular relevance to children is PMTCT based on feasibility studies conducted in high prevalence States. Efforts are on to reduce mother to child transmission of HIV/AIDS by encouraging expectant mothers to undergo
screening and offering short duration AZT 300 mg twice daily after 36 weeks of gestation to sero-positive women.

7.  Summary of lessons learned and initiatives undertaken since 2002 for accelerating the progress towards achievement of WFFC and relevant MDGs and outline of future initiatives planned at national, sub-national or regional levels:

7.1  The Government knows that there is a need for improvement in health services in rural areas, and, therefore, a time bound programme has been formulated to achieve the desired targets. The National Rural Health Programme launched in 2005, has to provide effective health care to the rural population throughout the country with special focus on 18 States, which have weak public health indicators and/or weak infrastructure. The Mission also aims at raising public spending on health to undertake architectural corrections of the health system to enable it to effectively handle increased allocations and promote policies that strengthen public health management and service delivery in the country. The goals of the Mission are reduction in IMR, MMR, universal access to public health services, prevention and control of communicable and non-communicable diseases, including endemic diseases, access to integrated comprehensive primary health care, population stabilization, gender and demographic balance, revitalize local health traditions and medical systems and promote healthy life styles.

7.2  With the launching of the massive Sarva Shiksha Abhiyan for universalization of elementary education in the country it has also been decided to make education free and compulsory for all children upto the age of 14 years. This is now a Fundamental Right enshrined in the Constitution. Public spending on education is also likely to increase. Emphasis would be on quality education and girl education. The elementary education programme has shown significant progress. There has been a reduction in the number of out of school children from 44 million in 2001 to 7 million in 2006. The enrolment of girls has gone up by 6.9% from 2001-02 to 2004-05. The drop out rate of girls at the primary stage has reduced by 15% in four years. The thrust of the programme is now to improve the quality of learning and take steps for the appointment of 6.6. lakh teachers to improve teacher pupil ratio, distribute 5.78 crore text books, 20 ensure days of annual in-service training to all teachers and provide for remedial teaching.

7.3  The Integrated Child Development Services Scheme was launched in 1975 for enhancing the health, nutrition and learning opportunities of infants and young children (0-6 years) and their mothers. With time the services under the programme increased to include supplementary nutrition, immunization, health check up, referral services, pre-school non-formal education etc. Now it has been decided to expand the programme to all blocks of the country with convergence of services under various schemes and programmes, namely, health, education, safe drinking water so as to achieve the desired impact. The allocation under the programme has been increased substantially in recent years.

7.4  A review of existing legislations for children was held in 2005 wherein it was found that offences against children are being handled in a scattered manner. Some offences were either not being addressed at all while others were being addressed inadequately. There is no comprehensive legislation to deal with all crimes and offences against children. It has been decided to prepare a legislation which covers all offences against children, including abuse, exploitation, neglect and others. Accordingly in wide consultation with States, Ministries, experts, voluntary organizations, social workers the Bill
titled “Offences Against Children(Prevention) Bill has been drafted and is being finalized in consultation with the Law Ministry. It will be introduced in the Parliament as soon as it is finalized.

7.5 As per the 2001 Census, there were 427 million children in the country many of whom could be living in difficult circumstances. The child protection programme in India is spread across various Ministries, which have been implementing the schemes and programmes to reach out to varied groups of vulnerable children with complex and diverse needs. The important schemes and programmes for such children include Programme for Juvenile Justice, Integrated Programme for Street Children, Shishu Grih Scheme, Scheme for Working Children in Need of Care and Protection, General Grant-in-Aid Scheme, CHILDLINE Service, Rajiv Gandhi National Crèche Scheme for the children of working mothers, Pilot Project to Combat the Trafficking of Women and Children for Commercial Sexual Exploitation in Destination Areas, etc. However, experience with the implementation of existing programmes and policies has brought out a large number of shortcomings in the system. In view of the gaps identified and recommendations and suggestions received from various quarters it has been decided to combine the existing child protection schemes under one integrated scheme titled “Integrated Child Protection Scheme”. In order to achieve the objectives of reaching out to all children, including those in difficult circumstances, the Ministry of Women and Child Development proposes to combine its existing child protection schemes under one integrated centrally sponsored scheme titled “Integrated Child Protection Scheme (ICPS)”. The Scheme will function as a Government – Civil Society Partnership under the overarching direction and responsibility of the Central/State Governments. The proposed scheme aims to provide for care and protection of all the children in conflict with law and children in need of care and protection. It would involve steps to strengthen families and prevent their breakup leading children to become homeless and without care and protection. At the same time, children already outside the mainstream need to be provided support beginning from emergency outreach services to final rehabilitation with their families/society. Details of the Scheme are being worked out which the Scheme is likely to be implemented in the Eleventh Plan.

7.6 The National Commission for Protection of Child Rights has been set up in February 2007 for enforcement of children’s rights and effective implementation of laws and programmes relating to children.

7.7 In the last five years, the number of hazardous “Occupations” listed in the Schedule of the Child Labour (Prohibition and Regulation) Act, 1986 has increased from 7 to 13 and “Processes” from 18 to 57. The Ministry of Labour and Employment has issued a Notification recently for prohibiting employment of children below the age of 14 years as domestic servants and in tea shops and dhabas, etc. with effect from 10th October, 2006. As per this notice employment of children as domestic servants or servants in dhabas, restaurants, hotels, motels, tea shops, resorts, SPAs or in any other recreational centers is prohibited. Efforts are being made for the rehabilitation of such children who are withdrawn from such occupations.

7.8 Certain amendments are proposed to the Immoral Traffic (Prevention) Act, 1956 to widen its scope, focus on traffickers, human rights of victims and to make its implementation more effective. The major amendments include deletion of section 8 that provide punishment for seducing or soliciting for the purpose of prostitution and section 20 that relates to removal of a prostitute from any place. Deletion of these sections have been proposed keeping in a view that women involved in prostitution
are victims of trafficking and booking under these sections re-victimizes them. The other major amendments include insertion of new sections defining the offence of “Trafficking in Persons”, punishment for persons involved in “Trafficking in Persons” and punishment for a person who visits or is found in a brothel for the purpose of sexual exploitation. The other amendments include constitution of a Central Authority as well as State Authorities for the purpose of effectively combating the offence of the “Trafficking in Persons” at the central and state level. The Bill has been examined by the Ministry related Parliamentary Committee and its recommendations are being considered.

There are several activities being undertaken at different levels. These initiatives are being taken in each and every sector of child development relating to survival, development, protection and participation.

With the new initiatives and holistic vision of children it is expected that the development process in the XI Plan period will be faster and help in achieving the MD goals as well as the national goals of NPAC.