

# **Base Paper on Availability of Data and Data Gaps for Situation Analysis of Well-being of Children and Women**



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## **Addressing the Well-being of Children and Women: Policy Framework and Data Issues**

### **1.1 The Context**

Children and women face various forms of vulnerability throughout the life cycle. They may face discrimination before or after birth; violence, harassment or abuse; neglect due to dependence and lack of resources; social prejudice; and exploitation – whether economic, political, social or religious. They are vulnerable to exploitation and discrimination regardless of where they are positioned on the economic and social spectrum. However, their vulnerability increases significantly if they are poor, socially disadvantaged or live in a backward or remote area.

A large number of commitments have been made in the Constitution as well as in national and international policy documents with regard to safe guarding and enabling the well-being of children and women. Laws have been enacted to uphold these commitments and policies, plans and programmes have been prepared and implemented. Yet, substantial gaps between the enunciated goals and the situational reality remain.

Timely availability of relevant and accurate data is critical for evidence based policy formulation and for making informed policy choices. It is undeniable that massive efforts are made by the national official statistical system to collect and provide data on a vast array of development indicators. However it is important to analyse whether the available data is adequate for understanding the situation of children and women. Also needing attention are questions such as: What are the core indicators on which data are required for understanding the well-being of children and women? Is the data that is available for these indicators sex disaggregated? Does the data provide adequate information for understanding and addressing the varied situations of women and children? What is the spatial unit for which it is available? What are the data gaps that need to be bridged? These are the questions that this Paper seeks to answer. It examines the availability of data and identifies data gaps for situation analysis of the well-being of children and women. It also highlights several critical areas of concern pertaining to the vulnerability, exploitation, neglect, discrimination and inequalities faced by children and women.

More specifically, the paper reviews and analyses data needs, availability and gaps pertaining to children and women who are:

- poor, malnourished, bonded or suffer deprivation;
- victims of child marriage, trafficking, violence and crimes;
- in situations where they need protection and care due to dependence, being differently-abled or having special needs;
- in conflict with law.

It also analyses the situation of children and women with regard to education, health care, work, basic amenities, assets and participation.

### **The Process**

Ministry of Statistics and Programme Implementation (MOSPI) and UNICEF invited IIPA to prepare a Base Paper on “Availability of Data and Data Gaps for Situation Analysis of Well - being of Children and Women.” Discussions were held with the Secretary and other senior officers of MOSPI as well as with representatives of UNICEF. Based on these discussions it was decided that taking into consideration the Twelfth Plan and other frameworks like CRC, CEDAW, MDGs etc., the Paper would examine the data availability and gaps to comprehend and address situations of vulnerability, exploitation and discrimination, which interfere with the well-being of children and women. An Inception Report was prepared and submitted to MOSPI. After incorporating suggestions received from MOSPI and UNICEF the Inception Report was finalised.

To understand the data needs, availability, gaps and issues faced by Government a structured questionnaire was sent through MOSPI to several identified Ministries. However, it was found that most of them were reluctant to respond in writing. Meetings were set up by MOSPI with officers from some of the data producing Ministries. Valuable meetings were held with Deputy Director General, Ministry of Human Resource Development, Chief Statistical Officer, NCRB, Ministry of Home Affairs, Deputy Director General, Directorate General of Employment and Training, Chief Director, Ministry of Health & Family Welfare, Deputy Director General, Ministry of Tribal Affairs, Member Secretary, National Commission for Protection of Child Rights, Director, Ministry of Minority Affairs and Deputy Director General, Ministry of Social Justice and Empowerment.

The Ministry of Statistics and Programme Implementation organized a presentation of the draft Base Paper at MOSPI for Ministry officials and representatives of UNICEF. Suggestions received were incorporated and the Paper was submitted to the Ministry. The Base Paper has been edited based on comments and suggestions received on the earlier version.

### **Structure of the Paper**

The Base Paper analyses data availability and data gaps pertaining to the well-being of children and women in the context of the important commitments made by Government through Constitutional provisions, international obligations and national policy commitments. The overall policy framework for addressing well-being of children and women is outlined in brief in Section 1 of the Paper. Data availability and gaps in the context of situations of vulnerability, exploitation and discrimination experienced by children and women are discussed in Section 2 while violence and crimes against children and women are addressed in Section 3. Sections 4 and 5 analyse capacities and capabilities for enhancing well-being in the context of education and health. Section 6 highlights data concerns in the context of paid and unpaid work, the statistical invisibility of women's work, basic amenities and assets. Participation in decision-making is the focus of Section 7. Data availability and data gaps relating to the core indicators on which data is needed to track progress in addressing the vulnerabilities are discussed in Section 8, which is also the concluding section of the Paper. This also highlights the importance of data generated through the national official statistical system in providing reliable evidence for policy and concludes the Paper.

Some of the important Constitutional provisions, international obligations to which India is a signatory and commitments made in Plan documents, policy statements and laws pertaining to children and women are outlined below.

#### **1.2 Constitutional Provisions**

The Constitution of India grants equality to all men and women before law (Article 14); provides for equality of opportunity for all citizens in matters relating to employment or appointment to any office under the State (Article 16); and prohibits discrimination on grounds of sex (Article 15). It also enables discrimination in favour of women, provides the right to special protection

for women and children (Article 15 (3)) and enables the State to make special provisions for the advancement of socially and educationally backward classes of citizens or Scheduled Castes and Scheduled Tribes and protection of minorities (Article 29). It provides the right to free and compulsory elementary education for all children in the 6–14 year age group (Article 21A), prohibits forced labour and trafficking in human beings (Article 23) and provides the right to be protected from any hazardous employment till the age of 14 years (Article 24).

The Directive Principles of State Policy direct the State to adopt policy towards securing for men and women, equally, the right to an adequate means of livelihood (Article 39(a)) as well as equal pay for equal work (Article 39(d)). These exhort the State to promote justice on a basis of equal opportunity and provide free legal aid by suitable legislation or scheme or in any other way to ensure that opportunities for securing justice are not denied to any citizen by reason of economic or other disabilities (Article 39A). These further call upon the State to "ensure that the health and strength of workers, men and women and the tender age of children are not abused" and "that the citizens are not forced by economic necessity to enter avocations unsuited to their age or strength" and that "children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity" and childhood and youth are protected against exploitation and against moral and material abandonment (Article 39(e and f)). The State is also directed to make provisions for securing just and humane conditions of work and for maternity relief (Article 42); provide early childhood care to all children below six (Article 45); promote with special care the educational and economic interests of the weaker sections of the people and protect them from social injustice and all forms of exploitation (Article 46); and raise the level of nutrition and the standard of living of its people (Article 47).

Among our Fundamental Duties is the obligation to promote harmony and the spirit of common brotherhood amongst all the people of India, renounce practices derogatory to the dignity of women (Article 51A (e)) and provide opportunities for education to the child or ward between the age of six and fourteen years (Article 51A (k)).

The Constitution also recognises State responsibility to promote women's political participation through the 73<sup>rd</sup> and 74<sup>th</sup> amendments and the requirement that not less than one-third<sup>1</sup> of the total number of seats to be filled by direct election in every Panchayat are to be reserved for women and such seats are to be allotted by rotation to different constituencies in a Panchayat (Article 243 D (3)). Further, not less than one-third of the total number of offices of Chairpersons in the Panchayats at each level are to be reserved for women (Article 243 D (4)). Additionally, not less than one-third<sup>2</sup> of the total number of seats to be filled by direct election in every Municipality to be reserved for women and such seats are to be allotted by rotation to different constituencies in a Municipality (Article 243 T (3)). It also requires the reservation of offices of Chairpersons in Municipalities for the Scheduled Castes, the Scheduled Tribes and women in such manner as the legislature of a State may, by law, provide (Article 243 T (4)).

### **1.3 International Conventions and Goals for Children and Women**

Government of India has ratified several international conventions and treaties such as the Declaration of the Rights of the Child, Universal Declaration of Human Rights and its Covenants, the Convention on the Rights of the Child and its two Optional Protocols, the United Nations Convention on the Rights of Persons with Disabilities, the United Nations Convention against Transnational Organized Crime, the Protocol to Prevent, Suppress and Punish Trafficking in Women and Children, the Hague Convention on Protection of Children and Cooperation in respect of Inter-Country Adoption, the Convention on the Elimination of All Forms of Discrimination against Women and the UN Millennium Declaration. A few salient points from some of these are outlined below.

**The UN Convention on the Rights of the Child** highlights the importance of:

- **Survival** - inclusive of the right to life, to have good health, minimum standards of food, clean water, clean environment, shelter and clothing, and the right to live with dignity;
- **Protection** - to be protected from neglect, exploitation and abuse at home, and elsewhere, including protection from sexual abuse, dangerous drugs, abduction and sale and in case of breaking law;

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<sup>1</sup> including the number of seats reserved for women belonging to the Scheduled Castes and the Scheduled Tribes.

<sup>2</sup> including the number of seats reserved for women belonging to the Scheduled Castes and the Scheduled Tribes.

- **Development** - Emotional, Mental and Physical, including right to good education, to relax and play; and
- **Participation** - in any decision-making that involves him/her directly or indirectly, including right to be informed, think and believe what they want, meet together and form groups and organisations.

The Convention came into force in 1990 and was ratified by India in 1992 with a declaration regarding progressive implementation.

The **UN Millennium Declaration** adopted at the Millennium Summit in September 2000 was ratified by 189 nations. It committed Member States to a new global partnership to reduce extreme poverty and set out a series of time-bound targets, with a deadline of 2015. These are known as the Millennium Development Goals and call for progress towards eradication of extreme poverty and hunger, universal primary education, gender equality and empowerment of women, reduction in child mortality, improved maternal health, etc. The eight MDGs are listed in Box 1.1. There is increased recognition of the fact that gender issues are central to the achievement of each of the MDGs and “international efforts have attempted to broaden the scope of focus on gender within the MDG framework.”<sup>3</sup>

**Box 1.1: Millennium Development Goals**

- Goal 1: Eradicate extreme poverty and hunger
  - Goal 2: Achieving universal primary education
  - Goal 3: Promoting gender equality and empower women
  - Goal 4: Reduce child mortality
  - Goal 5: Improve maternal health
  - Goal 6: Combat HIV/AIDS, malaria, and other diseases
  - Goal 7: Ensure environmental sustainability
  - Goal 8: Global partnership for development.
- Source: <http://www.un.org/millenniumgoals/>

<sup>3</sup> Megan Dersnah (2013). *A Review of National MDG reports from a Gender Perspective*, Background Paper for a UN Women-ECLAC Expert Group Meeting on structural and policy constraints in achieving the MDGs for women and girls.

**Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)**, was adopted by the UN General Assembly in 1979. India signed CEDAW on 30<sup>th</sup> July 1980 and ratified it on 9<sup>th</sup> July 1993<sup>4</sup>. Each of the Articles of CEDAW seeks the commitment of State Parties in correcting the cultural or structural discrimination faced by women in a specific area. CEDAW defines discrimination against women as “any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil and any other field.”

Countries that ratify CEDAW agree to take all appropriate measures, including legislation and temporary special measures, so that women can enjoy all their human rights and fundamental freedoms on a basis of equality with men. They agree to take measures to modify sex role stereotyping and elimination of prejudice; suppression of trafficking and exploitation of prostitution; elimination of discrimination against women in political and public life; equal rights in the field of education, work, employment opportunities, remuneration and social security, economic and social benefits, access to agricultural credit and loans, marketing facilities, appropriate technology, land etc as well as access to health-care services and additionally appropriate services in connection with pregnancy; equality before Law and equality in marriage and family life.

**The Beijing Declaration** was unanimously adopted at the end of the Fourth World Conference on Women convened by the UN at Beijing in 1995. Acknowledging “the voices of all women everywhere” and recognising that “inequalities between women and men have persisted and major obstacles remain, with serious consequences for the well-being of all people”, Governments adopted and committed to implement the Beijing Platform for Action<sup>5</sup> and to

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<sup>4</sup> Ratification was with two declarations (regarding its policy of non-interference in the personal affairs of any Community and practical difficulties in compulsory registration of marriages) and a reservation regarding para 1 of article 29. See [https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg\\_no=IV-8&chapter=4&lang=en#EndDec](https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-8&chapter=4&lang=en#EndDec).

<sup>5</sup> The 189 UN Member States unanimously adopted the Beijing Platform for Action, without any exceptions. See [http://www.un-ngls.org/spip.php?page=article\\_s&id\\_article=1725](http://www.un-ngls.org/spip.php?page=article_s&id_article=1725).

ensure “that a gender perspective is reflected in all policies and programmes.”<sup>6</sup> The Beijing Platform for Action called upon Governments, the international community and civil society, including non-governmental organizations and the private sector, to take strategic action in twelve critical areas of concern, which constitute barriers to the advancement of women. These are listed below in Box 1.2.<sup>7</sup>

### **Box 1.2: Beijing Platform for Action, 1995: Critical Areas for Action**

The critical areas of concern identified in the **Beijing Platform for Action in 1995** are:

- The persistent and increasing burden of poverty on women.
- Inequalities and inadequacies in and unequal access to education and Training.
- Inequalities and inadequacies in and unequal access to health care and related services.
- Violence against women.
- The effects of armed or other kinds of conflict on women, including those living under foreign occupation.
- Inequality in economic structures and policies, in all forms of productive activities and in access to resources.
- Inequality between men and women in the sharing of power and decision-making at all levels.
- Insufficient mechanisms at all levels to promote the advancement of women.
- Lack of respect for and inadequate promotion and protection of the human rights of women.
- Stereotyping of women and inequality in women’s access to and participation in all communication systems, especially in the media.
- Gender inequalities in the management of natural resources and in the safeguarding of the environment.
- Persistent discrimination against and violation of the rights of the girl child.

Source: United Nations (1995)

In March 2010, the **UN Commission on the Status of Women** held a high-level round table on the implementation of the Beijing Declaration and Platform for Action and the outcomes of the twenty-third special session of the UN General Assembly and its contribution to shaping a gender perspective in the realization of the Millennium Development Goals. The participants reaffirmed the centrality of gender equality and the empowerment of women for the achievement of all the internationally agreed development goals and recommended a range of actions to fully

<sup>6</sup> <http://www.un.org/womenwatch/daw/beijing/pdf/Beijing%20full%20report%20E.pdf>. pp. 2 – 5.

<sup>7</sup> United Nations (1995). *Report of the Fourth World Conference on Women Beijing*. New York. pp. 16-17. Available at: <http://www.un.org/womenwatch/daw/beijing/pdf/Beijing%20full%20report%20E.pdf>.

implement the Beijing Platform for Action and achieve the Millennium Development Goals. Among the recommendations was the need to integrate in future national censuses and household surveys, questions that would provide for better data disaggregated by sex, age and other variables.<sup>8</sup>

#### **1.4 National Policy Commitments for Women and Children: A Brief Outline**

The Government of India and State governments have taken several steps over the years towards the implementation of Constitutional and international obligations. A framework of laws, policies and programmes aimed at addressing the situation of women and children in India has been adopted. The Twelve Five Year Plans also reflect the evolution of approach and commitments of the State towards women and children and the over-arching framework for implementation of these commitments.

The **National Policy for the Empowerment of Women**, adopted in 2001, provides the overall framework and approach of Government. The policy draws attention to the existence of a “wide gap between the goals enunciated in the Constitution, legislation, policies, plans, programmes, and related mechanisms on the one hand and the situational reality of the status of women in India, on the other.” It seeks the advancement, development and empowerment of women as well as elimination of all forms of discrimination against them. Noting that “gender disparity manifests itself in various forms, the most obvious being the trend of continuously declining female ratio in the population in the last few decades” it draws attention to “social stereotyping and violence at the domestic and societal levels” as well as the persistence of “discrimination against the girl children, adolescent girls and women ...in parts of the country.” The Policy notes that the “underlying causes of gender inequality are related to social and economic structure, which is based on informal and formal norms, and practices.”

A gist of some of the policy prescriptions in the National Policy for the Empowerment of Women is outlined in Box 1.3 below.

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<sup>8</sup> See <http://www.un.org/womenwatch/daw/beijing15/outcomes/crp/crp5e.pdf>. pp. 5-6.

### **Box 1.3: Policy Prescriptions in the National Policy for the Empowerment of Women**

#### **Judicial Legal Systems**

- legal-judicial system will be made more responsive and sensitive to women's needs.
- encourage changes in personal laws to eliminate discrimination against women.
- encourage changes in laws relating to ownership of property and inheritance to make them gender just.

#### **Decision-making**

- measures to guarantee women equal access to and full participation in decision-making bodies at every level, including the legislative, executive, judicial, corporate, statutory bodies, as also the advisory Commissions, Committees, Boards, Trusts etc.

#### **Mainstreaming a Gender Perspective in the Development Process**

- policies, programmes and systems to ensure mainstreaming of women's perspectives in all developmental processes.
- women specific interventions to bridge gaps in policies and programmes, would be undertaken to bridge these.

#### **Economic Empowerment of women**

- through steps to mobilise poor women and improved implementation of programmes to meet their needs.
- enhanced access to micro credit for consumption and production.
- recognition of their contribution to socio-economic development as producers and workers in the formal and informal sectors.
- reinterpretation and redefinition of conventional concepts of work e.g. in the Census records, to reflect women's contribution as producers and workers.
- development of strategies to enhance the capacity of women and empower them to meet the negative social and economic impacts, which may flow from the globalization process.
- expansion of programmes for training women in agriculture in areas such as soil conservation, social forestry, dairy development and other occupations allied to agriculture.
- comprehensive support to women in industry in terms of labour legislation, social security and other support services.

#### **Social Empowerment of Women** – through access to

- education, health, nutrition.
- drinking water and sanitation, housing and shelter environment and science and technology.

#### **Women in Difficult Circumstances** - measures and programmes to provide special assistance to

- women in extreme poverty, destitute women.
- women in conflict situations, women affected by natural calamities.
- women in less developed regions.
- the disabled widows, elderly women, single women in difficult circumstances, women heading households.

contd

**Box 1.3: Policy Prescriptions in the National Policy for the Empowerment of Women (contd)  
Women in Difficult Circumstances - (contd)**

- those displaced from employment, migrants.
- women who are victims of marital violence, deserted women
- prostitutes.

**Violence against women** - Institutions and mechanisms/schemes for assistance will be created and strengthened for

- prevention of violence against women.
- taking effective action against the perpetrators of such violence.
- dealing with trafficking in women and girls.

**Rights of the Girl Child**

- strong measures both preventive and punitive within and outside the family to prevent all forms of discrimination against the girl child.
- strict enforcement of laws against prenatal sex selection and the practices of female foeticide, female infanticide, child marriage, child abuse and child prostitution etc.
- removal of discrimination in the treatment of the girl child within the family and outside.
- special emphasis on the needs of the girl child and earmarking of substantial investments in the areas relating to food and nutrition, health and education, and in vocational education.
- special focus on girl children while implementing elimination of child labour.

Source: National Policy for the Empowerment of Women

Operationalisation of the Policy requires all Central and State Ministries to draw up time bound Action Plans for translating it into a set of concrete actions, through a participatory process of consultation with Centre/State Departments of Women and Child Development and National /State Commissions for Women. It also requires the development of Gender Development Indices (GDI) and gender auditing and development of evaluation mechanisms. Some steps have been taken with regard to development of GDI and guidelines for gender auditing. It is important to note that the Twelfth Plan had identified several steps to institutionalise participatory processes for preparation and review of action plans.

The Policy also states that **collection of gender disaggregated data by all primary data collecting agencies of the Central and State Governments as well as Research and Academic Institutions in the Public and Private Sectors will be undertaken.** Data and information gaps in vital areas reflecting the status of women will be sought to be filled immediately.

## **The National Policy for Children, 1974 and 2013**

India adopted a Policy for Children in 1974, declaring children as the nation's "supremely important asset" and committing the Government of India to take steps to fulfill its obligations to children under the Constitution and international conventions and treaties. It recognized that programmes for children should find a prominent place in national plans for the development of human resources, so that children grow up to become robust citizens, physically fit, mentally alert and morally healthy, endowed with the skills and motivations provided by society. The Policy also laid emphasis on equal opportunities for the development of all children during the period of growth. The National Charter for Children, 2003, was adopted in 2004, which underlined the intent of the State to secure for every child its inherent right to be a child and enjoy a healthy and happy childhood, to address the root causes that negate the healthy growth and development of children, and to awaken the conscience of the community in the wider societal context to protect children from all forms of abuse, while strengthening the family, society and the Nation.

Review and Updation of the National Policy for Children (NPC), 1974, was initiated to reflect a paradigm shift from a 'needs-based' to a 'rights-based' approach. The Government of India adopted a new National Policy for Children in 2013, which emphasises the responsibility of State to ensure that childhood is protected from exploitation and moral and material abandonment; and affirms that "survival, health, nutrition, development, education, protection and participation are the undeniable rights of every child and are the key priorities of this Policy."

Recognising that children are not a homogenous group and their different needs require different responses, especially the multi-dimensional vulnerabilities experienced by children in different circumstances; and the need for a long term, sustainable, multi-sectoral, integrated and inclusive approach for the overall and harmonious development and protection of children, the policy reaffirms the need for special measures and affirmative action - legislative, policy or otherwise - to diminish or eliminate conditions that cause discrimination and reiterates its commitment to safeguard, inform, include, support and empower all children within its territory and jurisdiction, both in their individual situation and as a national asset. The State is committed to promote and safeguard the right of all children to live and grow with equity, dignity, security and freedom,

especially those marginalized or disadvantaged; to ensure that all children have equal opportunities; and that no custom, tradition, cultural or religious practice is allowed to violate or restrict or prevent children from enjoying their rights.

This Policy is to guide and inform all laws, policies, plans and programmes affecting children. All actions and initiatives of the national, state and local government in all sectors must respect and uphold the principles and provisions of this Policy.

#### **Box 1.4: National Policy for Children, 2013**

The Guiding Principles of the National Policy for Children, 2013, are:

- a) Every child has universal, inalienable and indivisible human rights.
- b) The rights of children are interrelated and interdependent, and each one of them is equally important and fundamental to the well-being and dignity of the child.
- c) Every child has the right to life, survival, development, education, protection and participation.
- d) Right to life, survival and development goes beyond the physical existence of the child and also encompasses the right to identity and nationality.
- e) Mental, emotional, cognitive, social and cultural development of the child is to be addressed in totality.
- f) All children have equal rights and no child shall be discriminated against on grounds of religion, race, caste, sex, place of birth, class, language, and disability, social, economic or any other status.
- g) The best interest of the child is a primary concern in all decisions and actions affecting the child, whether taken by legislative bodies, courts of law, administrative authorities, public, private, social, religious or cultural institutions.
- h) Family or family environment is most conducive for the all-round development of children and they are not to be separated from their parents, except where such separation is necessary in their best interest.
- i) Every child has the right to a dignified life, free from exploitation.
- j) Safety and security of all children is integral to their well-being and children are to be protected from all forms of harm, abuse, neglect, violence, maltreatment and exploitation in all settings including care institutions, schools, hospitals, crèches, families and communities.
- k) Children are capable of forming views and must be provided a conducive environment and the opportunity to express their views in any way they are able to communicate, in matters affecting them.
- l) Children's views, especially those of girls, children from disadvantaged groups and marginalized communities, are to be heard in all matters affecting them, in particular, judicial and administrative proceedings and interactions, and their views given due consideration in accordance with their age, maturity and evolving capacities.

Source: <http://wcd.nic.in/childwelfare/npc2013dtd29042013.pdf>

The 2013 policy further commits that professional and technical competence and capability in all aspects of programming, managing, working and caring for children at all levels in all sectors will be ensured through appropriate selection and well planned capacity development initiatives. All duty bearers working with children will be sensitized and oriented on child rights and held accountable for their acts of omission and commission.<sup>9</sup> The Guiding Principles of the National Policy for Children, 2013, are listed in Box 1.4.

### **Women in the Five Year Plans**

While women's issues and concerns are mentioned in all the Five Year Plans and specific policies have been enunciated for them, the journey across Plans reflects significant changes in the way in which women's needs and contribution have been viewed. The approach to women in the first few Plans was welfare or beneficiary oriented. While recognising that women needed to get the same opportunities as men in the sphere of work,<sup>10</sup> the focus was on education, mortality, maternal and child health services, nutrition and training. Women were viewed "as the beneficiaries of social services rather than as contributors to development."<sup>11</sup> With the Fifth Plan came a shift in the approach to women from welfare to development. This shift in approach is clearly reflected in various sections of the Sixth Plan. For instance, the Plan mentions the need for greater enrolment of women in engineering, agricultural, veterinary, fisheries and forestry colleges; better personnel policies to enable women to look after their families as well as continue in employment; and their involvement in the decision-making process including opportunities for placement at higher levels of decision-making.<sup>12</sup>

Another significant shift in the approach to women was from development to empowerment in the Eighth Plan. The Ninth Plan recognised the need to eliminate historical disadvantages such as gender, caste and other types of social and economic inequalities and gave priority to "empowerment of women and socially disadvantaged groups." Women's empowerment was one of the nine specific objectives of the Ninth Plan approved by the National Development

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<sup>9</sup> Government of India (2013). *The National Policy for Children*. Ministry of Women and Child Development, New Delhi. pp. 12-13. Available at: <http://wcd.nic.in/icpsmon/pdf/npc2013dtd29042013.pdf>.

<sup>10</sup> Planning Commission. *First Five Year Plan*. New Delhi: Government of India. Chapter 33 para 103.

<sup>11</sup> Planning Commission. *Eighth Five Year Plan*. New Delhi: Government of India. Para 15.2.2.

<sup>12</sup> Planning Commission. *Sixth Five Year Plan*. New Delhi: Government of India. Chapter 19 Para 19.35.

Council.<sup>13</sup> It viewed them as “active participants and indeed as partners, in the process of development and not as passive beneficiaries of public largesse.”<sup>14</sup> It also sought the empowerment of women not just in the political sphere but also in the social and economic spheres. The Tenth Plan sought to strengthen the approach to empowerment of women by committing to the preparation of a National Plan of Action for the Empowerment of Women with a view to translating the National Policy for the Empowerment of Women into action. Strategies for empowering women included the reservation of one-third of seats for women in the Lok Sabha and State Legislative Assemblies and the adoption of a special strategy for the Women Component Plan to ensure that at least 30% of funds and benefits flow to women from all development sectors.<sup>15</sup>

However, it was the Eleventh Plan that marked a departure from all the earlier Plans in that “an effort was made to engender the entire five year plan.” The Group of Feminist Economists, constituted in March 2007, “was the means to achieve this end.”<sup>16</sup> As noted in Planning Commission (2010), for the first time, women were recognized not just as equal citizens but also as agents of economic and social growth.

**The Report of the Steering Committee for Women’s Agency and Child Rights** for the Twelfth Plan pointed out that for faster, more inclusive and sustainable growth, women must become partners in the process of development and for this, all National policies and programmes must be engendered. “....accurate accounting” of the contribution of women to India’s economy is a “key step in the process of engendering the country’s macro-economic policy framework.” However, this remains a challenge. “Gender sensitivities in public finance and monetary, trade and fiscal policies also need to be enhanced.”<sup>17</sup> Existing laws should be implemented and enforced and made more gender just where needed and new legislations enacted where gaps exist. The Report refers to the declining child sex ratio as “a silent

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<sup>13</sup> Planning Commission. *Ninth Five Year Plan*. New Delhi: Government of India. Chapter 1 para 1.2 and 1.6.

<sup>14</sup> *ibid.* Chapter 1 para 1.34.

<sup>15</sup> Planning Commission. *Tenth Five Year Plan*. New Delhi: Government of India. Volume 2. p. 21.

<sup>16</sup> Planning Commission (2010). *Engendering Public Policy*, April. p. (iii). Available at:

[http://planningcommission.gov.in/reports/genrep/rep\\_engpub.pdf](http://planningcommission.gov.in/reports/genrep/rep_engpub.pdf).

<sup>17</sup> Ministry of Women & Child Development. *Report of the Working Group on Child Rights for the Twelfth Five Year Plan (2012-2017)*. New Delhi: Government of India. p. 27.

demographic disaster in the making”, and identifies seven goals for the Twelfth Plan. These can be seen in Box 1.5 below.

The Twelfth Plan aimed to end “gender based inequities, discrimination and violence” as an “overriding priority.”<sup>18</sup> It stated that “high priority will be given to women and children from the poorest communities, from the most deprived socio-religious communities, such as Scheduled Castes, Scheduled Tribes, particularly vulnerable tribal communities, de-notified and nomadic groups, religious minorities, other backward classes, migrants, those living in inaccessible or scattered hamlets, those living in insecure environments and the urban poor, among others.”

**Box 1.5: Goals for Women’s Agency and Empowerment**

- i) Creating greater ‘freedom’ and ‘choice’ for women by generating awareness and creating institutional mechanisms to help women and men question prevalent “patriarchal” beliefs that are detrimental to women’s empowerment.
- ii) Improving health and education indicators for women like maternal mortality, infant mortality, nutrition levels, enrolment and retention in primary, secondary and higher education.
- iii) Ending the incidence of violence against girls and women and providing quality care services to the victims.
- iv) Improving employability of women, work participation rates especially in the organised sector and increased ownership of assets and control over resources.
- v) Increasing women’s access to public services and programmes through establishing and strengthening convergence mechanisms at multiple levels, creation of physical infrastructure for women and improving the capacity of women’s organizations and collectives.
- vi) Ensuring that the specific concerns of disadvantaged women including single women are addressed.
- vii) Developing strategies for dealing with the impact of economic reforms and progressive globalization/ liberalization of economy on the conditions of women and children.

Source: Report of the Steering Committee for Women’s Agency and Child Rights

While drawing attention to the overall progress of women in many dimensions,<sup>19</sup> it was cognisant of the fact that large gaps still remain due to the sharp disparities in opportunities

<sup>18</sup> Planning Commission. *Twelfth Five Year Plan*. New Delhi: Government of India. Vol. 3. p.164.

<sup>19</sup> *ibid.* p.166.

available to women and men. It expressed serious concerns about the deteriorating child sex ratio. It specifically referred to the need for inclusion of vulnerable women such as those belonging to the scheduled castes, scheduled tribes, minorities, single women and widows, elderly women, differently abled women, migrant women, trafficked women, women in prison and women in disturbed areas.

It sought to address seven key elements for Gender Equity. These are economic empowerment; social and physical infrastructure; enabling legislations; women's participation in governance; inclusiveness of all categories of vulnerable women; engendering national policies/programmes; and mainstreaming gender through gender budgeting.

**Children and Five Year Plans:** While the concern for health, nutrition and education of children has been apparent from the First Plan onwards, a clear shift from welfare to the development approach was evident from the Fifth Plan. The Integrated Child Development Scheme was introduced in 1975. Addressing the needs of working children was a major concern in the Sixth Plan. Special focus on the needs of the girl child led to adoption of the National Plan of Action for the Girl Child. This has remained a concern with the alarming worsening of the sex-ratio in many parts of the country. From the Tenth Plan onwards, the emphasis was on a rights-based approach. The Eleventh Plan took several significant initiatives with regard to child rights, such as, the setting up of the National Commission for Protection of Child Rights (NCPCR) in 2007 as an independent statutory commission, with similar commissions envisaged at State level. Since then, several States have set-up State Commissions. Strengthening and empowering these SCPCRs, with support from NCPCR remains an issue that needs to be addressed.

**The Twelfth Plan underlines the need to address the special needs of children of vulnerable communities with multiple deprivations.** It expresses concern that vulnerabilities such as poverty, exclusion, gender discrimination compound each other and their impact is often inter-generational and notes that children living in insecure environments experience denial or disruption of access to health, childcare, education and other basic services face greater exposure and vulnerability to violence. It emphasizes the vulnerability of children of urban poor communities residing in unregistered/unrecognized slums or settlements as well as that children,

living on or off the streets are extremely vulnerable to abuse, violence and exploitation, including sexual abuse and are vulnerable to substance abuse.

The strategy for child development in the Twelfth Plan commits to build on the achievements of Eleventh Plan and see the fulfillment of ‘child rights’ as a sensitive lead indicator of national development, at national, state, district and local levels, which should be reflected in the monitorable targets for the Twelfth Plan. This is expected to provide an overarching framework to which concerned ministries/departments that impact the lives of children will be committed and to which policies of concerned child specific and child related sectoral ministries would be aligned. The Programme Implementation Plans of different flagship programmes are also required to reflect child related outcomes and concomitant resources. These commitments will also be reflected in the Results Framework Documents and Five Year Strategic Plans of concerned ministries and regularly reviewed. The Plan also underlines the need for the development of a comprehensive Children’s Code, harmonizing and updating different legal provisions for children.<sup>20</sup> For binding commitments of different sectors to multisectoral action, it committed to finalizing a matrix of the indicative contribution that can be made by different sectors for fulfilling children’s rights, based on the updated National Policy and National Plan of Action for Children, in consultation with child specific and child related sectors and states.

The Twelfth Plan further emphasises the need for uniformity in the definition of “children” and creating more effective mechanisms for child sensitive and child friendly jurisprudence. It also suggests:

- Amendment in the Child Labour (Prohibition and Regulation) Act in line with the RTE and abolish all forms of child labour and removing the distinction between hazardous and non-hazardous categories of work for children under 14 years, as children cannot be both working and in school at the same time.
- Transition measures and support for families, enhanced opportunities for skill development, vocational training and rehabilitation for children.
- Making the setting up of State Commissions for Protection of Child Rights (SCPCR) for all State Governments mandatory and strengthening the mentoring role of NCPCR and

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<sup>20</sup> *ibid.* p. 187.

giving the mandate to SCPCRs to adopt normative guidelines for their constitution and functioning.

- Amending the Immoral Trafficking Prevention Act (ITPA) to clearly define trafficking and sexual exploitation and recognizing different aspects of the same.
- Taking forward the Protection of Children from Sexual Offences (POSCO) Act 2012 passed in Parliament.

Ensuring that the draft National Food Security Bill protects children's rights and does not dilute earlier provisions for all six services of ICDS mandated by earlier Supreme Court directive and also provides support for maternity protection.<sup>21</sup>

Key strategies for promoting children's rights in the Twelfth Plan are listed in Box 1.6.

**Box 1.6: Strategies for Promoting Children's Rights in the Twelfth Plan**

The key strategies for promoting children's rights enshrined in the Twelfth Plan include:

- Harmonisation of different child related legislative provisions and ensuring child-sensitive jurisprudence.
- Updation of the National Policy for Children in harmony with the Twelfth Plan.
- Development and implementation of national/State/District Plans of Action for Children, with monitorable outcomes, based on the updated policy, building on the Twelfth Plan.
- Focused interventions to improve the Child Sex Ratio, within an overall National Strategy for Care and Protection of the Girl Child.
- Designing a strategic approach to respond holistically to the emerging needs of children of excluded socio religious community groups such as SC, ST, particularly vulnerable tribal groups, Minorities, other disadvantaged communities, including urban poor communities.

### **1.5 Legal Framework for Protection of Women and Children**

It is important to mention here that an elaborate legal framework has been created to put into effect the national and international commitments on the issues related to the protection of children and women. Important among these are: Immoral Traffic Prevention Act, 1956; the Child Labour (Prohibition and Regulation) Act, 1986; the Bonded Labour System (Abolition) Act 1979; the Prohibition of Child Marriage Act, 2006; the Pre-conception & Pre-natal

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<sup>21</sup> *ibid.* p. 188.

Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 and its amendment of 2002; the Juvenile Justice (Care and Protection of Children) Act, 2000, amended in 2006 and 2010; the Persons With Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995; the Right of Children to Free and Compulsory Education Act, 2009; the Protection of Children from Sexual Offences Act, 2012; the Dowry Prohibition Act, 1961 (Amended in 1986); the Immoral Traffic Prevention Act, 1986; Indecent Representation of Women (Prohibition) Act, 1986; The Equal Remuneration Act, 1976; Protection of Women from Domestic Violence Act, 2005; Commission of Sati (Prevention) Act, 1987; the Sexual Harassment of Women at the Workplace (Prevention, Prohibition and Redressal) Act, 2013. The effective implementation of these laws requires the ability to monitor and regular flow of information and data on various aspects of the problems to be addressed is crucial for that.

### **1.6 The Significance of Data Issues**

As can be seen from the overview provided above, several critical areas of concern pertaining to the situation of women and children have been identified in national and international policy documents. Additionally, a large number of enabling laws, policies, plans and programmes have been adopted over the years to address the situations facing women and children. Yet, they continue to face multiple forms of vulnerability, exploitation and discrimination. Some of these pervade all social and economic groups while others are specific to certain communities, identity groups, regions or life spheres. These situations reflect the fact that the outcomes of laws, policies, plans and programmes deviate considerably from the commitments made.

Data collected by the official data collection agencies provides the basis for making informed policy choices, plans and budgetary allocations for programmes and schemes to enable achievement of equitable and sustainable development. Data is a potent tool for capturing disparities and inequalities between men and women, social groups and spatial locations. Data gaps and inaccuracies distort the understanding of the nature and extent of problems and vulnerabilities faced by children and women. This, in turn, can lead to flawed policy decisions and weak implementation. To the extent data is able to capture disparities, it provides the basis for determining whether programmes and schemes are effective in achieving inclusive growth. In other words:

“Without high-quality data providing the right information on the right things at the right time; designing, monitoring and evaluating effective policies becomes almost impossible.”<sup>22</sup>

Hence, availability of appropriate, reliable and timely data flow is critical to the processes of informed decision-making, as also determining policy effectiveness and timely corrective interventions in case of need.

The need for timely, reliable and relevant data for policy making and implementation has been emphasized by various agencies of government too and some commitments have also been made in this direction. The National Policy for the Empowerment of Women, 2001, for instance, states that “Collection of gender disaggregated data by all primary data collecting agencies of the Central and State Governments as well as Research and Academic Institutions in the Public and Private Sectors will be undertaken. Data and information gaps in vital areas reflecting the status of women will be sought to be filled in by these immediately” It also commits that “All Ministries/Corporations/Banks and financial institutions etc will be advised to collect, collate, disseminate and maintain/publish data related to programmes and benefits on a gender disaggregated basis.” This, it admits, “will help in meaningful planning and evaluation of policies.” The National Policy for Children, 2013, too, underlines that its implementation will be supported by a comprehensive and reliable knowledge base on all aspects of the status and condition of children. Establishing such a knowledge base would be enabled through child focused research and documentation, both quantitative as well as qualitative. A continuous process of indicator-based child impact assessment and evaluation will be developed, and assessment and evaluation will be carried out on the situation of children in the country, which will inform policies and programmes for children.

The Report of the Working Group on Child Rights for the 12<sup>th</sup> Five Year Plan (2012-2017) also underlined the need for data to address the challenges highlighted by the Eleventh Plan. Insufficient data and inadequate documentation were seen as problem areas. It emphasized that data related to children continues to be piecemeal and lack of data related to the vulnerabilities of

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<sup>22</sup> A World that Counts, <http://www.undatarevolution.org/wp-content/uploads/2014/12/A-World-That-Counts2.pdf> p. 2.

these children makes it difficult to measure the intensity of the problems and provide appropriate services.<sup>23</sup>

Keeping in view the national and international policy commitments discussed above, the remaining sections of this Paper try to highlight the indicators, data availability and gaps pertaining to different aspects of vulnerability, survival, protection, development and participation of children and women.

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<sup>23</sup> Planning Commission. *Twelfth Five Year Plan*. op.cit., Volume 3, p. 48.

## **Situations of Vulnerability, Exploitation and Discrimination experienced by Children and Women**

### **2.1 A Brief Overview**

Children and women in India are often entrapped in situations of vulnerability, exploitation and discrimination. Many of these situations are on account of the immediate circumstances that surround them; most of these are embedded in the prevailing social and cultural context, and reflect the political and economic developments too. Women in India face numerous challenges throughout the life cycle.<sup>24</sup> Discrimination against the girl child takes place even before she is born due to the increasing practice of pre-natal sex selection and female foeticide. In many parts of India, the girl child faces the risk of infanticide. Those who survive, face the challenge of discrimination during the initial stages of growth in many ways, such as in access to food and nutrition as well as immunisation and health. At the pre-adolescent and adolescent age, discrimination in terms of access to education reflects in low enrolment and high dropout rate besides the pressure for sibling care and other domestic chores and drudgery. She is vulnerable to child marriage and early pregnancy, abuse, violence and trafficking. In addition to persistence of many of these problems, married women often face new vulnerabilities on account of pressures for repeated child bearing, frequent and unhygienic abortions, child birth under unfavourable conditions, high maternal mortality, etc. On the economic front too, women face a number of disadvantages—such as lack of assets, access to finance and other income generating facilities, drudgery, unpaid and unrecognised work, etc. On reaching old age, an entire range of problems confront many women, which include insecurities related to health, finance, resources, destitution, survival, marital status, emotional and psychological well-being and dependence.

Admitting that “women in India have suffered in various aspects of life and physical health, mental well-being, bodily integrity and safety, social relations, political empowerment, education

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<sup>24</sup> Mehta, Aasha Kapur and Krishnan, Manjula (eds.) (2007). *Report of the Workshop on Gender Budgeting for Gender Budgeting Cells*. MWCD and IIPA p. 1.

and knowledge, domestic work and non-market care, paid work and other projects, shelter and environment, mobility, leisure activities, time autonomy, respect, religion, and if we may add, self-esteem/self-autonomy,” the **Verma Committee** notes that “Indian women have substantially suffered on most of these counts as a consequence of which the de-facto equality guaranteed by the Constitution has not become a reality for them.”<sup>25</sup> Further, vulnerabilities emanating from class/ caste/ community and poverty lead to a subculture of oppression.<sup>26</sup>

Women in difficult circumstances have been identified as women in extreme poverty, destitute women, women in conflict situations, women affected by natural calamities, women in less developed regions, the disabled, widows, elderly women, single women in difficult circumstances, women heading households, those displaced from employment, migrants, women who are victims of marital violence, deserted women and commercial sex workers etc in the National Policy for Empowerment of Women.<sup>27</sup> The Twelfth Plan also states that vulnerable women include those belonging to the Scheduled Castes, Scheduled Tribes and minorities, single women, differently abled women, migrant and trafficked women.<sup>28</sup> It draws attention to the “overarching fact of vulnerability” suffered by women “from every state and every community, dalits, adivasis, minorities” that is created by “the prevalence of alcoholism which eats its way into precious family income, leads to poverty, malnutrition and domestic violence.”<sup>29</sup> It stresses the serious fallout of the “intergenerational cycle of multiple deprivation and violence faced by girls and women (that) is epitomized by the adverse child sex ratio in children under 6 years of age.”<sup>30</sup> It also highlights the fact that “vulnerabilities such as poverty, exclusion, gender discrimination compound each other and their impact is often inter-generational.”<sup>31</sup>

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<sup>25</sup> Government of India. Ministry of Home Affairs (2012). Justice J.S. Verma Committee Report on Amendments to Criminal Laws Relating to Safety & Security of Women. New Delhi. p. 10.

<sup>26</sup> *ibid.* p. 44.

<sup>27</sup> Planning Commission. *Report of the Steering Committee on Women’s Agency and Child Rights for the Twelfth Five Year Plan (2012-2017)*. New Delhi: Government of India.

<sup>28</sup> Planning Commission. *Twelfth Five Year Plan*, *op.cit.*, p. 165.

<sup>29</sup> *ibid.* pp. 173-174.

<sup>30</sup> *ibid.* p. 164.

<sup>31</sup> *ibid.* p. 184.

The Twelfth Plan identifies children in very difficult circumstances or vulnerable children as those in poor households, denied educational opportunities and forced into labour, abused/trafficked children, children on the streets, children affected by substance abuse, by armed conflict/civil unrest/natural calamity etc. Acknowledging that wide disparities in social indicators relevant to children and their communities continue to exist across and within states, districts and diverse socio religious communities, it expresses concern that vulnerabilities such as poverty, exclusion, gender discrimination compound each other and their impact is often inter-generational. Further, it notes that children living in insecure environments experience denial or disruption of access to health, childcare, education and other basic services and face greater exposure and vulnerability to violence. It is estimated that around 172 million or 40 per cent of India's children are experiencing difficult circumstances or are vulnerable.<sup>32</sup>

Both Integrated Child Protection Scheme (ICPS) and the Juvenile Justice Act, 2000 define vulnerable children as (a) children in need of care and protection and (b) children in conflict with law (See Box 2.1). The ICPS also recognises a third category of vulnerable children, viz., children in contact with law. ICPS also outlines that vulnerable children groups include but are not limited to the following: "children of potentially vulnerable families and families at risk, children of socially excluded groups like migrant families, families living in extreme poverty, scheduled castes, scheduled tribes and other backward classes, families subjected to or affected by discrimination, minorities, children infected and/or affected by HIV/AIDS, orphans, child drug abusers, children of substance abusers, child beggars, trafficked or sexually exploited children, children of prisoners, and street and working children."

"Children, living on or off the streets are often "invisible", denied an identity and are extremely vulnerable to abuse, violence and exploitation, including sexual abuse. Increased vulnerability to substance abuse is another issue of concern in such conditions. Despite various policy provisions, these children are not only denied a protective environment but also subjected to different forms of abuse, including in occupations, such as, domestic work. This is especially so in case of girl children. All children should receive basic services, regardless of their location

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<sup>32</sup> Planning Commission. *Report of the Steering Committee on Women's Agency and Child Rights for the Twelfth Five Year Plan (2012-2017)*. New Delhi: Government of India.

and the status of their settlements. However, this is far from the reality.”<sup>33</sup> We have some data but only on who have been provided benefits and not about those who have remained excluded.

The State of the World’s Children highlights the fact that “millions of children make their way through life impoverished, abandoned, uneducated, malnourished, discriminated against, neglected and vulnerable. For them, life is a daily struggle to survive. Whether they live in urban centres or rural outposts, they risk missing out on their childhood – excluded from essential services such as hospitals and schools, lacking the protection of family and community, often at risk of exploitation and abuse. For these children, childhood as a time to grow, learn, play and feel safe is, in effect, meaningless.”<sup>34</sup>

### **Box 2.1: Vulnerable Children**

#### **a) Child in need of Care and Protection**

Child in need of care and protection is defined as one who:

- Does not have a home or shelter and no means to obtain such an abode.
- Resides with a person(s) who has threatened to harm them and is likely to carry out that threat, harmed other children and hence is likely to kill, abuse or neglect the child.
- Is mentally or physically handicapped, or has an illness, terminal or incurable disease and has no one to provide and care for him/her.
- Has a parent or guardian deemed unfit or unable to take care of the child.
- Is an orphan, has no family to take care of him/her, or is a runaway or missing child whose parents cannot be located after a reasonable search period.
- Is being or is likely to be sexually, mentally, emotionally or physically abused, tortured or exploited.
- Is being trafficked or abusing drug substances.
- Is being abused for unthinkable gains or illegal activities.
- Is a victim of arm conflict, civil unrest or a natural disaster.

#### **b) Child in Conflict with Law**

Child in conflict with law is defined as a juvenile who has allegedly committed a crime under the Indian Penal Code or other laws.

#### **c) Child in Contact with Law**

Child in contact with law is defined as a child who is victim of or witness to crimes.

UNICEF views vulnerable children as those who are abused, exploited, and neglected. It identifies the following groups as vulnerable: children subjected to violence, children in the

<sup>33</sup> Planning Commission. *Twelfth Five Year Plan*, op.cit.

<sup>34</sup> The United Nations Children’s Fund (2005). *The State of the World’s Children 2006*. New York. p. 1.

midst of armed conflict, children associated with armed groups, children affected by HIV/AIDS, children without birth registration, children engaged in labour, child in marriage, children in conflict with the law, children without parental care, children used for commercial sexual exploitation, female children subjected to genital mutilation / cutting, and trafficked children.

Data availability and gaps pertaining to the vulnerability of children and women in the context of poverty, hunger, malnutrition, child labour, bonded labour, child marriage, child trafficking, children in conflict with the law, old age, widowhood, being differently abled etc. are discussed in **each of** the sub-sections below while those pertaining to violence, health and education are discussed in subsequent sections of this paper.

## **2.2 Poverty, Hunger and Malnutrition: Data Sources and Data Gaps**

Children and women experience vulnerability, exploitation and discrimination for many reasons. However, poverty exacerbates that situation and in many cases leads to it; being poor and a woman or being a girl or an older person in a poor household may increase vulnerability. In the poorest of all casual labour categories, it is women who are significantly worse-off.<sup>35</sup>

The numbers of men, women and children who suffer the multiple deprivations associated with poverty is massive. “Vulnerability to poverty and destitution is far greater in respect of women.”<sup>36</sup> Those in poverty are disproportionately represented among certain occupational groups, social classes and geographical spaces.<sup>37</sup>

Poverty is generally estimated on the basis of the consumption data collected through household sample surveys by the National Sample Survey Organisation (NSSO).<sup>38</sup> Detailed data on consumer expenditure from nationally representative samples are available from the early 1970s to the present at intervals of five years, with (eight) large sample consumer surveys conducted

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<sup>35</sup> Bhalla, Shiela, Karan, Anup K., and Shobha T. (2004). *Rural Casual Labourers, Wages and Poverty: 1983 to 1999-2000*. CPRC-IIPA Working Paper 14, IIPA, New Delhi.

<sup>36</sup> *ibid.* p. 50.

<sup>37</sup> Mehta, Aasha Kapur, Shepherd, Andrew, Bhide, Shashanka, Shah, Amita and Kumar, Anand (2011). *India Chronic Poverty Report*, CPRC and IIPA, New Delhi.

<sup>38</sup> The NSSO of the Ministry of Programme Implementation and Statistics conducts surveys on various socioeconomic issues annually. The 61st round of the NSSO, conducted between July 2004 and June 2005, collected data on household consumer expenditure on a large sample basis and was the seventh quinquennial survey on the subject. It covered a sample of 79,298 rural and 45,346 urban households in all states and union territories of India.

since 1973-74. Official poverty estimates, patterns and trends are determined on the basis of analysis of data on household consumption expenditure, against which poverty lines are juxtaposed to separate the poor from the non-poor and to determine the extent of poverty. Since the household is the sampling unit in household consumption expenditure surveys, sex-disaggregated household consumption data is not available, as gender specific details are not captured. Hence, poverty head count ratio is not available separately for men and women or boys and girls or older men and women. Alternatives such as pilot surveys that canvas questions to both men and women must be explored, in order to understand intra-household differentials in well-being.

Further, poverty head count ratios for SCs, STs and OBCs are not estimated for all the States as the sampling design adopted for household consumer expenditure survey does not ensure representative samples across social groups for all States.<sup>39</sup>

Longitudinal tracking of poverty based on panel data is important since poverty is dynamic and not static. India has no national panel data for tracking poverty. The only national rural panel dataset shows that many of those who are poor are “stuck” in poverty, others escape from it and many of the non-poor enter poverty. Most of the factors that drive and maintain people in poverty have gender, age and social group related dimensions that need to be addressed. **To bridge this data gap, panel data must be collected in order to longitudinally track households (and preferably individuals within the household) to identify and understand the factors and processes that result in some people entering poverty or getting stuck in it while others are able to move out of it.**

Hunger is among the worst forms of severe poverty and unequal intra-household distribution leads to gender, age and socially determined variations in consumption. Since women are the often the last to eat in many Indian households, the estimates of hunger among women are likely to be higher than for the household. NSSO gathers data based on self-reporting of hunger by asking households about availability of two square meals a day. Since intra-household variations are not captured, the data is not disaggregated by sex or age.

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<sup>39</sup> [http://planningcommission.gov.in/reports/genrep/rep\\_pov1303.pdf](http://planningcommission.gov.in/reports/genrep/rep_pov1303.pdf).

India is one of the four countries with the highest prevalence of underweight in children under five. In 2005–06, about 44 percent of Indian children under age five were underweight and 48 per cent were stunted.<sup>40</sup> Children and adults are vulnerable to malnutrition because of “low dietary intake, infectious diseases, lack of appropriate care, and inequitable distribution of food within the household.” It can lead to “reduced productivity, slow recovery from illnesses, increased susceptibility to infections” and in the case of women additionally affect the health of her children.<sup>41</sup>

High prevalence of nutritional deficiency among women is evident from NFHS 3 (2005-06) estimates - 33 percent of ever-married women between 15 to 49 years of age (and 28.1 percent of men) have a Body Mass Index (BMI) less than 18.5 or are undernourished. More than half of the ever-married women in this age group (56.2 percent) and almost one-quarter of men (24.3 percent) are anaemic. Pregnant women are more likely to be anaemic (57.9 percent) than non-pregnant women (55 percent).<sup>42</sup> The percentage of children under five years of age classified as malnourished shows that malnourishment levels were highest among tribal children as well as among the poorest. Malnourishment among children was higher in rural areas than urban areas. However the data pertains to 2005-06. Most children in India (70 percent) have anaemia, caused primarily by poor nutrition.<sup>43</sup>

Low birth weight (LBW) among newborn babies has serious adverse implications, including stunting and reduced intellectual development.<sup>44</sup> “Maternal deprivation adversely affects the

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<sup>40</sup>see <http://www.ifpri.org/publication/2010-global-hunger-index-facts-and-findings-asia>.

<sup>41</sup>Government of India. Ministry of Health and Family Welfare and IIPS (2007). *National Family Health Survey (NFHS-3)* 2005-06, Vol. I, p. 267.

<sup>42</sup>Arnold, Fred, Parasuraman, Sulabha, Arokiasamy, P., and Kothari, Monica (2009). *Nutrition in India. National Family Health Survey (NFHS-3)*, India, 2005-06. Government of India. Ministry of Health and Family Welfare and IIPS.

<sup>43</sup> *ibid.* pp. 267-269.

<sup>44</sup>Swaminathan, M. S. (2004). *Technological Change and Food Production: Implications for Vulnerable Sections*. CPCR-IIPA Working Paper 20. New Delhi: Chronic Poverty Research Centre, University of Manchester and Indian Institute of Public Administration; Mehta, Aasha Kapur and Shepherd, A. (2004). *Chronic Poverty in India: Overview of Key Emerging Issues*. CPCR-IIPA Working Paper 24. New Delhi: Chronic Poverty Research Centre, University of Manchester and Indian Institute of Public Administration.

health of the fetus, which in turn leads to long-term health risks that extend not just into childhood but into adulthood as well.”<sup>45</sup>

**Data pertaining to malnutrition is available each month through the ICDS for households that choose to take the benefit of the scheme. However data from the NFHS and ICDS diverge significantly and there is a large literature questioning the reliability and accuracy of the data from administrative records given the poor nutritional indicators for women and children from independent evaluations.** Early identification of malnutrition and immediate steps for rectification are critical for the mental and physical development of the child. Hence, regular monitoring and evaluation of administratively collected data as well as motivation and behaviour change are important for achievement of nutritional outcomes.

There is a spatial or geographical dimension to poverty and inequality as multi-dimensional poverty is concentrated in certain districts of the country. However estimates of poverty are not available at the district level. **A large proportion of those in poverty are the ‘working poor,’ for whom the state has not been able to meet its requirement to secure the right to an adequate means of livelihood. Accurate and disaggregated data at below district level is critical for addressing these issues.**

**Socio-economic Caste Census (SECC) 2011** has collected information for individuals, i.e., whether they are male/ female, marital status, occupation/activity, main source of income, education level, disability and religion, caste or tribe. It has also collected household level information regarding amenities and assets owned. Identification of households that are below the poverty line based on the SECC 2011 is to be based on criteria that will enable automatic exclusion, automatic inclusion followed by scoring based on the following 7 criteria:

- i) households with only one room, kucha walls and kucha roof
- ii) no adult member between the ages of 16 and 59
- iii) female headed households with no adult male member between 16 and 59
- iv) households with a disabled member and no able bodied adult member
- v) SC/ST households
- vi) households with no literate adult above 25 years and

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<sup>45</sup>Osmani, Siddiq and Sen, Amartya (2003). “The hidden penalties of gender inequality: fetal origins of ill-health.” *Economics & Human Biology*, Vol.1, No. 1. January.

vii) landless households deriving a major part of their income from manual casual labour.

Socio Economic Caste Census 2011 provides valuable data with regard to whether the household belongs to a Primitive Tribal Group, whether any member of the household is a legally released bonded labourer or is a manual scavenger. Information has also been collected with regard to the actual work done by the individual as well as the main source of household income specifically including manual casual labour, foraging and rag picking as well as begging. All of these are related to vulnerability to poverty and vulnerability on account of poverty.

Census 2011 is conducted by the Registrar General and Census Commissioner of India under the Census Act of India 1948 under the aegis of the Ministry of Home. Two schedules were canvassed for the collection of data, i.e., the House Listing and Housing schedule and the Household schedule. The house listing and housing schedule provides information regarding the type of house, males and females in the household, SC, ST or other category and amenities. The household schedule provides information about all the members of the household, their gender, relation to head of family, date & place of birth, marital status, age at marriage, religion, SC/ST status, disability if any, present and permanent address, duration of stay at present address, migration, literacy, educational qualification, work status, main worker or marginal worker, occupation, children born, children surviving. The data collected on the basis of the House Listing and Housing schedule includes information regarding housing, household amenities and assets for the population, SCs, STs and female headed households. The data collected on the basis of the Household schedule presents Population enumeration data comprising Primary Census Abstract regarding total population, scheduled caste and scheduled tribe population, literates, workers, non-workers and categories of economic activity by sex and residence, slums and houseless population; age data; disability and workers.

Inferences can be drawn regarding poverty, deprivation and quality of life of households based on information provided in Houselisting and Housing data in Census 2011. The information is available at the level of the district, sub-district and even for the village level. Information is provided with regard to construction material used for the roof, wall, floor; household congestion; access to amenities like drinking water, availability of a toilet and bathroom in the household; type of fuel used for cooking; whether the household has a separate kitchen; lighting

and electricity; assets such as a bicycle, car and telephone; banking facility etc. Each of these has gender dimensions. For instance, lack of lighting and electricity leads to safety and security concerns for women. Similarly, lack of access to clean fuels for cooking has significant ramifications for women and girls. Census 2011 data shows that 65.8% households depend on firewood, crop residue and cowdung cake for this cooking. Women and girls collect, process and use these fuels in deprived households. In addition to the time and drudgery associated with these tasks, there are risks of accidents on slippery terrain, pain from carrying head loads and skin, respiratory and other infections in processing and using them. Hence data regarding access to clean cooking fuels is extremely important for policy purposes.

**Inferences regarding vulnerability to poverty and persistence of it can also be drawn through cross tabulation of age-wise female population that is illiterate and disabled or illiterate and houseless. Hence presentation of data in this way will be very useful for policy.**

Census 2011 marks a milestone as the National Population Register (NPR) is also being prepared along with it. The National Population Register (NPR) is a Register of usual residents of the country. It will provide a comprehensive identity database of every usual resident. A usual resident is defined as a person who has resided in a local area for the past 6 months or more or a person who intends to reside in that area for the next 6 months or more. The database would contain demographic as well as biometric particulars.

During the first phase of Census 2011, enumerators visited every household and canvassed a questionnaire pertaining to demographic details for each member of the household. In addition to name of the person, relationship to the head of household, names of parents and spouse, sex, date and place of birth, present and permanent address, marital status, nationality, etc information was also collected regarding occupation and educational qualifications. Subsequently, biometric details are collected at camps and identified Centres.

### **2.3 Bonded Labour and Child labour: Data Issues**

A large number of children are forced to work to contribute to families or to sustain themselves. Many children have to work either because they have been pledged by their parents for paltry sums of money or have to work to pay off the inherited debts of their parents. The Bonded Labor System (Abolition) Act outlaws bonded labor in India and provides for district-level vigilance committees to investigate allegations of bonded labor and release anyone found in bondage. The Act also provides for rehabilitation assistance payments for released bonded laborers. Persons found using bonded labor may be fined and face imprisonment. Some data is available on bonded labour identified/released and rehabilitated as reported by respective State Governments under a Centrally Sponsored Scheme for assistance in this regard. 2,94,155 bonded labourers and identified and released and 2,74,193 rehabilitated in 18 States with central assistance of Rs. 7,580.62 lakh up to 30<sup>th</sup> March 2012 according to data published in Annual Report 2012-13 of Ministry of Labour and Employment. However, many persons and children continue to suffer as bonded labour though their number is not available because of the denial by those employing them as well as those sending them though some estimates have been made in specific contexts by non-governmental organizations working for providing relief to them. **Pilot surveys could be undertaken as a first step to understand the extent and nature of the problem so that informed decisions can be taken to estimate and address the problem of bonded labour.**

Children also work as part of family labour in agriculture and in home-based work along with their parents for long hours. They form the largest category of children who are out-of-school and remain vulnerable to various forms of exploitation in future. However, a very large percentage of children who are in the work-force escape the cover of government policy and programs meant for child labour even when they do either paid or unpaid work in agriculture, factories, workshops, establishments, mines and in the service sector such as domestic labour. Apart from children who are employed for wages or serve in bondage as domestic help, a large number of children, especially girls, work in their own houses, taking care of younger siblings, cooking, cleaning and other such household activities without being recognized as working, but are not sent to school as a consequence, thereby making them vulnerable to being exploited as child labour eventually.

Many children live and work on the streets, pavements, bus stands and railway stations. They work as rag-pickers, newspaper-vendors, beggars, etc. and do not have family support to fall

back on and for that reason are extremely vulnerable to exploitation, including sometimes by the police, which is expected to provide them protection. When they work for employers, street children without family support are at the mercy of their employers and are also more likely to be exploited by them.

A large number of rural households in many parts of India resort to distress seasonal migration leaving their homes and villages for several months every year in search of livelihoods. Often children of these families have to drop out of school, and end up joining their parents at worksites. Migrant populations overwhelmingly belong to Scheduled Caste, Scheduled Tribes, and Other Backward Castes. They are mostly landless and land poor, lack assets, skills or education. Migrant labour is found overwhelmingly in some states - Andhra Pradesh, Rajasthan, Karnataka, Gujarat, Tamil Nadu and Maharashtra, where many industrial and agro-industrial sectors like brick-making, salt manufacture, sugar cane harvesting, stone quarrying, construction, fisheries, plantations, rice mills, etc. rely on migrant labour. In many cases, run away and trafficked children also end up as migrant child labour.

Despite there being legislative protection against child labour in hazardous activities and occupations, many children are found to work in these situations. In non-hazardous areas, child labour remains rampant and legally permitted. **While data on child labour is available from various sources such as the Census, NSSO, NFHS, various surveys and studies, there are large differences in estimates of child labour from different sources.** The Census estimated that 10.75 million children aged 5 to 14 years were working in 1971, 13.64 million in 1981, 11.29 million in 1991 and 12.67 million in 2001<sup>46</sup> Census 2011 shows that 10.13 million children in age group 5 to 14 years worked as main or marginal workers and 1.59 million were seeking work. The Ministry of Labour notes that in 2001, of the 12.67 million child workers, approximately 12 lakh children were working in the hazardous occupations/processes, which are covered under the Child Labour (Prohibition & Regulation) Act i.e. 18 occupations and 65 processes.<sup>47</sup> National Sample Survey Organization (NSSO) estimated that 90.75 lakh children were working in 2004-05 and this declined to 49.84 lakh in the 66<sup>th</sup> Round (2009-10). As per NFHS-3 data, around 28 million children in the age-group 5-14 or about 11.8 per cent children

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<sup>46</sup> see <http://labour.gov.in/upload/uploadfiles/files/Divisions/childlabour/Census1971to2001.pdf>.

<sup>47</sup> see <http://labour.gov.in/content/division/about-child-labour.php>

are engaged in work. In comparison, according to the Census 2001, only five per cent children were estimated to be working. The definitions of work differ between different sources. For instance, the Census defines work as participation in any economically productive activity with or without compensation, wages or profit during the year preceding the enumeration. The contribution could be as a main worker (more than 6 months) or marginal worker (less than 6 months). The last one year is the reference period, even if a child was engaged for one day of economic activity, which included work for family business and farm. The Census definition of work does not include any household chores. In comparison, the NFHS 3 estimate of 28 million children in the age-group 5-14 engaged in work is based on the UNICEF definition of child labour.<sup>48</sup> NSSO on the other hand defines work based on activity codes and usual status (reference period of one year), current weekly status (reference period of one week) and current daily status (based on engagement on each day during the reference week). This is discussed in greater detail in the section on work.

The National Commission for Enterprises in the Unorganised Sector (NCEUS) expanded the definition of child labour in its Report on the Conditions of Work and Promotion of Livelihoods in the Unorganised Sector. “The Commission does not consider it appropriate to view child labour purely from a definitional point of view of who is a worker and who is not. This is because there is a significant proportion of children who are out of school and are not reported as child labour...”<sup>49</sup>. Hence, the report recognizes that even if they are not reported as workers, chances are that they are engaged in some activity by way of helping their parents or in activities that are not perceived as income earning by the parents.

**A major problem with the decennial Census data is that it is conducted once in ten years.** For instance, in the years since Census 2001, the number of listed hazardous processes in the schedule to the child labour law has gone up from 18 to 65, and occupations have gone up from 7 to 18. The Government has recently prohibited employment of children in two more occupations

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<sup>48</sup> According to UNICEF child labour occurs when a child aged 5–11 years does at least 1 hour of economic work or 28 hours of domestic work per week and aged 12–14 years does at least 14 hours of economic work or 28 hours of domestic work per week.

<sup>49</sup> National Commission for Enterprises in the Unorganised Sector (2007). *Report on Conditions of Work and Promotion of Livelihoods in the Unorganised Sector*. New Delhi. p. 101.

viz. (i) circus; and (ii) caring of elephants by way of amendment in the Child Labour (Prohibition & Regulation) Act, 1986. All this is not accounted for in the Census figures.

The problem is further compounded when one seeks to look at the state of children in specific types of activities. While the policies and programmes which seek to address the problem and offer support towards rehabilitation are expected to be sincerely implemented, a good part of implementation itself is conditioned on the availability of information about the problems. Monitoring and evaluation of implementation too is dependent on information that is not readily available. This makes it difficult to effectively plan action and allocate resources for addressing the problem as also rectify the problems through implementation of existing policies and programmes.

It is a matter of serious concern that many children who have to labour, especially when lacking family support, become vulnerable to commercial sexual exploitation by their employers or others who are aware of their vulnerability. Factories, workshops, street corners, railway stations, bus stops and homes where children work often also become the sites of their sexual exploitation and abuse by employers, who work either as perpetrators or intermediaries. Children are also abused when indebted parents give them in bondage to work for the money-lenders, or sell them to repay their loan. Many of these children, away from their family, are susceptible to falling easy prey to traffickers, who act as procurers for city brothels, or sell them to employers as cheap or bonded labour. There is a network of criminals behind organized rackets of trafficking. But child abuse and exploitation in localized and isolated contexts are equally rampant because of the vulnerability of the family or community, making them silent witness or even participants in many cases of abuse and exploitation. Such children are exposed to not only physical threat to their health, danger of HIV/AIDS, sexually transmitted diseases but also psycho-social damage inflicted by commercial sexual exploitation. **In view of the seriousness of this problem and the long term ramifications of such exploitation and abuse on the future of the child, it is important to conduct an NSSO surveys on bonded labour, child labour and trafficking in women and children.**

## 2.4 Vulnerability of Differently-abled and Special Needs Children and Women: Data Concerns

The Twelfth Plan<sup>50</sup> draws attention to the double disadvantage suffered by differently-abled women. It also emphasizes the importance of prevention of childhood disability and need for early intervention, community based care and referral support through NRHM and ICDS. The joint ICDS\NRHM mother-child card could be a useful starting point with referral care linkages to the health system and with institutional support mechanisms such as District Rehabilitation Centres. The Plan also commits to engendering all programmes aimed at the differently-abled and provision of special rehabilitation services along with care provisions in existing MWCD run short stay homes and hostel facilities. Data on implementation of these commitments will therefore be needed.

Taking cognizance of the fact that women and girls with disabilities are subject to multiple discrimination, Article 6 of the Convention on the Rights of Persons with Disabilities and its Optional Protocol adopted on 13 December 2006 requires that States Parties recognize this and that they take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms; and take all appropriate measures to ensure the full development, advancement and empowerment of women. On the same lines Article 7 requires among other things that in all actions concerning children with disabilities, the best interests of the child shall be a primary consideration.

NSSO presents data on mental disability, visual, hearing, speech, locomotor, multiple and any other disability in its Report 485 on Disabled Persons in India in its 58<sup>th</sup> Round (2002). Census 2011 also provides data on disability in seeing, hearing, speech, movement, mental retardation, mental illness, other disability and multiple disabilities. **However, coverage, definition and accuracy of estimates are issues that have been debated.** There is a massive variation between disability estimates presented by the World Report on Disability 2011<sup>51</sup> (which estimates disability prevalence in India to be 24.9% in 2001) and those collected by the Census 2001, Census 2011 and NSSO for 2002, (which estimate prevalence of disability at only 2.1%, 2.2% and 1.8% of the population). One explanation for the difference between the estimates is that

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<sup>50</sup> Planning Commission. *Twelfth Five Year Plan*, op.cit., p. 194.

<sup>51</sup> WHO and World Bank, *World Report on Disability 2011*, Geneva: WHO Press. p. 273.

while WHO includes activity limitations and participation restrictions in addition to impairments, the Census and NSSO estimates are limited to impairments in seeing, hearing, speech, movement, mental retardation, mental illness, any other and multiple disability. **Additionally, accuracy of data that is collected depends on the extent to which the investigator is trained to capture the prevalence of disability and on whether or not respondents provide this information.**

Among other issues, the proposed Rights of Persons with Disabilities Bill introduced in Rajya Sabha seeks to broaden the ambit of disability from seven to 19 sub-categories. It divides the broad categories into various sub-categories, seeking to include as many types of disabilities as possible. It includes sickle cell disease, thalassemia and muscular dystrophy besides autism, spectrum disorder, blindness, cerebral palsy, chronic neurological conditions, mental illness and multiple disabilities.<sup>52</sup> **For instance, mental illness includes a wide range of situations such as autism on the one hand and cerebral palsy on the other. Clarity is also needed regarding the conditions that are included in multiple disability. Hence, questions are raised regarding accuracy of the data pertaining to disability as well as adequacy of State responses to it.**

## **2.5 Trafficking in Women and Children: Data needs**

The Twelfth Plan<sup>53</sup> draws attention to the fact that trafficking for commercial sexual exploitation is one of the worst forms of crimes against women and children as it exposes them to a life of humiliation and sexual abuse. Poverty, illiteracy, lack of livelihood options, natural/man-made disasters, lack of social and family support and migration are among the factors which make women and children vulnerable to such trafficking. Cross-border trafficking is another area of concern.

The Government of India has signed/ratified the following conventions, which commit to addressing child trafficking:

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<sup>52</sup> <http://timesofindia.indiatimes.com/india/Government-introduces-Rights-of-Persons-with-Disabilities-Bill-in-Rajya-Sabha/articleshow/30007941.cms>

<sup>53</sup> Planning Commission. *Twelfth Five Year Plan*, op.cit., p. 176.

- (a) Protocol to Prevent, Suppress and Punish Trafficking in Persons especially Women and Children, supplementing the United Nations Convention against Transnational Organised Crime;
- (b) Convention on the Rights of the Child and
- (c) Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography.
- (d) SAARC Convention on Prevention and Combating Trafficking in Women and Children for Prostitution.

Hence, the Twelfth Plan also notes that this casts an obligation on the State Parties to undertake measures for prevention of trafficking as also for providing physical, psychological and social recovery of victims of trafficking in persons.

Human trafficking in India can be classified into three groups: (a) for commercial sexual exploitation, (b) for exploitative labour, and (c) for other forms of exploitation like organ sale, begging, etc. However, it is very difficult to estimate the scale of trafficking in women and girls “due to the clandestine nature of the operation.”<sup>54</sup>

The Government has adopted a multi-pronged approach to prevent and combat trafficking of women and children. The Ministry of Women and Child Development administers the Immoral Traffic (Prevention) Act, 1956 (ITPA). Strengthening the law enforcement response in India against Trafficking in Persons through Training and Capacity Building, a scheme set up by the Ministry of Home Affairs has two components: establishing integrated Anti-Human Trafficking Units (AHTUs) and training of police officers specifically to handle cases of human trafficking. Anti-Human Trafficking Units (AHTUs) have been set up in many States and equipped with infrastructure to assist the States in their efforts. The scheme provides prevention through formation of community vigilance groups and awareness and sensitization for key functionaries, rescue and safe withdrawal of the victim from the place of exploitation. Provisions have also been made for rehabilitation, which include safe shelter for victims with basic inputs of food, clothing, counseling and vocational training. **However, information on staff, training, other facilities and the ability to respond to the needs is crucial for effective monitoring of**

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<sup>54</sup> Biswajit, Ghosh (2009). “Trafficking in Women and Children in India.” *The International Journal of Human Rights*, Vol.13, No. 5, December. pp. 716 to 738.

**implementation and timely intervention for improved outcomes. Information on these monitoring indicators should be collected and placed in the public domain.**

The Ministry of Women and Child Development issued an Advisory to States/Union Territories on 12<sup>th</sup> October 2011, emphasizing on, inter-alia, gender sensitization of the police personnel, minimizing delays in investigations of crime against women, setting up ‘Crime against Women Cells’ in district where these do not exist; adopting a victim centric approach in human trafficking cases, creating Special Juvenile Police Units, and conducting regular meetings of the State Advisory Committees for preventing and combating trafficking of women and children for commercial sexual exploitation. The Ministry of Home Affairs (MHA) in consultation with Ministry of Women and Child Development also issued various advisories to State/Union Territories on measures needed for preventing and combating crime of human trafficking e.g. Advisory on preventing and combating human trafficking in India (9<sup>th</sup> September 2009), Advisory on Missing Children (31<sup>st</sup> January 2012), Advisory to treat human trafficking as organised crime (30<sup>th</sup> April 2012) and Advisory on preventing and combating human trafficking-dealing with foreign national (1<sup>st</sup> May 2012). **Information is still not forthcoming on the extent to which these advisories have been followed and effective action has been taken for implementation of these, much less on how far these have altered the scenario of child protection in India.**

The Ministry of Women and Child Development is also implementing a Comprehensive Scheme for Prevention of Trafficking and Rescue, Rehabilitation, Re-integration and Repatriation of Victims of Trafficking for Commercial Sexual Exploitation, launched in December 2007 and called “Ujjawala”. The scheme has five components. These are prevention, which consists of formation of community vigilance groups/adolescents’ groups, awareness and sensitization of key functionaries; rescue, safe withdrawal of the victim from the place of exploitation; rehabilitation, which includes providing safe shelter for victims with basic inputs of food, clothing, counselling, medical care, legal aid, vocational training and income generation activities etc.; reintegration, which includes restoring the victim into the family/ community (if she so desires); and repatriation, to cross-border victims for their safe repatriation to their country of origin.

As on 14<sup>th</sup> August 2013, 238 projects including 126 Protective and Rehabilitative Homes have been supported under the Scheme.<sup>55</sup> These rehabilitative centres are given financial support for providing shelter and basic amenities such as food, clothing, medical care, legal aid, education in case the victims are children, as well as for undertaking vocational training and income generation activities to provide the victims with alternate livelihood option. However, the extent of implementation and effectiveness of the scheme remains important to any meaningful change in the prevailing situation. **There is hardly any information regarding the effectiveness of these projects in addressing the objectives of rehabilitation and reintegration of victims of trafficking.**

Information regarding the number of Swadhar and Short Stay Homes, which cater to women in difficult circumstances, including trafficked women who have been rescued, is available in the Annual Report of the Ministry of Women and Child Development. The Report provides information regarding the name of the organisation, State in which it is located, number of beneficiaries provided support and funds released. Information regarding funds released to rehabilitation centres under the Ujjwala scheme is also provided in the Annual Report of the Ministry.

**To ascertain whether the number of shelter homes, short stay homes and rehabilitation centers is sufficient to effectively deliver the provisions of laws and schemes, it is crucial to have data regarding the number of children and women in such situations. As a first step, micro studies could be undertaken to explore the extent of the problem. Data is also needed to track the quality of services delivered and numbers rehabilitated by such homes through follow up. Regular management information systems need to be put in place to enable improved monitoring and delivery of services. Independent surveys should also be conducted to validate the data provided by administrative sources.**

## **2.6 Protection of Children in need of Care and those in Conflict with Law: Data Needs**

There is indeed a realization at the level of the State about the seriousness of the state of children in various parts of the country. There is also an evident resolve at the level of planners and policy

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<sup>55</sup> <http://pib.nic.in/newsite/PrintRelease.aspx?relid=98217>

makers to address the issues of vulnerability, exploitation and disparities experienced by children. The National Policy for Children, 2013, commits that “To secure the rights of children temporarily or permanently deprived of parental care, the State shall endeavour to ensure family and community-based care arrangements including sponsorship, kinship, foster care and adoption, with institutionalization as a measure of last resort, with due regard to the best interests of the child and guaranteeing quality standards of care and protection.”

The policy emphasises the obligation of the State to take “special protection measures to secure the rights and entitlements of children in need of special protection, characterized by their specific social, economic and geo-political situations, including their need for rehabilitation and reintegration, in particular but not limited to, children affected by migration, displacement, communal or sectarian violence, civil unrest, disasters and calamities, street children, children of sex workers, children forced into commercial sexual exploitation, abused and exploited children, children forced into begging, children in conflict and contact with the law, children in situations of labour, children of prisoners, children infected/affected by HIV/AIDS, children with disabilities, children affected by alcohol and substance abuse, children of manual scavengers and children from any other socially excluded group, children affected by armed conflict and any other category of children requiring care and protection.”

The most important Act for the protection of children who come in conflict with law is the Juvenile Justice Act, 2000, as amended in 2007 and 2011. The Act is designed to address two categories of children:

1. Children in Need of Care and Protection; and
2. Children in Conflict with Law.

The Act requires the constitution and notification of Child Welfare Committees (CWCs) and Juvenile Justice Boards (JJBs). Children in need of care and protection can be brought before the five member CWC by a police officer, public servant, social worker, CHILDLINE or any citizen. The Committee may commit the child to a Children’s Home or a Shelter Home, if the child cannot be sent to the family. A Juvenile in conflict with law can be heard only in the JJB, which must contain a Metropolitan or Judicial Magistrate and two social workers. While the proceedings are on, the Juvenile can be sent to an Observation Home and if, after the case is complete the JJB feels that the rehabilitation of the Child is not complete, it may place him in the

Special Home for up to three years. **Information on this should be readily available for close monitoring and effective analysis of the provisions.**

Special juvenile police units (SJPU) have to be constituted in all States and State governments are expected to provide paid social workers to each SJPU unit having experience of working in the field of child welfare. When a police officer comes in contact with a juvenile, he must place the child with a SJPU. A social investigation report from a probation officer is required for the child to be discharged and the probation officer may be required to continue follow up of the child even after discharge. **There is no information available in the public domain regarding whether SJPU units have been duly constituted, how many of the paid social workers are women, in how many cases probation officers have been appointed and trained and in how many case follow up after discharge has been done and to what effect.**

The Act and the model rules lay down specific duties for the police, especially SJPU, so as to improve the treatment by the police of all juveniles and children under Section 63; to coordinate and function as a watch dog for providing legal protection against all kinds of cruelty, abuse and exploitation of child or juvenile under rule 84(5); to take serious cognizance of adult perpetrators of crimes against children and to see to it that they are apprehended without delay and booked under the appropriate provisions of the law under rule 84(6); and, to identify children in conflict with law and children in need of care and protection in association with civil society under rule 84(7).

Section 34(3) of the JJ Act provides for mandatory registration of child care institutions housing children in need of care and protection with the intent of enforcing minimum standards of care for services provided to the children in these homes. The JJ Act also provides for stringent monitoring of the quality of services. Many States, however, have still not been able to identify and register all child care institutions under the JJ Act - child care institutions were licensed under older existing laws like the Women and Children Institutions (Licensing) Act, 1956 and Charitable Homes (Supervision and Control) Act, 1960, etc. and have not registered under the JJ Act.

**No child in conflict with law can be detained in a special home for more than three years and all children whose case is pending for more than three years have to be released. Ensuring this requires regular information flow about the time taken in handling the case and action in case of violation. This information is not provided regularly by all districts/ states in respect of the number of pending cases, duration of pendency, children released or not released after three years and penal action taken against those CJMs/CMMs who detained a child in special home beyond three years or beyond the term given in the order.**

Pendency of cases in JJBs needs to be reviewed quarterly by the concerned CJMs/CMMs, the Juvenile Justice Committee and/or the High Court Judge in-charge may review the same on an annual basis. **A regular systematic analysis of cases pending in the JJBs, the reasons thereof, remedial measures for the same, the level of understanding among the presiding officers regarding child rights jurisprudence should be carried out by the NCPCR or an independent agency in order to work on the weaknesses and strengths in the system.**

It is important to have information on:

- the number of existing Observation Homes and their adequacy in catering to the needs of children in conflict with law;
- cases in which the location of such Homes was too far for the poor parents/relatives of children belonging to other districts to visit the Homes periodically for interaction with their wards;
- cases in which children in conflict with law missed their dates for production before the JJB due to non-availability of escort party of the police on such dates thereby resulting in delay in the disposal of cases;
- how much distance had to be traveled by a child in the company of police for production before the JJ Board;
- in how many cases did the JJB/CWC order that such children are sent to an Observation Home/Children Home out of its geographical jurisdiction;
- whether there is at least one Observation Home and one Childrens Home for boys and girls separately at every divisional headquarter covering two/three adjoining Districts (in large States) for the interim care of such children; and
- whether there is any proper schooling for all children in school-going age.

The supervisory/administrative and watch and ward staff in such Homes requires adequate training/orientation for creating a child-friendly environment in such Homes. In view of this, each State should have at least two Model Homes with all infrastructure and processes of child participation, openness, transparency, accountability, etc. within six months to serve as the Resource Centres to conduct training programmes for the functionaries of other similar Homes in the state.

In a recent affidavit filed by the NCPCR, it pleaded with the SC to issue directions to States to ensure that (a) the Superintendent of the Home gets the educational status, level of learning/background and educational requirements assessed through the qualified teaching staff available in-house or specially requisitioned for the purpose from the Department of School Education; (b) the education progress report should be maintained for each and every child in the Home; (c) Bridge courses should be organized by the school education department under SSA Program for the drop-out/older children to prepare them for admission into age appropriate classes in full time formal schools; (d) the School Education Department should also provide free text books/note books/other learning materials to all children living in Observation Homes/Special Homes/Children Homes/Shelter Homes under the SSA Programme on the basis of requisition from the Superintendent of such Homes; (e) it should be the responsibility of the Superintendent to arrange tuitions for the students facing examinations in order to solve their difficulties encountered on different subjects. The respective State Governments/UT Administrations are expected under Section 35 of the Juvenile Justice Act and Rule 63 of the JJ Rules, 2007 to ensure that Inspection Committees carry out surprise inspections of all Children Homes, whether run by Government or NGOs, on a periodic basis and the Directors/Commissioners of concerned Departments give due consideration to the recommendations of the Committees for taking remedial measures to improve the conditions of the Homes.

Information regarding the annual “social auditing” of the functioning of Children Homes, as envisaged under Section 36 of the Act and Rule 64 of the JJ Rules, 2007, and its outcomes should be communicated to NCPCR in the manner and format as prescribed by it from time to

time. **No such information regarding the position of different states is available in the public domain or with the NCPCR to enable further action in this regard.**

Under Section 62 of the Act, state level and district level Advisory Boards are constituted and required to have periodic meetings at least four times in a year in order to review the situation of the implementation of the JJ Act and functioning of the Juvenile Justice system within their respective jurisdictions and to propose appropriate remedial measures to concerned authorities. **The minutes of the meetings of the State Advisory Board should be marked to NCPCR for perusal. However, this information is not available from all areas.**

Under section 62A of the JJ Act, Child Protection Units have to be constituted at the State level and in all Districts by the respective State Governments/UT Administrations in order to have better implementation of the Act and its monitoring. However, this has not happened and **information regarding the constitution of Child Protection Units is not readily available to the public.**

Protective legislation has been passed to help children out of many situations of exploitation and vulnerability. Elaborate institutional mechanisms have been provided to address the vulnerability of children and discrimination against the girl child. However, **the monitoring and implementation of these laws and effective functioning of the mechanisms meant for protection require regular flow of information from the local to the state and national level institutions. Availability of this information in the public domain is important for enabling critical analysis and determining appropriate interventions for improvement.**

There are multiple agencies involved in addressing the issues of child vulnerability, exploitation and discrimination faced by children and offering them protection. The sharing of information by the various agencies is significantly conditioned on the nature and effectiveness of mechanisms for coordination. The lapses in this regard make data gaps extremely serious and difficult to handle.

In order to create a protective environment for children so that they do not fall through the security net in the first place, several commitments have been made. These include a commitment to ensuring survival of the girl child and her right against discrimination before

birth (reflected in a balanced sex ratio); the constitution of Commissions for protection of child rights in all States and UTs; and the implementation of the Integrated Child Protection Scheme (ICPS). Other areas of commitment include a focus on prevention of girl child abuse, exploitation and violence, prohibition of child marriage, reaching out to the marginalized and most vulnerable, especially, child workers, eliminating child trafficking, commercial sexual exploitation of children, child pornography, child sex tourism, helping the HIV/AIDS-infected/affected children, social integration of children in conflict with law, special provisions for children in distress/difficult circumstances, including children of prisoners, the need to see disability as a child protection issue, and simplifying adoption issues and preventing unscrupulous practices.

The Twelfth Plan<sup>56</sup> stresses the need for effective enforcement of the Child Marriage Prohibition Act, Dowry Prohibition Act and Protection of Women from Domestic Violence Act. It expresses concern regarding the fact that most of the States/UTs have given additional charge to their existing officers to perform the duties of Protection Officer, which is said to be affecting implementation of the Act. It recommends that State governments be encouraged to appoint personnel as needed and provide support for establishing counselling facilities, capacity building of the officials and infrastructure support for Protection Officers. A Scheme for this is planned, as also, for appointment of sufficient number of dedicated, full time Dowry Prohibition Officers to enforce the DPA Act and setting up of one Stop Crisis Centres for providing shelter, police desk, legal, medical and counseling services and Women's Helpline.

**However, one of the reasons for persisting vulnerability of children and women, despite the creation of legislative and administrative mechanisms, is the lack of monitoring on the actual creation of these mechanisms and their functionality.** The Government of India, for instance, brought into force the Prohibition of Child Marriage Act, 2006 (PCMA) with effect from 1<sup>st</sup> November 2007 repealing the Child Marriage Restraint Act (CMRA) of 1929 in order to prohibit child marriages rather than only restraining them. For effective implementation of the Act, State Governments have been requested from time to time to notify rules and appoint Child Marriage Prohibition Officers (CMPOs) under PCMA 2006. As per information provided by States & UTs, 19 States and 6 UTs have framed the Rules and 20 States and 7 UTs have

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<sup>56</sup>Planning Commission. *Twelfth Five Year Plan*, op.cit.

appointed CMPOs. Information regarding the implementation of various provisions of the Act is not known. Prevalence of child marriage is still the cultural norm in some parts of the country. Evidence from NFHS 3 shows that more than one-quarter (27 percent) of Indian women of age 20-49 were married before they reached age 15; over half (58 percent) married before the legal minimum marriage age of 18.<sup>57</sup> However, NFHS 3 pertains to 2005-06. **The data reported does not tell us how many child marriages occur each year.**

Data on marital status of males and females in different age groups is also provided by SRS on an annual basis. SRS 2013 reports that at the national level, the proportion of females getting married before legal age of marriage has declined to 2.2 percent as against 2.9 percent reported in 2012. However, while SRS data pertains to the current marital status of children aged less than 10 or between 10 and 14 or those between 15 and 19, etc, NFHS data is based on recall questions regarding the age of marriage of women between 20 and 49 years of age.

In sum then, women and children face various forms of vulnerability throughout the life cycle, though their intensity and effects vary depending on circumstances. These arise due to discrimination before or after birth; exploitation as with bonded labour or trafficking, due to violence, harassment or abuse; due to dependence, lack of autonomy and resources. Vulnerable children and women may be located in poor and marginalized households, situations of unequal power relations within households, socially disadvantaged and marginalized groups in communities, villages, towns and cities, backward spatial locations within a village, town, city or district, situations of exploitation - whether economic, political, social or religious - or other situations in which they suffer deprivation in multiple dimensions. The problem is massive and needs to be addressed with urgency. Clearly, data is not readily available for determining the extent to which women and children are vulnerable in each of these dimensions. Therefore, the nature and size of the problem needs to be ascertained and measured with greater precision in order to address it more effectively.

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<sup>57</sup>Government of India (2007). Ministry of Health and Family Welfare and IIPS. *National Family Health Survey (NFHS-3)*. op.cit., p. 163.

## **Addressing Violence and Crimes against Children and Women: Indicators and Gaps**

### **3.1 Violence against Children and Women: Context and Commitments**

Violence against children and women takes many forms, ranging from one time acts that may or may not leave temporary scars to those which have a long-lasting effect and may in some cases be life changing. Children and women may fall into situations, which expose them to repeated and regular incidents of violence, such as kidnapping to use them for activities that involve violence. Other more explicit forms of violence could be individual, as in the case of suffering caused by on-going domestic violence, or collective, such as caste violence, communal violence, mob violence, etc. In both situations, they may become victims of direct violence, or, in case, they escape it, their victimization may be incidental to the violence suffered by others in the family, as when they may be rendered orphan or homeless in some cases, or they suffer psychological trauma after witnessing such violence. Children and women are also exposed to or become vulnerable to violence on account of their conditions of living. Poverty, homelessness, lack of care, poor opportunities for education, forced employment in unhealthy conditions, or forced indulgence in crimes and illegal activities are situations that open up a different scenario for the children involved, and each needs to be understood and addressed carefully.

The violence experienced by women and children may thus be visible or invisible, overt or covert, physical, emotional or mental and may occur within or outside the home. “With growing recognition that acts of violence ...are not isolated events but rather form a pattern of behaviour that violates the rights of women and girls, limits their participation in society, and damages their health and well-being (and) ....affects approximately one third of women globally,”<sup>58</sup> it is impossible to ignore the importance of collecting accurate data on the extent, nature and forms of violence as well as the contexts leading towards it and the effectiveness of mechanisms aimed at addressing and preventing the incidence of crime and violence.

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<sup>58</sup> World Health Organisation (2013). *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*. Geneva.

The term “violence against women” refers to violence that is “directed against a woman because she is a woman or that affects women disproportionately.”<sup>59</sup> It encompasses many forms of violence, including violence by an intimate partner and rape/sexual assault and other forms of sexual violence perpetrated by someone other than a partner as well as female genital mutilation, honour killings and the trafficking of women.<sup>60</sup> “Though physical violence is pervasive against women (and children), it can take other forms.... (and) ...may vary between cultures and settings, but what is near universal is that male violence far exceeds female violence.”<sup>61</sup>

Article 1 of the UN Declaration on the Elimination of Violence against Women calls upon the States to condemn violence against women and not invoke any custom, tradition or religious consideration to avoid their obligations with respect to its elimination. States should pursue by all appropriate means and without delay a policy of eliminating violence against women. Defining violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life” it underlines that violence against women shall be understood to encompass, but not be limited to, the following:

- a) Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;
- b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- c) Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

While recognizing that violence against women in the family and society was pervasive and cut across lines of income, class and culture had to be matched by urgent and effective steps to eliminate its incidence, it also expressed concern that some groups of women, such as women

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<sup>59</sup>Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). Available at: <http://www.un.org/womenwatch/daw/cedaw/>.

<sup>60</sup>ibid. p. 4.

<sup>61</sup>Krishnaraj, Maithreyi (2007). “Understanding Violence against Women.” *Economic and Political Weekly*, Vol. 42, No. 44. November 3.

belonging to minority groups, indigenous women, refugee women, migrant women, women living in rural or remote communities, destitute women, women in institutions or in detention, female children, women with disabilities, elderly women and women in situations of armed conflict, are especially vulnerable to violence.

Noting that “any form of violence or assault, sexual or otherwise, on women is a violation of the fundamental right to live with dignity” the Justice Verma Committee stated that “substantive equality and women’s rights as human rights have been established both in domestic and international legal regimes”<sup>62</sup> Given that the State has primary obligations under the Constitution to secure the fundamental rights of its citizens the Committee noted that the fundamental rights of women include “safety and bodily integrity” and “secure spaces where they can exercise autonomy and freewill.”<sup>63</sup> Additionally, violence against women is a “manifestation of historically negligent poor relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women and that violence against women is one of the crucial social mechanisms by which women are forced into subordinate position compared with men....” They further noted that:

“...State should pursue by all appropriate means and without delay a policy of eliminating violence against women and, to this end should:

(d) develop penal, civil, labour and administrative sanction and domestic legislation to punish and redress wrongs caused to women; women who are subjected to violence should be provided with access to the mechanism of justice and, as provided for by national legislation, to just and effective remedies for the harm that they have suffered; State also informed women of their rights in seeking redress through such mechanisms.”<sup>64</sup>

The National Policy for Children, 2013, commits that the “State shall protect all children from all forms of violence and abuse, harm, neglect, stigma, discrimination, deprivation, exploitation including economic exploitation and sexual exploitation, abandonment, separation, abduction, sale or trafficking for any purpose or in any form, pornography, alcohol and substance abuse, or any other activity that takes undue advantage of them, or harms their personhood or affects their development.”

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<sup>62</sup> Government of India. Ministry of Home Affairs (2012). *Justice J.S. Verma Committee Report on Amendments to Criminal Laws Relating to Safety & Security of Women*. New Delhi. p. 64 and 65.

<sup>63</sup> *ibid.* p. 65.

<sup>64</sup> *ibid.* p. 62 and 63 citing Article 14 of the UN Declaration on Elimination of Violence against Women 1993.

If the State is to protect all women and children from all forms of violence and abuse, harm, neglect, discrimination, deprivation, exploitation or any other activity that takes undue advantage of them, or affects their development, information regarding the extent and nature of vulnerability and actual exposure of children and women to these varied situations is required. In this arena, one faces enormous data gaps, partly because of the very nature of violence, but also because of the failure to gather the requisite information at the appropriate levels. Addressing violence against women, in both the public and private sphere, is a major challenge.<sup>65</sup>

### 3.2 Addressing Violence against Women: Data Availability and Issues

The United Nations Statistical Commission points out that in principle, population-based specialized, stand-alone statistical surveys are the instruments of choice for collecting statistics on violence against women. However, resource constraints result in most countries just adding a module on violence in surveys that are being conducted such as was done in NFHS 3 in India. A Group established by the UN Statistical Commission identified a list of statistical indicators on violence against women<sup>66</sup> for population based surveys and administrative records.

#### **Box 3.1: UN Statistical Commission's Statistical Indicators on Violence Against Women**

A. The suggested list for **Population Based Surveys** consists of total and age-specific rate of:

- Women subjected to physical violence in the last 12 months by severity of violence, relationship to the perpetrator and frequency
- Women subjected to physical violence during lifetime by severity of violence, relationship to the perpetrator and frequency
- Women subjected to sexual violence in the last 12 months by severity of violence, relationship to the perpetrator and frequency
- Women subjected to sexual violence during lifetime by severity of violence, relationship to the perpetrator and frequency
- Ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner in the last 12 months by frequency
- Ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner during lifetime by frequency
- Women subjected to psychological violence in the past 12 months by the intimate partner
- Women subjected to economic violence in the past 12 months by the intimate partner
- Women subjected to female genital mutilations (FGM)

B. The list of indicators on which statistics should be drawn from **administrative records** includes:

- Femicide and spousal homicide by personal characteristics of the victim and the perpetrator
- Forced marriage
- Trafficking of women

<sup>65</sup> Planning Commission. *Twelfth Five Year Plan*, op.cit., p. 166.

<sup>66</sup> United Nations Department of Economics and Social Affairs Statistics Division (2010). *The World's Women 2010*. New York: United Nations.

Data on sexual, physical and emotional violence is available from the National Family Health Survey and is based on a sample of 13,999 never married women and 69,704 ever-married women. NFHS-3 collected data on the experience of physical and sexual violence for all women in the 15-49 age group, irrespective of marital status, the relationship of the perpetrator to the respondent, and for women who report sexual violence, the age at which it first occurred; marital control exerted by husbands on their wives through coercive behaviour; spousal violence experienced by ever-married women; violence by women against their husbands; and finally help seeking behaviour of abused women. In addition, in order to examine the intergenerational effects of domestic violence, information was collected on whether the respondent's father ever beat her mother. Statistics are collected by age-group, location in rural and urban areas, religion, caste/tribe and wealth index.

While NFHS-3 presents data on violence against girls and women in the 15-49 age-group and also presents data regarding location in rural and urban areas, religion, caste/ tribe and wealth index, the information pertains to 2005-06. There is no information regarding violence suffered by boys of any age or girls below the age of 15 or women above the age of 49 or the severity of violence. Information provided regarding the perpetrators of violence is limited. Most importantly, whatever data exists is presented at the national and state level and is not available for districts and below.

We may note here that in the absence of regular large scale surveys, crime records maintained by NCRB become the main source of information on crimes against women. Significantly, although women may be victims of any of the general crimes such as 'murder', 'robbery', 'cheating', etc., only the crimes, which are directed specifically against women, are characterised as 'crimes against women'. Various new legislations have been brought and amendments have been made in existing laws with a view to handle these crimes effectively. These crimes are broadly classified under two categories.<sup>67</sup>

(1) The crimes under the Indian Penal Code (IPC)

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<sup>67</sup>This year the crime rate for crimes committed against women has been calculated using only female population based on RGI's Mid-year projected female population. Therefore 'crime rate' of year 2012 is not comparable to previous years' 'crime rate'.

(2) The crimes under the Special & Local Laws (SLL).

**Box 3.2: Crimes against Women under the Indian Penal Code and under the Special & Local Laws**

(1) The crimes under the Indian Penal Code (IPC)

- (i) Rape (Sec. 376 IPC)
- (ii) Kidnapping & abduction for specified purposes (Sec. 363 -373 IPC)
- (iii) Homicide for dowry, dowry deaths or their attempts (Sec.302/304-B IPC)
- (iv) Torture - both mental and physical (Sec. 498-A IPC)
- (v) Assault on women with intent to outrage her modesty (Sec. 354 IPC)
- (vi) Insult to the modesty of women (Sec. 509 IPC)
- (vii) Importation of girl from foreign country (up to 21 years of age) (Sec. 366-B IPC)

(2) The crimes under the Special & Local Laws (SLL)

Although all laws are not gender specific, the provisions of law affecting women significantly have been reviewed periodically and amendments carried out to keep pace with the emerging requirements. The women specific laws for which crime statistics are recorded throughout the country include:

- (i) Immoral Traffic (Prevention) Act, 1956
- (ii) Dowry Prohibition Act, 1961
- (iii) Indecent Representation of Women (Prohibition) Act, 1986
- (iv) Commission of Sati Prevention Act, 1987
- (v) Protection of Women Against Domestic Violence Act, 2005

Data regarding rape, kidnapping and abduction, dowry deaths, cruelty by husband and relatives, molestation, sexual harassment, importation of girls, etc., as also disposal of crimes against women cases by police and by courts etc. are based on administrative sources or Police/Crime records and are reported by National Crime Records Bureau (NCRB). Thus, data on cases registered under crimes against women on all the heads mentioned above is made available by NCRB State-wise on an annual basis. However, the data provided by NCRB stands no comparison with the NFHS data on violence in terms of the details captured or even regarding the extent of violence though the limitations of NFHS data, as mentioned above, are important too.

The enactment of Protection of Women Against Domestic Violence Act, 2005, created space for filing of cases under the Act. However, the actual registration of the cases happens in only a small proportion of the actual incidence of domestic violence. As per the National Crime

Records Bureau (NCRB) data only 12036 cases were filed under the Protection of Women against Domestic Violence Act, 2005, in the year 2010. The number of cases filed under this Act declined to 9873 in 2011 and 4567 in 2012.<sup>68</sup>

The fact that only a fraction of those who suffer from domestic violence register a complaint is clear from a comparison with data generated by independent surveys, such as, the NFHS, which find that a large number of married women have been abused, physically or sexually, by their husbands at some point of time in their lives.<sup>69</sup> As many as 1 out of 4 married women reported that they had experienced physical or sexual violence from their husband in the 12 months prior to the NFHS-3 survey. Most women did not seek help when they were abused. Only 1 in 4 abused women have ever sought help to end the violence and 66% of abused women not only have not sought help but they have also not told anyone about the violence. One-third of women in the age group 15-49 have experienced physical violence.

Further, data presented by NCRB covers only the States that provided information. A large number of States and UTs did not provide any information. Several States and UTs that provided information regarding the number of cases filed under the Protection of Women Against Domestic Violence Act, reported zero cases. In Gujarat and Tamil Nadu, the reported cases were very high in 2010. However, Gujarat did not submit the figures for 2011 whereas the number of cases registered in Tamil Nadu showed a decline. Whether or not this is representative of the actual state of domestic violence needs further investigation. NCRB does not provide any information about domestic violence against children. Information regarding the status of domestic violence cases that are registered is not available.

### **3.3 Addressing Violence against Children: Data Availability and Issues**

To be able to effectively address the commitments made in policy and in the existing legal framework, information is required regarding the state of children who are vulnerable and exploited (a) in the absence of family support - orphans, run-away children, street children, children who are victims of disasters, victims of conflicts and mass violence or riots, children of

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<sup>68</sup> Press Information Bureau information regarding Cases of Domestic Violence, dated 14<sup>th</sup> August 2013.

<sup>69</sup> Gupta, Kamla Parasuraman, Sulabha Arokiasamy, P., Singh, S. K. and Lhungdim, H. (2006). "Preliminary Findings from the Third National Family Health Survey." *Economic and Political Weekly*, Vol. 41, No. 42, October 21.

prisoners, etc. (b) in spite of family support - because of poverty, dependence, community pressures, vulnerable social group, etc., or (c) because of the family itself - ill-treatment, abuse, sale of children, honour issues, etc. Since children need state support for different reasons and in different locations, identification of such children in their exact location in order to provide them timely support is important, yet often quite complicated. This is especially so when vulnerability, exploitation or victimisation takes shape in private spaces, and children or their families do not talk about these, far less complain about these, either because of their dependence on the exploiters or due to pressure from support networks like community leaders or because of a sense of shame.

There are serious issues involved in the data pertaining to children, more so pertaining to various forms of violence suffered by children and the reasons that account for their situation. When the Ministry for Women and Child Development began the process of drafting a Bill to prevent offences against children and formulating a comprehensive national level scheme to deal with child protection, its work was hampered by lack of data on offences or crimes against children. The only source of data that was available was with the National Crime Records Bureau. Although this data was found useful, it was felt that this constituted a miniscule of the total crimes/violence committed against children. The reason for this was that very often crimes against children were either not reported or cognizance was not taken of them. Also, some crimes against children were not covered under existing legislations. Though gaps in information were at all levels, child abuse being an issue shrouded in secrecy, emerged as the most burning issue and the Ministry initiated a National Study on Child Abuse to understand the extent and magnitude of the problem.<sup>70</sup> The study highlighted the widespread physical, sexual and emotional abuse of children.

The position regarding the availability of data on crimes and violence against children remains largely unchanged. The main source of data on crimes and violence against children which is presently available is still the National Crime Records Bureau. The NCRB compiles information on the crimes against children and children in conflict with law. Crimes against children are categorized under two broad heads:

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<sup>70</sup> Government of India. Ministry of Women and Child Development (2007). *Study on Child Abuse in India*. New Delhi.

- 1) Crimes committed against Children which are punishable under Indian Penal Code (IPC).
- 2) Crimes committed against Children which are punishable under Special and Local Laws (SLL).

**Box 3.3: Crimes Committed against Children covered by NCRB**

**Crimes against Children punishable under the Indian Penal Code (IPC) include:**

- a) Murder (Section 302 IPC).
- b) Foeticide (Crime against a foetus under Section 315 and 316 IPC).
- c) Infanticide (Crime against newborn child 0 to 1 year under Section 315 IPC).
- d) Abetment to Suicide (abetment by other persons for commitment of suicide by children under Section 305 IPC).
- e) Exposure and Abandonment (Crime against children by parents or others to expose or to leave them with the intention of abandonment under Section 317 IPC).
- f) Kidnapping and Abduction, which covers
  - i) Kidnapping for exporting (Section 360 IPC).
  - ii) Kidnapping from lawful guardianship (Section 361 IPC).
  - iii) Kidnapping for ransom (Section 364 A).
  - iv) Kidnapping for camel racing etc. (Section 363 IPC).
  - v) Kidnapping for begging (Section 363-A IPC).
  - vi) Kidnapping to compel for marriage (Section 366 IPC).
  - vii) Kidnapping for slavery etc. (Section 367 IPC).
  - viii) Kidnapping child for stealing from its person (under 10 years of age only) (Section 369 IPC).
- g) Procurement of minor girls (for inducement to force or seduce to illicit intercourse under Section 366-A IPC).
- h) Selling of girls for prostitution (Section 372 IPC).
- i) Buying of girls for prostitution (Section 373 IPC).
- j) Rape (Section 376 IPC)

**Crimes against Children punishable under 'Special and Local Laws' include:**

- a) Abuse of minors in prostitution under Immoral Traffic Prevention Act, 1956.
- b) Crimes under Child Labour (Prevention & Regulation) Act, 1986.
- c) Prohibition of Child Marriage Act, 2006.
- d) Protection of Children from Sexual Offences Act, 2012.

The data on crimes against children is compiled through the revised annual returns with effect from 2001. Cumulative totals of crime statistics available on monthly basis were used for this analysis till 2000. The revised annual returns have additional heads like 'murder of children' and 'other crimes', therefore, incidents of crimes against children during 2001 and later years may not be comparable with the figures of year 2000 and before.

NCRB provides annual information on incidence and rate of crimes against children and their disposal by police and courts. This information is provided state-wise and union territory-wise as well as by cities in case of infanticide, murder, rape, kidnapping and abduction, foeticide, abetment to suicide, exposure and abandonment, procurement of minor girl, buying of girls for prostitution, selling of girls for prostitution, prohibition of child marriage act and other crimes. State-wise data is also compiled age group wise and sex-wise in case of crime heads like victims of murder, culpable homicide not amounting to murder and kidnapping and abduction - all categories lumped together. Purpose-wise information on kidnapping and abduction is provided sex group-wise and age-wise only at all India level. Age-group categories are up to 10 years, 10-15 years, 15-18 years, 18-30 years, 30-50 years and above 50 years.

**The NCRB records do not provide state-wise and district-wise or city-wise data on each of the various IPC crimes separately.** All the kidnapping and abduction offences, for instance, are clubbed together into one category and the aggregated data is provided for the entire category. As a result, there is no separate state-wise or district-wise information on the purpose of kidnapping.

Data on crimes against Scheduled Castes/Scheduled Tribes is also being compiled by NCRB. These are broadly categorized under two major heads, viz. crimes under the IPC, and those under the Special laws. Cases under the Protection of Civil Rights Act and the Scheduled Castes and the Scheduled Tribes (Prevention of Atrocities) Act are segregated for SCs and STs to have clear picture of the crimes against each category.

**Box 3.4: Crimes against Scheduled Castes/Scheduled Tribes covered by NCRB**

Crimes against Scheduled Castes/Scheduled Tribes under the Indian Penal Code (IPC):

- (i) Murder
- (ii) Hurt
- (iii) Rape
- (iv) Kidnapping & Abduction
- (v) Dacoity
- (vi) Robbery
- (vii) Arson
- (viii) Others (other classified IPC crimes).

Crimes against Scheduled Castes/Scheduled Tribes under Special Laws (SL) registered under:

- (i) Protection of Civil Rights Acts, 1955 and
- (ii) The Scheduled Castes and the Scheduled Tribes (Prevention of Atrocities) Act, 1989.

The data on crimes against SCs/STs is being compiled with provision for district-wise reporting of these crimes with effect from the year 2001. Cumulative totals of crime statistics, available on monthly basis, were used for analysis till 2000. Since these did not distinguish between true or false cases, therefore, the incidence of crimes reported in the year 2001 and later years may not be comparable with figures of earlier years. **However, the data on crimes against scheduled castes and scheduled tribes is not segregated for children and others.**

Annual **state-wise data** is also collected for cases of juvenile delinquency under IPC & SLL giving details about juveniles apprehended by type of crime. Information is also provided about the profile of juveniles apprehended, including the ratio of girls to boys arrested for committing IPC crimes and SLL crimes, giving information in respect of literacy and education level, children living with parents, homeless children and family income of juveniles. The details of disposal of juveniles arrested are also provided state-wise.

The figures for Juvenile delinquency till 2000 were collected as per the definition of Juveniles in the Juvenile Justice Act, 1986. Male below the age of 16 years and female below the age of 18 years were considered as juveniles under this Act. The Act was amended in 2000 and the age of juvenile males and females was brought at par as below the age of 18 years.

NCRB data on crime is undoubtedly a very useful source of information on various crimes against children and enables a state-wise, district-wise and city-wise comparison in case of some crimes. However, it constitutes only a small proportion of the total crimes and violence committed against children. An important reason for this is the low reporting of crimes against children. The NCRB data, for instance, shows that the number of cases registered under Prohibition of Child Marriage Act (PCMA) 2006 in the year 2010, 2011, 2012 are 60, 113 and 169 respectively, whereas the average marriage age in sample surveys depict a completely different scenario. Sample Registration System (SRS) findings of the Registrar General of India show that even though the mean age for marriage of girls in the country has improved from 19.3 years in 1990 to 21.2 years in 2012, as per the National Family Health Survey 2005-06, around 46 percent women aged 18-29 were married before reaching the legal age of 18. The incidence of child marriage in rural areas, especially because of the social sanction, is very high - it stands

at 53.4% when compared to urban average of 29.7%. These numbers are particularly high in states such as West Bengal, Bihar, UP, MP, Rajasthan, Chhattisgarh and Jharkhand and some districts reflect a much higher prevalence of the practice. Sometimes cognizance is not taken of the crimes resulting in continued denial of rights to children. **Much of the child exploitation, abuse and violence against children also escapes NCRB data because existing legislations do not cover all forms of abuse.**

Attention has frequently been drawn towards significant limitations of the NCRB data in understanding the reality of violence against children. The data maintained by NCRB is a record of only those crimes that can be registered under the IPC or other criminal Acts. Corporal punishment, use of children for creation of pornography, exposure etc. are not reflected in NCRB data as they are not offences under the IPC.<sup>71</sup> There is also a gross under-reporting of crimes against children, which in itself is indicative of the low priority accorded to children by parents, care-givers and the police. This was also pointed out by the MWCD Study on Child Abuse.<sup>72</sup> Further, NCRB data is available only at the national and state level and only reflects incidence of crimes that have actually been reported. Many states maintain their own data on offences related to children that just get aggregated under “other crimes” in the NCRB data. Disaggregated data remains a challenge. Data from Karnataka and Andhra Pradesh on victims of the Devadasi tradition is one example of this. To get a true picture of crimes against children, NCRB needs to present disaggregated data on all offences enumerated by it in terms of gender, caste and age.<sup>73</sup>

As regards trafficking of children, while the NCRB does give a break up of child marriage, and trafficking under the Immoral Traffic Prevention Act and the Indecent Representation of Women (Prohibition) Act (ITPA), it does not give data break-up for offences under the Child Labour (Prohibition and Regulation) Act, 2006 (CLPRA). Since 2001, the crime data for children included murder and a category called “other crimes”.

Data on importation of girls (Sec. 366-B IPC), molestation (Sec. 354 IPC), dowry deaths (Sec. 304 B), eve teasing or sexual harassment (Sec. 509 IPC), torture and cruelty (Sec. 498-A IPC),

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<sup>71</sup> Thukral, Enakshi Ganguly and Thukral, Parul (2011). *India Child Rights Index*. New Delhi: HAQ: Centre for Child Rights.

<sup>72</sup> MWCD Study on Child Abuse, 2007, op.cit., pp. 8-9.

<sup>73</sup> Thukral, et.al (2011). op.cit.

and crimes registered under the ITPA is only available in the chapter on crimes against women and that too without age segregation.<sup>74</sup>

### **3.4 Limitations of NCRB Data**

There are three major issues regarding NCRB data in general: (i) Crime Reporting (ii) Data Formats and (iii) Process of Consolidation. These are discussed below.

**(i) Crime Reporting:** NCRB data is collected from administrative/ police crime/ justice system records. Despite the increased reporting of crimes against women, data presented by NCRB is likely to significantly underestimate the number of such crimes that actually occur in any year as (a) a crime may be reported to the police station but the victim may face difficulty in getting the case registered or recorded; (b) the crime may not be reported by the victim for fear or stigma or family honour etc. A good part of violation related information remains poorly captured because of the reluctance of the victim or others to take it to the police station. But a significant part escapes the records because of the reluctance or inability of police to take cognizance of it. There is little match between the data collected by various departments or autonomous organizations like the Commissions for the protection of rights of specific communities. Data problems are also evident from the research studies and surveys on specific issues or problems. Hence, independent micro studies must be undertaken to validate the data that is presented.

**(ii) Data Formats:** NCRB uses specific formats for procuring data which have to be filled up by the data providers. Recently, in view of the various issues raised in the wake of demand for data it has attempted a revision of the format to make it more comprehensive and to serve the needs of various laws that have been passed recently. The proforma has been updated and modified after discussion and direction by CSO. This has become more detailed and attempts to capture several other details regarding the nature of crime, as also, taking note of the gender and social category dimensions of some crime situations. In case of rape, for instance, an attempt has been made to record custodial rape and other rape separately. Like-wise, in both categories, a further distinction is made between gang rape and other rape. Assault on women with intent to outrage her modesty distinguishes sexual harassment, assault or use of criminal force on women with the intent to disrobe, voyeurism, stalking and others, and also records these in the categories of SC, ST and others. Taking note of social category is also evident in case of recording violations of

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<sup>74</sup> *ibid.*

the Bonded Labour System (Abolition) Act, 1976, as information is now sought for the categories 'against SC', 'against ST', and against others. Specific requirements for several new laws, such as Information Technology Act, 2000, as amended in 2008, have been incorporated. However, the effect of these changes will take time to materialise.

*(iii) Process of Consolidation:* Crime records prepared by police station are sent to the District Crime Records Bureaus. The DCRBs send data to the State Crime Research Bureaus, which then send it to the NCRB. Not all states have, however, set up such bureaus in all districts. Some districts do not have any institutionalized DCRB with adequate infrastructure, staff and resources. Some of these have only ad hoc arrangements for the purpose.

The authenticity and reliability of NCRB data thus depends largely on the initial process of registration of complaints and the method of processing them at the level of the police station. But it also depends on how the police station compiles data and sends it to the DCRB, and further, on its movement after that in terms of how SCRB and NCRB manage consolidation of this data. In some cases, the data gets clubbed, as it moves to a higher level. This leads to loss of the subtle details that can be valuable for understanding violations and addressing them effectively. Some data must not be clubbed under general category heads, as this would mean a complete change of meaning. For instance a person may be raped as well as murdered. Since murder is a higher order crime, this will be reported as a murder and not as a rape as well as a murder.

The attempt to move towards electronic data collection process with the introduction of CCTNS is expected to make a difference to the data scenario by enabling the capture of the specifics of the violations and their context in greater details. Manual collection processes are sometimes influenced by the persons preparing these.

### **3.5 Administrative Data for Addressing and Preventing Violence**

The absence of regular availability of data pertaining to the administrative arrangements for addressing the issues of violence is also a major issue in addressing violence against women and children. The newly enacted Criminal Law Amendment Act, 2013 and Protection of Children from Sexual Offences Act, 2012, intend to protect children from sexual assault, sexual harassment and pornography and establish Special Courts for trial of these crimes. The

amendment includes penalties for those who employ children or adults who have been trafficked, and will particularly help those migrant and trafficked children who are engaged as child labour and sexually exploited. The Information Technology Act 2008 provides penalties of fine and imprisonment for any person who publishes, collects, seeks or downloads child pornography in electronic form. The Narcotic Drugs and Psychotropic Substances Act No. 61 makes it illegal to cause any person, including children to produce or deal in narcotic or psychotropic substances and provides for fines and imprisonment for violation. **There is lack of information on the extent of these problems. As suggested above, a detailed survey on child labour and trafficking will be very valuable in bridging this gap.**

With the enactment of the **Protection of Women from Domestic Violence Act**, the State is responsible for providing protection to women who suffer domestic violence. The PWDVA requires that State Governments appoint Protection Officers, register Service Providers and notify shelter homes and medical facilities. Although all State Governments have appointed Protection Officers, several States/UTs have yet to register Service Providers, as well as notify medical facilities and shelter homes. Until a few years ago, State agencies and even the police considered it inappropriate to interfere in cases of spousal and domestic violence. **Regular reporting through implementation of an MIS combined with micro studies will be useful in tracking progress on implementation of this Act.** Twelfth Plan<sup>75</sup> also underlines that although under the Protection of Women from Domestic Violence Act (PWDVA), the State Governments are required to appoint Protection Officers, register Service Providers and notify medical facilities, most of the States/UTs have given additional charge to their existing officers to perform the duties of Protection Officer which is said to be affecting implementation of the Act and refers to the need to encourage State governments to appoint personnel as needed and provide support for establishing Counselling Facilities or Family Counselling Centres as well as for capacity building of the officials and infrastructural support to Protection Officers for implementation of the DV Act. Similarly, it also mentions the need to appoint a sufficient number of dedicated, full time Dowry Prohibition Officers to enforce the DPA Act; build capacity of law enforcement agencies and the Judiciary on issues concerning dowry related harassment of women; as well as set up One Stop Crisis Centres for providing shelter, police

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<sup>75</sup> Planning Commission. *Twelfth Five Year Plan*, op.cit., p. 172.

desk, legal, medical and counseling services and Women's Helpline. **Data pertaining to each of these indicators will be needed to monitor the implementation of these commitments.**

**While these Acts have been passed, they must not remain limited to words that do not get translated into action. And this is more likely to happen in the absence of information that is needed for monitoring and corrective interventions to address the objectives of the laws and policies.**

To conclude, while explicit violence and crimes against children and women are growing, and are also noted with concern by state as well as non-state organizations and society at large, a significant proportion of experiences of violence and crimes committed against them remain covert and occur within private spaces, thereby making it difficult to bring them on record. Accurate data is not available on several types of violence and crimes, such as child marriage, child abuse, trafficking, missing children, female foeticide, infanticide and violence faced by old women. While murder and kidnapping may get reported more accurately, rape, sexual harassment, cruelty and ongoing physical, emotional and psychological abuse within as well as outside the home are far from accurately captured. Nor is data able to capture the magnitude of vulnerability caused by the effect of abuse, combined with situations of hunger, poverty, homelessness, ill-health and/or neglect. Further, much of the available data on violence and crime is not disaggregated by age and sex of victims and offenders or social and economic background of victims and offenders and level of education and employment status of victims and offenders.

**In view of the critical importance of addressing violence against children and women, specific and periodic surveys must be conducted regularly in order to monitor and address this and data should be available for all age groups, capturing all social categories and all levels, including district level, in order to effectively address issues.**

Understanding and determining the extent of the problem, identifying the women and children in need of protection and providing the required support hinges on accurate data collection. However, it is generally accepted that the data provided by the administrative recording system is a significant underestimate. **Hence, it will be useful if independent micro studies are**

**undertaken to validate the data that is presented. Additionally, formats used to capture and present data need to be corrected so that the gravity and extent of violence suffered by children and women is presented.** Further, it must be noted that the implementation of the many Acts that have been passed and schemes that seek to protect children and women from crimes and violence within and outside the home require the appointment of personnel, establishment of Counselling Facilities and Centres, capacity building, One Stop Crisis Centres and infrastructure support, judicial processes and action, rehabilitation, shelter homes, etc. **Data pertaining to progress on each of these indicators will be needed to monitor the implementation of these commitments, as well as improvements in the situation of children and women, if the Acts that have been passed are to get translated into action.**

INDIAN INSTITUTE OF PUBLIC ADMINISTRATION

## Capacities and Capabilities for Enhancing Well-being: Education

### 4.1 Overarching Issues and Context

In a highly unequal society, education is an important instrument not only for upward mobility but also for escaping certain forms of vulnerabilities and exploitative contexts. Developing the capacity and capability to address situations that point towards exploitation and discrimination and getting the benefits of development is facilitated through education in the wider context.

The enactment of the Right of Children to Free and Compulsory Education Act, 2009, is a critical milestone, extending India's commitment to rights-based access to education. The RTE Act came into force on April 1, 2010, translating the Constitutional provision for children's education to a justiciable right for children 6-14 years old. The impact of RTE on the lives of children, with respect to enabling them to realize their full development potential and ensuring their safety and protection is expected to be significant. The Act makes 25 per cent reservation for disadvantaged children in private schools mandatory. It also includes provisions against corporal punishment.

A core committee of Experts in Early Childhood Care and Education (ECCE) constituted by the Ministry of WCD has formulated a draft National ECCE Policy, National Curriculum Framework and Quality Standards for ECCE.

The Twelfth Plan places special emphasis on education, which is critical for child development. It is a key element in the strategy for equipping children with the learning capacities and skills they need to ensure the realization of their full development potential, without discrimination.<sup>76</sup>

**National Policy for Empowerment of Women 2001** seeks to ensure equal access to education for women and girls and implement special measures to eliminate discrimination, universalize education, eradicate illiteracy, create a gender-sensitive educational system, increase enrolment

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<sup>76</sup> Planning Commission. *Twelfth Five Year Plan*, op.cit., Chapter 23. p. 189.

and retention rates of girls and improve the quality of education to facilitate life-long learning as well as development of occupation/vocation/technical skills by women. It also seeks to reduce the gender gap in secondary and higher education through achievement of sectoral time targets in existing policies, with a special focus on girls and women, particularly those belonging to weaker sections including the Scheduled Castes, Scheduled Tribes, Other Backward Classes and Minorities. Additionally it commits to development of Gender sensitive curricula at all levels of educational system in order to address sex stereotyping as one of the causes of gender discrimination.

It states that programmes will be strengthened to bring about a greater involvement of women in science and technology and special measures would be taken for their training in areas like communication and information technology.

**National Policy for Children, 2013**, recognizes the equal right of every child to learning, knowledge and education, the responsibility of state to secure this right for every child, with due regard for special needs, through access, provision and promotion of required environment, information, infrastructure, services and supports, towards the development of the child's fullest potential.

**Box 4.1: National Policy for Children on Education:**

National Policy for Children emphasises state responsibility to take all necessary measures to:

- (i) Provide universal and equitable access to quality Early Childhood Care and Education (ECCE) for optimal development and active learning capacity of all children below six years of age.
- (ii) Ensure that every child in the age group of 6-14 years is in school and enjoys the fundamental right to education as enshrined in the Constitution.
- (iii) Promote affordable and accessible quality education up to the secondary level for all children.
- (iv) Foster and support inter sectoral networks and linkages to provide vocational training options including comprehensively addressing age-specific and gender-specific issues of childrens' career choices through career counseling and vocational guidance.
- (v) Ensure that all out of school children such as child labourers, migrant children, trafficked children, children of migrant labour, street children, child victims of alcohol and substance abuse, children in areas of civil unrest, orphans, children with disability (mental and physical), children with chronic ailments, married children, children of manual scavengers, children of sex workers, children of prisoners, etc. are tracked, rescued, rehabilitated and have access to their right to education.

#### **Box 4.1: National Policy for Children on Education (contd.)**

- (vi) Address discrimination of all forms in schools and foster equal opportunity, treatment and participation irrespective of place of birth, sex, religion, disability, language, region, caste, health, social, economic or any other status.
- (vii) Prioritize education for disadvantaged groups by creating enabling environment through necessary legislative measures, policy and provisions.
- (viii) Ensure physical safety of the child and provide safe and secure learning environment.
- (ix) Ensure that all processes of teaching and learning are child friendly.
- (x) Ensure formulation and practice of pedagogy that engages and delights children, with a special focus on mental health, from a social and gender just, life skills and age appropriate perspective.
- (xi) Provide access to ICT tools for equitable, inclusive and affordable education for all children especially in remote, tribal and hard to reach areas.
- (xii) Promote safe and enjoyable engagement of children's experiences with new technology in accordance with their age and level of maturity, even as there is respect for their own culture and roots.
- (xiii) Review, develop and sustain age-specific initiatives, services and programmes for safe spaces for play, sports, recreation, leisure, cultural and scientific activities for children in neighborhoods, schools and other institutions.
- (xiv) Enable children to develop holistically, bringing out their aspirations, with focus on their strengths, empowering them to take control of their lives, bodies and behaviours.
- (xv) Ensure no child is subjected to any physical punishment or mental harassment. Promote positive engagement to impart discipline so as to provide children with a good learning experience.
- (xvi) Ensure that children's health is regularly monitored through the school health programme and arrangements are made for health and emergency care of children.
- (xvii) Provide services to children with special needs in regular schools and ensure that these are inclusive and have all facilities such as trained teachers and special educators, appropriate pedagogy and education material, barrier-free access for mobility, functional toilets and co-curricular activities towards the development of child's fullest potential and autonomy and sense of dignity and self-worth.
- (xviii) Promote engagement of families and communities with schools for all round development of children, with emphasis on good health, hygiene and sanitation practices, including sensitization on ill-effects of alcohol and substance abuse.
- (xix) Facilitate concerted efforts by local governments, non-governmental organizations/community based organizations to map gaps in availability of educational services, especially in backward, child labour intensive areas, areas of civil unrest, and in situations of emergency, and efforts for addressing them.
- (xx) Identify, encourage and assist gifted children, particularly those belonging to the disadvantaged groups, through special programmes.

The National Policy for Children, 2013, requires that the State should take all necessary measures to track, rescue and rehabilitate child labourers and ensure that they have access to their right to education.

**The UN Convention on the Rights of the Child** establishes the right to education on the basis of equal opportunity. It underlines the need to make “available and accessible to every child” compulsory and free primary education and options for secondary schooling, including vocational education (Article 28). It also commits the States to “encourage the provision of appropriate and equal opportunities for cultural, artistic, recreational and leisure activity” (Article 31).

**Millennium Development Goals** aim at achieving universal primary education, ensuring gender parity and women’s empowerment. Target 2A stipulates that by 2015 all children, girls and boys can complete a full course of primary education.

Cognisance must also be taken of our commitments to meeting the right to education of persons with disabilities. Article 24 of the **UN Convention on the Rights of Persons with Disabilities** and its Optional Protocol requires the States to recognize the right of persons with disabilities to education and to realize this right without discrimination and on the basis of equal opportunity, ensure an inclusive education system at all levels and lifelong learning directed to the full development of human potential and sense of dignity and self-worth. It requires that the persons with disability should not be excluded from free and compulsory primary education, or from secondary education, on the basis of disability; must have access to an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live; be provided effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion; be enabled to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. It also requires the States to take appropriate measures, including a) Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring; b) Facilitating the learning of sign

language and the promotion of the linguistic identity of the deaf community; c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deaf-blind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development. Therefore, it is important to take appropriate measures to employ teachers (including teachers with disabilities), who are qualified in sign language and/or Braille, as well as to train professionals and staff who work at all levels of education. Further, the need to incorporate disability awareness in training, as also the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities are underlined. States are also required to ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others.

#### **4.2 Meeting the Challenges**

Even if these commitments were to be met, it would require regular information on various facets of the educational scenario to deal with issues of (a) availability, (b) equitable access, (c) quality and (d) affordability of education, from the perspective of children and women placed in different situations. One would need information on children availing education and those out of school or even out of alternate systems of education and also know of the reasons for that as mentioned above. This would imply the requirement of **knowing about the not-enrolled children as well as the drop-out children and their situations**, which may be responsible for their not being able to get education. Since poverty, migration, homelessness, need to work for sustenance, need to provide care to siblings in case of working mothers, ill health, child marriage, cultural practices, separation from family due to children going missing or being trafficked or running away and becoming street children or child labour often contribute to children not accessing education, it is important to get data on children in these categories as well as on how these issues are addressed to help children get out of these situations. Information is also needed about child victims of alcohol and substance abuse, children in areas of civil unrest, orphans, children with special needs (mental and physical), children with chronic ailments, married children, children of manual scavengers, children of sex workers, children of prisoners, etc. who need to be provided access to education.

To examine issues of access, it is important to **map the gaps in availability of educational services**, especially in backward, child labour intensive areas, areas of civil unrest, and in situations of emergency, and efforts needed for addressing them. To the extent drop out children could also be victims of poor quality education, lack of support at school to inculcate interest, distance of the school and treatment at the school leading to the tendency of the child to avoid it, it becomes important to have **data for assessment of conditions in schools. This includes data on safety and security and the availability of resources for development in schools**, such as books, library, play material, computers, etc., teachers and their training, and facilities like water and sanitation. Similarly, ramps for physically challenged, access to Braille, alternative scripts, learning of sign language and the promotion of the linguistic identity of the deaf community, use of the most appropriate languages and modes and means of communication for the individual, whether blind, deaf or deafblind and in environments which maximize academic and social development, etc., are extremely important. In the context of the burden of education, such as in the form of fees, expenditures on books, uniform, etc., **data is required on access to state support in the form of** scholarships, free books, uniforms, residential facilities or other incentives and the availability and use of counseling services in schools. Data on issues of access must reflect the gender and social category of children included or excluded as well as that of the providers of education.

Data would be required for **tracking the educational progress of children who are blind, deaf or deafblind, or challenged by other types of special needs- physical or mental**. On the supply side, tracking information regarding employment of teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and training of professionals and staff who work at all levels of education with regard to the awareness of special needs, etc. is crucial. Data would also need to be available not just with regard to school education but also regarding **access to general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis for all children and women**. This information is required to capture the social category of children and women included or excluded as well as providers of education.

**In case of drop out children**, the stage at which children drop out and the conditions that were responsible need to be identified and addressed. It is also important to know if those who are

enrolled actually attend, and those who attend are actually imparted quality education that makes them well qualified for addressing life situations and acquiring capabilities for taking up good jobs. Information on all these aspects needs to be available locally and must capture variations along gender, caste, region, religion and economic categories. Dropping out at higher levels in case of women is also an important area of concern that needs to be addressed by data collection agencies.

Equally important is the need to understand the context and **reasons** for women in specific regions **moving towards certain types of education (like vocational training, skill development, etc.) rather than some others (like higher education, science education, commerce, management, computers, etc.), and the effects of that** for the position of women in society. For the purpose, information regarding the availability of women's colleges or vocational education institutions within a reasonable distance, the availability of women teachers, the nature of courses offered and safety and security issues also need to be captured.

The education and allied data at various administrative levels is available from a variety of sources:

- (i) Planning, Monitoring and Statistics Division of the Education Department of the Ministry of Human Resource Development publishes Statistics of School Education and Higher education. Statistics are collected from the individual educational institutions, but they are consolidated at block, district, state and national levels. State-wise and national level data are finally made available in published form in *Education in India*. However, due to long time-lag in the collection of educational statistics, its significance has come down. Educationists have also been critical of it for it lacked information on: (a) un-recognised institutions; (b) non-formal education; (c) wastage, stagnation, survival and promotion rates; (d) socio-economic background of students; (e) attrition rate of teachers; (f) data on school attendance; and (g) enrolment by age-groups. To make up for the time lags, MHRD published *Selected Educational Statistics* published annually which gives briefly state-wise information on educational institutions, by levels, enrolments of total, scheduled caste and scheduled tribe population, by gender, teachers, pupil-teacher ratios, gross enrolment ratios, and a one-page information on state-wise total plan and non-plan budget expenditure on education.<sup>77</sup> However, there were inconsistencies in the statistics given in the two publications. Since 2007/08,

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<sup>77</sup> Jandhyala, B. G., Tilak, P.R. Panchamukhi and K. Biswal (2014). *Statistics on Education*. Government of India. Ministry of Statistics and Programme Implementation. New Delhi.

MHRD has instead been publishing *Statistics of School Education*- the last volume published in 2014 provides information regarding 2010-11. This captures the gender parity index, drop-out rates and gross enrolment ratio for SC and ST population separately. However, it is consolidated at the State level. MHRD also brings out the *Statistics of Higher and Technical Education* since 2006/07. In view of the fact that the existing database on higher education suffers from inadequacy, incomplete coverage and time lag, the Ministry of Human Resource Development (MHRD) has recently initiated *All India Survey on Higher Education (AISHE)* to create a database to assess the status of tertiary education in the country. All institutions of higher education-both private and public are intended to be covered in Survey. These include all universities including deemed to be universities, institutions of national importance and other institutions of university level, general and professional/technical colleges and institutions that offer post-secondary education like polytechnics, DIETs, etc. The survey seeks to collect data on basic profile of institutions like management, affiliation status, courses offered, and income and expenditure of institutions, etc., enrolment and faculty by broad discipline, gender, social category, etc. The first survey report (2010-11) provides a profile of higher education institutions, including profiles of teachers, non-teaching staff, academic programmes conducted by school/centre/department/faculty, intake/enrolment in higher education institutions, examination results and receipt and expenditures of higher education institutions. The survey is an annual feature and the latest report of the survey (provisional) is available for the year 2011-12.

- (ii) The Census of India provides data from village upwards at various levels of aggregation on literacy, educational attainment, and facilities. Data on educational characteristics of population are available by age, gender, caste and religion categories as well. However, long delays characterise the availability of this data.
- (iii) The National Sample Survey Organisation provides data at the national and the regional level. An important feature of data provided by NSSO is that since it is based on household surveys, many educational characteristics of the population are available by gender and social background (caste), as also by economic levels of households (household expenditure levels). Such information at national level is provided by the NSSO. The Social Consumption Surveys, it conducts, based on a large national sample of households and some specific surveys focus on education. Important data on education was collected in the 35<sup>th</sup>, 42<sup>nd</sup>, 47<sup>th</sup>, 50<sup>th</sup>, 52<sup>nd</sup>, 61<sup>st</sup>, 64<sup>th</sup> and 66<sup>th</sup> NSSO Rounds. In the 61<sup>st</sup> Round (Report No. 517), besides information on education collected in earlier Rounds, information on some new items such as type of institution for those attending educational institutions and particulars on vocational training received by household members were also collected. Besides, information on current attendance in educational institutions was collected for persons of age below 30 years. For formal vocational training received, information on field of training, duration of training, source of degree/diploma/certificate received were also collected (NSSO, 2006). In the 64<sup>th</sup> Round (Report No. 532), important information on household profile, distance to various levels of schooling facilities, status of current enrolment and attendance, type of institution attended, students getting free education and educational incentives, average annual private expenditure per student on education by level and type of education and major components of private

- expenditure and their shares in the total expenditure, major reasons for non-enrolment and major reasons for dropping out of the school were collected. In this Round, information on 'whether receiving/received any vocational training' was collected for persons of age 15-59 years instead of age 15-29 years as it was in 61<sup>st</sup> Round (NSSO, 2013). Being based on household survey, NSSO estimates of enrolment/non-enrolment status of children and other aspects of education situation in the country are considered more realistic. However, this is periodic and the issue of sample size is relevant for the reliability of category-wise results.
- (iv) NUEPA brings out annually a set of eight publications including 'District and State Report Cards', web-enabled 'Elementary Education in Rural and Urban India', 'DISE Flash Statistics including Educational Development Index', and 'Elementary Education in India: Progress towards Universal Elementary Education (UEE), Analytical Reports & Tables'. District Information System of Education (DISE) has been a data collection mechanism under *Sarva Shiksha Abhiyan* since the mid-nineties; and Secondary Education Management Information System (SEMIS) has been a data collection mechanism under *Rashtriya Madhyamik Shiksha Abhiyan*. The two have become a part of U-DISE, a unified system for educational data since 2012-13. Prior to this DISE collected information on key aspects of elementary education, pertaining to *school profile*, including their location, management, type, size of school funds, staffing pattern, medium of instructions, number of instructional days, mode of evaluation of learning achievements, etc.; *Availability of physical facilities and equipment in the school*, which included information on status of school building and related infrastructure like drinking water and toilet facilities, playgrounds, boundary wall, library, IT infrastructure and computer aided learning facilities, rooms for extracurricular activities and teaching staff, disabled friendly infrastructure, etc.; *Profile of teachers and part-time instructors*, including information on social background of teachers, their employment status, educational and professional qualifications, teaching experience, training status, classes and subjects taught providing a rich database on teachers in elementary education sub-sector; and Enrolment, attendance and repeaters by location, age, grade, sex and social category.<sup>78</sup>

In order to monitor school based preparedness and compliance under RTE Act, data is now collected from all categories of schools imparting school education (Grade I to XII), viz. Government, Local Body, Private aided, Private unaided, recognized and un-recognized. Several new variables have been incorporated which are expected to throw light on different aspects of elementary education in the country and RTE and MDM (See Box 4.2).

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<sup>78</sup> *ibid.*

#### **Box 4.2: New Indicators added in the Context of RTE and MDM**

- Performance indicators in terms of school category; ratio of primary to upper primary schools/sections; enrolment distribution: total, Scheduled Castes and Scheduled Tribes, percentage female enrolment; gender-parity index, classrooms; single-teacher schools; schools with attached pre-primary classes; percentage of under-age & over-age children in primary and upper primary classes; apparent survival rate (up to Grade V), dropout rate, retention rate, and transition rate from primary to upper primary level.
- Quality indicators according to category of schools, teacher-pupil ratio; availability of female teachers; schools without female teacher; blackboard and building; percentage schools received and utilized school development and TLM grant; students classroom ratio; availability of drinking water common toilet and girl's toilet in school, etc.
- Data on Out-of-School Children enrolled in formal schools being imparted 'Special Training'.
- Information on the functioning of Special Training Centers, including involvement of Teachers, Education Volunteers, etc.
- Number of instructional days separately for primary and upper primary stage of education.
- School hours for children and teachers (number of hours children and teachers stay in school).
- Number of Part-time Instructors for upper primary schools.
- Children belonging to weaker sections or disadvantaged groups enrolled in Grade I under 25% seats in private unaided schools.
- Information on the constitution of School Management Committees (SMCs), representatives and functioning of SMCs.
- Month of receipt of free text books.
- Geographical information i.e. latitude and longitude (if available).
- Information on existence of library in school and availability of books and periodicals therein.
- Information of availability of ramps with hand-rails.
- Availability of Teaching Learning Equipment (TLE) and play/sports material for each grade.
- Detailed information on Mid-Day Meal (MDM) Scheme e.g. number of children opted for Mid-day-meal; number of meals served; number of days MDM was served; whether school received one-time Kitchen Devices grant; number of cooks-cum-helpers available.
- Number of inspections by supervisory officials; number of inspections by community; number of children admitted in Grade I with pre-school experience.
- Number of children provided free transport or residential facility.
- Children with Special Needs will also include Cerebral Palsy, Autism and Learning disability as nature of disability.
- Class-wise, gender-wise annual attendance rate.
- Information on implementation of Continuous and Comprehensive Evaluation (CCE).

From 2012-13 onwards, Data Capture Format has been modified to meet the requirements of Annual School Census, covering data for about 14 lakh schools imparting elementary education and 2.05lakh Secondary and Higher Secondary

schools across the country-earlier, RMSA was involved in collecting data regarding secondary and higher secondary schools. School Report Cards (elementary level) for last seven years i.e. 2005-06 to 2011-12 and SEMIS report cards (English) for 2010-11 are available online in English, Hindi, Gujarati, Marathi, Punjabi, Kannada Tamil, Telegu and Malayalam.

**The limitation of DISE data** has been that it is obtained from the schools. Although validation of 5% of the sample has been introduced to ensure correctness of the data, there is scope for manipulation at the level of school. Besides, many dimensions of the issues relevant to the realization of the right to education for children cannot be captured, especially pertaining to the situation of children, its bearing on education, and the interventions needed for the purpose of addressing the situation.

- (v) National Council of Educational Research and Training (NCERT) conducts **All India Educational Surveys (AIES)** surveys periodically to collect information on country's overall progress in the area of school education. These Surveys provide basic inputs to develop educational plans at micro-level as well as at macro-level, to formulate educational policies, and to monitor the progress of various educational schemes of the Central and State Governments. These cover the availability of schooling facilities in rural habitations, physical and educational facilities in schools, incentive schemes and beneficiaries, medium of instruction and languages taught, enrolment particularly of SCs, STs, girls and educationally backward minority community, teachers and their academic and professional qualifications, library, laboratory, ancillary staff and subject-wise enrolment at +2 stage of education. In addition, the enrolment and teachers in unrecognised schools, Alternative Schools and AIE Centers, Oriental Schools covering Sanskrit Pathshalas, Madarsas and Maktabas; Special Schools for children with disabilities, and Pre-primary Institutions are covered. These surveys provide data at the institutional, district, state and the national level. Eighth survey was conducted in 2009.
- (vi) Many other departments and agencies of the GOI and the state governments also collect significant data on education related parameters of the households. Many **state governments** too have been collecting considerable data based on household survey. Educational department also collects household data, which is used to operationalise school mapping and micro-planning at the cluster and the village level. Projects and national surveys, sponsored by some international agencies, have also generated valuable data. Many non-governmental agencies have also been involved in data collection, often for purposes of evaluation of programmes.

Although there are multiple agencies involved in the exercise on data collection on various aspects of education, this itself is a source of problem. Not only because of the lack of agreement on the conceptual and methodological issues but also because the varied approach to data collection leads to varied results and puts a question mark on its reliability. Besides, in spite of

the multiple data capture exercises, there are still gaps in data availability on some aspects, creating problems for appropriate policy planning. Some of the important problem areas are listed below:

- **Non-formal education:** Although many programmes of non-formal education are being offered in various States, much of the data collection on education remained centered on the formal school system. This is an important area of concern regarding which adequate data needs to be collected on regular basis. While some initiatives have been taken to capture it, collecting it from school administration will not help the reliability. This data must be collected at the household level and should capture multiple dimensions, such as, the social background and economic status of those using the system, those serving it, the facilities, performance etc. at district and state level. Only then will it be possible to plan appropriate interventions.
- **Unrecognized institutions:** The Education Departments in the States generally do not collect information from the unrecognized institutions. In the All India Educational Survey conducted by NCERT, data from such institutions has also been collected, but it has not been possible to ensure complete coverage and reliability of information from such institutions. DISE has attempted this more recently. However, this information is being collected through schools themselves and its reliability remains to be tested. Besides, it is important to seek more details on the users' social background, including gender dimension.
- **Sanctioned and filled posts of teachers, qualifications and upgradation of knowledge and teaching skills:** This is relevant in the context of the teacher-student ratio as well as quality of teaching, absenteeism among teachers, inadequate training and skills. This data should be available for different type of schools but it should be collected from providers as well as users, including parents and students and drop outs or out of school children.
- **Average daily attendance:** No data was being collected systematically on average daily attendance of girls and boys in schools, although it is extremely important for planning and other purposes, as they indicate how the existing facilities are being utilized. This is also important for tracking girls and boys with low attendance. Collecting this from schools is unlikely to help where benefits are offered based on enrolment or attendance. There is a need to use household surveys to assess the level of attendance. It should also be possible to see the correlation between the attendance of teachers and students as well as other quality variables on the one hand and the situation of children on the other.
- **Data on learning outcomes:** While some data is collected on quality of education and achievement levels of students, data needs to be collected systematically on learning outcomes of boys and girls by type of school as well as by social category and gender, and reasons for variation need to be addressed. Especially in elementary school, reading deficit, writing deficit and deficit in mathematic skills need to be identified and addressed so that acceptable levels of learning are achieved.
- **Fund Flow to the Implementing Agencies:** In many cases, timeliness of the delivery of benefits makes a difference to its effectiveness. Often this is attributed to the delayed receipt of funds. Data should be collected on date or month of receipt of grants by schools as this is important in enabling delivery of services.

- **Private expenditure on education:** While the data on educational expenses from the Government and public funds are usually available, hardly any data exists on the private expenditure on education. The affordability of education and dropout rates are closely related, especially at higher level of education. At the school level, this is often responsible for choice of school type. Regular studies and surveys are needed for getting information on this important aspect of educational cost borne by the households and its effect on retention rate for both boys and girls. Higher cost of education works especially unfavourably for girls.
- **Unit cost of education:** Since there is no data on the expenditure incurred in different stages of education it is difficult to find out the unit cost of primary level, middle level, or secondary level of education. This is needed to enable appropriate allocation of funds.
- **Defining Drop-outs:** One of the problems with the data collected by DISE is the lack of clarity and uniformity in defining what constitutes a drop out child. While the official statistics of MHRD rely on the enrolment figures to arrive at the number of dropouts, NSSO Survey arrived at very different figures.
- **Out of School Children:** Various sources have differing figures when it comes to out-of-school children. While District Information System for Education (DISE) does not provide data on this, Census data calculates it as percentage of non-enrolled in the total population 6-14 years of age. However, there is the problem of different age group categories being used for different aspects of data being collected by different agencies, making it difficult to relate their data. For disabled population, for instance, data for children is provided for age groups 0-4, 5-9 and 10–19 years. For SC/ST enrolment, it is difficult to get 6-14 year Census data on SC/ST children.
- **Data on functional toilets for girls:** Access to toilets for girls is known to be a factor in the retention rates of the girl child. Looking at the raw data provided by DISE, studies point towards a significant amount of double-counting in those two categories, which is perhaps hindering a true assessment of how inclusive the schools are for the girl child.<sup>79</sup> Unless there is availability of water in toilets they will not be used. Hence more than construction of toilets, data on use of toilets is relevant.
- **Data on areas dominated by disadvantaged groups:** Data on educational institutions in areas dominated by scheduled castes, ethnic minorities and religious minorities is crucial due to the complex social structure that India has.
- **Data on location characterized by geo-physical difficulties:** Data on educational institutions by location characterized by geo-physical difficulties and frequent natural calamities is also crucial as these situations have implications for the realisation of right to education.
- **Impact of Reservation for Education of Weaker Sections:** Data on retention, survival and progress of children belonging to weaker sections or disadvantaged groups enrolled under 25% seats in private unaided schools is needed to assess the impact. This should be disaggregated by gender, social category, religion and location and should be collected at household level to capture the outcomes and their reasons more effectively. School level data on this can also be relevant for assessing policy. However household level data can be more revealing of the actual implementation and impact.

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<sup>79</sup> HAQ: Centre for Child Rights (2011). *India: Child Rights Index*, New Delhi.

- **Remedial Education:** Data on the beneficiaries and outcomes of remedial education as well as the quality of provisioning and facilities created is important to work towards retention and survival. This too needs to be collected at both household and school level with sufficient care to enable disaggregation along social category, gender and community lines at local level.
- **Different age categories:** Further, there is the problem of different age group categories being used for different aspects of data being collected by different agencies, making it difficult to relate their data. For the disabled population age-group used was 10-19 yrs. For SC/ST enrolment, it was difficult to get 6-14 year Census data on SC/ST children.
- **Inclusion of differently-abled boys and girls:** While data on ramps is being collected, this only addresses access by the orthopaedically challenged. Data on availability of other assistive devices to enable inclusion of the differently-abled in several physical and mental dimensions as well as their retention and survival rates at different levels of the education system are critical to address their needs.
- **Sexual harassment, abuse and humiliation in educational institutions:** Data pertaining to mechanisms to identify sexual harassment and abuse of girls and boys in educational institutions, information about the perpetrator of the abuse especially, i.e., whether teachers, staff or children in senior classes is critical for preventing and addressing occurrence and ensuring safety of children in educational institutions.
- **Gender sensitisation and human rights training** of teachers and educational administrators: Regular training in this regard is important to make teachers more responsive. Information on this needs to be available for proper planning.
- **Vocational and Technical Education and Skills:** This data is not available for SC/ ST communities or minorities but it is important to facilitate effective planning.
- **Higher Education:** In view of the fact that the existing database on higher education suffers from inadequacy, incomplete coverage and time lag, the Ministry of Human Resource Development (MHRD) has recently constituted a Task Force to conduct an All India Survey of Higher Education to fill this gap. One hopes that this would help improve planning as well as implementation of policies and programmes for the weak and marginalised groups better.

In order to ensure that children and women can get opportunities for developing their capabilities, it is important that issues of (a) availability, (b) equitable access, (c) quality and (d) affordability are addressed in the sphere of education. Besides addressing data gaps and rectifying inconsistencies or delays in data collection, and ensuring that data takes care to capture the situation of women and children seeking or not seeking education and getting or not getting access to certain kind and quality of education, it is important to ensure effective utilisation of data for appropriate policy making, especially, in view of the enormous resources that get committed to data generation.

## Capacities and Capabilities for Enhancing Well-being: Health

In the light of our Constitutional provisions, the 12<sup>th</sup> Plan and other national and international commitments, what indicators need to be tracked to monitor the well-being and progress of children and women in the context of health? What are the data gaps that must be addressed so that we have accurate estimates with regard to mortality, morbidity, sex ratio and disability of children and women as well as their access to health services and care? These issues are discussed in this chapter.

### 5.1 National Policy Documents: Health Concerns

Emphasizing that the health of the population is a “matter of serious national concern” and “there is an imminent need to closely monitor and direct health programmes in the country to meet the health needs of the population”, the Report of the National Statistical Commission 2001 rightly argued that an efficient Health Information System is a prerequisite for effective administration of health services and achieving the stated goal of “Health for All”.

While Health for All may be the stated goal, there are significant disparities and inadequacies in health provisioning. Hence, the National Health Policy (2002) severely criticized the state of health provisioning with regard to quality of public health infrastructure, insufficient funds, inadequate medical and para-medical personnel, negligible availability of consumables, obsolete and unusable equipment, dilapidated buildings, over-crowding and steep deterioration in the quality of the services. The Twelfth Plan also draws attention to many of these issues (see Box 5.1).

Prior to this, the Eleventh Plan<sup>80</sup> too drew attention to the need to recognise “the strong link between poverty and ill health...(as) the onset of a long and expensive illness can drive the non-poor into poverty. Ill health creates immense stress even among those who are financially secure. High health care costs can lead to entry into or exacerbation of poverty. The importance of

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<sup>80</sup> Planning Commission. *Eleventh Five Year Plan (2007-12)*. New Delhi: Government of India. Vol II. p.57.

public provisioning of quality health care to enable access to affordable and reliable health services cannot be underestimated. This is especially so, in the context of preventing the non-poor from entering into poverty or in terms of reducing the suffering of those who are already below poverty line.”

#### **Box 5.1: Issues pertaining to Health in the Twelfth Plan**

Among the issues highlighted in the Twelfth Plan are:

- inadequate availability of health care services and shortfall of doctors, nurses and staff;
- geographic disparities with rural areas being especially poorly served;
- varied quality, inadequately defined and ineffectively enforced regulatory standards;
- high out of pocket expenditures;
- low coverage by health insurance;
- high burden of chronic non communicable diseases and rising associated costs of NCDs, injuries as well as communicable diseases;
- low public expenditure on health;
- shortfalls on targets on several goals with disparities across states;
- reversal /worsening of the child sex ratio;
- suboptimal performance on IMR in EAG states, gaps in ante-natal care, skilled birth attendance and emergency obstetrical care and need to draw lessons from maternal death reviews;
- accelerated decline in IMR but at a lower than required pace;
- low couple protection rate and unmet needs for contraception; and
- concerns with regard to reduction in malnutrition.

Source: Planning Commission. *Twelfth Five Year Plan*, op.cit., Chapter 1.

The National Policy for Empowerment of Women 2001 aimed to adopt a holistic approach to women’s health. This included both nutrition and health services with special attention to the needs of women and the girl child at all stages of the life cycle; reduction of infant mortality and maternal mortality as a priority concern; and access to comprehensive, affordable and quality health care by women as well as attention to availability of accurate data at micro level on deaths, births and marriages with strict implementation of registration of births and deaths and compulsory registration of marriages.

It stated that in view of the high risk of malnutrition and disease that women face ...focused attention would be paid to meeting the nutritional needs of women at all stages of the life cycle.

Attention was drawn to the critical link between the health of adolescent girls, pregnant and lactating women and the health of infant and young children and the need to tackle the problem of macro and micro nutrient deficiencies especially amongst pregnant and lactating women as it leads to various diseases and disabilities. It sought to end intra-household discrimination in nutritional matters vis-à-vis girls and women and committed to providing widespread use of nutrition education as well as women's participation in the planning, superintendence and delivery of the system.

National Policy for Children, 2013, recognizes the right to life, survival, health and nutrition as an inalienable right of every child and makes a commitment that this will receive the highest priority. It commits the State to ensuring equitable access to comprehensive, and essential, preventive, promotive, curative and rehabilitative health care, of the highest standard, for all children before, during and after birth, and throughout the period of their growth and development. Accepting that every child has a right to adequate nutrition and to be safeguarded against hunger, deprivation and malnutrition, it commits the State to securing this right for all children through access, provision and promotion of required services and supports for holistic nurturing, wellbeing with nutritive attainment of all children, keeping in view their individual needs at different stages of life in a life cycle approach.

### **Box 5.2: State responsibility and Health of Children**

The National Policy for Children 2013 emphasises State responsibility for taking all necessary measures to:

- (i) Improve maternal health care, including antenatal care, safe delivery by skilled health personnel, post natal care and nutritional support
- (ii) Provide universal access to information and services for making informed choices related to birth and spacing of children
- (iii) Secure the right of the girl child to life, survival, health and nutrition
- (iv) Address key causes and determinants of child mortality through interventions based on continuum of care, with emphasis on nutrition, safe drinking water sanitation and health education
- (v) Encourage focused behaviour change communication efforts to improve new born and childcare practices at the household and community level
- (vi) Provide universal and affordable access to services for prevention, treatment, care and management of neo-natal and childhood illnesses and protect children from all water borne, vector borne, blood borne, communicable and other childhood diseases
- (vii) Prevent disabilities, both mental and physical, through timely measures for pre-natal, peri-natal and post-natal health and nutrition care of mother and child, provide services for early detection, treatment and management, including interventions to minimise and prevent further disabilities, prevent discrimination faced by children with disabilities (mental and physical), and provide services for rehabilitation and social support
- (viii) Ensure availability of essential services, supports and provisions for nutritive attainment in a life cycle approach, including infant and young child feeding (IYCF) practices, special focus on adolescent girls and other vulnerable groups, and special measures for the health, care and nutrition, including nutrition education, of expectant and nursing mothers
- (ix) Provide adolescents access to information, support and services essential for their health and development, including information and support on appropriate life style and healthy choices and awareness on the ill effects of alcohol and substance abuse
- (x) Prevent HIV infections at birth and ensure infected children receive medical treatment, adequate nutrition and after-care, and are not discriminated against in accessing their rights
- (xi) Ensure that only child safe products and services are available in the country and put in place mechanisms to enforce safety standards for products and services designed for children
- (xii) Provide adequate safeguards and measures against false claims relating to growth, development and nutrition.

## 5.2 International Policy Documents: Health Concerns

Internationally too, the approach to women's health was holistic and covered the entire life cycle.

Hence the Beijing Platform for Action proposed actions toward five strategic objectives:

- Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services.
- Strengthen preventive programmes that promote women's health.
- Undertake gender-sensitive initiatives that address sexually transmitted diseases, HIV/AIDS and sexual and reproductive health issues.
- Promote research and disseminate information on women's health.
- Increase resources and monitor follow-up for women's health.

Reiterating some of these demands, the twenty-third special session of the General Assembly called for "policies and measures to address, on a prioritized basis, the gender aspects of emerging and continued health challenges, such as malaria, tuberculosis, HIV/AIDS and other diseases having a disproportionate impact on women's health, including those resulting in the highest mortality and morbidity rates."<sup>81</sup> It also called for the allocation of the necessary budgetary resources to ensure the highest attainable standard of physical and mental health, so that all women have full and equal access to comprehensive, high-quality and affordable health care, information, education and services throughout their life cycle<sup>82</sup>.

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) commits State parties to take "all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning" and to "ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation."<sup>83</sup> In 1999, the Committee on the Elimination of Discrimination against Women stressed the importance of giving "special attention" to the health needs of women belonging to "vulnerable and disadvantaged groups, such as migrant women, refugee and internally displaced

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<sup>81</sup> United Nations General Assembly resolution S-23/2, para. 72 (a) cited in Beijing Platform for Action Section C page 1. Available at: [www.un.org/womenwatch/daw/beijing/beijingat10/C. Women and health.pdf](http://www.un.org/womenwatch/daw/beijing/beijingat10/C. Women and health.pdf). Accessed 30<sup>th</sup> May 2014.

<sup>82</sup> *ibid.*

<sup>83</sup> For complete text of the article, see: [www.un.org/womenwatch/daw/cedaw/text/econvention.htm#article12](http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm#article12) cited in Beijing Platform for Action Section C page 1.

women, the girl-child and older women, women in prostitution, indigenous women and women with physical or mental disabilities.”

The Commission on the Status of Women further enhanced the commitments of the *Platform for Action* on women and health by drawing attention to infectious diseases, mental health and occupational diseases as well as “women’s right to the highest attainable standards of physical and mental health and their access to affordable and adequate health-care services ...”<sup>84</sup>

While Millennium Development Goals (MDGs) 4, 5 and 6 directly focus on reducing child mortality, improving maternal health and combating HIV/AIDS, malaria, and other diseases, many of the other MDGs have significant implications for the health of women and children. For instance, MDG1 is concerned with reducing extreme poverty and hunger, which lead to undernutrition and ill health. Similarly, MDG 7 is concerned with access to safe drinking water and sanitation, both of which reduce malnutrition and disease load.

Article 25 of the UN Convention on the Rights of Persons with Disabilities and its Optional Protocol with regard to Health requires States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability and that they take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular, States Parties shall:

- a) Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;
- b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;
- c) Provide these health services as close as possible to people's own communities, including in rural areas;
- d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;

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<sup>84</sup>Forty-third session, 1999, and Fiftieth session, 2005.

- e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;
- f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

### 5.3 Data Availability and Sources

Health related data is available from the following sources:

**The Office of Registrar General of India (RGI)**, Ministry of Home Affairs conducts the decennial **Census** which provides data on population, sex ratio, child sex ratio and household amenities like safe drinking water, sanitation, electricity, etc. Census 2011 covered 35 States/Union Territories, 640 districts, 5,924 sub-districts, 7933 towns and 6,40,930 villages. The Office of the RGI also conducts the **Sample Registration System (SRS)** annually and provides State wise estimates of percent distribution of population by age, sex and residence, marital status, fertility rate, age specific death rate by sex and residence, birth rate, sex ratio at birth, child sex ratio, child and infant mortality rates by sex, maternal mortality ratio, percent live births where mothers received medical attention, annual death rate, and cause of death for males and females.

**Registration** of births and deaths is mandatory under the Registration of Births and Deaths Act, 1969 and this is coordinated and administered by the Registrar General and Census Commissioner of India (RGI) and designated State level authorities in the State Governments. The **Civil Registration System** provides information regarding registered births, deaths and infant deaths with rural-urban & sex-wise break-up and sex ratio at birth based on Civil Registration Records. The level of registration of births increased from 59.5% in 2002 to 83.6% in 2011 and of deaths from 52.1% in 2002 to only 67.4% in 2011.

**National Family Health Survey (NFHS)** of the Ministry of Health and Family Welfare (MoHFW) coordinated by International Institute of Population Sciences (IIPS), Mumbai is conducted at the National and State level. So far three rounds of NFHS have been conducted in 1992-93, 1998-99 and 2005-06. NFHS-3 conducted during 2005-06 mainly covered the areas of fertility, marriage, family planning, unmet need, ante-natal care, immunization etc.; breast feeding practice, child nutrition and health, infant and child mortality, women's nutrition,

anaemia, HIV/AIDS estimation (in 2005-06, women's autonomy and domestic violence. The fourth round of NFHS or NFHS-4 is being implemented in 2014-15.

**District Level Household Survey (DLHS)** of the MoHFW is also coordinated by IIPS, Mumbai at the State and District levels. Three rounds of DLHS have been conducted in 1998-99, 2002-2004 and 2007-08. The DLHS-3 conducted during 2007-08 provides district level data on ante natal care and immunization coverage, extent of safe deliveries, contraceptive prevalence and unmet need for family planning, awareness about RTI/STI and HIV/AIDS, assessment of the quality of RCH Services and availability of critical inputs in public health care establishments.

**Annual Health Survey** was conducted by the Office of Registrar General of India, Ministry of Home Affairs at the district level in 9 identified states with the objective of providing vital inputs for evidence based intervention and monitoring. The 9 states were Assam, Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Uttar Pradesh and Uttarakhand. This was done regularly for 3 years. Periodicity will be once every 3 years in future. In all, 161 indicators are available from AHS. These include fertility, sex ratio, marriage, mortality, mother and child care, ante natal care, delivery care, post natal care, Janani Suraksha Yojana (JSY), immunization, Vitamin A and iron supplements, birth weight, childhood disease, birth registration, breastfeeding and supplementation, awareness in mothers, abortion, family planning practices, disability, morbidity, personal habits, housing and household characteristics, etc. Sex ratio indicators include sex ratio at birth, 0-4 years and all ages.

**National Sample Survey Organisation (NSSO)** has been collecting information on various facets of the Indian economy through nationwide sample surveys. A survey on 'Morbidity, Health care and the Condition of the Aged' was undertaken by the NSSO during the NSSO 60<sup>th</sup> Round (January - June 2004) at the request of Ministry of Health and Family Welfare.

**Concurrent Evaluation of NRHM** was conducted in 2009-10 at the District level and was coordinated by IIPS, Mumbai. It provides key indicators related to the core strategies of NRHM such as infrastructure and management practices, communitisation of services and innovations at community level, human resources, response to NRHM at the grass root level, ASHA and Janani

Suraksha Yojana (JSY) Janani Shishu Suraksha Yojana (JSSK) has been introduced and is monitored in NRHM.

Additionally there are seven **Regional Evaluation Teams** (RETs) located in the offices of Regional Directors, Ministry of Health & Family Welfare, Government of India at Lucknow, Patna, Kolkata, Chennai, Bengaluru, Bhopal and Delhi (HQ). Each RET consists of one Evaluation Officer and four Evaluation Assistant. However, due to large number of vacancies, the RETs are functioning with skeleton staff of two members per team only. Regional Evaluation Teams (RETs) evaluate the implementation of Health & Family Welfare Services provided in the States/UTs and check the reliability of information relating to the performance of various health programmes. Each RET is required to undertake every month a tour to two adjoining district of a State allocated to them by the Ministry. During the evaluation work the teams visit district headquarters and facilities like, Community Health Centres (CHCs), Primary Health Centres (PHCs), Sub-Centres (SCs) and Urban FW Centres etc. The teams also cover acceptors of Family Planning (FP) beneficiary of Maternal and Child Health (MCH) Services, Janani Suraksha Yojana (JSY) and also interact with ASHAs and Village Health and Sanitation Committee (VHSC) Members. The sample of beneficiaries is selected from the records/registers maintained by the Health Centres. The teams undertake both qualitative and quantitative assessment of beneficiaries. This enables verification about the genuineness of the acceptors and beneficiaries reported.

**Central Bureau of Health Intelligence** (CBHI) is the National Nodal Institution for Health Intelligence in the country and it maintains and disseminates the National Health Profile (NHP), Health Sector Policy Reform Options Database, Inventory and GIS Mapping of Govt. Health Facilities in India, etc. and also reviews the progress of Health Sector Millennium Development Goal (MDG) in India. Data from administrative sources is compiled with regard to the number of Government hospitals and beds in rural and urban areas based on information provided by Directorate General of State Health Services; medical, dental, nursing etc colleges, admission capacity, students admitted to different courses, number of beds etc. based on information provided by the Councils of the concerned disciplines; blood banks, CGHS facilities etc based on information provided by the concerned sections of the Ministry of Health and Family Welfare;

and health finance indicators based on information provided by the Budget Division of the Departments of Health, NRHM, AYUSH, NACO and Health Research.

**Rural Health Statistics** pertaining to functioning PHCs and CHCs, facilities available at Sub centres, PHCs and CHCs, doctors, specialists, ANMs and other medical staff, etc are compiled and disseminated by the Ministry of Health and Family Welfare based on administrative data received from Governments of States and Union Territories.

#### 5.4 Data Gaps and Concerns

There are many concerns that need to be addressed in the context of access to health care for children and women. Some of these are outlined below:

- **Data to help address health needs of women and children throughout the life cycle:** The primary focus of health provisioning for women and children is on reproductive health and immunisation instead of on the overall state of health and disease burden suffered by women and men as well as girls and boys. Planning for women's health must focus on women's survival and health throughout the life cycle.
- **Periodicity of data regarding the female male ratio:** Glaring gender discrimination is visibly manifested in the low female-male ratio or sex ratio. Although the sex ratio for India increased between 2001 and 2011, it still remains very low. Even more serious is the fact that the child sex ratio (0-6 years) for India has worsened over this period. Discrimination against the girl child is no longer limited to a few states: the child sex ratio (0-6 years) worsened in all except 8 states. The largest improvement was in Punjab, but despite this, the child sex ratio in the state still remains significantly below the low average for India. Periodicity is an issue since the census provides data once in a decade. Sex ratio at birth is available from SRS on a 3 yearly moving average but this is only for larger states. Regular flow of data from critical districts is needed.
- **Gaps in data on MMR, Life Expectancy etc for several States:** While the Birth Rate, Death Rate and IMR are available annually at the State level, Neo natal and Under 5 mortality are available annually for only 20 major states. MMR is available once in 3 years and is only available for 15 states. Similarly data on Life expectancy is available for less than half the total States/ UTs.
- **Lack of data at the district and below level:** With decentralised planning the "demand for data to derive mortality indicators at the State, district and lowest levels is increasing. Lack of estimates at the district and below level, is a serious handicap in planning preventive action at these levels."<sup>85</sup> While efforts are being made to fill these gaps through the Annual Health Survey, around two thirds of India's districts are not covered by the AHS. Besides AHS was for three rounds only. Data from the Civil Registration

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<sup>85</sup>Government of India (2001). *Report of the National Statistical Commission*, Ministry of Statistics and Programme Implementation. New Delhi.

System must be improved in order to get district level impact indicators. “Majority of the information is available at the state level with almost negligible at the district level, which is a limitation for the practical implementation of health programmes at the district level.”<sup>86</sup>

- **Off target on reducing mortality:** If targets for MMR are to be achieved, data will be needed based on investigation into the factors leading to each case of maternal death so that corrective action can be taken and reviews conducted to ensure follow-up. There is no data on factors leading to maternal mortality.
- **Data gaps for Cause of Death:** Raban et. al. highlight the fact that “there is a lack of primary data on cause of death information for the majority of the leading causes of disease burden in India. While there are modelled estimates of causes of death generated by the Global Burden of Disease and Risk Factors project, there are minimal primary data on causes of death. These data would normally be generated by a complete death registration system, which is not present in India.”<sup>87</sup> The report on medically certified cause of death-2009 prepared by the office of the RGI, is based on data for 9,46,018 total medically certified deaths (19.9 per cent of total registered deaths) supplied by 27 States/UTs. As noted in the report “owing to different levels of efficiency of medical certification across the States/UTs, the number of deaths reported therein may lack the representative character in the strict sense.” Additionally, there are issues of coverage with regard to deaths that take place at home or in the private sector.
- **Massive disease burden:** The Annual Report to the People of the MOHFW highlights the massive disease burden that we face since one fifth of the 9.2 million cases of TB that occur in the world every year are in India; more than 1.5 million persons are infected with Malaria every year (almost half of them suffer from *p.falciparum* Malaria); diseases like Dengue and Chikungunya have emerged in different parts of India; one-third of global cases infected with filaria live in India; nearly half of leprosy cases detected in the world in 2008 were contributed by India; and more than 300 million episodes of acute diarrhoea occur every year in India in children below 5 years of age.
- **Lack of national morbidity/epidemiological studies:** Basic morbidity data or an epidemiological profile on which all health care planning should be based is not available. Morbidity/epidemiological studies on a national scale have never been done, except for the one on tuberculosis way back in 1957.<sup>88</sup>
- **Data gaps for non-communicable diseases and injuries:** “This is a significant gap as India is undergoing an epidemiological transition with these diseases/ conditions accounting for a major proportion of disease burden.”<sup>89</sup>
- **Gender differentials in morbidity and treatment:** Differentials in morbidity and mortality and differential access to treatment and care for women and girls need attention. The morbidity estimates from the 60th round of NSSO (January to June 2004) show a

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<sup>86</sup>Raban, Magdalena Z., Dandona, Rakhi and Dandona, Lalit (2009). “Essential health information available for India in the public domain on the internet.” *BMC Public Health*, Vol. 9. June. Available at: <http://www.biomedcentral.com/1471-2458/9/208>.

<sup>87</sup>ibid.

<sup>88</sup> Duggal, Ravi. (1998). “Making A Health Services Database: A Discussion Note.” Centre for Enquiry into Health and Allied Themes (CEHAT) Available at <http://www.cehat.org/go/uploads/Publications/a83.pdf>.

<sup>89</sup> Raban et. al., op.cit.

significant increase in the proportion of ailing persons.<sup>90</sup> The proportions were higher among women than for men in both rural and urban areas. Even though reported morbidity is higher among women than men, this does not get reflected in access to treatment.

- **Micro studies and high morbidity:** Micro-studies reflect far higher estimates of morbidity than those recorded by the NSSO 2004 survey, which is also dated. This has implications for budget allocations for the health sector.
- **Gender differentials in care and treatment:** While poverty and ill health affect both men and women, the problems get compounded for women for many reasons. Firstly, “while men have higher rates of disease morbidity for many major diseases, including TB and malaria, a larger percentage of women die due to the fact that they are often only brought in for diagnosis and treatment at severe stages of illness, when treatment is less effective.”<sup>91</sup> Secondly, when any member of the family falls ill, the burden of care is disproportionately on women. Thirdly, “more than half of the female population in India suffers from anaemia due to lack of nutrition.”<sup>92</sup> Since they are the last to eat in many homes, where there is inadequate availability of food, this cultural norm often leads to intra-household discrimination in access to food and nutrition.<sup>93</sup>
- **Lack of data on care needs and inequitable care burden:** Since women provide critical support through caring for young children, for family members who suffer from chronic or other diseases, older persons, disabled children and older persons, their role as care givers must be recognized and mechanisms found to alleviate the difficulties, drudgery and depression that affect them due to these tasks. The burden on home-based caregivers must be reduced by strengthening Primary Health Centres and Public Hospitals, community care homes, outreach mobile services and hospices. Care-giving within the home saves the public health system both time and cost. Hence appropriate indicators are needed to capture months of care provisioning, support provided by the State and the distribution of care burden between men and women.
- **Gaps in age and sex disaggregated data on diseases:** Disease wise information is sporadic. Data on morbidity is neither available disease wise nor available separately for males and females and different age groups. While strategies are needed for identification of specific barriers to access to health care and removal of these constraints, this requires availability of information on disease-specific morbidity. This includes disease burden due to malaria, dengue, chikungunia, Japanese encephalitis, filariasis, tuberculosis, leprosy, kalaazar, diarrhoea, jaundice, hepatitis, diabetes, cancer, cardiovascular diseases, asthma and other respiratory diseases, HIV/AIDS, arthritis, skin related diseases, orthopaedic problems, disabilities of different kinds, mental health, injuries, etc.
- **Disaggregated data on specific diseases:** In the case of specific diseases e.g. tuberculosis, data may exist but may not be provided male/ female or age wise with information available separately for children. The number of women who suffer from the disease may be higher than the number captured for several reasons.

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<sup>90</sup> Government of India (2006). Press Note dated 16 March.

<sup>91</sup> CARE (2006). *Women's Empowerment for Better Health Outcomes*. CARE, New Delhi.

<sup>92</sup> *ibid.*

<sup>93</sup> Sudarshan, Ratna M. and Bhattacharya, Rina (2004). *Chronic Poverty and Gendered Patterns of Intra-Household Resource Allocation: A case study from East Delhi*. CPRC-IIPA Working Paper 12, IIPA, New Delhi.

- **Disaggregated data on health seeking behaviour and disease burden:** There are biological differences in the reactions of men and women to medication, anaesthesia, and in their immunity to disease. Data is needed to capture these differences. Data on health seeking behaviour and disease burden must be presented separately for males and females.
- **Out of pocket health expenditures:** The burden of communicable diseases is massive and incidence of non-communicable diseases and old age diseases is rising. This leads to high levels of out of pocket health expenditures and impoverishment and must be captured by data. Most of the population neither has health insurance nor pension. Even for those who are well off and have health insurance there are issues of pre-existing conditions and coverage.
- **Low public sector provisioning for health:** Juxtaposed against the high communicable and non-communicable disease burden, is the low public sector provisioning for health and unmet commitments regarding providing access to care. Public expenditure on health care in India is among the lowest in the world, both as a proportion of total expenditure on health care and as a percentage of GDP. National Health Accounts 2004-05 show that Government expenditure on health care constitutes only 19.67% of total expenditure while households themselves spend 71.13 per cent<sup>94</sup>. In sharp contrast Government expenditure on health care is 87% of total expenditure in UK, 80% in France, 64% in Thailand and 46% in Srilanka<sup>95</sup>. The budget for health has to increase significantly for delivery of equitable health care of a high quality. Disparities in access and quality of health care services are linked to both spatial location and ability to pay.
- **Violence against women and girls has health consequences:** There are health consequences of violence against women and girls and these can include fractures, injuries, pain, depression, trauma, gastrointestinal disorders and other conditions. Hence domestic violence is clearly a public health issue. While the Protection of Women from Domestic Violence Act came into force on 26<sup>th</sup> October 2006, the necessary systems, personnel and physical and financial allocations need to be put into place for implementation of the Act. In the absence of data pertaining to domestic violence and support provided, implementation of the Act cannot be monitored.
- There should be a minimum list of essential public health measures and essential preventive and curative medical care services that will be provided to all men and women to treat and prevent diseases.
- **Shortfalls in essential medical staff and health infrastructure:** Despite an increase in the number of public health facilities, there is a shortfall of 20 per cent for Sub-Centres, 24 per cent for PHCs and 37 per cent for CHCs, particularly in Bihar, Jharkhand, Madhya Pradesh and Uttar Pradesh (12<sup>th</sup> Plan page 4). The gap between staff in position and staff required at the end of the 11<sup>th</sup> Plan was 52 per cent for ANM and nurses, 76 per cent for doctors, 88 per cent for specialists and 58 per cent for pharmacists. Huge gaps remain in training capacity for all categories of health personnel. Issues of training, timely payment of incentive to staff etc also need attention. Tracking the significant shortfalls in essential infrastructure, nurses, doctors, other staff and drugs requires data as does deviation from

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<sup>94</sup> Government of India (2009). *National Health Accounts 2004-05*. New Delhi: Ministry of Health and Family Welfare.

<sup>95</sup> *ibid*.

access to PHCs, CHCs and medical care provided based on population and area norms. No individual should fail to secure adequate medical care because of an inability to pay.

- **Data gaps for private sector provisioning of healthcare:** There is lack of information on “infrastructure and human resources in the private sector which provides a large proportion of the health services in India.”<sup>96</sup>
- **Gaps in data on disability:** Data on disability are available through decennial Census and periodical NSSO Surveys. The last NSSO survey on disability was conducted in 2002. Census 2011 provides age group wise data for males and females and for SCs and STs for different types of disability. The data is available at the district level. Estimates of disability differ significantly between the Census and NSSO. Census 2001 reported 2.1%, Census 2011 reported 2.23% and NSSO 2002 reported 1.8% of the population suffered from disability. However NSSO 2002 also finds that “about 8.4 per cent and 6.1 per cent of the total estimated households in rural and urban India respectively, reported to have at least one disabled person.” Mitra<sup>97</sup> rightly draws attention to the “exclusion of disability categories in both NSSO and the Census. The reliance on PWD Act categories is a limiting factor. There are numerous examples of excluded disability categories, including autism, thalassemia, haemophilia, and many learning disabilities.” Further, The method of questioning on disability in both census and NSSO, which relies on a traditional “diagnostic” identification of disability by “untrained interviewers...yields the lowest disability estimates.” Information is needed on each of the many different types of disability as well as prevalence and incidence of multiple disabilities.

The Report of the National Statistical Commission 2001 lamented the lack of morbidity data or an epidemiological profile on which all health care planning should be based and reiterated the importance of data on morbidity and mortality as well as the geographical distribution of occurrence of diseases and deaths by their causes for different age groups, sex, occupations and other characteristics for health planning strategy. Many of the recommendations made by the Commission still need urgent attention. Some of them are mentioned in Box 5.3 below.

Making data available in this way needs priority attention. The focus in planning for health should be on survival and health throughout the life cycle - from conception to old age - while recognising the differences between men and women in disease burden and health needs at

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<sup>96</sup> Raban et. al., op.cit.

<sup>97</sup> Mitra, Sophie (2012). *Disability Data in India*, Fordham University, Washington, D.C. Available at: [http://siteresources.worldbank.org/DISABILITY/Resources/280658-1327953883745/8402175-1337109498381/module3\\_Mitra.pdf](http://siteresources.worldbank.org/DISABILITY/Resources/280658-1327953883745/8402175-1337109498381/module3_Mitra.pdf).

different stages and correcting prevailing inequities and differentials in health service provisioning<sup>98</sup>.

**Box 5.3: National Statistical Commission Recommendations that need urgent attention**

- Periodic sample surveys of households on morbidity in the country, by trained investigators taking in to account the seasonal variations in diseases.
- The National Statistical System should bring out regularly the morbidity and mortality patterns in the different age groups at least at the district/regional levels including for diseases like T.B. and AIDS.
- The morbidity and mortality surveys should be conducted in two stages. While at the first stage, the data could be collected on a fairly large sample; at the second stage, data from a sub-sample may be collected and verified by trained medical functionaries on certain specific aspects like causes of death, maternal mortality audit, etc.
- Quality of data on infant, child mortality and maternal mortality can be greatly improved by conducting comprehensive sample surveys of pregnant women and by a follow up of these over one or more years after childbirth. Such surveys can be conducted on a small scale at local levels.
- There should be a procedure for medical certification of the cause of death to be implemented at least on a sample basis throughout the country regularly, in order to have a better understanding of the causes or factors underlying deaths in the country. The death records should include symptom-based information on the possible cause of death.
- The scheme of Medical Certification of Cause of Death (MCCD) envisaged under the Registration of Births and Deaths Act, 1969 should be strengthened. The State Governments should attach a high priority to the implementation of this scheme both in the rural and urban areas. There should be a system for prompt reporting of deaths due to certain diseases, like cholera, polio, malaria, diphtheria, etc. so that immediate preventive and curative measures can be taken.
- The statistical system in all hospitals, nursing homes and other treatment facilities and dispensaries including those in the private sector should necessarily include certain basic information on each patient and this information in prescribed formats should flow to Health Statistical System within a fixed time frame.

Source: Report of the National Statistical Commission 2001.

<sup>98</sup> Mehta, Aasha Kapur and Shiva Kumar, A.K. Comments submitted to Planning Commission with regard to Health in April 2012 as members of the Working Group of Feminist Economists.

## **Paid and Unpaid Work, Statistical Invisibility of Women's Work, Basic Amenities and Assets**

This section of the paper examines the availability of data and identifies data gaps for situation analysis of women in the context of contribution to work. It discusses paid and unpaid work, statistical invisibility of women's work especially in Agriculture and the drudgery associated with collection of water and fuelwood etc for energy.

### **6.1 Paid and Unpaid Work, Wages and Employment: Context and Commitments**

Government has made a large number of commitments with regard to work and livelihood. Important among the principles of policy to be followed by the State is that it shall direct its policy towards securing that the citizens, men and women equally, have the right to an adequate means of livelihood; that the ownership and control of the material resources of the community are so distributed as best to subserve the common good; that there is equal pay for equal work for both men and women; and that the health and strength of workers, men and women, and the tender age of children are not abused and that citizens are not forced by economic necessity to enter avocations unsuited to their age or strength.

The National Policy for Empowerment of Women 2001 states that women's contribution to socio-economic development as producers and workers will be recognized in the formal and informal sectors (including home based workers) and appropriate policies relating to employment and to her working conditions will be drawn up. Such measures could include the reinterpretation and redefinition of conventional concepts of work wherever necessary e.g. in the Census records, to reflect women's contribution as producers and workers; the preparation of satellite and national accounts; and development of appropriate methodologies for undertaking these.

CEDAW Article 11 requires that the State take all appropriate measures to eliminate discrimination against women in the field of employment in order to ensure, on a basis of equality of men and women, the same rights, in particular:

- (a) The right to work as an inalienable right of all human beings;
- (b) The right to the same employment opportunities, including the application of the same criteria for selection in matters of employment;
- (c) The right to free choice of profession and employment, the right to promotion, job security and all benefits and conditions of service and the right to receive vocational training and retraining, including apprenticeships, advanced vocational training and recurrent training;
- (d) The right to equal remuneration, including benefits, and to equal treatment in respect of work of equal value, as well as equality of treatment in the evaluation of the quality of work;
- (e) The right to social security, particularly in cases of retirement, unemployment, sickness, invalidity and old age and other incapacity to work, as well as the right to paid leave;
- (f) The right to protection of health and to safety in working conditions, including the safeguarding of the function of reproduction.

Article 11 additionally requires that the State take appropriate measures to prevent discrimination against women on the grounds of marriage or maternity and to ensure their effective right to work.

Further Article 14 requires that States Parties take into account the particular problems faced by rural women and the significant roles which rural women play in the economic survival of their families, including their work in the non-monetized sectors of the economy, and shall take all appropriate measures to ensure the application of the provisions of this Convention to women in rural areas.

## **6.2 Problems in Estimation: Statistical Invisibility of Women's Work**

### **Estimates of Work Force Participation Rates of Women**

Data on Work Force Participation is available from the Census on a decennial basis and from the National Sample Survey Organisation (NSSO) which has been conducting all-India household surveys on employment and unemployment since its 9th round (May-September, 1955). All-India surveys on employment and unemployment are being conducted on a quinquennial basis on a large sample of households from the 27<sup>th</sup> Round (October 1972 – September 1973). Despite improvements, female worker population ratio or work force participation rates of women under-report women's work. Over all the NSSO large sample rounds between 1973-74 and 2011-12, while the worker population ratio for males has uniformly been more than 50 percent in both rural and urban areas, the corresponding estimate for females has varied between 25 to 34

percent for rural and 13.4 to 16.6 percent for urban areas. Since at least the 1970s, it has been pointed out that there are serious inaccuracies in the recording of work contributed by women and this makes the women statistically invisible as workers.

Some of these reasons are documented in more detail below.

The statistical invisibility of women's work or measurement failure could be due to several factors.<sup>99</sup> The literature on the subject identifies the following among others:

- Indian women are engaged in two kinds of work: one that produces an income and the other that does not. The former in turn has home-based work and work outside the home. Even within the latter, there are many components that are not 'pure' domestic work like cooking, cleaning, child care but encompass post-harvest processing, livestock maintenance, gathering of fuel, fodder, water and forest produce unpaid family labour in family farm or family enterprise and so on.<sup>100</sup>
- Dominance of domestic work leading to under reporting of other work.<sup>101</sup>
- Cultural bias regarding women working outside the home and under-reporting of it. Since information is usually obtained from the male head of household, this leads to an under-estimation of women's work participation in non-domestic work, especially outside the home.<sup>102</sup>
- The tendency of women to identify themselves as 'only housewives' even when they are economically active, reflects a common cultural pattern in large parts of the Third World. Unless questions are formalised with sufficient care there is a strong likelihood of her under-estimating the economically productive content of her work, insofar as she herself considers it a part of 'domestic duties' and reports it as such.<sup>103</sup>
- Bias of interviewers; poorly constructed questionnaires; ambiguous and ill-understood definitions of labour force participation.<sup>104</sup>
- The nature/style of women's work where they perform several tasks in a day for small amounts of time, so classification based on one main activity is difficult.<sup>105</sup>
- Work styles of women are determined by history, biology and attitudes - a whole package. Women contribute to productive activity but at the processing/pre-marketing, less visible monetised stage; intermingling of production for self-consumption with

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<sup>99</sup>Based on Aasha Kapur Mehta (2000). "The Invisible Workers: Women's Unrecognised Contribution to the Economy." *Manushi*, November-December, and on a background paper on Women and the Economy in India for The South Asian Human Development Report.

<sup>100</sup>Krishnaraj, Maithreyi (1990). "Women's Work in Indian Census: Beginnings of Change." *Economic and Political Weekly*, Vol. 25, No. 48-49, December 1-8.

<sup>101</sup>Jain, Devaki and Chand, Malini (1982). "Report on a Time Allocation Study: Its Methodological Implications." Institute of Social Studies Trust, Technical Seminar on Women's Work and Employment, April 9-11.

<sup>102</sup>Agarwal, Bina (1985). "Work Participation of Rural Women in Third World: Some Data and Conceptual Biases." *Economic and Political Weekly*, Vol. 20, No. 51-52, December 21-28, p. A-156.

<sup>103</sup> *ibid.*

<sup>104</sup> Anker, Richard, Khan, M.E. and Gupta, R.B. (1998). *Women's participation in the labour force: A methods test in India for improving its measurement*. ILO Series on Women, Work, and Development. Geneva: ILO. p. 1.

<sup>105</sup> *ibid.* p.144.

production for sale, are not easy to disentangle, and the existing designs do not capture them.<sup>106</sup>

- Mistaken perception of women's roles by respondents and interviewers.
- Contribution to 'family' occupations like agriculture, animal husbandry, weaving, cottage industries, where the contribution of women gets merged with that of the family and becomes invisible.<sup>107</sup>
- Women of poor rural households are routinely involved in manual work related to cultivation and processing and in addition work in the fields. Most peasant women do a significant proportion of the work involved in pre-and postharvest operations that are done in the home compound. The working day of a poor woman in India may be from 12 to 16 hours. 'Invisibility' of women's work, domestic chores and other tasks, is part of cultural/ideological system which views man as the primary breadwinner.<sup>108</sup>

The NSSO uses the following activity codes for determining work (see Table 6.1).

**Table 6.1: Activity Status and Code**

Activity status	Code
worked in household enterprise (self-employed) as own account worker	11
worked in household enterprise (self-employed) as employer	12
worked as helper (unpaid family worker) in household enterprises (self-employed)	21
worked as regular wage/salaried employee	31
worked as casual wage labour: in public works	41
in other types of work	51
did not work but was seeking and/or available for work	81
attended educational institutions	91
attended domestic duties only	92
attended domestic duties and was also engaged in free collection of goods (vegetables, roots, firewood, cattle-feed etc) sewing, tailoring, weaving, etc. for household use	93
rentiers, pensioners, remittance recipients, etc	94
not able to work due to disability	95
others (including begging, prostitution, etc.)	97

Codes 11, 12, 21, 31, 41 & 51 refer to the 'employed', 81 to the 'unemployed' and the remaining viz. 91 to 95 and 97 refer to the 'not in labour force'. It may be noted that:

- a person who attended domestic duties only is assigned code 92 and

<sup>106</sup>Devaki Jain and Malini Chand, op. cit., p.40.

<sup>107</sup> Shramshakti (1998). *Report of the National Commission on Self employed Women and Women in the Informal Sector*, National Commission on Self Employed Women and Women in the Informal Sector, June, New Delhi.

<sup>108</sup> Duvvury, Nata (1989). "Women in Agriculture: A Review of Indian Literature." *Economic and Political Weekly*, Vol. 24, No. 43, October 28, p. WS-97.

- (ii) a person who mainly attended domestic duties and was also simultaneously engaged in free collection of primary goods (vegetables, roots, firewood, cattle-feed, etc), sewing, tailoring, weaving, making baskets and mats, etc., for household use, his/her usual principal status will be assigned as 93.

In the fifth quinquennial survey on employment and unemployment in its 50<sup>th</sup> round (1993-94) the NSSO reported information regarding participation of women in household work and other specified household activities which resulted in economic benefits to their households.<sup>109</sup> Each person categorised as usually engaged in household duties in the principal status was asked whether he or she pursued certain specified activities more or less regularly for household consumption along with his/her normal house chores. The activities were grouped into three broad categories:

- (i) activities relating to agricultural production like maintenance of kitchen garden, work in household poultry, dairy, etc. including free collection of agricultural products for household consumption.
- (ii) processing of primary products produced by the households for households' consumption and
- (iii) other activities for own consumption but resulting in economic benefits to the households.

During 1993-94, about 29 per cent of rural women and 42 per cent of urban women in India were usually (principal and subsidiary) engaged only in household duties. Each person categorised as usually engaged in household duties in terms of principal status was asked whether certain specific activities listed under categories (i) to (iii) above were pursued more or less regularly for household consumption also along with normal household chores.

Subsequently, they noted, that 58 percent of women characterised as engaged only in household work in rural areas and 14 percent in urban areas were actually maintaining kitchen gardens, household poultry, collecting fish, collecting firewood, husking paddy, grinding food-grains, preserving meat, preparing gur, making baskets etc., or in other words they were engaged in economic activities. The NSSO calculates the percentage of such women, incorrectly categorised as "not working", as constituting 17.0 per cent of women in rural areas and 5.8 per cent in urban areas. An upper limit of women worker population ratio, therefore, can approximately be

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<sup>109</sup> Government of India. Ministry of Statistics and Programme Implementation (1997). *Sarvekshana*, Vol. XXI, No. 2, Issue, 73, October-December. A Note on Participation of Indian Women in Household Work and Other Specified Activities, 1993-94.

obtained by raising the population ratio of all women workers (principal and subsidiary status) by adding to them the above proportions.

This problem still needs to be addressed. The 68<sup>th</sup> Round (2011-12) estimates the Worker Population Ratio (WPR) for women of all ages, according to the usual status, (considering both principal activity and subsidiary activity), to be 24.8 per cent in rural areas and 14.7 per cent in urban areas. NSSO report 559 on Participation of Women in Specified Economic Activities along with Domestic Duties (68<sup>th</sup> Round 2011-12), finds that about among women of all ages who were not workers in the subsidiary status, about 20.0 per cent in rural areas and about 6.9 per cent in urban areas pursued one or more of the activities under the broad categories (i) and (ii) that are considered as economic activities in SNA-2008. **Hence based on the production boundary of SNA-2008, NSSO finds that “the approximate upper bound of worker population ratio (WPR) of women of all ages in usual status (ps+ss) are obtained as 44.8 per cent in rural areas and 21.6 per cent in urban areas.”**

However, NSSO does not take the logical next step and make the correction in the female WPR.

The Census also collects data on work force participation rate for males and females in rural and urban areas for each state. However the Census is often conducted during “slack periods of agricultural activity using short reference periods (one day). Therefore, they are likely to omit persons such as migrants and women, who may be active during peak agricultural seasons, from the economically active population. This deficiency is to be taken note of.”<sup>110</sup>

CSO undertook a pilot Time Use Survey during 1998-99. It was a pilot survey and was conducted in six states viz., Kerala, Meghalaya, Haryana, Madhya Pradesh, Orissa and Gujarat. Data was collected on time spent on non-market productive activities, particularly the extended SNA activities, and on purely non-economic activities, besides economic (SNA) activities. “The results of the time use survey by CSO brought to fore the issue of inadequacy of data collected through conventional Employment and Unemployment Surveys (EUS) and the Population Census for measuring the quantum of unremunerated economic activities.”<sup>111</sup>

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<sup>110</sup> Note prepared by Dr K Prasad Rao, DDG NSSO, for the Subgroup on Gender and Agriculture for the Eleventh Plan chaired by Aasha Kapur Mehta.

<sup>111</sup> [http://mospi.nic.in/mospi\\_new/upload/TU\\_survey/About%20the%20Survey.pdf](http://mospi.nic.in/mospi_new/upload/TU_survey/About%20the%20Survey.pdf).

“Out of 168 hours, on the average, males spent about 42 hours in SNA activities as compared to only about 19 hours by females. However, situation completely changes when we consider extended SNA activities. In these activities, males spent only about 3.6 hours as compared to 34.6 hours by females. In non-SNA activities, which pertain to learning, leisure and personal care, male spent about 8 hours more as compared to females. On the average, 71% of the time is spent in non-SNA activities. The SNA and extended SNA contribute for 18% and 11% respectively.”<sup>112</sup>

The report also found that “if we take SNA and extended SNA activities together, the average time spent by rural males is only 46.05 hours as compared to 56.48 hours by rural females. For urban males, this figure comes out to be 44.50 hours as compared to 45.60 hours by urban females. Therefore, women were found to be working for longer hours than males.” Additionally, no payment is made for a number of economic activities performed either by family labour or through exchange labour. The study also found that “for the six states combined, payment was not made for about 38% of the time spent in SNA activities. The amount of unpaid activities was more (51%) for female as compared to only 33% for male. The predominance of females in unpaid activities was visible in all the states.” Also, “it was generally found that females spent about double the time as compared to males in activities relating to taking care of children, sick and elderly people.”

**In view of the considerable evidence regarding inaccuracy of data pertaining to women’s contribution to agriculture and allied sector activities this needs urgent correction.** As is well known,

“women today play a pivotal role in agriculture - as female agricultural labour, as farmers, co-farmers, female family labour and (with male out-migration, widowhood, etc) as managers of farms and farm entrepreneurs. Three-fourths of women workers are in agriculture. Women work extensively in production of major grains and millets, in land preparation, seed selection and seedling production, sowing, applying manure, fertilizer and pesticide, weeding, transplanting, threshing, winnowing and harvesting; in livestock

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<sup>112</sup> [http://mospi.nic.in/stat\\_act\\_t5\\_2.htm](http://mospi.nic.in/stat_act_t5_2.htm).

production, fish processing, collection of non-timber forest produce (NTFP) etc. In animal husbandry, women have multiple roles ranging from animal care, grazing, fodder collection and cleaning of animal sheds to processing of milk and livestock products. Keeping milch animals, small ruminants and backyard poultry is an important source of income for poor farm families and agricultural labourers. Landless women agricultural labourers play a pivotal role, as they are involved in most of the agricultural operations. Landless women also lease in land for cultivation. The majority of workers involved in collection of non-timber forest produce (NTFP) are women, particularly tribal women. Women also augment family resources through tasks such as collection of fuel, fodder, drinking water and water for family members and domestic animals.”<sup>113</sup>

Further, it is important to note that “while women have always played a key role in agricultural production, their importance both as workers and as managers of farms has been growing, as an increasing number of men move to non-farm jobs. Today 53% of all male workers but 75% of all female workers, and 85% of all *rural* female workers, are in agriculture. Women constitute 40% of the agricultural work force and this percentage is rising. An estimated 20 percent of rural households are de facto female headed, due to widowhood, desertion, or male out-migration.”<sup>114</sup>

**While the population Census and NSSO surveys are the most appropriate sources of information about the labour force and employment however, as a result of measurement problems, it is clear that the extent of women’s participation in agricultural work can be significantly underestimated in these sources.** Hence, as Rao argues, “more accurate details regarding the different categories of agricultural labour, as well as the hours worked (including gender differentials), should be obtained from these sources through the appropriate re-tabulation of the results.”<sup>115</sup>

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<sup>113</sup>Krishnaraj, Maithreyi and Shah, Amita (2004). *Women in Agriculture*. Academic Foundation, New Delhi. Notes sent by E. Revathi, CESS, Hyderabad; V. Prameela and Nina Bijoor (2002). “Improving the Lot of Women in Agriculture,” Sampark, Bangalore, through Solution Exchange; note from Geetha Kutty subgroup member; Aasha Kapur Mehta et al. (2004). “The Budget: A Gender and Poverty Sensitive Perspective,” National Commission for Women; CP Sujaya (2006), *Climbing a Long Road*, MSSRF, Chennai as cited in Report of the Subgroup on Gender and Agriculture for the Eleventh Plan.

<sup>114</sup>Agarwal, Bina (2006). “Women’s economic empowerment and the Draft Approach to the 11<sup>th</sup> Plan”: Comments as Member of the 11<sup>th</sup> Plan Working Group on Land Relations.

<sup>115</sup> Note prepared by Dr K. Prasad Rao, op.cit.

The same NSSO quinquennial large sample also tells us the number of persons, men and women who are unemployed. While it tells us that female workforce participation decreased it does not provide the reasons for unemployment.

### **6.3 Employment and Wages**

The Labour Bureau, Ministry of Labour and Employment has also started conducting annual Employment-Unemployment Surveys since 2010. The Third Annual Employment-Unemployment Survey was conducted during the period October 2012 to May 2013 in all the 35 States/UTs and covered all the districts in the country. It provides data regarding Labour Force Participation Rate, Worker Population Ratio, Unemployment Rate based on four different approaches viz. Usual Principal Status Approach, Usual Principal & Subsidiary Status Approach, Current Weekly Status Approach & Current Daily Status Approach. The major findings are presented by State, Gender, Sector, Social Group, different activities, vocational training, employed, unemployed and not in labour force category and distribution of persons in major activities by education status as well as information regarding employment and unemployment of youth. However, it has issues of quality and the report notes that “there are reasons to feel that the survey should be more sensitive to gender attributes to capture the true and fair value of contribution made by females.”<sup>116</sup>

The Director General of Employment and Training DGET (Ministry of Labour) provides data regarding registration and placement, vocational guidance and career counseling, etc activities of the network of Employment Exchanges. It covers all the States and Union Territories with a network of 956 Employment Exchanges as on 31-12-2012. It provides information regarding registration, placement, live register, submissions as well as educational, vocational and other qualifications of job seekers registered with the exchanges. Information includes the number of women, SC, ST and physically handicapped persons on the live register, their educational qualifications, broad occupational groups, placements made etc. However DGET depends on the State government machinery to provide data on labour participation in the organized sector, as there is no direct field force or central statistical cadre in States. The District Statistical Officer

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<sup>116</sup> Government of India. Ministry of Labour and Employment (2012-13). *Report on Employment and Unemployment Survey 2012-13*. New Delhi. p. 12.

reports to Collector. Information is available only for persons who register at the 956 Employment exchanges.

The Department of Agriculture and Cooperation of the Ministry of Agriculture conducts the quinquennial **Agriculture Census** in three phases. In the first phase, data is collected on the number of operational holdings and area operated by different size classes, social groups, gender, types of holding etc. Subsequently, the holding schedule is canvassed to estimate agricultural characteristics of operational holdings. In the third phase, data is collected on the input use pattern of operational holdings, size of the household, age and educational level of the holders, etc.<sup>117</sup> This data can be used as a “framework for conducting further sample surveys for extension support programmes; for drawing up research plans in the development of gender-specific agricultural technologies for specific crops and a specific holding size/mix (a combination of land and livestock) and that support secondary activities (that could for raise the living standards of agricultural households).”<sup>118</sup>

### **Wage rate data**

Wage rates in rural India are published by the Labour Bureau of the Ministry of Labour & Employment in respect of 11 agricultural and 7 non-agricultural occupations entailing manual work for 20 States and all-India for the agricultural year on a monthly basis from July to June (see Table 6.2).

**Table 6.2: Selected Agricultural and Non-Agricultural Occupations entailing Manual Work**

<b>Selected Agricultural Occupations</b>	<b>Selected Non-Agricultural Occupations</b>
1. Ploughing	1. Carpenter
2. Sowing	2. Blacksmith
3. Weeding	3. Cobbler
4. Transplanting	4. Mason
5. Harvesting	5. Tractor Driver
6. Winnowing	6. Sweeper
7. Threshing	7. Unskilled Labour (un-specified)
8. Picking	
9. Herdsman	

<sup>117</sup> <http://agcensus.nic.in/document/agcensus2010/completereport.pdf>.

<sup>118</sup> Note prepared by Dr K Prasad Rao, op.cit.

10. Well Digging	
11. Cane Crushing	

**The Survey found that the average daily wage rates for women were generally lower than for men in most of the occupations. While male ‘sweepers’ were paid Rs. 123.63 per day, only Rs.104.80 was paid to female ‘sweepers’.** None of the female workers were found engaged as ‘carpenters’, ‘blacksmiths’, ‘cobblers’, masons or ‘tractor drivers’ and hence no wage rate was reported for female workers for these occupations during the year 2012-13.

### **Manufacturing**

For the purpose of data collection, manufacturing sector has been broadly sub-divided into two categories, i.e. organised and unorganised. While data for organised manufacturing sector are collected through the Labour Bureau, Annual Survey of Industries (ASI) and more recently the Statistical Profile on Women Labour, the same for the unorganised manufacturing sector are collected periodically through sample surveys as follow-up surveys of Economic Censuses (EC). The unorganised manufacturing sector has roughly about one-third share in the total contribution by the manufacturing sector in the GDP.

The Report on Absenteeism, Labour Turnover, and Employment & Labour Cost of the Annual Survey of Industries (ASI) is the primary source of industrial statistics in India that can be used to assess and evaluate the changes in growth, composition and structure of organized manufacturing sector. The main objectives of the Annual Survey of Industries are to build a systematic database on absenteeism; labour turnover; earnings; employment, and labour cost in manufacturing industries, and to analyse various components of labour costs such as wage/salary; bonus; provident funds; welfare expenses, etc. in manufacturing Industries. Data is available state wise and industry group wise on male and female workers employed directly, man-days worked in manufacturing and non-manufacturing, number of man-days paid for, wages/ salaries, the industry groups in which women are primarily employed, etc.

In a publication entitled Statistical Profile on Women Labour, the Labour Bureau presents the trend in average daily employment of men and women, mandays worked, wages / salaries and

earnings by directly employed workers in states. State-wise data is also presented for various years for males and females employed in factories (by broad industrial group), plantations and coal and other important mines. The data is disaggregated by age groups, i.e., male and female adults, adolescents and children for employment in factories and plantations. Data for plantations is for males and females (but is not age group wise) and is presented state-wise and over time, for tea, coffee, rubber and other plantation crops. Additionally, information is presented for States and UTs with regard to provision of creches, maternity benefits and other social security benefits in factories, plantations and mines by states/union territories as well as complaints received and prosecutions launched.

**Unorganised Manufacturing sector** is one of the important sectors of industry in the Indian economy. The term ‘unorganised manufacturing’ referred to all manufacturing enterprises, which were not under the coverage of ASI. All government and public sector undertakings were also outside the coverage of the survey. Collection of data on unorganised manufacture has a long history in the NSSO.<sup>119</sup> In fact, the very first round of NSSO had small-scale manufacturing and handicrafts as one of its subjects of enquiry.

The survey collects information on particulars of operation and background information of the enterprise, operating expenses, receipts, gross value added, employment particulars, compensation to workers, fixed assets owned and hired, loan outstanding etc. Data is provided state wise on estimated number of workers engaged in unorganised manufacturing enterprises by nature of employment and gender, percentage of workers by gender in different industries in rural and urban areas, percentage distribution of workers by gender in different industries, categories of workers, viz., working owner, hired worker and other worker considering all types of enterprises for all sectors combined.

The Economic Census provides a count of all establishments engaged in economic activities, including those in the unorganised sector but excluding crop production, plantation, public administration, defence and compulsory social services. It presents data pertaining to the number

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<sup>119</sup> Government of India, Ministry of Statistics & Programme Implementation (2008). *NSSO Report No. 525: Unorganised manufacturing sector in India, 2005-06: Employment, Assets and Borrowings*. New Delhi.

of males and females employed (hired and non-hired) in non-agricultural establishments that are inside and outside household.

**NSSO estimates the proportion of women workers not eligible for any social security benefit in States/ UTs as well as the proportion of women workers who have no written job contract and are not eligible for paid leave. While this is extremely important for policy purposes, it would be very valuable to collect data on these indicators at the district and below levels. In addition, data should be collected on the proportion of women workers needing and getting adequate social security benefits.**

Similarly, the Ministry of Labour and Employment provides data regarding the minimum wage. **However, no information is provided regarding the number of women workers getting less than minimum wage or the number of cases registered against employers paying less than minimum wages to women workers.** Nor is data available from the national official statistical system regarding the number and percentage of women workers in regular employment trained and promoted to higher positions or the number and percentage of women agricultural labourers provided drudgery reducing equipment or the number and percentage of women cultivators and agricultural labourers provided agricultural extension training. **Information is also not available regarding the percentage of women workers with “decent” work conditions or regarding the shortfall in access to working women’s hostels.**

#### **6.4 Basic Amenities**

##### **Water and Sanitation**

The Housing Schedule of Census 2011 provides information regarding access to amenities like drinking water, availability of toilet and bathrooms in the household; type of fuel used for cooking; whether the household has a separate kitchen; lighting and electricity; access to assets; banking facility and information regarding who is the head of the household. Each of these has gender dimensions that are not captured by the data.

Data presented in NSSO Report 556 on Drinking Water, Sanitation, Hygiene and Housing Condition (69<sup>th</sup> Round conducted during July – December 2012) shows that 59.4 percent households in rural India and 8.8 percent households in urban India had no latrine facilities. Census 2011 also shows that 53.08 percent households did not have latrine facility within the premises and 49.84% households practice open defecation. The lack of water and sanitation facilities significantly and disproportionately impacts the lives of women and girls as compared to that of men and boys. Water management practices and endeavors have not been successful in making safe and secure drinking water, universally available in India. Therefore, women must be recognized as primary stakeholders in water resources management and have a primary role at the core of community-based water governance.

**It is important to note that lack of access to water and sanitation has ramifications for women and children. For instance, lack of a water source in the house results in women and children spending time and energy in collecting and transporting water. Lack of latrine facilities in the house implies that women have to wait till it is dark to relieve themselves, leading to security and health risks. While both Census and NSSO provide data on availability of water and distance at which water is available, information is not available on quality of water, number of hours per day for which water is available, number of days for which water was not available or was not safe, etc.**

### **Energy<sup>120</sup>**

NSSO Report 558 on Household Consumption Expenditure (68<sup>th</sup> Round 2011-12) shows that 83.5% of rural households and 23% of urban households use firewood and wood chips, while 40% of rural and 7% of urban households use dung cakes. These are collected by women and there is an opportunity cost to the associated drudgery and time required for these tasks.

Access to energy for cooking and other tasks and the availability of lighting has security, safety, drudgery and health related implications for women. In poor rural households, women provide

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<sup>120</sup> This section on energy is based on Mehta, Aasha Kapur, Eapen, Mridul and Mishra, Yamini (2012). *A Critique of the Approach to the 12th Plan through a Gender Lens*. UN Women.

for the daily energy needs by collecting non-commercial materials and processing these into fuel for cooking.

The findings of a survey<sup>121</sup> regarding the use of fuel by over 300 rural households and the work and hazards involved in that show that not more than 1 per cent of households used any commercial fuel. All the households were using any combustible material they could find - leaves, sticks, agricultural waste, wood, or dung. The collected materials need further processing and even then emit large quantities of smoke during cooking. The average daily time taken to collect and process fuel materials varied between an hour and a half to over three hours and on the whole, those with little or no land had to put in longer hours than those with some land. Apart from common complaints like eye irritation, cough, headaches etc., the Health Department of the West Bengal Government has shown that respiratory diseases are the largest single killer in the State and in rural areas, much of the air pollution comes from inefficiently burnt fuel materials.

This is corroborated by a study of 792 households and 4296 individuals in Himachal Pradesh, which shows that “bio fuels still meet about 70 per cent of the fuel needs. In procuring bio fuels, women walk typically 30 K.M. each month, and each trip to collect firewood takes on average 2.7 hours. The state has infrastructure to provide kerosene and 31 per cent of the population use it. Bio fuel collection is primarily the responsibility of adult women and older men. This is a physically strenuous process, with almost two-thirds suffering from neck ache at least quarterly and half suffering from backache almost daily.”<sup>122</sup>

The significant impact of using firewood, wood chips, dung-cakes, grass etc. on the health and survival of young and old women who live in poverty stricken households is listed in the Table 6.3 below. Additionally, in hilly terrain, the slopes from which women collect biomass are slippery and accidents, fractures and bruises are frequent. **These are privately incurred costs of drudgery, pain, expenditure and loss of work days that must be built into any estimates of cost/ viability of clean energy provisioning. However this requires collection of data on the**

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<sup>121</sup> Survey conducted by Dr Nirmala Banerji, cited in *Locating Gender in the Twelfth Five Year Plan: Approach Issues emerging from a Gendered Analysis*. (2012). New Delhi: UN Women.

<sup>122</sup> Parikh, Jyoti and Sharma. Saudamini (2005). *The Energy, Poverty Gender Nexus in Himachal Pradesh, India*, New Delhi: IRADE.

difficulties encountered by women in collecting biomass and the ill health suffered by women due to use of these fuels.

**Table 6.3: Health effects of biomass fuel use in cooking**

<b>Processes</b>	<b>Potential health hazards</b>
<b>Production</b>	
Processing/preparing dung-cakes	Faecal/ oral/ enteric infections Skin infections
Charcoal production	CO/smoke poisoning Burns/trauma Cataract
<b>Collection</b>	
Gathering/carrying fuel	Trauma Reduced infant/child care Bites from venomous reptiles/insects Allergic reactions Fungus infections Severe fatigue Muscular pain/back pain/arthritis
<b>Combustion</b>	
Effects of smoke	Conjunctivitis Blepharo conjunctivitis Upper respiratory irritation / inflammation Acute respiratory infection (ARI)
Effects of toxic gases (CO)	Acute poisoning
Effects of chronic smoke inhalation	Chronic obstructive pulmonary disease (COPD) Chronic bronchitis Corpulmonale Adverse reproductive outcomes Cancer (lung)
Effects of heat	Burns Cataract
Ergonomic effects of crouching over stove	Arthritis
Effects of location of stove (on floor)	Burns in infants/toddlers/children

Source: Batliwala, Srilatha and Reddy, Amulya K.N. (2003). Energy for women and women for energy, *Energy for Sustainable Development*, Volume VII, No. 3, September.

## 6.5 Assets

Despite their disproportionate share in the total quantum of work, whether measured or unmeasured and paid or unpaid, women are discriminated against in ownership of land,

resources and assets. “The gender gap in the ownership and control over property is the single most critical contributor to the gender gap in economic well-being, social status and empowerment.”<sup>123</sup> Legal rights to property inheritance and ownership have not translated into actual ownership in practice for most women. Further, ownership may not necessarily mean control over use of - or income from - property.

The National Sample Survey Organisation (NSSO) All-India survey on Debt and Investment generates basic quantitative information on assets, liabilities and capital expenditure in the household sector. It provides information regarding assets such as land and buildings, machinery and equipment (farm and non-farm business equipment and transport equipment), financial assets (shares and deposits) and dues receivables (loans receivable in cash or in kind). However since the last such survey was conducted in 2003, the information is dated. While it provides information regarding social groups there is no gender disaggregation of any of the items of data in the document.

Gender disaggregated data on ownership of assets is not available for most assets for India and the States.<sup>124</sup> The exception is data on Operational Holdings for which data is available from the Agricultural Census. The Agricultural Census provides information regarding the number of operational holdings individually and jointly held by women as well as the area operated by them. The data is disaggregated for different size classes of land as well as for social categories for all States/ UTs.

Data regarding the number of women with title to land (by size of land) is not available from the national official statistical system. Nor has it been compiled from administrative records. This needs attention.

Data regarding the number of women owning a house by type (whether pucca or not etc) is not available and has not been compiled from administrative records. Nor is data compiled regarding

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<sup>123</sup> Agrawal, Bina (1994). Gender and Command over Property: A Critical Gap in Economic Analysis and Policy in South Asia. *World Development*, Vol. 22, No. 10. p. 1455.

<sup>124</sup> Ministry of Women and Child Development (2009). *Gendering Human Development Indices: Recasting the GDI and GEM for India*. New Delhi: MWCD, UNDP and IIPA.

women's ownership of vehicles. Data is also not available regarding the number of women owning livestock by type or other major assets by type and value.

NSSO estimates the proportion of women owning unorganised manufacturing enterprises. The Census of Micro, Small and Medium Enterprise Sector provides data regarding the number of registered and unregistered enterprises owned by women as well as those managed by women.

Partial data is available for women's ownership of bank accounts and credit access. The RBI publication, 'Basic Statistical Returns of Scheduled Commercial Banks in India', provides national level data based on information collected from bank branches through Basic Statistical Returns 1 & 2. The document provides information on deposit accounts of females in banks at the All India level. It also provides information on staff strength, classified according to gender and category (i.e. officers, clerical and subordinates), in individual bank offices.

**Gender disaggregated State-wise information regarding bank accounts/ borrowals is available from RBI only for accounts with credit limit above Rs. 2 lakh. Information is not gender disaggregated at the State level for accounts with credit limit upto Rs. 2 lakh.<sup>125</sup> Data is also not available regarding ownership of shares and other financial instruments by women.**

**Data regarding loans for consumption or production is available at the level of the household from NSSO but this is not sex disaggregated.** Partial information would be available from Administrative records such as from Rashtriya Mahila Kosh or under government schemes.

**Hence, significant data gaps persist with regard to women's access to land, resources and assets as well as their earnings or income from assets (non-wage/ salary income). These gaps need to be bridged.**

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<sup>125</sup> *ibid.*

### **Participation in Decision-Making**

National Policy for Empowerment of Women, 2001 accepted the goal of Equal access to participation and decision-making of women in social, political and economic life of the nation as one of its major objectives. It committed that Women's equality in power sharing and active participation in decision-making, including decision-making in political process at all levels will be ensured for the achievement of the goals of empowerment. All measures will be taken to guarantee women equal access to and full participation in decision-making bodies at every level, including the legislative, executive, judicial, corporate, statutory bodies, as also the advisory Commissions, Committees, Boards, and Trusts etc. Affirmative action such as reservations/quotas, including in higher legislative bodies, will be considered whenever necessary on a time bound basis. Women-friendly personnel policies will also be drawn up to encourage women to participate effectively in the developmental process.

The 73<sup>rd</sup> and 74<sup>th</sup> Constitutional Amendment Acts passed in 1992 by Parliament ensured one-third of the total seats for women in all elected offices in local bodies whether in rural areas or urban areas. Some states have provided for 50% reservation for women.

According to the UN Convention on Child Rights, all children are equal, and have human rights such as the right to food, shelter, health care, education and freedom from violence, neglect and exploitation. The Convention also states that children have the right to participate in decision-making and due weight should be given to their opinions, according to their age and maturity. This implies that children have the right to participate in family decisions, in school and class decisions, in faith communities, in their cultural and sporting organisations, and also in local and national government, and in the UN and other international bodies.

Children have the right to freedom of expression, to form and join associations and to seek and receive appropriate information. These rights should empower children to bring about changes in their own lives, to build a better future.

Article 12 of CRC states that States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.

Article 13 states that the child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice. The exercise of this right may be subject to certain restrictions, but these shall only be such as are provided by law and are necessary: (a) For respect of the rights or reputations of others; or (b) For the protection of national security or of public order (order public), or of public health or morals.

The National Policy for Children, 2013, also provides that the State has the primary responsibility to ensure that children are made aware of their rights, and provided with an enabling environment, opportunities and support to develop skills, to form aspirations and express their views in accordance with their age, level of maturity and evolving capacities, so as to enable them to be actively involved in their own development and in all matters concerning and affecting them.

It also underlines that the State shall promote and strengthen respect for the views of the child, especially those of the girl child, children with disabilities and of children from minority groups or marginalised communities, within the family; community; schools and institutions; different levels of governance; as well as in judicial and administrative proceedings that concern them.

Further the policy commits the State to engage all stakeholders in developing mechanisms for children to share their grievances without fear in all settings; monitor effective implementation of children's participation through monitorable indicators; develop different models of child participation; and undertake research and documentation of best practices.

The annual publication *Women and Men in India* by CSO presents some data on the issue of participation of women in decision-making at the household level, at the national level, in All India Services and in Parliament. It gives data on women's autonomy, women judges, women ministers and women's participation in national elections at all levels. This data, however, is very limited and based on other sources.

Lok Sabha Secretariat provides information regarding Representation of Women in the Central Council of Ministers, including women Cabinet Ministers, Ministers of State and Deputy Ministers since 1985 (Men and Women in India 2012-13, Table 80). This is not disaggregated by social category.

Election Commission provides information on the number of women electors and percentage of women voting in various Lok Sabha elections. This is also available state-wise, but not according to social category. It also provides information on women contested and elected during various Lok Sabha elections. The information is available state-wise. More recently information has also been compiled regarding the performance of women in elections, measured in terms of seats contested, elected and security deposit forfeited. Party-wise performance of women in general elections is also compiled by the Election Commission more recently.

Ministry of Panchayati Raj compiles data on women's participation in Panchayats at various levels- village, intermediate and district, wherever these exist. This data is also available state-wise as also by social category. There are many studies undertaken by researchers and non-governmental organizations regarding the nature and effects of participation of women in decision-making in Panchayats in specific regions. However, a good part of this information is not being used to make any systematic interventions. While many agencies and groups are working on women's issues and undertaking a lot of activities for strengthening the position of women in institutions of governance, data related to these activities and their impact is not readily available.

Information on the number of women judges in Supreme Court and High Courts is provided by CSO in *Men and Women in India, 2012-13*. However, this information states the position as on 1 April 2011. Besides, it is not disaggregated by social category of women.

Information on the number of Women in All India and Central Services is compiled by CSO in Men and Women in India. This is available for the years 1995, 2000 and 2005 to 2010 annually for the IAS; it also provides information regarding SC, ST and OBC women. For other services, however, the data is for fewer years and in some cases does not capture social categories. In case of Indian Revenue Service, for instance, it provides information only for the years 1993-1995 and for the Central Secretariat Services (CSS), information is available only for Group A officers for the years 2008-2011, and no information is available on the SC, ST or OBC women in the CSS.

The Directorate General of Employment and Training, Ministry of Labour compiles information on the employment of women in the Central Government, State Governments and Local Bodies. However, this is quite dated. Besides, figures for years 1991 to 1995 are provisional based on Quarterly Employment Review and separate figures for females are not available.

The data on participation of women in household decision-making and autonomy is difficult to gather. Some data on this is collected by National Family Health Survey-3, 2005-06. This is with regard to own health care, making major household purchases, purchasing daily household needs, and visits to her family and relatives including the girl child/ adolescent girls in the age-group 15-49 both in rural and urban areas. Information on household decision-making and autonomy provided by the National Family Health Survey-3, 2005-06, and gives the percent distribution of currently-married women (age 15-49) involved in household decision-making either alone or jointly with their husbands, by selected background characteristics in India during 2005-06. It also provides percentage with access to money by selected background characteristics for States/Union Territories during 2005-06.

In a context where vulnerability of children on account of the situation in which they born is high, and all opportunities are conditioned on their position, the lack of attention to the rights of children to express their views and take relevant decisions for themselves has not received as much attention and there is even less effort to bring out information on the actual state of participation or its absence. A few programmes of participation, some of them initiated by a few NGOs, are all that one hears of in the sphere of children's participation. Hardly any information

is available on the steps taken to create space for the views of the child, especially those of the girl child, children with disabilities and of children from minority groups or marginalised communities, within the family; community; schools and institutions; and different levels of governance. We also do not have any systematic information on how far children have been provided the opportunity to be heard in any judicial and administrative proceedings affecting them, either directly, or through a representative or an appropriate body as committed in the CRC and National Policy for Children.

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## Conclusions

This Paper draws attention to the significant gaps between the situational reality of children and women on the one hand and the commitments made in the Constitution and in national and international policy documents on the other. Meeting these commitments and bridging these gaps requires clarity regarding the extent of the problem that has to be addressed. For this, Government is critically dependent on timely availability of relevant, accurate and reliable data.

It is undeniable that massive efforts are made by the national official statistical system to collect and provide extremely valuable data on a vast array of development indicators. However, there are many areas outlined in this Paper that need attention. This requires far greater resources, as well as urgent strengthening of the statistical cadre, for more nuanced collection of data.

Keeping in view the policy commitments outlined in the first section of this paper, Sections 2 to 7 examined issues pertaining to data availability and reliability and identified data gaps in different dimensions of life situations facing children and women. These data gaps can be categorised as follows:

- i) Where the data exists but it has inaccuracies and raises questions of reliability.
- ii) Where data exists but is incomplete or provides a partial picture of the situation of women and children.
- iii) Where there is lack of data.

A few illustrations drawn from preceding sections of this paper are presented in sections 8.1 to 8.4 below. Core Indicators, data availability and data gaps with regard to vulnerability, security and protection, poverty, work, basic services, assets, education, survival and health and participation and decision-making are presented in Tables 8.1 to 8.5.

### 8.1 Issues of Accuracy and Reliability of Data

There is a large quantum of data that is generated from administrative records, based on the information provided by the implementing agencies. A substantial proportion of data reflecting the situation of women and children comes from such sources. This applies to data related to

education, health and crimes as well as data regarding the implementation of major flagship programmes like the ICDS, NRHM and MGNREGA. Since the functionaries who are directly delivering these programmes also report the data each month, it is not independently collected. Significant gaps are found between data from administrative records and that collected from independent sources such as by NFHS. Hence, there is a large literature questioning the reliability and accuracy of the data from administrative sources. For instance, early identification of malnutrition and immediate steps for rectification are critical for the mental and physical development of the child. Improvement in the poor nutritional outcomes for women and children requires accurate and timely availability of data.

Support from the official statistical system would go a long way towards tightening data reporting systems and improving its accuracy. Monitoring and evaluation of administratively collected data as well as motivation and behaviour change are important for achievement of improved outcomes. Since regular verification of the data reported from the field is needed for better programme delivery, this could be achieved by building in a component for monitoring in all national programs with a clearly earmarked budget.

While data on morbidity is available separately for males and females, the level of morbidity captured is well below realistic levels. Official data pertaining to morbidity differs significantly from estimates provided by micro-studies, which, in some cases, are more than 3 times the official estimates. If data on morbidity does not reflect the situational reality captured by micro studies, this is likely to lead to lower than needed budget allocations for health sector. Additionally, in the case of specific diseases e.g., Tuberculosis, the data may exist but may not be presented separately for males, females, or for age groups or social groups. Further, the data that exists pertains only to those who seek treatment. However the number of women who suffer from the disease may be higher than the number captured for several reasons such as fear of stigma or differential treatment seeking behaviour.

Data pertaining to female workers has been a contentious issue for decades due to definitional and methodological issues that lead to differences in estimates provided by the Census, NSSO and Ministry of Labour and Employment. More importantly, the estimates are inaccurate as a large proportion of women reported as attending only or mainly domestic duties (codes 92 and

93) are actually participating in economic activities or SNA activities. This is estimated and reported in NSSO Reports on Participation of Women in Specified Economic Activities along with Domestic Duties but the information is not used to revise and correct the female worker population ratio or female work participation rate.

## **8.2 Incomplete Data**

In many cases data exists but is incomplete as it only partially captures the situation of women and children as in the case of violence and crimes against them.

As noted in section 3, when the Ministry for Women and Child Development began the process of drafting a bill to prevent offences against children and formulating a comprehensive national level scheme to deal with child protection, its work was hampered by lack of data on offences or crimes against children. The only source of data that was available was with the National Crime Records Bureau and although this was useful, it constituted a miniscule of the total crimes/violence committed against children. NCRB compiles data reported by police stations. Very often crimes against children were either not reported or cognizance was not taken of them. Additionally, some crimes against children were not covered under existing legislations. Though gaps in information were at all levels, child abuse being an issue shrouded in secrecy, emerged as the most burning issue. Similarly, it is very difficult to estimate the scale of trafficking in women and girls due to its “clandestine” nature.

Violence against children and women can be visible or invisible, overt or covert, physical, emotional or mental and may occur within or outside the home. Some of these forms of violence are recognised as crime, as legislation has been passed to prevent these and to punish those who inflict any of these. Some crimes against women and children, which have been recognised as such by law, may not involve direct physical violence but are violative of the rights of women and children accepted by law. NCRB data significantly underestimate the number of such crimes that actually occur in any year as they provide a record only of those crimes which can be registered under the IPC or other criminal Acts and that that have actually been reported. Accurate capture of the situation on the ground depends on the initial process of registration of complaints and their processing at the level of the police station: (a) a crime may be reported to

the police station but the victim may face difficulty in getting the case registered or recorded; (b) the crime may not be reported by the victim for fear or stigma or family honour etc. A good part of violation related information remains poorly captured because of the reluctance of the victim or others to take it to the police station. But a significant part escapes the records because of the reluctance or inability of police to take cognizance of it.

To ascertain whether the number of shelter homes, short stay homes and rehabilitation centers is sufficient to effectively deliver the provisions of laws and schemes, it is crucial to have data regarding the number of children and women in difficult situations. Data is also needed to track the quality of services delivered and numbers rehabilitated through such homes through follow up. These data gaps need to be addressed.

### **8.3 Lack of Data**

As the Labour Bureau Report on Employment and Unemployment rightly points out “In our country, district is a primary unit for planning. But due to non-availability of district-level data on many important indicators, the indicators at the State/UT level have to be used as a proxy for planning at the district level. For bigger states which have wide diversity across districts in terms of natural endowments, public and private investment and other employment opportunities, the state-level indicators would not be of much use for making district-level policies.”

Further, poverty head count ratio is not available separately for men and women or boys and girls or older men and women. Poverty head count ratios for SCs, STs and OBCs are not estimated for all the States as the sampling design adopted for household consumer expenditure survey does not ensure representative samples across social groups for all States.<sup>126</sup> Another lacuna is the lack of panel data or longitudinal tracking of poverty so the dynamics of poverty are neither captured nor addressed. Many of the factors that drive and maintain people in poverty have gender, age and social group related dimensions that need to be addressed. This is a data gap that needs to be bridged.

Even at the state level, there are gaps in availability of data - as well as gender disaggregated data - on a large number of indicators. For example, Maternal Mortality Ratio and Life

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<sup>126</sup> [http://planningcommission.gov.in/reports/genrep/rep\\_pov1303.pdf](http://planningcommission.gov.in/reports/genrep/rep_pov1303.pdf).

Expectancy at Birth are available only for 15 large States. Data for Mean Years of Education is not readily available. RBI does not provide gender disaggregated data for bank accounts with credit limit below Rs 2 lakhs. Another extremely important area on which there is lack of data is with regard to care work.

Even in respect of education, in spite of the multiple data capture exercises by varied agencies, there are still gaps in data availability on some aspects, creating problems for appropriate policy planning. Although many programmes of non-formal education are being offered in various States, much of the data collection on education remained centered on the formal school system. Data regarding unrecognized institutions of education too remains wanting. While some initiatives have been taken to capture this, collecting it from school administration will not ensure reliability. Household level data that captures multiple dimensions, such as, the social background and economic status of those using the system as well as information regarding service providers, facilities, performance etc. needs to be collected at block, district and state level, on regular basis. Only then will it be possible to plan appropriate interventions. This is an important area of concern regarding which adequate data needs to be collected.

Data on retention, survival, progress and learning achievement of children belonging to weaker sections or disadvantaged groups enrolled under 25% seats in private unaided schools is needed to assess the impact. This should be disaggregated by gender, social category, religion and location and should be collected at household level to capture the outcomes and their reasons more effectively. School level data on this can also be relevant for assessing policy but household level data will be significant to monitor the actual situation and the impact of policy.

#### **8.4 Other issues**

There are multiple agencies involved in providing protection to children and women to address the vulnerability, exploitation and discrimination faced by them. The sharing of information is significantly conditioned on the nature and effectiveness of mechanisms for coordination. Lack of convergence and coordination and lapses in this regard make data gaps extremely serious and difficult to handle.

Multiplicity of data collection agencies often adds to the confusion regarding the reliability of a particular set of data. In respect of education, for instance, although there are multiple agencies

involved in collecting data on various aspects of education, accuracy and reliability are cause for concern, not only because of the lack of agreement on the conceptual and methodological issues between these agencies, but also because the varied approach to data collection leads to varied results.

Data effectiveness also gets reduced when different age group categories are used for different aspects of data that are being collected by different agencies. This makes it difficult to relate the data- on education, crime, disability, etc. for instance.

Additionally, there are issues of timeliness and periodicity. Processing data takes a long time. The structure of the economy is changing rapidly and periodicity of once in five years for NSSO employment/ unemployment data is not enough. Low use of technology hampers productivity.

### **8.5 Core Indicators, Data availability and Data Gaps**

What are the core indicators required for understanding the well-being of children and women in the context of vulnerability, security and protection; poverty, work, basic services and assets; survival and health; education and participation and decision-making? Tables 8.1 to 8.5 below try to identify the core indicators on which data is needed to track progress in addressing these vulnerabilities, given the commitments made in the Constitution as well as in national and international policy documents. Data availability and gaps are also indicated.

As noted above, non-availability of data at the level of the district and below is a major gap that needs urgent attention. Also needing attention is the importance of social category-wise as well as intra-household level data. Regularity remains a major concern where data is almost a decade old. While useful data can be obtained from the institutions involved in the administration and delivery of certain services or in providing for protection of women and children through the legal mechanism, it is important that this is validated. Data collected by the national official statistical system is crucial in providing reliable evidence for policy and the importance of this must not be underestimated. This requires urgent strengthening of the statistical cadre that is the backbone of a strong and reliable national official statistical data collection system.

**Table 8.1: Vulnerability, Security and Protection for Children and Women**

<b>Core Indicators</b>	<b>Source, Limitations and Remarks</b>
Number of orphans	NFHS. Limitation: Information is dated. Coverage is limited to India and States and does not cover UTs. Data is also needed at below state level.
Number of orphans provided care	Scheme based information from administrative records. Quality of care provided needs to be tracked.
Number of orphans adopted	MWCD - All India data available for (i) In-country adoption from Recognised Indian Placement Agencies and Shishu Grehs. (ii) Inter-country adoption by non-resident Indians/ person of Indian origin/foreigners. District and state level data needed along with gender and social category.
Number of homeless children	Census. Limitation: Periodicity is decadal.
Number of homeless children provided care	Could be compiled from administrative records. District and state level data needed along with gender and social category.
Number of trafficked children	NCRB. Limitation: Coverage of data is for children procured and sold for prostitution. Coverage is also limited to information reported to NCRB by Police Stations.
Number of trafficked children rescued and rehabilitated	Data not compiled. District and state level data needed along with gender and social category.
Number of cases of trafficked children investigated and prosecuted	District and state level data needed along with gender and social category.
Number of missing or runaway children	NCRB. Limitation: The data is only for missing children. Coverage limited to information reported to NCRB by Police Stations based on cases registered by them.
Number of missing or runaway children rescued and reunited with their families	Data could be compiled from Administrative sources. Data needed at the level of the State, District and below along with gender and social category.
Number of children found begging	Census. Limitation: the data is not available separately and is clubbed with vagrants etc.
Number of street children	Census. Limitation: the data is not available separately and is clubbed with vagrants etc.
Number of rag pickers	SECC (forthcoming).
Number of children of prisoners in prison	NCRB.
Number of destitute children	Not available. District and state level data needed along with gender and social category.

Number of children suffering abuse	Not available. Data is needed on abuse inflicted in the household, by the family, by others, outside the household, in schools, in work spaces, in institutional care.
Number of children suffering sexual abuse	NCRB. Limitation: Coverage limited to information reported to NCRB by Police Stations based on cases registered by them.
Number of children suffering emotional abuse	Not available. Data is needed on abuse inflicted in the household, by the family, by others, outside the household, in schools, in work spaces, in institutional care. Studies also needed.
Number of neglected children	Not available.
Number of abused and neglected children provided counselling and support	Not available.
Number of cases registered against perpetrators of child abuse and neglect	Not available. District and state level data needed along with gender and social category.
Number of disabled children	Census. Limitation: Coverage of disability issues. Periodicity is decadal. NSSO. Limitation: dated plus coverage of disability issues.
Number of disabled children mainstreamed in school and provided specifically required care	NSSO: Limitation: dated plus coverage of disability issues Data needed at the level of the State, District and below along with gender and social category DISE.
Number of children with incurable disease with no one to care for them	Not available.
Number of children affected by HIV/AIDS	HIV Sentinel Surveillance data, NACO.
Number of children affected by HIV/AIDS provided care and support through Government	NACO.
Prevalence of substance abuse among children	NFHS. Limitation: Information is dated. Coverage is limited to India and States and does not cover UTs. Data needed at the level of the State, District and below.
Number of abandoned children	NCRB. Limitation: Coverage limited to information reported to NCRB by Police Stations based on cases registered by them.
Number of abandoned children admitted to care and support in institutions	Administrative records in concerned Ministries. Needs to be compiled.
Number of children engaged in labour (child labour)	Census. Limitation: Periodicity is decadal. NSSO. NFHS. Limitation: Information is dated and limited

	<p>to the State level.</p> <p>AHS. Limitation: Coverage is limited to districts in 9 selected states for a period of three years.</p> <p>Data is needed at below state level.</p> <p>Significant variation in estimates of child labour</p> <p>Lack of consistency in defining child labour.</p> <p>Implementation as well as monitoring and evaluation depend on the availability of data.</p>
Number of child domestic workers	Census. Limitation: Data is decadal.
Number of children who are victims of child marriage	<p>NFHS 2005-06. Limitation: Dated and limited to the State level only.</p> <p>NCRB. Limitation: Coverage limited to information reported to NCRB by Police Stations based on cases registered by them.</p> <p>SRS – Limitation: Coverage limited to India and bigger States.</p> <p>Accuracy of data needs to be addressed. Significant deviation between administratively collected data and independent surveys.</p> <p>Prevalent but difficult to capture due to social sanction and culture of secrecy.</p>
Number of victims of child marriage provided relief	Administrative records in concerned Ministries. Data needed at the level of the State, District and below along with gender and social category.
Number of children in conflict with law (juveniles who have allegedly committed a crime under the Indian Penal Code or other laws)	NCRB. Data is based on information reported by Police Stations.
Number of children and women who are victims of armed conflict or civil unrest	Not available. Data needed at the level of the State, District and below along with gender and social category.
Number of children and women affected by calamity or disaster	
Women victims of Honour Killings	
Number of trafficked women	NCRB. Limitation: Coverage limited to information reported to NCRB by Police Stations based on cases registered by them.
Number of homeless women	Census. Limitation: Periodicity is decadal.
Number of night shelters	Not available.
Number of children and women using night shelters	Not available. Block, District and State level data needed along with gender and social category
Number of disabled women	<p>Census: Limitation: Periodicity is decadal</p> <p>NSSO: Limitation: Dated</p>
Number of women in prison	NCRB.
Number of destitute women	

Number of women and children in brothels	Not available. Data needed at the level of the State, District and below along with gender and social category.
Number of women and children rescued from brothels	
Number of widowed women needing support	
Number of widowed women provided support	Needs to be compiled from administrative records. Data needed at the level of the State, District and below along with gender and social category.
Number of old women needing support and care	NSSO for proportion of old women who are physically and economically dependent on others. Data needed at the level of the State, District and below along with gender and social category.
Number of old women provided adequate support and care	Needs to be compiled from administrative records for old age pensions or inmates of old age homes for State, district and below by social category. However pension amounts are not adequate
Number of women affected by HIV/AIDS	HIV Sentinel Surveillance data, NACO.
Number of women affected by HIV/AIDS provided counselling, care and support	NACO.
Women affected by substance abuse	Not available. Data needed at the level of the State, District and below along with gender and social category.
Number of abandoned women	
Number of women affected by substance abuse provided counselling, care and support	Not available. Could be compiled from administrative records. Data needed at the level of the State, District and below along with gender and social category.
Number of abandoned women provided counselling, care and support	
Number of women victims of indecent representation	NCRB. Limitation: Data is based on information reported by Police Stations based on cases registered by them. Data needed at the level of the State, District and below along with gender and social category.
Number of cases registered against persons victimising women through indecent representation	
Number of women victims of cruelty by husband and relatives	
Number of women victims of assault with intent to outrage her modesty	
Number of women victims of dowry death	
Number of cases of dowry deaths	
Number of women who have suffered physical violence and its frequency	
	NFHS. Limitation: Information is dated. Coverage is limited to the level of States and to information

Number of women who have suffered sexual violence and its frequency	reported by women in the age group 15-49. Girls and older women not included. Data needed at the level of the State, District and below along with gender and social category.
Number of women seeking help to stop violence and source from which help was sought	
Number of women who have suffered mental/ emotional violence and frequency	
Relationship of the women with the perpetrators of violence	NFHS. Limitation: Information is dated. Coverage is limited to the level of States and to information reported by women in the age group 15-49. Girls and older women not included. NCRB. Limitation: Data is based on information reported by Police Stations based on cases registered by them.
Number of women who have suffered economic violence	Not available. Data needed at the level of the State, District and below along with gender and social category.
Number of cases of stalking of girls and women	
Number of cases of stalking of girls and women registered	
Number of women victims of sexual harassment at the workplace	
Number of women victims of sexual harassment at other places	
Number of cases of infanticide	NCRB. Limitation: Data is based on information reported by Police Stations based on cases registered by them.
Number of cases of murder of children and women	
Number of cases of crimes against children and women	Data needed at the level of the State, District and below along with gender and social category.
Conviction rate in crimes against children and women	NCRB.
Disposal of cases pertaining to crimes against children and women	NCRB.
Number of girls and women victims of Rape	NCRB data. Limitation: Data is based on information reported by Police Stations based on cases registered by them. Data needed at the level of the State, District and below along with gender and social category.
Number of children and women kidnapped and abducted	
Number of cases of foeticide	
Number of cases of abetment to suicide of children and women	
Number of suicides by children and women	
Number of cases of exposure and abandonment of girls and women	

Number of cases of Molestation of girls and women	
Number of Juvenile Crimes	
Number of persons belonging to the third gender/ transgender	Census
Number of child care institutions registered under the JJ Act	Data from administrative records. Data needed at the level of the State, District and below.
Number of children in child care institutions registered under the JJ Act	Data from administrative records.
Number of child care institutions still not registered under the JJ Act	Not available. Data needed at the level of the State, District and below.
Number of children in child care institutions still not registered under the JJ Act	Not available. Data needed at the level of the State, District and below along gender and social category.
Number of observation homes and special homes set up under JJ Act	Data from administrative records.
Number of children in observation homes and special homes set up under JJ Act	Data from administrative records. Data needed at the level of the State, District and below with regularity along gender and social category.
Number of Observation Homes and special care homes for children in conflict with the law	Data available from administrative records. District level data needed.
Number of children in conflict with the law arrested, tried, convicted, released	NCRB. Data needed at the level of the State, District and below along with gender and social category.
Number of children in conflict with the law rehabilitated	Data available from administrative records.
Number of qualified staff in observation homes and special homes	Data from administrative records. Data needed at the level of the State, District and below with regularity along with gender and social category.
Percentage of Children Homes regarding which social audit was done	Data not available. Data needed at the level of the State, District and below.
Number of women in institutional care by type (eg short stay home, shelter home, special care home, etc in each district	Ministry of Women and Child Development Annual Report. District level data needed along with age, social category, duration of stay, adequacy of support and rehabilitation.
Number of beneficiaries/women beneficiaries of Family Counselling Centres	State wise data provided by Central Social Welfare Board (CSWB). Data needed at the level of the District and below along with age and social category.
Number of staff required and shortfall in care homes	Not available.
Number of Child and Women	Not available.

Welfare Committees notified	
Number of Protection officers for women required, designated, in position, and shortfall in each district	Partial data available from administrative records.
Number of women provided support by Protection officers	
Number of working women's hostels required, existing and shortfall	Ministry of Women and Child Development Annual Report provides information regarding the number of working women's hostels in States and UTs, the number of working women and children staying in them and the Societies that have received grants in aid. However information is not available regarding the number of working women's hostels required and shortfall relative to demand. Information is also not available at the District level.
Number of Anti-Human Trafficking Units (AHTUs) set up in different States	Not available.
Infrastructure of AHTUs	
Number of Community vigilance groups formed under Act of AHT	
Number of awareness and sensitization programmes for key functionaries AHTUs	
Number of cases of rescue and safe withdrawal of the victim from the place of exploitation.	
Number of cases of rehabilitation, including safe shelter for victims with basic inputs of food, clothing, counseling and vocational training	
Number of staff required, sanctioned, in position, vacant and shortfall in AHTUs	
Number of trained and untrained staff in AHTUs	
Training programmes conducted for child sensitization of the police personnel	
Training programmes conducted for gender sensitization of the police personnel	
Proportion of Police personnel who underwent training programmes for gender sensitization	

Proportion of Police personnel who underwent training programmes for child sensitization	Not available.
Time taken in investigations of crime against women- less than three months/ more than three months/ one year/ two years/ three years	
Number of districts where 'Crime against Women Cells' do not exist	
Number of Special Juvenile Police Units created in different States	
Periodicity of the meetings of the State Advisory Committees for preventing and combating trafficking of women and children for commercial sexual exploitation- three monthly, six monthly, annual, none	
Number of rehabilitation centres where medical care, legal aid, education facilities are provided to children and women	
Number of rehabilitation centres where the facility for undertaking vocational training and income generation activities is available	
Special juvenile police units (SJPUs) in various states under the JJ Act	Partial data is available from administrative records.
Number of SJPU units where paid social workers having experience of working in the field of child welfare have been provided and how many of the paid social workers are women	Not available. District, State and All India level data needed.
Number of SJPU units where probation officers have been appointed and trained	
Number of pending cases against juveniles, duration of pendency, children released or not released after three years and penal action taken against those CJMs/CMMs who detained a child in special home beyond three years/beyond the term given in the order.	

Number of divisional headquarters covering two/three adjoining Districts (in large States) with at least one observation home and one children home for boys and girls separately	Not available. District, State and All India level data needed.	
Number of cases in which children in conflict with law missed their dates for production before the JJB due to non-availability of escort party of police on such dates and this resulted in delay in the disposal of cases		
Proportion of supervisory/ administrative and watch and ward staff in children homes provided/ not provided training/orientation for creating child-friendly environment and the number of untrained staff		
Number of children homes with educational arrangements		
Number of Inspection Committees formed to carry out surprise inspections of all Children Homes, whether run by Government or NGOs, on a periodic basis and the number of such inspections		
Status of Disposal of Cases of Children in Conflict with Law		NCRB.
Number of state level and district level Advisory Boards under JJ Act		Not available.
Periodicity of Advisory Boards meetings		

\* A lot of this data is not available beyond the level to which it pertains or where it is compiled. The overall monitoring and corrective intervention is not possible without it.

**Table 8.2: Poverty, Work, Basic Services and Assets**

<b>Core Indicator</b>	<b>Source, Limitations and Remarks</b>
<b>Poverty and Deprivation</b>	
Number of children and women in Poverty	Planning Commission estimates are available at the level of the household. Limitation: Estimates of poverty are not available separately for men and women or boys and girls or older men and women or SC/ST/minorities etc. Information is also not available at the level of the district and below.
Number of children and women in households that were poor and are still poor (chronic or persistent poverty)	Not available. Panel data needed.
Number of children and women in households that were not poor and have become poor (and major driver for entry into poverty)	
Number of children and women in households that were poor and have moved out of poverty (and major enabler or interrupter)	
Number of children and women who are in non-poor households but are poor	Intra-household poverty estimates not available.
Number of children and women belonging to SC households	Census. Limitation: Periodicity is decadal.
Number of children and women belonging to ST households	
Number of children and women belonging to OBC households	
Number of children and women belonging to Minority households	
Number of children and women in backward spatial locations	Not available.
Number of women and children belonging to landless rural households	Census.
Number of children and women who are homeless	
Number of children and women provided shelter including night shelter	Not available. Data based on administrative records. Needs to be verified through independent evaluations.
Number of bonded children and women bonded labourers	Not available.

Number of legally released bonded children and women bonded labourers	SECC (forthcoming).
Number of legally released bonded children and women labourers who have been rehabilitated	Partial data reported by some States.
Number of children and women belonging to Primitive Tribal Groups	SECC (forthcoming).
Number of children and women manual scavengers	
Number of children and women manual scavengers who have been rehabilitated	Data based on administrative records of the Ministry of Social Justice. Needs to be verified through independent evaluations.
Number of children and women who suffer multidimensional deprivation	Not available.
Percentage of children and women who suffer hunger	Partial from NSSO for household. Based on responses from head of household. Accuracy issues. Data is needed at the level of the district and below.
Number and percentage of children and women suffering hunger and provided with nutritious food throughout the year	Not available.
Number of women without adequate means of livelihood	Not available.
Number of women provided an adequate means of livelihood	Very limited data from administrative records based on, for example, women beneficiaries of STEP and other livelihood related programmes.
Number of “working” women who are unable to secure an adequate means of livelihood	Not available.
Number of children and women provided social protection/ security	Very limited data from administrative records such as number of women provided old age pension. However, the level at which the pension is set is not adequate. Data is needed at the level of the State, District and below.
Number of children and women without <b>adequate</b> social protection/ security	Not available.
Percentage of children and women with insurance	Partial data from Insurance Regulatory Development Authority of India based on data from LIC, India for life insurance only.
Number of children and women who have migrated due to distress	NSSO (forced migration and migration due to health reasons). Census (disaster based migration mentioned in some years). Data is needed at the level of the State, District and below with clarity regarding

	different kinds of distress related migration and support received and needed.
<b>Assets and Debt</b>	
Number of women with title to land (by size of land)	Not available. Data could be compiled based on administrative records. NSSO Debt and Investment survey data is for the household.
Number of women operating land for agricultural production	Agricultural Census (number of operational holdings individually and jointly held by women).
Number of women owning unorganised manufacturing enterprises	NSSO.
Number of registered and unregistered enterprises owned by women	Census of Micro, Small and Medium Enterprise Sector.
Number of registered and unregistered enterprises managed by women	
Number of women owning a house by type	Not available.
Number of women owning livestock by type	
Number of women owning a vehicle	
Number of women owning other major assets by type and value	
Number of women bank or post office savings account holders	NFHS. Limitation: Information is dated. Coverage is limited to the level of States. RBI Limitation: Partial coverage. Gender disaggregated State-wise information regarding bank accounts/ borrowals is available only for accounts with credit limit above Rs. 2 lakh. Information is not gender disaggregated at the State level for accounts with credit limit upto Rs. 2 lakh. Post office records. Administrative records for certain schemes.
Number of women who have taken loans for consumption (by source and value)	Available at the level of the household from NSSO.
Number of women who have taken loans for production (by source and value)	
Rate of interest at which women have taken the loan	Partial information from administrative records with for e.g., Rashtriya Mahila Kosh.
Number of women owning shares and other financial instruments etc	Not available.

Number of women earning above the level of minimum wage from sources other than labour	
<b>Work</b>	
Female labour force participation rate	NSSO. Ministry of Labour and Employment.
Female worker population ratio/ Female work participation rate	NSSO. Limitations: Inaccuracy issues as a large proportion of women reported as attending only or mainly domestic duties (codes 92 and 93) are actually participating in economic activities. Data reported in NSSO Reports on Participation of Women in Specified Economic Activities along with Domestic Duties needs to be used to correct this indicator Census. Limitation: decadal and subject to respondent bias. Ministry of Labour and Employment. Differences in estimates by different agencies.
Number and percentage of women workers by category (cultivator, agricultural labour, household industry and other workers – total, main and marginal)	Census. DGET. Ministry of Labour.
Number and percentage of women employed in the organised sector (public and private) by industrial activity (agriculture, manufacturing, trade, transport etc).	DGET, Ministry of Labour and Employment. Data is needed at the level of the State, District and below.
Number of females employed in non agricultural establishments	Economic Census for establishments inside and outside household (excluding crop production, plantation, public administration, defence and compulsory social services). Data is needed at the level of the State, District and below.
Average daily employment of children and women in factories (by broad industrial group), plantations and mines (women)	Labour Bureau. Data is needed at the level of the State, District and below.
Number and percentage of female employees in Government	DGET, Ministry of Labour provides data for Central Government.
Percentage of women workers by employment status (self employed, regular salaried employees, casual labour)	NSSO.
Percentage of women workers provided skills and training	Partial data from administrative records. Data is needed at the level of the State, District and below.

Percentage of women employed in the informal sector	NSSO.
Percentage of women workers who have no written job contract and are not eligible for paid leave	NSSO. Data is needed at the level of the State, District and below.
Percentage of women workers in part time work	Not available. Data is needed at the level of the State, District and below.
Percentage of women workers with “decent” work conditions	
Number of women receiving maternity benefits in factories, plantations and mines	Labour Bureau. Data is also needed at the level of the district and below.
Number of complaints received and prosecutions launched under the maternity benefit act in factories, plantations and mines	
Number of women workers getting <b>adequate</b> social security benefits	Not available. Data is needed at the level of the State, District and below.
Number of creches for working women required, existing and shortfall	
Unemployment rate	NSSO, Ministry of Labour. Data is also needed at the level of the district and below.
Number of unemployed women registered at employment exchange and number placed in jobs	DGET, Ministry of Labour and Employment. Data is needed at the level of the State, District and below.
Number of unemployed youth (girls and boys)	
Percentage of unemployed women trained and placed in jobs	Not available.
Minimum wage	Ministry of Labour and Employment.
Number of women workers getting less than minimum wage	Not available. Data is needed at the level of the State, District and below.
Number of cases registered against employers paying less than minimum wages to women workers	
Number and percentage of women workers in regular employment trained and promoted to higher positions	
Number and percentage of women agricultural labourers provided drudgery reducing equipment	Not available. Needs to be compiled from administrative records and placed in the public domain.

Number and percentage of women cultivators and agricultural labourers provided agricultural extension training	
Percentage of women engaged in unpaid work	NSSO - Partial estimate.
Percentage of women engaged in unpaid care work (hours per week)	Time Use Survey for 6 States.
Number of hours per week spent by women on SNA non SNA and extended SNA activities	
Wage rate (male/ female)	Ministry of Labour and Employment.
Wage/ Salary received per day by regular wage/ salaried women employees by broad industrial category and educational level (and deviation from rate earned by men)	NSSO.
<b>Basic Services</b>	
Number and percentage of children and women in households with access to adequate and safe drinking water (and time to obtain drinking water)	Census. Limitation: Periodicity is decadal. NSSO. NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below. Data needed on quality, adequacy, time spent on filling water, who fills water etc.
Number and percentage of children and women in households with latrine facility within the household	Census. Limitation: Periodicity is decadal. NSSO. Limitation: Coverage not below State level. NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below. Data needed on within or outside house, distance from house, with or without running water, in use or disuse, if community provision then number of seats relative to users, etc.
Number and percentage of children and women in households not having any latrine facility	Census. Limitation: Periodicity is decadal and information is at the household level. NSSO. Limitation: Coverage is for households and is not below State level.
Number and percentage of children and women using public latrine facility and distance to it	
Number and percentage of children and women using latrine facility serviced by humans (manual scavengers)	Not available.

Number and percentage of children and women aware of and adopting hygienic practices	
Number and percentage of children and women in households with drainage facility	Census. Limitation: Periodicity is decadal. NSSO. Limitation: Coverage is for households and is not below State level.
Number and percentage of children and women in households with bathroom	
Number and percentage of children and women in villages and slums with pucca internal roads	Not available.
Number and percentage of children and women owning a mobile phone	Census. Limitation: Periodicity is decadal. Coverage is for households.
Number and percentage of women providing care to family members and hours of care burden	Not available.
Number and percentage of children and women in households with lighting by main source (eg electricity, kerosene, solar, hydro, other, no lighting)	Census. Limitation: Periodicity is decadal. NSSO. Limitation: Coverage is for households. Data regarding Outage hours and voltage etc are not available.
Number and percentage of women cooking with each of the following energy sources - firewood, crop residue, cow dung cake, coal, lignite, charcoal, kerosene, LPG/ PNG, electricity, biogas, any other.	Census. Limitation: Periodicity is decadal. Coverage is for households. NSSO. Limitation: Coverage is for households.
Number and percentage of women collecting firewood, making dung cakes etc for cooking and time spent on these tasks	Partial data from NSSO.
Number of villages with no BPL	SECC (forthcoming)

**Table 8.3: Education**

<b>Education: Core Indicators</b>	<b>Source, Limitations and Remarks</b>
Literacy rate 7 years and above	Census- Periodicity is decadal NSSO. Periodic
General education level 15 years and above	Census NSSO. Periodic
Educational characteristics of population by gender and caste/religion categories	Census- Periodicity is decadal
Access to quality early childhood development, care and pre-primary education educational attainment	NCERT- All India Education Surveys. Periodic.
Category-wise enrolment in pre-primary institutions (Balwadis, Anganwadis, ECE Centers, LKG/UKG, Nursery classes)	NCERT- All India Education Surveys. Periodic.
Gross enrolment as % of total pop by age 6-11 and 11-14 male female	Dept of Education, MHRD. NUEPA- Unified District Information System for Education (U-DISE). Limitation- collected from schools
Net Enrolment Ratio	MHRD. NUEPA- U-DISE (earlier DISE). NCERT- All India Education Surveys. Periodic.
Enrolment in primary education	MHRD. NUEPA- U-DISE (earlier DISE). Reliability issues as the data is collected from schools NCERT- All India Education Surveys. Periodic.
Enrolment in secondary education	MHRD U-DISE (earlier SEMIS). Reliability issues as the data is collected from schools NCERT- All India Education Surveys.
Class-wise enrolment (all categories, SC, ST, OBC, Economically backward minority communities - Muslim) and children with disabilities by sex) in primary, upper primary, secondary and higher secondary stages of recognized schools.	NUEPA- U-DISE (earlier DISE and SEMIS). Partial-collected from schools. NCERT- All India Education Surveys. Periodic.
Enrolment in technical, vocational and tertiary education – subject wise	MHRD- AISHE aims to address this. Concerned Department/ agency. AICTE, MCI, IASRI, CSO, Not available for SC/ ST communities or minorities. NCERT- All India School Education Statistics – on

	vocational education in schools. Is periodic.
Children with special needs in school	NUEPA-AIES.
Out-of-school children and their background	Census. Limitation: Periodicity is decadal. Data on SC and ST children, children of minorities, and disabled children out of school not available.
Drop out rate at different levels of education	MHRD. NSSO. Periodic. Issue of sample size important. U-DISE- collected from schools. Estimates differ between sources.
Children provided remedial education	Not available. District, State and All India level data needed along with gender and social category
Availability of educational services, especially in backward areas,	MHRD provides data on schools in Educationally backward blocks. Data regarding boys and girls in these schools is not available.
Availability of educational services, including facilities and utilisation in child labour intensive areas.	Not available. District, State and All India level data needed along with gender and social category.
Availability of educational services, including facilities and utilization, in areas of civil unrest and in situations of emergency.	
Data on educational institutions, including facilities and utilization, in locations characterized by geo-physical difficulties and frequent natural calamities	
Availability of institutions of higher education.	State and district level data needed for both private and public institutions as well as by broad disciplines. The information should be by gender and social category. Aimed at in AISHE.
Enrolment and faculty in institutions of higher education	
Completion of primary education (Apparent Survival Rate, Retention Rate, Promotion Rate & Transition Rate from Primary to Upper Primary)	U-DISE. Limitation- based on school data. NSSO. Periodic.
Completion of secondary education (class X and XII passed)	NSSO. Periodic. U-DISE.
Completion of technical, and vocational education and absorption in job market.	NSSO data for completion of technical and vocation education. Not available social category-wise and for absorption in job market.
School attendance rate	NSSO. Periodic.
Learning achievement at primary level, e.g. in Maths, Language, etc	NCERT – AIES.
Completion of higher education	Limited data. Data not available for all courses. Also not available for private institutions.

Pupil/teacher ratio	MHRD. NCERT – AIES. NUEPA-U-DISE.
Percentage of female teachers	MHRD. NUEPA. Limitation: Availability of female teachers in girls schools needed subject wise especially at the secondary school level
Qualified teachers	NUEPA- U-DISE. NCERT – AIES
Teacher training and certification	NUEPA. - U-DISE. NCERT – AIES.
Teachers qualified in sign language and/or Braille to train professionals and staff who work at all levels of education (all India level)	Rehabilitation Council of India.
Data on retention, survival and progress of children belonging to weaker sections or disadvantaged groups enrolled under 25% seats in private schools	U-DISE. Limitation- based on school data.
Sanctioned and filled posts of teachers, qualifications and upgradation of knowledge and teaching skills:	U-DISE for Teacher receiving in-service training. Administrative records from MHRD for sanctioned and filled up posts.
Data on quality of teaching, absenteeism among teachers, inadequate training and skills.	User data should be collected at the household level.
Required, sanctioned and available support staff, technicians, helpers, etc. in various educational institutions	Not available for private institutions, informal institutions.
Functional toilets in schools (with running water) for girls	U-DISE. Limitation- based on school data.
Physical health (conducted medical-checkups) and well-being of children in schools	NUEPA- U-DISE. NCERT.
Government and private schools- recognised and unrecognised	NUEPA- U-DISE. NCERT- All India Education Surveys. MHRD- SSE.
Informal education (Ashram schools, Maktabas, Sanskrit Patshalas, Madrasas)	NCERT- All India School Education Statistics.
School infrastructure- boundary wall, classrooms, toilets, water availability, blackboard, electricity, computers, science lab and required equipment	NUEPA- U-DISE.

Facilities in residential schools for weaker sections (SCs, STs, physically challenged children)- infrastructure, teachers, support staff, scholarships)	Ministry of Social Justice and Empowerment. Ministry of Tribal Affairs. NCERT-AISES. U-DISE.
Children in education availing scholarships and other concessions. Free education, Tuition fee fully exempted, Tuition fee partly exempted. Scholarship, subsidised books/stationery/ mid-day meal (at Primary, Middle, Secondary and HS)	NSSO. Periodic.
Data on learning outcomes	Class specific data available from National Achievement Survey of NCERT. District level data needed along with gender and social category.
Fund Flow to the Implementing Agencies	Not Available. District, State and All India level data needed along with social category.
Private expenditure on Education	
Household expenditure on Education	NSSO - Periodic.

**Table 8.4: Survival and Health**

<b>Core Indicators</b>	<b>Source, Limitations and Remarks</b>
Sex ratio at birth, Child sex ratio, Sex ratio for the population (all ages).	<p>Census – Decadal for all ages. Periodicity is an issue since the census provides data once in a decade.</p> <p>CRS – based on live births that are registered. Available for States/ UTs and Districts. Limitation: births that are not registered will not be covered.</p> <p>SRS – Annual. Limitation: Coverage limited to India and bigger States</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Regular flow of data from critical districts is needed.</p>
Birth Rate	<p>CRS- based on live births that are registered. Available for States/ UTs and Districts. Limitation: births that are not registered will not be covered.</p> <p>SRS – Crude birth rate.</p> <p>Limitation: Coverage limited to India and bigger States.</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Need to cover all States and UTs and all districts.</p>
Death Rate	<p>CRS- based on deaths that are registered. Available for States/ UTs and Districts. Limitation: deaths that are not registered will not be covered.</p> <p>SRS – Crude death rate. Limitation: Coverage limited to India and bigger States.</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Need to cover all States and UTs and all districts.</p>

Infant and child mortality rate	<p>SRS – Annual. Limitation: Coverage limited to India and bigger States.</p> <p>CRS- based on deaths that are registered. Available for States/ UTs and Districts. Limitation: deaths that are not registered will not be covered.</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Data needed nation-wide at district and below level. Mother and child tracking over time with regular follow up would improve data on infant and child development and mortality as well as maternal mortality.</p>
Maternal Mortality Ratio	<p>SRS – Limitation: Data is available only for 15 large states.</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Data needed nation-wide at district and below level on mortality. Investigation into the factors leading to each case of maternal death is needed so that corrective action can be taken and reviews conducted to ensure follow-up.</p>
Life expectancy at birth	<p>SRS – Limitation: Coverage limited to India and bigger States Data needed nation-wide at district and below level.</p>
Total Fertility Rate	<p>SRS – Annual. Limitation: Coverage limited to India and bigger States NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below.</p> <p>Data needed nation-wide at district and below level.</p>
Mortality Rate for children and women	<p>SRS - Annual estimate of mortality rate (rural and urban). Age specific groups. Limitation: Coverage limited to India and bigger states.</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Data needed nation-wide at district and below level.</p>
Couple Protection Rate	<p>MoHFW - Annual, India and bigger States</p> <p>Data needed nation-wide at district and below level.</p>
Registration of all Births and Deaths	<p>Registration of births has improved a large number of births and deaths are not captured.</p>

Number and percentage of underweight children (weight for age)	NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below. ICDS - Accuracy issues for administratively collected data. Validation needed through independent surveys.
Number and percentage of stunted children	NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below. Data needed nation-wide at district and below level.
Number and percentage of wasted children	
Number and percentage of under weight women (Body mass index)	
Number and percentage of anaemic children and women	
Number and percentage of children and women suffering from micronutrient deficiency	
Morbidity rates for children and women	NSSO - Data is for 2004 and is dated. Data has significant accuracy issues. Periodic sample surveys of households on morbidity in the country, by trained investigators are needed, taking in to account the seasonal variations in diseases. Morbidity/epidemiological studies are needed on a national scale. Information is needed Gender wise, Age wise, Social Group wise at the level of the district and below. Urgent filling of gap needed.
Disease burden –major communicable and non-communicable diseases suffered by children and women	This data is extremely critical for planning. Data from NSSO is for 2004 and is dated. Urgent filling of gap needed. CBHI provides administratively collected data for States and UTs based on monthly reports sent by Directorate of Health Services of State/ UT. The data is gender disaggregated for a few diseases. However accuracy of the data needs to be verified through independent surveys and the data must be available for all major diseases It needs to be available for all diseases Gender wise, Age wise, Social Group wise at the level of the district and below.

Number of infected children and women diagnosed and treated (major communicable or non-communicable disease wise)	Data is available from administrative records. Needs to be verified through independent surveys. Gender disaggregated information is not available. Since reported morbidity is higher for women, data on gender differentials in access to treatment and care for women and girls need to be provided together with information regarding stage of the disease at which medical attention received.
Cause of death of children and women	MCCD, Office of RGI – Limitation: Around one-third of deaths are still not registered. Of the two-third of deaths that are registered around 20% are medically certified as per MCCD 2010. Quality of medical certification across the States/UTs would vary. Hence a large number of deaths are not covered. Complete death registration system is needed.
Number of accidental deaths and suicides by children and women	NCRB. Limitation: Coverage limited to information reported to NCRB by Police Stations based on cases registered by them.
Medical attention received by children and women before death	SRS - Limitation: Coverage limited to Government hospitals or private hospitals and for India and bigger states. Lack of clarity regarding stage at which medical attention received.
Number and percentage of children and pregnant women fully immunised and vaccinated	Data based on administrative records. Needs to be verified through independent evaluations. CBHI NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below.
Number and percentage of mothers receiving full ante natal, natal and post natal care at the time of delivery	NFHS. Limitation: Information is dated. Coverage is limited to the level of States and does not cover UTs or districts and below. AHS. Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only. Data based on administrative records. Needs to be verified through independent evaluations. Data needed nation-wide at district and below level
Number and percentage of births through institutional care	SRS - Percent of live births where the mothers received medical attention at delivery either at Government hospitals or at Private hospitals. Data available annually. Limitation: Coverage issues. Limited to India and bigger States NFHS. Limitation: Information is dated. Coverage

	<p>is limited to the level of States and does not cover UTs or districts and below.</p> <p>AHS – Coverage limited to districts in 9 selected states for a period of three years. Limitation: Geographical coverage and for a limited time period only.</p> <p>Data needed nation-wide at district and below level</p>
Number and percentage of children and women with health insurance/ coverage	Limited to schemes e.g. CGHS or ESI or RSBY No data to enable tracking of progress towards universal coverage
Number of Sub Centres, PHCs, CHCs as per population and area norms and shortfall thereof	MoHFW Rural Health Statistics and CBHI Location wise deviation from norms needs to be specified and tracked.
Number of doctors required, sanctioned, in position, vacant and shortfall in each Sub Centre, PHC and CHC	MoHFW - deviation from norms needs to be specified and tracked.
Number of specialists required, sanctioned, in position, vacant and shortfall in each CHC and District Hospital	MoHFW.
Number of nurses, ANMs, midwives and technicians required, sanctioned, in position, vacant and shortfall in each Sub Centre, PHC and CHC	MoHFW Rural Health Statistics and CBHI. Location wise deviation from norms needs to be specified and tracked.
Number of paramedics and allied health workers as per population norms	MoHFW Rural Health Statistics and CBHI. Location wise deviation from norms needs to be specified and tracked.
Public Sector provisioning for Health	Budget documents and MoHFW – Health Accounts.
Number and percentage of women who are dependent on out of pocket expenditure for health care	MoHFW – Health Accounts are dated. The data is not available separately for males and females and only the maternal health expenditure can be disaggregated.
Number and percentage of women who take loans to meet the health expenditure of a family member	Not available.
Number and percentage of women who provide care to family members who are ill (hours per day)	
Number and percentage of women who are provided care by family members when they are ill (hours per day)	
Number and percentage of children	Census. Limitation: Periodicity and coverage

and women who are disabled	NSSO. Limitation: Coverage of disability and lack of data below the level of States/UTs. Some categories of disability and learning disabilities remain excluded. It is argued that the determination of disability in the Census and NSSO, by “untrained interviewers...yields the lowest disability estimates.” Information is needed on each of the many different types of disability as well as prevalence and incidence of multiple disabilities.
Action taken on health issues due to violence against women noted by Hospitals/ Public Health Systems	Not available.
Number of Ambulances and Mobile Medical Units transporting patients in each district	Data needed on remote or unserved districts and blocks.
Number of children and women patients transported by Ambulances and Mobile Medical Units	Data based on administrative records. Needs to be verified through independent evaluations. The information should especially focus on remote or unserved districts.
Response time of Ambulances and Mobile Medical Units in remote districts	
Number and percentage of children and women provided nutrition during the year	
Number and percentage of malnourished children and women provided <b>adequate</b> nutrition during the year	Not available.
Number and percentage of severely malnourished children treated during the year	Data based on administrative records. Needs to be verified through independent evaluations.
Number and percentage of children and women patients provided <b>free</b> medical care in public and private hospitals	
Number of months delay in payment of salaries and incentives to staff	
Availability of quality medicines and diagnostic equipment as per norms at Sub centres, PHCs, CHCs and District Hospitals	Not available. Availability (but not quality) could be compiled from data based on administrative records. Needs to be verified through independent evaluations.
Number of clinics, poly clinics, diagnostic facilities, nursing homes and hospitals registered and unregistered	Registered –MoHFW Unregistered – data not available.

Number of cases of medical malpractice reported, investigated and action taken	Not available Data is needed at the level of the district and below.
Number of doctors and medical staff who have received training during the year	
Number and capacity of community care homes and hospices	
Number of women patients admitted to community care homes and hospices	
Number of children and women with long term illness provided home based care	
Number of cases of spurious drugs registered, prosecuted and disposed	Central Drug Regulator's Office

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**Table 8.5: Participation and Decision-Making**

<b>Core Indicator</b>	<b>Source, Limitations and Remarks</b>
Number and percentage of women representatives in Parliament	Election Commission.
Number and percentage of women representatives in State Legislatures	Election Commission.
Number and percentage of women representatives in PRIs	Ministry of Panchayati Raj.
Number and percentage of women representatives in ULBs	Ministry of Panchayati Raj.
Number and percentage of women in Central Council of Ministers including women Cabinet Ministers, Ministers of State and Deputy Ministers	Lok Sabha Secretariat.
Number and percentage of women electors and voters in the General Election	Election Commission.
Number and percentage of women candidates contesting and elected in General Elections	Election Commission.
Number and percentage of women in All India Services	DOPT and concerned Ministries. Provides information on SC, ST and OBC women also.
Central Secretariat Services (CSS)	Information is available only for Group A officers for up to 2011, and no information is available on the SC, ST or OBC women in the CSS.
Number and percentage of women Judges in Supreme Court, High Courts and Lower Courts	Supreme Court and different High Courts and Lower Courts. Needs to be by social category of women.
Number and percentage of women in professional and technical positions	Not available from the national official statistical system.
Number and percentage of women participating in household decision-making	NFHS for 2005-06. This is with regard to own health care, making major household purchases, purchasing daily household needs, and visits to her family and relatives including the girl child/ adolescent girls in the age-group 15-49 both in rural and urban areas.
Number and percentage of women who have autonomy in household decision-making	NFHS for 2005-06.
Number and percentage of children's participation in decision-making in educational institutions	Not available.
Number and percentage of women participating in decision-making	Consolidated data not available.

positions in educational administration as Vice Chancellors, Deans, Principals, Registrars, Heads	
Number and percentage of children participating in sports events at the block, district, state, national and international levels	Administrative records from Ministry of Youth Affairs and Sports.
Number of girls receiving training under the National Sports Training Contest Scheme	
Number and percentage of children participating in cultural events at the block, district, state, national and international levels	
Number and percentage of girls participating in youth club exchange programmes	
Number and percentage of girls receiving awards for contribution to voluntary social development activities	
Number and percentage of girls participating in National Youth Core Scheme activities	
Number and percentage of women who are members of Trade Unions	
Information on implementation of children's right to be heard in any judicial and administrative proceedings	Not available.