



SAARC
Social Charter
India Country Report
2014

Ministry of Statistics and Programme Implementation
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Foreword

The SAARC Social Charter is a reflection of long term vision of the SAARC leaders for promoting the welfare of the people, improving quality of life, accelerating economic growth, social progress and cultural development and in providing all individuals the opportunity to live in dignity and to realize their full potential in the SAARC region.

So far India is concerned, at the beginning of the 11th Plan (2007-12), it was envisaged faster and inclusive growth of the country and continues in the 12th Plan (2012-17) for sustainable and more inclusive growth. However, due to economic crisis across the Globe and for some internal reasons, the envisaged goals could not be fully achieved. Nevertheless, a few achievements were made even beyond the expectations like tele-density, institutionalised deliveries, under-5 mortality rates in the Country.

I hope that the 'SAARC Social Charter – India Country Report 2014' would be useful in understanding the policy interventions undertaken by the Government of India so as to achieve growth in the Country.

New Delhi
13th August 2014

(T. C. A. Anant)
Chief Statistician & Secretary,
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Preface



The Ministry of Statistics and Programme Implementation has been designated for reporting the implementation of SAARC Social Charter in India. The Ministry has been bringing out the country report on the Social Charter in India. The present report is an attempt to provide a holistic view of policy and programmes of different Ministries for achieving the goals of SAARC Social Charter in the country.

The “SAARC Social Charter – India Country Report 2014” is the fifth country report which represents the status of progress in achieving the objectives of the SAARC Social Charter in India. The report is divided into 11 chapters corresponding to the different Articles of the Social Charter.

I would like to extend my sincere thanks to the Planning Commission, Ministries of Rural Development, Women & Child Development, Human Resource Development, Housing & Urban Poverty Alleviation, Environment & Forest, Youth & Sports, Law & Justice, and Social Justice & Empowerment, who have cooperated by providing the requisite material for the report. I would like to appreciate Dr. G.M. Boopathy, Additional Director General, Social Statistics Division of the Central Statistics Office and his team for their valuable efforts in the preparation of this Report.

New Delhi
13th August 2014

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Contents

	Title	Page No.
	<i>Foreword</i>	<i>i</i>
	<i>Preface</i>	<i>ii</i>
	<i>Officers associated with the Publication</i>	<i>iii</i>
	<i>Background</i>	<i>vi</i>
1.	Poverty Alleviation	1
2.	Health	19
3.	Population Stabilisation	44
4.	Education and Human Resource Development	48
5.	Youth Mobilisation	74
6.	Promotion of the Status of Women	92
7.	Promotion of Rights and Well-being of the Child	101
8.	Drug De-addiction, Rehabilitation and Reintegration	105
9.	Environment Management	109
10.	Affordable Justice	126
	Annexure 1: SAARC Social Charter	129
	Annexure 2: SAARC Development Goals	141
	Annexure 3 : SAARC in Figures (2014)	145
	Acronyms	148

Referral Websites

The current publication has been compiled based on the inputs from the concerned Ministries/Organisations. For details, the readers may visit the respective websites –

Planning Commission	www.planningcommission.nic.in
Registrar General of India	www.censusindia.gov.in
Ministry of Rural Development	www.rural.nic.in
Ministry of Housing & Urban Poverty Alleviation	www.mhupa.gov.in
Ministry of Health & Family Welfare	www.mohfw.nic.in
Ministry of Human Resource Development	www.mhrd.gov.in
Ministry of Youth Affairs & Sports	www.yas.nic.in
Ministry of Women & Child Development	www.wcd.nic.in
Ministry of Social Justice & Empowerment	www.socialjustice.nic.in
Ministry of Environment, Forests and Climate Change	www.moef.gov.in
Ministry of Law & Justice	www.lawmin.nic.in
SAARC Secretariat	www.saarc-sec.org www.saarcstat.org

Background

The SAARC Heads of State/ Government signed the SAARC Social Charter at the 12th SAARC Summit in Islamabad on 4th January 2004. The Charter envisages action in the areas of poverty alleviation, health, education, human resource development, status of women, rights and well-being of children, population stabilization, drug de-addiction, rehabilitation & reintegration.



The objective of the Charter is to place people at the centre of development and to direct the economy to meet the human needs more effectively.

The SAARC countries in 2004 agreed to set up a National Committee to facilitate the implementation of the SAARC Social Charter and monitor performance in achieving its goals and to exchange ideas and information on best practices, apart from promoting collaborative poverty alleviation projects.

The Ministry of Statistics and Programme Implementation has been designated as the nodal Ministry to facilitate the implementation of SAARC Social Charter in India. A National Coordination Committee under the chairpersonship of Secretary, Ministry of Statistics and Programme Implementation was constituted on 12th September 2005 with members from Planning Commission, Ministries of External Affairs, Rural Development, Panchayati Raj, Social Justice and Empowerment, Housing and Urban Poverty Alleviation, Health and Family Welfare, Youth Affairs and Sports, Human Resource Development, Women and Child Development and Finance.

The mandate of the National Coordination Committee is to coordinate, facilitate and monitor the implementation of the goals

of the SAARC Social Charter; to coordinate with the National Committees of other SAARC Member States and consult with these Committees to exchange ideas and information on best practices, apart from promoting collaborative Poverty Alleviation Projects; to interact with SAARC Secretariat in the matters pertaining to implementation of SAARC Social Charter in India.

Ministry of Statistics and Programme Implementation has been bringing out the India Country Report on SAARC Social Charter since 2005.

The current report, fifth in the series, presents the status of achievement on different social development outcomes under different chapters as enumerated in the various Articles of the Charter. The publication sketches a lucid description of the programmatic interventions of the Government of India aimed at raising the living standards of its citizens and providing equal opportunities to hitherto marginalized sections of the society.

1 : Poverty Alleviation

1.1 Poverty Profile

For a good economy, it is necessary to ensure that the benefits of growth accrue to all sections of the society.



Eradication of poverty is thus the most important goal for any country.

Human beings need a certain minimum consumption of food and non-food items to survive. However, the perception regarding what constitutes poverty varies over time and across countries.

Nevertheless, only proper poverty measure can evaluate the performance of economy in terms of providing a certain minimum standard of living to all its citizens. Measurement of Poverty has, therefore, important policy implications. In India, there had been many studies on measurement of poverty with varied approaches.

The consumption approach is to look at it in terms of minimum consumption expenditure per person or preferably per household. Any household failing to meet this level of consumption expenditure can be treated as a poor household. This minimum level of consumption expenditure can be derived, in turn, in terms of minimum expenditure on food and non-food items. Minimum food consumption theory is related to fulfilling certain nutritional standards. However, quantification of minimum non-food consumption is more dubious.

The methodology as devised by Dr. Y. K. Alagh in 1979, improvised by the Lakdawala Expert Group in 1993 and then by the Tendulkar Expert Group in 2009 is used for estimating poverty line by Planning Commission. The improvisations have led to a firmer reliance on the NSSO's results on consumption expenditure by households, a much better method to adjust for inter-state and inter-region differences in price changes over time, and the use of the better recall period introduced in the NSSO's surveys.

According to earlier official poverty estimates, the population living

below the poverty-line declined by 8.5 percentage points between 1993-04 and 2004-05. Since the appropriateness of the poverty line was questioned in some quarters, the Government appointed an Expert Committee under the Chairmanship of late Prof. Suresh Tendulkar. The Tendulkar Committee recommended a recalibration of the rural poverty line to make it more comparable with the urban poverty line, which it found to be appropriate. The application of the Tendulkar Committee poverty line provides a higher estimate of rural poverty and therefore also of total poverty. Applying this methodology to the earlier years, the decline in population under poverty for the above period came to 0.8 points per year. The Tendulkar Committee poverty line for 2004-05 was updated for 2009-10 based on the methodology which provided the poverty ratio at all India level as 21.9% for 2011-12. Poverty lines are by nature subjective and judgmental and as such the Government has constituted an Expert Committee under the Chairmanship of Dr. C.R. Rangarajan, which has submitted the report for consideration of the Government.

1.2 Poverty Alleviation: Rural India

Agricultural wage earners, small and marginal farmers and casual workers engaged in non-agricultural activities, constitute the bulk of the rural poor. Small land holdings and their low productivity are the cause of poverty among households dependent on land-based activities for their livelihood. Poor educational base and lack of other vocational skills also perpetuate poverty. Due to the poor physical and social capital base, a large proportion of the people are forced to seek employment in vocations with extremely low levels of productivity and wages. The creation of employment opportunities for the unskilled workforce has been a major challenge for development planners and administrators.

Poverty alleviation has been one of the guiding principles of the planning process in India. The role of economic growth in providing more employment avenues to the population has been clearly recognised. The growth-oriented approach has been reinforced by focusing on specific sectors which provide greater opportunities to the people to participate in the growth process. The various dimensions of

poverty relating to health, education and other basic services have been progressively internalised in the planning process. Central and state governments have considerably enhanced allocations for the provision of education, health, sanitation and other facilities which promote capacity-building and well-being of the poor. Investments in agriculture, area development programmes and afforestation provide avenues for employment and income. Special programmes have been taken up for the welfare of scheduled castes (SCs) and scheduled tribes (STs), the disabled and other vulnerable groups. Anti-poverty programmes that seek to transfer assets and skills to people for self-employment, coupled with public works programmes that enable people to cope with transient poverty, are the third strand of the larger anti-poverty strategy. The targeted public distribution system (TPDS) protects the poor from the adverse effects of a rise in prices and ensures food and nutrition security at affordable prices.

1.2.1 Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)

Ensuring a minimum level of livelihood security in the rural areas has been one of the daunting tasks for successive governments. Evolving the design of the wage employment programmes to more effectively fight poverty, the Central Government formulated the National Rural Employment Guarantee Act (NREGA) in 2005. 'National Rural Employment Guarantee Act' 2005 (NREGA) was launched with effect from 2nd February, 2006. During 2009-10, through an amendment the NREGA has been rechristened as the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA). To start with, 200 selected districts of the country were brought under its ambit. In 2007-08, it was extended to 130 more districts. As against the original target of 5 years, within three years of its launch MGNREGA has been extended to all the districts from 1st April 2008.

Being the first ever law internationally, that guarantees wage employment in an unprecedented scale, MGNREGA aims at enhancing livelihood security of households in rural areas of the country by providing at least one hundred days of guaranteed wage employment in a financial year to every household whose adult members volunteer

to do unskilled manual work. Unique features of the Act inter alia include, time bound employment guarantee and wage payment within 15 days, incentive-disincentive structure to the state governments for providing or not providing employment as per demand, emphasis on labour intensive works prohibiting the use of contractors, and machinery, ensure the creation of durable community, social and economic infrastructure and assets in the rural areas. The Act also mandates 33 per cent participation for women. The potential of NREGA spans a range of possibilities.

The primary objective of the Act is augmenting wage employment. The choice of works suggested in the Act addresses causes of chronic poverty like drought, deforestation and soil erosion, so that the process of employment generation is maintained on a sustainable basis. The Act is also a significant vehicle for strengthening decentralization and deepening processes of democracy by giving a pivotal role to local governance bodies, that is, the Panchayati Raj Institutions.

During the first year of implementation (2006-07) in 200 districts, 2.10 crore households were provided employment and 90.5 crore person-days were generated. Over the years employment opportunities under MGNREGA have increased and during 2012-13, 4.98 crore households were provided employment and 229.86 crore person-days were generated. During 2013-14 (provisional), 4.77 crore households have been provided employment and 218.10 crore person-days have been generated across the country. At the national level, average wage paid under MGNREGA has increased from Rs. 65 in 2006-07 to Rs. 132.70 in 2013-14. During 2012-13, expenditure on wages was Rs. 27,128.36 crore (72 per cent of the total expenditure). During 2013-14 (provisional), expenditure on wages was Rs.26,495.32 crore (74 percent of the total expenditure). The Programme had a high workforce participation of marginalized groups like SC/ST (40%) in 2012-13. Women workforce participation has also surpassed the statutory minimum requirement of one third participation. In 2012-13, women participation was 51% and it is 53% in 2013-14 (provisional). Financial inclusion of the poor and marginalised has also increased manifold. Up to 2013-14, 9.91 crore bank and post office accounts

have been opened to disburse wages directly to the workers' accounts. In 2013-14 (provisional), 138.49 lakh works were undertaken, of which 37% constituted water conservation, 11% rural connectivity, 5% land development, 0.24% Rajiv Gandhi Sewa Kendra. Provision of irrigation facility to individual beneficiaries constituted around 12% of total work. The remaining 34% works were other activities specific to the local needs of the respective rural areas.

1.2.2 National Rural Livelihood Mission (NRLM)

The National Rural Livelihood Mission (NRLM), launched in June 2011 after restructuring of Swarnjayanti Grameen Swarojgar Yojana (SGSY) was designed based on 2 decades long experience of large scale State wide experiences of various States and dedicated civil society organisations (CSOs) across the country. It was further restructured in May 2013, based on the lesson learnt from the early implementation of the Mission activities. The objective of NRLM is to organize at least one women member from each rural poor household in the country into Self Help Groups (SHGs) and continuously nurture and support them till they come out of abject poverty. Key process of NRLM are driven by the institutions of rural poor women, especially by women who have come out of poverty and whose lives have been transformed by this very process. Thus, it is a programme for the poor, of the poor and by the poor.

SHGs and their federations promoted under NRLM are expected to provide a close and long term handholding support to each of their members and enable them to access the financial entitlements. It is a cost effective programme and the investment by the Mission is expected to leverage at least 8 to 10 times the amount in terms of institutional credit from commercial banks. Each poor household is expected to access at least Rs. 1 lakh as credit from banks in 5-6 loan cycles. The Mission objective is to ensure that each family, once it is in the SHG network for a period of 6-8 years, is able to achieve household food security and have 3-4 stabilized livelihoods. Moreover, these grassroots institutions of poor women go beyond livelihoods. Investment in social and economic mobilization of the rural poor leads to increased voice, participation and representation

of the rural poor in local governments and creates a demand side accountability and pressure on the government line departments for better access to various entitlements from Government and therefore contributing to good governance at the local level.

NRLM seeks to reach out to 8-10 crore rural poor households and organize women member from each household into SHGs and federations at village level and at higher levels. This will be done in a phased manner, using the social capital of the poor, the community resource persons (CRPs) and will be completed by year 2024-25, coverage of poor and vulnerable sections of the society identified through Participatory processes and approved by Gram Sabha. A strong convergence with PRIs is an important feature of the programme.

During the year 2013-14, Aajeevika-NRLM has focused on supporting the State Mission in transiting to NRLM fulfilling all the requirements and setting up implementations architecture and strengthening them by providing comprehensive induction training and capacity building support. As of March, 2014, 27 States and Union Territory of Puducherry have transited to NRLM and set up SRLMs. The resource blocks initiated during the year 2012-13 have shown impressive results in terms of quality of community institutions and generation of social capital. NRLM has focused on creating special strategies and initiating pilots to reach out to the most marginalized and vulnerable communities- Persons with Disabilities (PwDs), the elderly, Particularly Vulnerable Tribal Groups (PVTGs), bonded labour, manual scavengers, victims of human trafficking, etc. During the year emphasis was also placed on strengthening the institutional systems in terms of adopting Human Resource Manual, Financial Management Manual and roll out of interest subvention programme.

1.2.3 Indira Awaas Yojana (IAY)

Since the beginning of the planned development one of the major and daunting tasks engaging the attention of successive governments has been to effectively address the issue of rural housing shortage. Shelter is one of the basic human requirements for survival and dignity. To

meet the shortage of housing in rural areas, the Government of India had launched a comprehensive scheme Indira Awaas Yojana.

Since inception of scheme about 3.25 crore houses have been constructed with an expenditure of Rs.1.07 lakh crore (upto March 2014). Rural Housing is one of the six components of Bharat Nirman Programme, which was launched in 2005 as a time bound action plan for rural infrastructure. In phase-I of Bharat Nirman, 60 lakh houses were to be constructed under IAY (in the period 2005-2009). Against this, 71.76 lakh houses were constructed with an expenditure of Rs. 21,720.39 crores. In phase II of Bharat Nirman (2009-14) the target was fixed at 120 lakh houses under IAY. Against this target, 121.31 lakh houses have been constructed with an expenditure of Rs. 62,042.25 crores.

1.2.4 Pradhan Mantri Gram Sadak Yojana (PMGSY)

Government of India, as the part of poverty reduction strategy, launched the Pradhan Mantri Gram Sadak Yojana (PMGSY) on 25th December, 2000 as a Centrally Sponsored Scheme to assist the States, though Rural Roads is in the State List under the Constitution. The primary objective of Pradhan Mantri Gram Sadak Yojana (PMGSY) is to provide single all weather connectivity by way of an All-Weather road (with necessary culverts and cross-drainage structures, which is operable throughout the year), to the eligible unconnected habitations as per Core-Network with a population of 500 persons (as per 2001 Census) and above in plain areas. In respect of 'Special Category States' (namely, Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim, Tripura, Himachal Pradesh, Jammu and Kashmir and Uttarakhand), the Desert areas, the Tribal (Schedule V) areas and 88 Selected Tribal and Backward districts as identified by the Ministry of Home Affairs/Planning Commission, the objective is to connect eligible unconnected habitations as per Core-Network with a population of 250 persons and above (Census 2001). In critical LWE affected blocks (as identified by MHA), special dispensation has been given to connect habitations with population 100 persons and above.

With a view to ensuring full farm-to-market connectivity, the programme also provides for the upgradation of the existing Through Routes and Major Rural Links to prescribed standards, though it is not central to the programme.

Since inspection of PMGSY and up to April 2014, a total of 98,485 habitations have been connected by constructing 4, 02,122 Km rural roads (including upgradation). The Physical and Financial Performance of PMGSY during the last three years is as follows:-

Year	No. of Habitations connected	Length completed (in Km)	Funds Released (Rs. In Crore)
2011-12	6537	30,994.50	15,809.39
2012-13	6864	24,161.29	4,388.90
2013-14	6560	25,316.39	5,360.39

In the context of rural roads and in order to promote cost-effective and fast construction technologies in the construction of rural road , it has become imperative to mainstream the technologies already developed through Research & Development(R&D) in the past as also to undertake further research and technology initiative duly taking into account the environment, geographic and other constraints, National Rural Roads Development Agency (NRRDA) has issued guidelines for research and development in order to use eco-friendly guidelines material and green technology for rural road construction under PMGSY. Such material and technology is being used in the demonstration projects with suitable safeguards and warranties from the industry. All the State Research and Development initiatives under PMGSY and also prepare Detailed Project Reports(DPRs) using new materials/technologies by mainstreaming already available technologies and Indian Roads Congress(IRC) accredited materials/guidelines.

The Ministry of Rural Development launched PMGSY-II in May, 2013 and it envisages consolidation of the existing Rural Road Network to improve its overall efficiency as a provider of transportation services for people, goods and services. PMGSY-II aims to cover upgradation of existing selected rural roads based on their economic potential and their role in facilitating the growth of

rural market centres and rural hubs. During the 12th five year plan period a provision for upgradation of 50,000 km road length at an estimated cost of Rs.33,030 crore (at 2012-13 prices) has been made. The cost will be shared between the Centre and States/UTs on 75:25 basis for normal areas and 90:10 basis for the special areas. At present, 7 States (Andhra Pradesh, Gujarat, Haryana, Karnataka, Maharashtra, Punjab and Uttar Pradesh) have transited to PMGSY-II. Out of these, 6 states (except Punjab) have submitted the proposals under PMGSY-II. The Ministry has given clearance for covering 11,234.68 Km road length in these 6 States.



1.2.5 National Social Assistance Programmes (NSAP)

The Directive Principles of State Policy in the Constitution of India enjoin upon the State to undertake, within its means, a number of welfare measures. In particular, Article 41 of the Constitution of India directs the State to provide public assistance to its citizens in case of unemployment, old age, sickness and disablement and in other cases of undeserved want within the limit of its economic capacity and development. It is in accordance with these noble principles that the Government of India on 15th August 1995 included the National Social Assistance Programme (NSAP) in the Central Budget for 1995-96.

The NSAP then comprised of National Old Age Pension Scheme (NOAPS), National Family Benefit Scheme (NFBS) and National Maternity Benefit Scheme (NMBS). NMBS was transferred to Ministry of Health and Family Welfare from 2001-02 and subsumed in Janani Suraksha Yojna. On 1st April, 2000 a new scheme known as Annapurna

Scheme was launched. This Scheme aimed at providing food security to meet the requirement of those senior citizens who, though eligible had remained uncovered under the NOAPS. Under Annapurna Scheme 10 kg of food grains per month is provided free of cost to the beneficiary. Under NOAPS Rs.75 per month was being provided per beneficiary to destitute who were 65 years of age or above. The amount of pension was increased to Rs.200 per month with effect from 1.4.2006. In February 2009 two new Schemes namely Indira Gandhi National Widow Pension Scheme (IGNWPS) and Indira Gandhi National Disability Pension Scheme (IGNDPS) have been introduced under NSAP. At present NSAP comprises of five schemes. The salient features of the five schemes under NSAP are as under :-

1.2.5.1 Indira Gandhi National Old Age Pension Scheme (IGNOAPS)

Under the scheme, assistance is provided to person of age 60 years and above and belonging to family living below the poverty line as per the criteria prescribed by the Government of India. Central assistance of Rs.200/- per month is provided to person in the age group of 60-79 years and Rs.500/- per month to persons of 80 years and above. As per the latest report upto March, 2014, 209.28 lakh persons have been covered under the scheme.

1.2.5.2 Indira Gandhi National Widow Pension Scheme (IGNWPS) –

Under this scheme, Central assistance of @ Rs. 300/- per month is provided to widows in the age group of 40-79 years and belonging to family living below the poverty line as per the criteria prescribed by the Government of India. After attaining the age of 80 years, the beneficiary would be shifted to IGNOAPS for getting pension of Rs. 500/- per month. As per the latest report upto March, 2014, 58.19 lakh widows have been covered under the scheme.

1.2.5.3 Indira Gandhi National Disability Pension Scheme (IGNDPS)-

Under the scheme, Central assistance of @ Rs. 300/- per month is provided to persons aged 18-79 years with severe or multiple disabilities belonging to BPL households in the age group of 18-79 years, widows in the age group of 40-79 years and belonging to family living below the poverty line as per the criteria prescribed by the Government of India. After attaining the age of 80 years, the beneficiary would be shifted to IGNOAPS for getting pension of Rs.

500/- per month. As per the latest report upto March, 2014, 12.69 lakh beneficiaries have been covered under the scheme.

1.2.5.4 National Family Benefit Scheme (NFBS)- Under the scheme, a BPL household is entitled to lump sum amount of money on death of primary breadwinner aged between 18 and 59 years. The amount of assistance is Rs. 20,000/-. As per the latest report, upto March 2014, 3.32 lakh families got assistance under the scheme.

1.2.5.5 Annapurna: Under the scheme, 10 Kgs of food grains per month is provided free of cost to those senior citizens who, though eligible under IGNOAPS, are not receiving old age pension. As per the latest report, upto March 2014, 6.39 lakh beneficiaries have been covered under the scheme.

1.3 Poverty Alleviation: Urban India

In the Federal structure of the Indian polity, the matters pertaining to the housing and urban development have been assigned by the Constitution of India to the State Governments. The Constitutions (74th Amendment) Act have further delegated many of these functions to the urban local bodies. The constitutional and legal authority of the Government of India is limited only to Delhi and other Union Territories and to the subject which State Legislatures authorize the Union Parliament to legislate.

However, the provisions of the Constitution notwithstanding, the Government of India plays a much more important role and exercise a larger influence to shape the policies and programmes of the country as a whole. The National Policy issues are decided by the Government of India which also allocates resources to the State Governments through various Centrally Sponsored schemes, provides finances through national financial institutions and supports various external assistance programmes for housing and urban development in the country as a whole. Policies and programme contents are decided at the time of formulation of Five Year Plans. The indirect effect of the fiscal, economic and industrial location decisions of the Government of India exercise a far more dominant influence on the pattern of urbanisation and real estate investment in the country.

The Ministry of Housing and Urban Poverty Alleviation (MoHUPA) is the apex authority of Government of India at the national level to formulate policies, sponsor and support programme, coordinate the activities of various Central Ministries, State Governments and other nodal authorities and monitor the programmes concerning all the issues of urban employment, poverty and housing in the country.

1.3.1 National Urban Livelihoods Mission (NULM)

The Ministry of Housing and Urban Poverty Alleviation has launched a “National Urban Livelihoods Mission (NULM)” in the 12th Five Year Plan by replacing the existing Swarna Jayanti Shahari Rozgar Yojana (SJSRY). The NULM will focus on organizing urban poor in self-help groups, creating opportunities for skill development leading to market-based employment and helping them to set up self-employment venture by ensuring easy access to credit. The Mission is aimed at providing shelter equipped with essential services to the urban homeless in a phased manner and to address livelihood concerns of the urban street vendors.

- NULM envisages universal social mobilization of urban poor into Self-Help Groups (SHGs) and organizing them into federations. Atleast one member from each urban poor household, preferably a woman, should be brought under the Self-Help Group network in a time-bound manner. These groups will serve as a support system for the poor, to meet their financial and social needs. A maximum of Rs. 10,000/- can be spent per self-help group for its formation, handholding up to two years, training of all the members, bank linkage, formation of federation and other related activities. Rs. 10,000/- per SHG and Rs. 50,000/- per registered Area Level Federation (ALF) will be provided as revolving fund support.
- A key objective of NULM is to transform the role of the Ministry of Housing and Urban Poverty Alleviation and State Agencies in charge of urban poverty alleviation into providers of high quality technical assistance in the fields of urban livelihoods promotion and urban poverty alleviation. NULM will establish a National Mission Management Unit (NMMU) with 10 experts, one State Mission Management Unit (SMMU) per state and City Mission

Management Units (CMMUs) in all NULM Cities. The CMMU will have 1 Community Organizer (CO) per 3000 urban poor families.

- Employment through Skills Training and Placement (EST&P) component under NULM is designed to provide skills to the unskilled urban poor as well as to upgrade their existing skills. The program will provide skill training to the urban poor so that they can set up self-employment ventures or secure salaried employment. The program intends to fill the gap between the demand and availability of local skills by providing skill training programs as required by the market. The maximum cost per beneficiary shall not exceed Rs.15,000 (Rs.18,000 for North-Eastern and Special Category States -Jammu & Kashmir, Himachal Pradesh and Uttarakhand). This will include cost towards training, trainee mobilization, selection, counselling, training material, trainers' fee, certification, toolkit, other miscellaneous expenses to be incurred by the training institution and also micro-enterprise development/ placement related expenses.
- Self-Employment Programme (SEP) component will focus on financial assistance to individuals/groups of urban poor for setting up gainful self-employment ventures/ micro-enterprises. This assistance will be in the form of interest subsidy on bank loans for projects up to Rs. 2 lakh for setting up of individual micro enterprises and for projects up to Rs. 10.00 lakh for setting up of group enterprises. Interest subsidy, over and above 7% rate of interest will be available on a bank loan for setting up of individual or group enterprises and to all SHGs accessing bank loan. An additional 3 percent interest subvention will be provided to all women SHGs who repay their loan in time in all the cities. The Interest subvention will be subject to timely repayment by the beneficiaries.
- Up to 5% of the total NULM budget will be spent on component "Support to Urban Street Vendors" which will cover pro-vending urban planning, development of vendors market, credit enablement of vendors, socio-economic survey of street vendors, skill development and micro enterprises development, and

convergence with social assistance under various schemes of the Government.

- Scheme of Shelter for Urban Homeless (SUH) aims to provide permanent shelter with all other essential services to the urban homeless. Depending upon local conditions each shelter could cater to 50 or 100 persons. For shelter planning purposes, a space of 50 sq. feet or 5 square meters per person may be taken as the minimum space to be provided. The role of the Central Government would be to provide the overall support in creation of infrastructure and facilities. Physical Achievement under National Urban Livelihoods Mission (NULM)

Year	No. of beneficiaries assisted for setting up Individual/ Group micro enterprises	No. of beneficiaries provided skill training
2011-12	1,21,343	3,63,670
2012-13	1,42,991	5,35,779
2013-14	1,34,160	7,05,507

1.3.2 Jawaharlal Nehru National Urban Renewal Mission (JNNURM)

This Mission was launched in 2005 to implement reform-driven, planned development of cities in a Mission mode with focus on up-gradation of urban infrastructure, creation of housing stock and provision of basic services to the urban poor, community participation and accountability of Urban Local Bodies (ULBs). The Reform-driven Mission comprises four components of which two, viz., the Sub-Mission for Urban Infrastructure and Governance (UIG) and the Sub-Mission for Basic Services to the Urban Poor (BSUP) are implemented in 65 select cities. The other two components, namely, Urban Infrastructure Development Scheme for Small and Medium Towns (UIDSSMT) and Integrated Housing and Slum Development Programme (IHSDP) are implemented in other cities/towns. The MoHUPA is implementing BSUP and IHSDP components of JNNURM. The other two components, viz. UIG and UIDSSMT are implemented by the Ministry of Urban Development (MoUD).

Duration of the Mission was 7 years from 2005-06 to 31.3.2012, which was earlier extended for 2 years upto 31.03.2014. For the BSUP & IHSDP Components, the period has further been extended upto 31.03.2015 for completion of projects sanctioned upto 31.3.2012.

The focus is on reform-driven integrated and planned development of cities/towns with efficiency in urban infrastructure and service delivery Mechanisms, provision of basic services including improved housing to urban poor, community participation and accountability of ULBs and Parastatal agencies towards citizens.

Central support to leverage State share/Municipal share/Beneficiary contribution/Public-private partnerships. Total Central support of more than Rs. 50,000 crore committed for 2005-12. Support for BSUP & IHSDP is more than Rs. 23,000 crore.

BSUP and Integrated Housing and Slum Development Programme (IHSDP) components envisage 3 key Pro-poor Reforms. These are:

- Internal earmarking within local body budgets for basic services to the urban poor (in proportion to the share in total city/town population);
- Implementation of 7-Point Charter, i.e. provision of basic services to urban poor including security of tenure at affordable prices, improved housing, water supply, sanitation and ensuring delivery of already existing universal services of the Government for education, health and social security within the Mission period as per agreed timelines;
- Earmarking at least 20-25% of developed land in all housing projects (both public and private Agencies) for EWS/LIG category with a system of cross-subsidization.

Under BSUP, 65 select cities in the country are covered and the remaining cities are covered under IHSDP. Under BSUP scheme, 481 projects have been approved with total project cost of Rs. 26630.64 crore for construction of 917,932 Dwelling Units (DUs). Under IHSDP scheme, 1036 projects in 885 cities have been approved with total project cost of Rs. 10883.74 crore for construction of 523,299 Dwelling Units (DUs). Out of these 1,441,231 houses, 831,041 houses have been constructed and 605,997 houses have been occupied by the beneficiaries. Out of Additional Central Assistance for these projects of Rs. 20169.32 crore, 17639.64 crore has been disbursed to states. Government of India also extended Mission period upto 31.03.2015 to complete ongoing work.

1.3.3 Rajiv Awas Yojana (RAY)

Government launched Rajiv Awas Yojana (RAY) envisaging slum-free India in June 2011 in two phases; the preparatory phase for a period of two years which ended in June 2013 and implementation phase in September, 2013 as Centrally Sponsored Scheme. An allocation of Rs. 35,810 crores is available for MoHUPA in 12th Plan including committed liabilities under JNNURM. The selection of Cities/UAs under the scheme is to be made by the States in consultation with the Centre. The Guidelines of RAY has the provision to cover all slums within a city, whether notified or non-notified (including identified and recognized), whether on lands belonging to central Government or its Undertakings, Autonomous bodies created under the Act of Parliament, State Government or its Undertakings, ULBs or any other public agency and private sector.

Two step implementation strategy include preparation of Slum-free City Plans of Action (SFPCoAs) on 'whole city' basis and DPRs on 'whole slum' basis for selected slums. RAY envisages involvement of community at each stage, from planning through implementation and post-project sustenance, necessitating that the designing of slum development is done with people's participation, which will lead to community ownership and sustainability of the scheme. It would be essential for the implementing agencies to establish the structures necessary for community participation in various processes and activities under the Scheme.

Under the scheme, Central Government provides assistance of 50 % of the project cost for Cities/UAs with Population more than 5 lakhs, 75% for Cities/UAs having population less than 5 lakhs. For North-Eastern Region and special category States (Jammu & Kashmir, Himachal Pradesh & Uttarakhand) central share will be 80%. There is an upper ceiling of Rs. 5 lakhs per Dwelling Unit (DU) for cities with population less than 5 lakhs. This ceiling is Rs. 4 lakhs per DU for smaller cities with population less than 5 lakhs. In North East (NE) and special category States, upper ceiling is Rs. 5 lakhs per DU irrespective of population of the city. Upper ceilings, as above, also include cost of civic infrastructure and social amenities. 10% of the RAY allocation is kept for the innovative projects and the projects for slum

development / relocation for the slums on Central Government land or land owned by its agencies; autonomous bodies etc.

A total of 166 DPRs with a total project cost of Rs. 6472.06 crore involving Central Share Rs.3531.19 crore for construction/up gradation of 120,912 DUs have been approved.

The Government has also approved the scheme of Affordable Housing in Partnership (AHP) as part of RAY on 03.9.2013 to increase affordable housing stock, as part of the preventive strategy. Central support is provided at the rate of Rs. 75,000 per EWS/ LIG Dwelling Units (DUs) of size of 21 to 40 sqm in affordable housing projects taken up under various kinds of partnerships including private partnership. A project size of minimum 250 dwelling units is eligible for funding under the scheme. The DUs in the project can be a mix of EWS/LIG-A/LIG-B/Higher Categories/Commercial of which at least 60 percent of the FAR/ FSI is used for dwelling units of carpet area of not more than 60 sq.m. Under Affordable Housing, a total of 18 projects of 3 States (Karnataka, Gujarat & Rajasthan) for construction of 20,472 DUs have been sanctioned under the Affordable Housing in partnership Scheme.

1.3.4 Credit Risk Guarantee Fund (CRGF);

A Credit Risk Guarantee Fund has been created to guarantee the lending agencies for loans to new EWS/LIG borrowers in urban areas seeking individual housing loans not exceeding a sum of 5 lakh for a housing unit of size upto 430 sqft (40 sqm) carpet areas without any third party guarantee or collateral security, CRGF with a proposed corpus of Rs. 1000 crores in the 12th Five Year Plan has also been created under RAY. The fund is operated by National Housing Bank. As on date, 44 Members Landing Institutions have executed the MoUs with Credit Risk Guarantee Fund Trust . An amount of Rs. 50 crores was released to NHB in the year 2012-13 and Rs. 100 crores has been released to NHB in the year 2013-14.

1.3.5 Urban Institute of India (UII):-

Government of India has approved setting up of Urban Institute of India (UII) as an Autonomous institution as public private partnership

with 50% contribution each from the Government of India and private sector as a not-for-profit institution to be registered as a Society under the Societies Registration Act, 1860. The UII is envisaged to conduct policy research in issues related to urbanization and provide inputs to various tiers of Government. UII is expected to augment Capacity Building initiatives in urban sector, design and implementation support to cities as they evolve. In this regard, Shri Adi Godrej has been appointed as the Chairman of the Governing Board, UII and McKinsey & Co. has been appointed as the Knowledge Partner for setting up of UII.

A Steering Committee has been constituted under the Chairman, Governing Board, UII to work as the first General Body of the Society and also first Governing Board has been formed. Urban Institute of India (UII) as a 50:50 Public Private Partnership (PPP) has been registered under the Societies Registration Act, 1860.

“Housing for All by 2022”

Government has declared houses for all by 2022 as its goal in the Presidential Address to Joint Session of both the Houses of Parliament on 9th June, 2014. Towards that Goal, Ministry would be launching a new mission for achieving the objective of “Housing for All” by 2022.

1.3.6 Rajiv Rinn Yojana (RRY)

Rajiv Rinn Yojana (RRY) is a 100% Central Sector Scheme to address the housing needs of the EWS/LIG segments in urban areas, through enhanced credit flow to be implemented. RRY has been formulated by modifying the Interest Subsidy Scheme for Housing the Urban Poor (ISHUP) piloted in the 11th Plan period with enhanced scope and coverage. It provides an interest subsidy of 5% on loans granted to EWS and LIG categories to construct their houses or extend the existing ones. Irrespective of loan amount, interest subsidy would be limited to the first Rs 5 lakh of the loan amount.

The overall target for the 12th Plan period is 10 lakh dwellings including slum and non-slum dwellers. In the selection of beneficiaries, preference would be given to Women, SCs, STs, Minorities and persons with disabilities.

2 : Health

2.1 Demographic and Health Status Indicators

The National Health Policy-2002 (NHP-2002) gives prime importance to ensure a more equitable access to health services across the social and



geographical expanse of the country. The policy outlines the need for improvement in the health status of the people as one of the major thrust areas in the social sector. It focuses on the need for enhanced funding and organizational restructuring of the public health initiatives at national level in order to facilitate more equitable access to the health facilities. An acceptable standard of good health amongst the general population of the country is sought to be achieved by increasing access to the decentralized public health system by establishing new infrastructure in deficient areas, and by upgrading the infrastructure in the existing institutions. Emphasis has been given to increase the aggregate public health investment through a substantially increased contribution by the Central Government. Priority would be given to preventive and curative initiatives at the primary health level through increased sectorial share of allocation.

The demographic and health status indicators have shown significant improvements over time as shown in the adjoining table:

Parameters	1981	1991	2001	2012
Crude Birth Rate (per 1000 population)	33.9	29.5	25.4	21.6
Crude Death Rate (per 1000 population)	12.5	9.8	8.4	7.0
Total Fertility Rate	4.5	3.6	3.1	2.4
Maternal Mortality Ratio (per 100,000 live births)	<i>Not available</i>	398 (1997-98)	301 (2001-03)	178 (2010-12)

Infant Mortality Rate (per 1000 live births)		110	80	66	42
Child (0-4 years) Mortality Rate (per 1000 children)		41.2	26.5	19.3	11.5 (2012)
Expectation of life at birth (in years)	Male	55.4	59.0	62.3	64.6
	Female	55.7 (1981-85)	59.7 (1989-93)	64.6 (1999-03)	67.7 (2006-10)

Source: Office of Registrar General of India

2.2 National Health Mission (NHM)

The National Health Mission encompasses its two Sub-Missions, the National Rural Health Mission (NRHM) and the newly launched National Urban Health Mission (NUHM). Under NHM, financial and technical support are provided to the states to strengthen their health systems for improved healthcare delivery. The main programmatic components include Health System Strengthening in rural and urban areas, Reproductive-Maternal- Neonatal-Child and Adolescent Health (RMNCH+A), and Communicable and Non-Communicable Diseases. The NHM envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs. The NHM includes an explicit focus on financial protection, expanding coverage to vulnerable and marginalized groups, and addressing social determinants.

2.2.1 National Rural Health Mission (NRHM)

The National Rural Health Mission, founded in April 2005, is a Government of India initiative to address the health needs of underserved rural areas and rural populations addressing the health needs of 18 States/ UTs having weak public health indicators. As per the 12th Plan document of the Planning Commission, the flagship programme of NRHM will be strengthened under the umbrella of National Health Mission.

Under the NRHM, the Empowered Action Group (EAG) States along with North Eastern States, Jammu and Kashmir and Himachal

Pradesh have been given special focus. The thrust of the mission is on establishing a fully-functional, community-owned, decentralized health delivery system with inter-sectorial convergence at all levels, to ensure simultaneous action on a wide range of determinants of health such as water, sanitation, education, nutrition, social and gender equality. Institutional integration within the fragmented health sector was expected to provide a focus on outcomes, measured against Indian Public Health Standards for all health facilities.

NRHM has played a major role by strengthening health facilities to provide services by adding over one lakh human resources, by augmenting and improving infrastructure, by increasing availability of equipment and essential supplies and by promoting demand through community level processes. Beyond health systems strengthening, the Reproductive and Child Health (RCH) component of NRHM introduced a number of innovative strategies in maternal health, child health and family planning programmes which also contributed in a major way. Some of the major innovations that have contributed to the reduction in maternal mortality include the Janani Suraksha Yojana (JSY) for promoting institutional delivery, the Janani Shishu Suraksha Karyakram (JSSK) to reduce the financial barriers of access to care, multiskilling of non-specialist medical officers to address the lack of specialist skills for the provision of emergency obstetric care etc.

For reduction of child mortality, the main strategies have been universal immunisation, training of Auxiliary Nurse Midwives (ANMs) and Anganwadi workers on the Integrated Management of New-born and Childhood Illnesses (IMNCI), the development of capacity in facilities to provide care for the sick child, institutional care for children with severe malnutrition.

The polio eradication is an example of one of the most successful outreach campaigns to be conducted in India over the past 14 years. The country has finally been declared polio free in 2014. India moved from its earlier focus on Reproductive and Child Health (RCH) to a new strategic approach, the RMNCH+A (Reproductive Maternal New-born Child & Adolescent Health) in 2012, bringing focus on all the life stages including the New-born and the

adolescents to emphasize inter-linkages between each of the five pillars under RMNCH+A and connects community and facility based services.

To ensure equitable health care and to bring about sharper improvements in health outcomes, at least 25% of all districts in each state have been identified as high priority districts based on a composite health index. These also include all tribal and Left Wing Extremism (LWE) affected districts which are below the State's average of composite health index. These districts would receive higher per capita funding, enhanced monitoring, focused supportive supervision and have differential planning norms

A system of Call Centre based ambulance network has been established that allows the people to access ambulance services through *dial 108* (emergency response system to attend to patients of critical care, trauma and accident victims etc.) or *dial 102* (basic patient transport aimed to cater to the needs of pregnant women and children). Empanelled vehicles are also being used in some States to provide transport to pregnant women and sick infants. The total number of vehicles for emergency response services/ patient transport systems has increased significantly over the last five years from about 5000 to over 20,000 and these are largely managed through a centralised/State level call centre.

Drugs constitute about 70% of Out-of-pocket expenditure (OOPE) in India. Many States/UTs in the country have started to provide essential (generic) drugs free of cost in public health facilities. Generic drugs procured in bulk cost a very small fraction of branded drugs. Therefore, free essential (generic) drugs through public health facilities would significantly help in reducing the OOPE, while it is not posing a very burden on State exchequer.

Universal Health Coverage (UHC) Pilots : Providing affordable and universal access to health is a widely shared aspiration across the globe. Moving towards Universal Health Coverage is a key goal of the 12th Plan. The National Health Mission is the primary vehicle to move towards UHC. India has charted a path that depends largely on provision of affordable, quality health care by the public health system

as its main form of social protection, with supplementation from the private sector to close gaps. UHC pilot projects would be supported in at least one district of each State. Guidelines of the same have been issued to the states along with essential service package. The pilots are expected to demonstrate how access to care and social protection against the costs of care can be meaningfully expanded in the most cost effective manner, while at the same time reducing health inequity.

1. National Urban Health Mission (NUHM)

National Urban Health Mission (NUHM) was approved by the Union Cabinet on 1st May, 2013 as a sub-mission under an overarching National Health Mission (NHM) for providing equitable and quality primary health care services to the urban population. NUHM aims to improve the health status of the urban population, particularly the poor and other disadvantaged sections by facilitating equitable access to quality health care through a revamped primary health care systems, targeted outreach services and involvement of the community and the urban local bodies.

NUHM covers all cities and towns with more than 50,000 population as well as District headquarters and State headquarters. Cities/towns with population less than 50,000 will continue to be covered under NRHM. NUHM is to be implemented through Urban Local Bodies (ULBs) in 7 Metros-Delhi, Kolkata, Mumbai, Chennai, Bengaluru, Hyderabad and Ahmedabad.

Under NUHM, provision has been made for creation of service delivery infrastructure which is largely absent in the urban areas i.e. cities/towns, by way of providing Urban Primary Health Centres (U-PHCs) and Urban Community Health Centres (U-CHCs). U-PHCs for approximately 50,000 population, preferably located near slums is envisaged. U-CHCs for providing in-patient care in cities having population above five lakhs have been envisaged. NUHM also provides for engagement of ANMs for conducting outreach services to target groups particularly slum and the vulnerable population through ASHA and Mahila Arogya Samiti (MAS)..

One ASHA per 1000-2500 population covering approximately 200-500 households would serve as an effective, demand-generating link between the health facility and the urban slum population. MAS for every 50-100 households having 250-500 population would act as community based per education group in slums. It would be involved in community mobilization, monitoring and referral with focus on preventive and promotive care.

The centre-state funding pattern is 75:25 for all the States except North-Eastern states including Sikkim and other special category states of Jammu & Kashmir, Himachal Pradesh and Uttarakhand, for whom the centre-state funding pattern is 90:10.

3.2 Maternal Health

Maternal health is an important aspect for the development of any country in terms of increasing equity and reducing poverty. The survival and well-being of mothers are not only important in their own right but are also central to solving large broader, economic, social and developmental challenges.

Maternal Mortality Ratio (MMR) is one of the important indicators of the quality of health services in the country. India has made remarkable progress in reducing maternal deaths in the last two decades.

The MMR has declined from 212 in 2007-09 to 178 in 2010-12 per 100,000 live births with annual decline of 5.7%. The high rate of decline incidentally coincides with the period immediately after the launch of NRHM, and the numerous initiatives taken under this flagship scheme including the Janani Suraksha Yojana (JSY), Janani Shishu Suraksha Karyakram (JSSK).

Key strategies contributing to the decline in MMR

1. Janani Suraksha Yojana (JSY) which is a demand promotion scheme, launched in April 2005 with the objective of reducing Maternal and Infant Mortality by conditional cash transfer scheme for pregnant women coming into the institutional fold for delivery. It has been lauded as a successful scheme bringing about a surge in institutional deliveries since its launch. The number of JSY

beneficiaries has also risen from 7.39 lakhs in 2005-06 to 106.48 lakhs in 2013-14.

2. Janani Shishu Suraksha Karyakaram (JSSK), launched in 2011 to continue the surge in institutional deliveries brought about by JSY in order to augment efforts to ensure that pregnant women, sick neonates and sick infants receive free care at public health institutions under JSSK with no out of pocket expenditure on drugs, diet, diagnostic, blood and Referral Transport. The scheme entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. Under this scheme, pregnant women are entitled to free drugs and consumables, free diagnostics, free blood wherever required, free diet up to 3 days for normal delivery and 7 days for C-section and also provides for free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements have been put in place for all sick new-borns accessing public health institutions for treatment till 30 days after birth. This has now been expanded to cover the complications during Ante-Natal Care(ANC), Post Natal Care(PNC) and also sick infants.

3. Essential and Emergency Obstetric Care

3.2.3.1 Improving Quality of Ante-Natal Care(ANC) and Post Natal Care(PNC):

- **Prevention & Control of Anaemia:** Under the National Iron+ Initiative, iron and folic acid supplementation is being given at health facilities and during outreach activities.
- **Web Enabled Mother and Child Tracking System (MCTS)** is being implemented to register and track every pregnant woman, neonate, infant and child by name for quality ANC, PNC, INC Family Planning(FP), Immunization services. Since inception of the scheme till 31st March, 2014, more than 6.30 crores women and 5.35 crores children have been registered under MCTS.

A joint **Mother and Child Protection Card** of Ministry of Health & Family Welfare and Ministry of Women and Child Development (MOWCD) is being used by all states as a tool for monitoring and improving the quality of MCH and Nutrition interventions.

3.2.3.2 Safe Abortion Care Services and Services for Reproductive Tract Infections and Sexually Transmitted Infections (RTI/STI)to provide drugs and equipment and skilled and trained manpower to operationalize these services at appropriate level of facilities.

3.2.3.3 Maternal Death Review process has been institutionalized across the Country with the objective of taking corrective action at appropriate levels and improving the quality of obstetric care both at facilities and in the community to identify not only the medical causes but also some of the socio-economic cultural determinants as well as the gaps in the system which contribute to the delays causing such deaths.

3.2.3.4 'Delivery Points': For placing emergency obstetric care services at the health facilities, once the women have come into the institutional fold, more than 17000 '**Delivery Points**' fulfilling certain bench marks of performance, have been identified across the country. These are being strengthened in terms of infrastructure, equipment, trained manpower for provision of comprehensive Reproductive, Maternal, New-born Child health services along-with services for Adolescents and Family Planning etc. These are being monitored for service delivery. **Maternal Health Tool Kit** has been developed as a ready reckoner/handbook for programme managers to plan, implement and monitor services at health facilities , with a focus on the Delivery Points, which includes setting up adequate physical infrastructure, ensuring logistics and supplies and recording/reporting and monitoring systems with the objective of providing good quality comprehensive RMNCH services.

3.2.3.5 Capacity Building : Skill Building through training programmes for all categories of service providers e.g. Training of MBBS doctors in Life Saving Anaesthesia Skills(LSAS), Emergency Obstetric Care including C-sections; Training of Nurses and ANMs in Skilled Birth Attendance(SBA);Training of MOs in Comprehensive Abortion Care(CAC). 1352 doctors have been trained in Emergency Obstetric Care including C-sections and 1862 doctors in LSAS. 69760 SNs/LHVs/ANMs have been trained as SBAs as per State reports.

3.2.3.6 Augmenting infrastructure for providing quality Obstetric, Neonatal and Child Health Care: : Under NRHM, 100 / 50/ 30 bedded

Maternal and Child Health (MCH) Wings are being established in District Hospitals/ District Women's Hospitals/Sub- District Hospitals/ CHC-FRUs to overcome the constraints of increasing case loads and institutional deliveries at these facilities. 470 dedicated MCH Wings with more than 28,400 additional beds are being established.

3.2.3.7 Supervision and Monitoring: Regular monitoring and desk review of information on key maternal health indicators is being done through analysis of data from the Central Health Management Information System (HMIS), various national level evaluation surveys e.g. District Level Household surveys (DLHS), National Family Health Surveys (NFHS), and Annual Health Survey (AHS) and field visits by Central level teams. Guidelines and tools have been provided for undertaking supportive supervision and monitoring by the states at different levels.

3.2.3.8 Quality Assurance Guidelines are on the anvil with the objective of providing standard guidelines to be uniformly adopted by all states which indicates the steps & processes and defines minimum standards to be followed, to ensure quality of service provision.

3.2.3.9 Creating comprehensive skill labs, each with a number of skill stations are in the process of being designed for skill building of service providers to provide good quality RMNCH services.

3.2.3.10 A new initiative of prevention of PPH through Community Based Advanced distribution of Misoprostol by ASHAs/ ANMs has been launched in the districts with high home delivery rates.

3.2.3.11 Mother and Child Tracking System (MCTS) is an innovative web-based system providing alerts to health service providers about the services due list and services delivery gaps across all the States & UTs to facilitate timely delivery of antenatal and postnatal care services to all the pregnant women and immunization to all the children. Furthermore, the system also provides ready reference about the status of services / vaccination delivered to pregnant women and children. Appropriate health promotion messages are being sent on mobiles of beneficiaries. MCTS is also being used for transfer of JSY benefits to pregnant women after delivery as is presently being done in 121 Direct Benefit Transfer (DBT)

districts. A pilot to transfer ASHA payments directly into their accounts has also been initiated. A total of 2,19,75,354 pregnant women and 1,83,67,253 children were registered in MCTS during 2013-14.

3.3 Child Health & Immunisation Programme

Infant Mortality Rate (IMR) refers to the number of deaths of children in the age 0-1 year per thousand live births. IMR for the year 2012 was 46 in rural and 28 in urban India against the all India IMR of 42 per 100 thousand live births in 2012. There is a constant gender differential of three points in IMR at national level over last five years.

Under-five Mortality Rate (U5MR) is defined as the probability of dying before the fifth birthday. As per the Sample Registration System 2012, the under-five-mortality rate is 52 per thousand live births against 126 in 1990 (Global rate at 88). In 2012, India's under-five child mortality is closer to the global average of 48.

Neo-natal Mortality Rate (NMR) refers to the number of deaths of children during the period of 0-28 days per thousand live births. NMR stands 29 per 1000 live births in India in 2012. Neonatal mortality thus contributes 56% of all deaths in childhood (up to age 5 years).

Key Child Health Interventions

- Facility based new-born Care
- Home Based New-born Care
- Promotion of optimal Infant and Young Child Feeding Practices
- Micronutrient supplementation (Vitamin A, Iron Folic Acid)
- Management of children with severe acute malnutrition
- Management of Childhood Diarrhoeal Diseases & Acute Respiratory Infections
- Child Health Screening and Early Intervention Services
- Strengthening Routine Immunisation
- Eliminating Measles and Japanese Encephalitis related deaths
- Polio Eradication

The major components of child health programme are:

1. New-born and Child Health Interventions : Facility Based New-born Care (FBNC) is one of the key components under the NRHM to improve the status of New-born health in the country. A continuum

of New-born care has been established with the launch of home-based and facility-based New-born care components ensuring that every New-born receives essential care right from the time of birth and first 48 hours at the health facility and then at home during the first 42 days of life. New-born Care Corners (NBCCs) are established at delivery points to provide essential new-born care, while Special New-born Care Units (SNCUs) located in close proximity to the labour room, and New-born Stabilization Units (NBSUs) provide care for sick new-borns. Till June 2014, a total of 14,099 NBCCs, 1,761 NBSUs and 525 SNCUs have been made operational across the country.

New Born Care Corners (NBCCs) are operationalized within the labour rooms and operation theatres in public health facilities designated as delivery points. These units have NSSK (Navjaat Shishu Suraksha Karyakram) personnel who provide essential new born care and resuscitation, when required, to all New-borns delivered at these health facilities. About 1,25,691 health care providers have been trained in NSSK in the country as on March, 2014.

2. Home Based New-Born Care Scheme : Under NRHM, Home Based New Born Care is being implemented since 2011 for reduction of neonatal mortality in the first month of life in rural areas. Under this scheme, funds are allocated for training of ASHAs, supportive supervision by ASHA facilitators, incentive to ASHAs for home visits and purchase of HBNC kits. ASHAs are paid an incentive of Rs.250 for visiting each New-born 6 times (in case of hospital delivery)/7 times (in case of home delivery) in the first six weeks of life as per the schedule. Out of 8.9 lakh ASHAs in the country, 5.19 lakhs have been trained in module 6 & 7, which provide necessary skills to conduct home visits. Around 8 lakh babies have been visited by ASHAs (all 6/7 visits).

3. Infant and Young Child Feeding : The importance of breastfeeding as the preventive intervention with potentially the single largest impact on reducing child mortality has been well recognised.

4. Nutritional Rehabilitation Centres (NRC) : Nutritional Rehabilitation Centers are facility based units providing medical and nutritional care to Severe Acute Malnutrition (SAM) children under 5

years of age who have medical complications. In addition, special focus is on improving the skills of mothers on child care and feeding practices so that child continues to receive adequate care at home.

Services provided at the NRCs include 24 hour care & monitoring of the child, treatment of medical complication, therapeutic feeding, sensory stimulation & emotional care, counselling on appropriate feeding, care & hygiene and demonstration & practice on the preparation of energy dense food using locally available, culturally acceptable & affordable food items.

Presently, 872 Nutrition Rehabilitation Centers are functional across 16 States/UTs. The States are directed to prioritise High Focus Districts and the Tribal districts identified as having high burden of malnutrition for establishment of NRCs, during approval of Annual PIP budgets.

5. Supplementation with Micronutrients

A daily regime of iron and folic acid supplementation was provided to children for a period of 100 days for prevention of iron deficiency anaemia. Under the national programme, 1st dose of Vitamin A (1 lakh I.U.) is being given to the child at the time of immunization at 9 months of age, and thereafter, the child is administered doses of Vitamin A (2 lakh I.U.) at 6 monthly interval, so that a child receives a total of 9 doses of Vitamin A till the age of 59 months. Bi-annual rounds for Vitamin A supplementation are being conducted in 14 States (including EAG States and some southern States) and 1 UT with the co-ordination between Health & ICDS functionaries.

6. Reduction In Morbidity and Mortality Due to Acute Respiratory Infections (ARI) and Diarrhoeal Diseases

- **Childhood Diarrhoeal Diseases** is one of the leading causes of under-five mortality in India. The guidelines under the national programme recommend use of low osmolality ORS, zinc and continued feeding (energy dense feeds) in addition to breastfeeding for management of diarrhoea. Antimicrobials are recommended only for specific cases.

a) **Acute respiratory tract infections** are very frequent in children; pneumonia is the leading cause of under-five mortality. Early recognition and treatment of pneumonia can be life-saving. For children with non-severe pneumonia, the ARI control program

recommends oral Cotrimoxazole as the first line drug which is supplied at the sub-centre level and is recommended as drug for community based management of pneumonia by frontline health workers.

b) **Facility Based-Integrated Management of Neonatal and childhood illnesses(F-IMNCI):** Presently, 25,412 medical officers and staff nurses have been trained in facility based IMNCI to provide care to sick children and New-born s at CHCs/FRUs.

7. Rashtriya Bal Swasthya Karyakram (RBSK):

A path breaking initiative launched in February 2013 which includes provision for Child Health Screening and Early Intervention Services through early detection and management of 4 D's i.e Defects at birth, Diseases, Deficiencies, Development delays including disability. An estimated 27 crore children in the age group of 0 to 18 years are expected to be covered across the country in a phased manner. Child Health Screening and Early Intervention Services will cover 30 common health conditions for early detection and free treatment and management. As of now, more than 7.8 crore children have already been screened under RBSK and over 1.16 lakh children have received free treatment including surgeries for conditions like congenital heart disease, cleft lip and correction of club foot etc.

In 2013-14, 11,839 teams in 24 State/UTs have been approved and 4844 recruited till December 2013. Total number of children screened from June-Dec'2013, are 3.45 crores, of which 12.06 lakhs were referred, and 91,000 availed services.

8. Rashtriya Kishor Swasthya Karyakram (RKSK):

A new initiative was launched on 7th January, 2014 to reach out to 253 million adolescents in the country. RKSK seeks to reach adolescents in their own spaces and introduces peer led interventions at the community level, supported by augmentation of facility based services. The new programme goes beyond addressing sexual and reproductive health and introduces focus on nutrition, sexual & reproductive health, injuries and violence (including gender based violence), non-communicable diseases, mental health and substance misuse. RKSK is a major step forward for reaping India's demographic dividend.

9. Strengthening Routine Immunisation

Under the Universal Immunization Programme, Government of India is providing free vaccination, including operational costs, to prevent seven vaccine preventable diseases i.e. Diphtheria, Pertussis, Tetanus, Polio, Measles, severe form of Childhood Tuberculosis and Hepatitis B. 2.7 crore new-born are targeted for vaccination each year through 90 lakh immunization sessions held annually. There are about 27000 cold chain points in the country to store vaccine under required temperature. Pentavalent, a combination vaccine, which includes DPT + Hepatitis B + Hib has been introduced in 8 States. A total of 113 lakh doses have been administered to children by 2013.

10. Eliminating Measles and Japanese Encephalitis (JE) related

Deaths : The number of deaths due to Measles has come down from 1 lakh to 30,000 after introduction of 2nd dose of Measles. Around 12 crore children have been vaccinated through Special Campaigns. Second dose of Measles is now a part of Routine Immunization to further bring down child mortality.

Japanese encephalitis vaccination program started in 2006 in endemic areas of JE with strategy to cover all children of 1-15 years of age in mass vaccination drive (campaign mode). This drive is being carried out in 113 districts in 15 States with a plan to extend it to another 64 districts in next 2 years. Two doses of JE vaccine (as opposed to one dose recommended earlier) has now been introduced under routine immunization with 1st dose at 9-12 months and 2nd dose at 16-24 months w. e. f 1st April 2013.

11. Polio Eradication : World Health Organisation certified India polio-free after three years in 2014 without a single new case being reported. This is monumental success, considering that India accounted for the world's highest polio incidence in 2009. Immunization continues unabated.

12. Universal Immunization Programme : The Universal Immunization Programme (UIP) is one of the largest on-going

Centrally Sponsored Public Health Programmes in the country. UIP sets a target of immunizing approximately 2.7 crore infants and approximately 3.0 crores pregnant women every year. Universal immunization protects against 9 deadly vaccine preventable diseases (VPD) namely Tuberculosis, Polio, Diphtheria, Tetanus, Pertussis, Hepatitis-B and Measles across the Country. In addition, Japanese Encephalitis vaccine is provided in selected districts to prevent Japanese Encephalitis and Pentavalent vaccine is provided in selected States to prevent meningitis and pneumonia due to Haemophilus influenza type B.

Immunization programme is one of the key interventions under National Health Mission launched for protection of children from life threatening conditions, which are preventable. Immunization Programme in India was introduced in 1978 as Expanded Programme of Immunization. This gained momentum in 1985 as Universal Immunization Programme (UIP) and implemented in phased manner to cover all districts in the country by 1989-90. UIP become a part of Child Survival and Safe Motherhood Programme in 1992. Since, 1997, immunization activities have been an important component of National Reproductive and Child Health Programme (now RMNCH+A).

Table: Status of Universal Immunization Programme		
	Coverage Evaluation Survey (CES)	
	2006	2009
Full Immunization	62.4	61.0
BCG	87.4	86.9
OPV3	67.5	70.4
Measles	70.9	74.6
No Immunization	-	7.6

3.4 National Vector Borne Diseases Control Programme (NVBDCP)

The NVBDCP under Directorate General of Health Services is the Nodal Agency for implementation of programmes for prevention and control of Vector Borne Diseases (VBD) in the country under the aegis of the National Health Mission. NVBDCP deals with six vector borne diseases viz. Malaria, Dengue, Chikungunya, Japanese Encephalitis / Acute Encephalitis Syndrome (JE/AES), Lymphatic

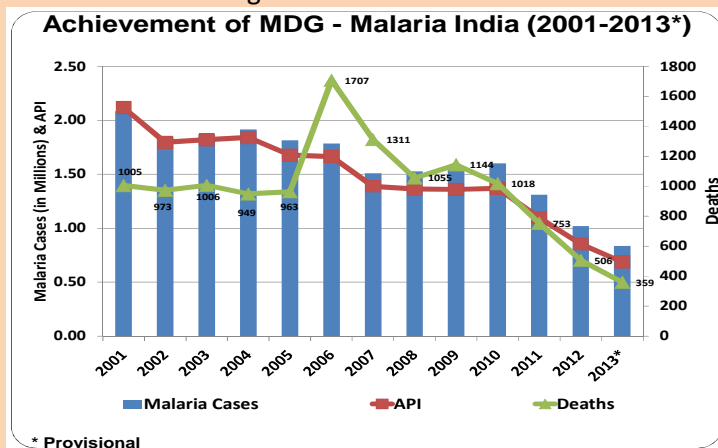
Filariasis and Kala-azar which are transmitted by different kinds of vector mosquitoes, while Kala-azar by sand flies.

The strategy recommended under the programme for prevention and control of VBDs is – Specific Preventive Strategy and Early Diagnosis and Complete Treatment (for reducing the load of Morbidity & Mortality) also including strengthening of referral services, epidemic preparedness and rapid response, and preventive measures like vaccination (for JE) and Mass Drug Administration (for LF), Integrated Vector Management (For Transmission Risk Reduction) including Indoor Residual Spraying in selected high risk areas, use of Insecticide Treated bed nets (ITN) Long Lasting Insecticidal Nets (LLINs), use of Larvivorous fish, source reduction and minor environmental engineering and Supportive Interventions (for strengthening technical & social inputs) including Behaviour Change Communication (BCC), Public Private Partnership, Inter-sectorial convergence, Human Resource Development through capacity building, Operational Research including studies on drug resistance and insecticide susceptibility, Monitoring and Evaluation through periodic reviews/field visits and web based Management Information System.

Malaria is an acute febrile illness caused by a parasite of the genus *Plasmodium* and transmitted by the bite of female *Anopheles* mosquito. In India, two types of *Plasmodia* are responsible for Malaria viz. *P. vivax* and *P. falciparum*. The former causes debilitating illness while the latter can be fatal. In many States of India, particularly the North Eastern States, Odisha, Jharkhand and Chhattisgarh, a very high proportion of cases are due to *P. falciparum*. In India, nine species of Anopheline mosquitoes serve as vectors for Malaria. Developmental activities like unplanned urbanization, construction projects, and industries with deficient water management and inadequate mosquito control measures have led to an increase in Malaria incidence.

The programme was renamed National Vector Borne Disease Control Programme in 2003 in view of the synergies in the prevention and control of vector borne diseases. Additional inputs were provided to high risk areas through World Bank supported National Vector Borne Disease Control Support Project (NVBDCSP) for Malaria control

and Kala-azar (KA) elimination for a period of five years from 2009 to 2013. Global Fund supported Intensified Malaria Control Programme (IMCP) was implemented in ten states from 2005-2010. The Fund supports the 7 NE states under IMCP- II (2010-2015). As a result of the global fight against Malaria, India has made remarkable gains. Both Pv and Pf have shown declining trends.



The National Malaria Strategic Plan (2012-17) lays down reform approaches to programme planning and management. It calls for enhanced surveillance, scaling up preventive measures and targeting them at high risk groups, and control of *P. vivax*. It proposes continued use of Artesunate Combination Therapy (ACT), Rapid Diagnostic Tests (RDTs) at village level, Integrated Vector Management (IVM) and (LLINs).

3.5 Revised National Tuberculosis Control Programme (RNTCP) : Tuberculosis (TB) remains a major health problem in India. According to the Global TB Report 2013, out of the annual estimated 8.6 million TB cases occurring globally, India alone accounted for 2.2 million cases, which is 25 percent of the annual global incidence. The number of TB deaths is unacceptably large; out of the 1.3 million annual numbers of deaths due to TB globally, 2.7 lakh deaths occur in India, despite the fact that most of these are preventable. The Revised National Tuberculosis Control Programme (RNTCP), based on the

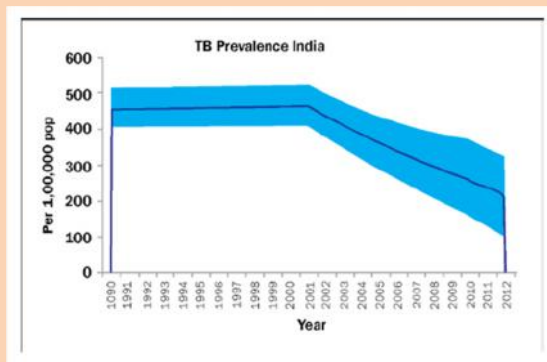
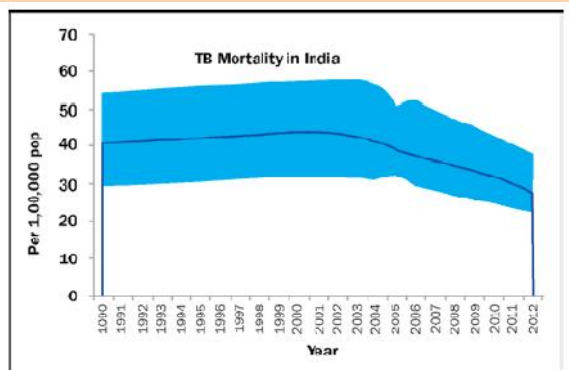
global DOTS (Directly Observed Treatment, Short course) strategy, was launched in 1997. By 2006, 100% of the Indian population was covered by the DOTS programme, making this scale-up one of India's most significant public health accomplishments.

The goal of RNTCP is to decrease mortality and morbidity due to TB and cut transmission of infection until TB ceases to be a major public health problem in India. Since its inception, more than 16 million TB patients have been put on treatment under RNTCP, saving 3 million lives. Treatment success rates have tripled from 25% in pre-RNTCP era to 88% presently (2012) and TB death rates have been reduced from 29% to 4% during the same period. NACP (National AIDS Control Programme) & RNTCP have developed a "National framework of Joint TB/HIV Collaborative activities". The Intensified TB-HIV package was scaled up in the entire country in June 2012.

A case-based web-based platform 'Nikshay', has been developed to enable better surveillance and tracking of TB cases.

In addition to the continuation of existing activities as per 11th five year plan, the following key activities are proposed during the 12th five year plan for achieving the objectives of RNTCP including universal access:

- Ensuring early and improved diagnosis of all TB patients, through improving outreach, vigorously expanding case-finding efforts among vulnerable populations, deploying better diagnostics, and by extending services to patients diagnosed and treated in the private sector.
- Improving patient-friendly access to high-quality treatment for all diagnosed cases of TB, including scaling-up treatment for MDR-TB nationwide.
- Re-engineering programme systems for optimal alignment with NRHM at block level and human resource development for all health staffs.
- Enhancing supervision, monitoring, surveillance, and programme operations for continuous quality improvement and accountability for each TB case, with programme-based research for development and incorporation of innovations into effective programme practice.



3.6 National AIDS Control Organization (NACO) : In order to control the spread of HIV/AIDS, the National AIDS Control Programme (NACP) had been launched in 1992, followed by NACP-II in 1999, NACP-III in 2007 with the goal to halt and reverse the epidemic by scaling up prevention efforts among High Risk Groups (HRG) and general population, and integrating them with Care, Support & Treatment services. Prevention and Care, Support & Treatment (CST) form the two key pillars of all HIV/AIDS control efforts in India. The programme, which is a 100% centrally sponsored scheme, succeeded in reducing the estimated number of annual new HIV infections in adults by 57% during the last decade through scaled up prevention activities. Wider access to Anti-Retroviral Treatment (ART) has resulted in a decline of the estimated number of people dying due to

AIDS related causes. The National AIDS Control Programme Phase-IV aims to accelerate the process of reversal and further strengthen the epidemic response in India through a cautious and well defined integration process over the next five years. The proposed objective is to reduce new infection by 50% (2007 baseline of NACP-III) and comprehensive care, support and treatment to all persons living with HIV/AIDS. The package of services provided under NACP-IV includes:

1. Prevention Services:

- a. Targeted Interventions (TI) for HRGs and Bridge Population (Female Sex Workers (FSW), Men who have Sex with Men (MSM), Transgenders/Hijras, Injecting Drug Users (IDU), Truckers & Migrants. During 2013-14, 246 TIs were established against the annual target of 300. The department has also initiated behavioural surveillance among HRGs and migrants; the results of this surveillance would be used for improving behaviour change communication strategy.
- b. Needle-Syringe Exchange Programme (NSEP) and Opioid Substitution Therapy (OST) for IDUs
- c. Prevention Interventions for Migrant population at source, transit and destinations
- d. Link Worker Scheme (LWS) for HRGs and vulnerable population in rural areas. . In 2012-13, the scheme was operational in 160 districts (against the target of 163), covering 1,51,764 HRG, and 26,65,738 vulnerable population. During 2013-14, in partnership with various development partners, the Link worker scheme was operational in 162 districts covering about 1,79,393 HRG, 4,11,795 Vulnerable Population.
- e. Prevention & Control of Sexually Transmitted Infections/Reproductive Tract Infections (STI/RTI) : In 2012-13, against the target of 64.2 lakh episodes of STI/RTI treated as per national protocol, 60.33 lakh episodes were treated. During 2013-14, against the physical target of treating, 68 lakh episodes of STI/RTI, of which 67.68 lakh episodes of STI/RTI were treated. The Department of AIDS Control, in association with the Maternal Health Division, of the Ministry of Health & Family Welfare, conducted a national consultation workshop on 20-21 December, 2013 for evolving a strategic framework towards elimination of congenital syphilis in India.
- f. Blood safety: During NACP III, the availability of safe blood increased from 44 lakh units in 2007 to 98 lakh units by 2012-13. During this time HIV sero-reactivity also declined from 1.2% to 0.2% in the Department of AIDS Control supported Blood Banks. Voluntary blood donation has been

enhanced through concerted programme efforts. The Department of AIDS Control endeavors to meet the blood needs of the country through voluntary non-remunerated donation through a well-coordinated Blood Banking Programme. The annual requirement of blood for the country is estimated at 120 lakh units, out of which 98 lakh blood units were collected in 2012-13, the Department of AIDS Control supported Blood banks collected 55 lakh units; 84.3% of this was through voluntary blood donation. During 2013-14, against the target of 55 lakh blood collection at the Department of AIDS Control supported blood bank, 57.48 lakh blood units were collected across the country, 84% of this was through voluntary blood donation.

- g. HIV Counselling & Testing Services : During 2013-14, 130.30 lakh general clients have been provided with free counselling and testing services for HIV.
- h. Prevention of Parent to Child Transmission: During 2013-14, 97.52 lakh Pregnant Women have been provided with free counselling and testing for HIV. Also 84% of HIV positive Pregnant Women and their babies received ARV prophylaxis for prevention of mother to child transmission.
- i. Condom promotion: During the 2012-13, 39.02 crore pieces of condoms were distributed through social marketing surpassing the target of 35 crore pieces and 46.17 crore pieces of condom were distributed free against the target of 44.5 crore pieces. During 2013-14, around 56.45 crores pieces of condom have been distributed through social marketing by the Department of AIDS Control contracted social marketing organizations against the target of 35 crores pieces for 2013-14. During 2013-14, against the target of 36 crores, 33.6 crore pieces of condom were distributed free up to March, 2014.
- j. Information, Education & Communication (IEC) and Behaviour Change Communication(BCC) – Mass Media Campaigns through Radio & TV, Mid-media campaigns through Folk Media, display panels, banners, wall writings etc., Special campaigns through music and sports, Flagship programmes, such as Red Ribbon Express.
- k. Social Mobilization, Youth Interventions and Adolescence Education Programme
- l. Mainstreaming HIV/AIDS response
- m. Work Place Interventions

2. Care, Support & Treatment Services: During 2012-13, the target of establishing 400 ART Centres was achieved and 6.32 lakh People living with HIV/AIDS received free ART in government health facilities.

- a. Establishment of ART Centre has been scaled up to 425 ART centres against the target to set up 420 such centres by March 2014. 870 link ART centres were also set up to facilitate the delivery of ART nearer to residence of PLHIV. As of February 2014, 7.34 lakh People living with HIV/AIDS are receiving free ART in government health facilities.
- b. Laboratory services for CD4 Testing, Viral Load testing, Early Infant Diagnosis of HIV in infants and children up to 18 months age and confirmatory diagnosis of HIV-2. 12 National Reference Laboratories and 117 State Reference Laboratories under NACP have been accredited for HIV testing by the National Accreditation Board for Testing and Calibration of Laboratories up to March, 2014
- c. Free First line & second line Anti-Retroviral Treatment through ART centres and Link ART Centres, Centres of Excellence & ART plus centres.
- d. Paediatric ART for children
- e. Early Infant Diagnosis for HIV exposed infants and children below 18 months
- f. Nutritional and Psycho-social support through Community and Support Centres
- g. HIV-TB Coordination (Cross-referral, detection and treatment of co-infections): In 2012-13, 13.28 lakh cross referrals were made between ICTC & RNTCP as against target of 11 lakh. During 2013-14, 14.88 lakh cross referrals have been made between ICTC & RNTCP.
- h. Treatment of Opportunistic Infections

Under NACP-III, there were 189 District AIDS Prevention and Control Units (DAPCUs) across 22 states in India. Their key role is to coordinate and monitor NACP activities at the district level. Each DAPCU team is led by a District AIDS Control Officer from the Government health system.

The Department of AIDS Control has been developing the capacities of DAPCUs through continuous supportive supervision, mentoring and capacity building to DAPCUs through DAPCU National Resource Team. Joint Directors of Basic service division at SACS are designated as DAPCU Nodal Officers for providing technical and programmatic oversight to DAPCUs.

National AIDS Control Programme Performance on key indicators

Indicator	2012-13	2013-14
New Targeted Interventions established	218	246
STI/RTI patients managed as per national protocol	60.33 lakh	67.68 lakh
Blood collection in DAC supported blood bank	NR	57,48,190
Proportion of blood units collected by Voluntary blood donation in DAC Supported Blood Banks	84.3%	84%
Districts covered under Link Worker Scheme (Cumulative)	160	162
Clients tested for HIV (General clients)	104.55 lakh	130.30 lakh
Pregnant Women tested for HIV	82.94 lakh	97.52 lakh
Proportion of HIV+ Pregnant Women & Babies receiving ARV prophylaxis	94%	84%
HIV-TB Cross Referrals	13.28 lakh	14.88 lakh
ART Centres established (Cumulative)	400	425
PLHIV on ART (Cumulative)	6.32 lakh	7.68 lakh*
Opportunistic Infections treated	6.08 lakh	4.35 lakh*
Campaigns released on Mass Media - TV/Radio	10	9
New Red Ribbon Clubs formed in Colleges	531	800
Persons trained under Mainstreaming training programmes	5.19 lakh	3.75 lakh
Social Marketing of condoms by NACO contracted Social Marketing Organisations	39.02 crore pieces	56.45 crore pieces
Free Distribution of Condoms	46.17 crore pieces	33.6 crore pieces

Estimates of Epidemiological indices of HIV in India

	India	2009	2010	2011
1	Estimated no. of annual new HIV infection			
a)	Total	1,32,033	1,30,594	1,30,978
b)	Adult	1,15,285	1,15,051	1,16,456

c)	Children	16,748	15,543	14,522
2	Estimated no. of AIDS Related deaths			
a)	Total	1,80,960	1,64,625	1,47,729
b)	Adult	1,69,869	1,53,948	1,37,516
c)	Children	11,091	10,676	10,213

a.7 National Programme for Control of Blindness (NPCB)

National Programme for Control of Blindness was launched in the year 1976 as a 100% centrally sponsored scheme with the goal of reducing the prevalence of blindness to 0.3% by 2020. Rapid Survey on Avoidable Blindness conducted under NPCB during 2006-07 showed reduction in the prevalence of blindness from 1.1% (2001-02) to 1% (2006-07).

Main causes of blindness are as follows: - Cataract (62.6%) Refractive Error (19.70%) Corneal Blindness (0.90%), Glaucoma (5.80%), Surgical Complication (1.20%) Posterior Capsular Opacification (0.90%) Posterior Segment Disorder (4.70%), Others (4.19%) Estimated National Prevalence of Childhood Blindness /Low Vision is 0.80 per thousand. Physical performance of Major performance indicators is as under-

Year	Cataract operations performed	% surgery with IOL	No. of free spectacles provided to school-age group children with refractive errors	Collection of donated eyes
2010-11	60,32,724	95	6,26,839	44,926
2011-12	63,49,205	95	6,58,061	49,410
2012-13	63,02,894	95	7,08,861	53,543
2013-14	54,68,786*	95	4,97,017*	41,815*

*= Reports for Feb. and March, 2014 awaited from some States/UTs

a.8 National Leprosy Eradication Programme

The National Leprosy Eradication Programme was introduced in 1983. India achieved the goal of elimination of leprosy as a public health problem, defined as less than 1 case per 10,000 populations, at the National level in the month of December 2005 as set by the

National Health Policy, 2002. 33 States/UTs have also achieved elimination. Only the State of Chhattisgarh and UT Dadra & Nagar Haveli have prevalence of more than 1 case per 10,000 populations. There are 209 high endemic districts in the country where elimination is proposed to be achieved during 12th Plan period.

Physical Performance during last 3 years

	2011-12	2012-13	2013-14
New cases detected and treated	127295	134752	117972
Reconstructive Surgery conducted	2413	2252	2548

Statistical data on outcome indicators

Indicators	Outcome expected	Achievement till March 2013 (provisional)
Annual New Case Detection Rate (ANCDR) less than 10/lakh population in high burden districts.	Achievement of ANCDR less than 10/100,000 population in 209 districts by March, 2017.	30
Reconstructive Surgery Performed	2500 every year	2252

3. Population Stabilization



Family Planning Program has witnessed a paradigm shift from a program aimed at population stabilization to a program ensuring improved maternal and child health outcomes. The new strategy of Reproductive-Maternal-Newborn Child and Adolescent Health (RMNCH+A) encompasses the maternal and child health, adolescent health along with Family planning.

India: Selected Health Indicators

S. No.	Indicator	1981	1991	Current Level (SRS 2012)
1	Total Fertility Rate	4.5	3.6	2.4
2	Crude Birth Rate	33.9	29.5	21.6
3	Crude Death Rate	12.5	9.8	7.0

Key Strategies of Family Planning Program:

Policy Level Strategies:

- *Target free approach*
- *Voluntary adoption of FP Methods*

Service Level Strategies:

- *More emphasis on spacing methods*
- *Assuring Quality of services*

Key Interventions under Family Planning:

New Strategic focus on Spacing Methods:

- Basket of choices has been now improved through the introduction of a new IUCD-375 of 5 years duration along with already existing IUCD 380A of 10 years duration.
- A new method of spacing **Post-Partum IUCD (PPIUCD)** has been introduced for post-partum women, to meet the high unmet need in the post-partum period
- More personnel are being trained in IUCD insertion at all levels.

- Interval IUCD services are also being promoted on two fixed days at sub-centre and PHC level.

Scheme of Home Delivery of Contraceptives by Accredited Social Health Activists (ASHAs)

This country wide scheme, launched in July 2011, aims to improve access to contraceptives by the eligible couples, through distribution of contraceptives at the doorstep of beneficiaries by ASHAs.



Presently 8.9 lakh ASHAs in the country are distributing contraceptives at the doorstep of beneficiaries.

Scheme of Ensuring Spacing at Birth (Launched in May 2012)

Services of ASHAs are being utilised in counselling newly married couples to ensure spacing of 2 years after marriage and to have spacing of 3 years after the birth of 1st child.

The scheme is operational in 18 States (8 Empowered Action Group-EAG, 8 north eastern, Gujarat and Haryana).

Pregnancy Testing Kits (PTK):

Aim of the scheme is to make available the PTKs with ASHAs and at the sub-centre level for early detection of pregnancy and availing of other RCH services. The PTKs is a part of ASHA drug kit and are distributed free of cost to the clients in field by ASHAs.



Improved counselling through RMNCH Counsellors:

Availability of RMNCH Counsellors at the District level, high case load facilities is to ensure counselling of the clients and their families visiting the facilities.

National Family Planning Indemnity Scheme (NFPIS):



Under NFPIS the clients are insured in the unlikely events of deaths, complications and failures following sterilization and the providers/ accredited institutions are indemnified against litigations in those eventualities through monetary compensation.

Compensation scheme for sterilization acceptors:

It is a Centrally Sponsored Scheme since 1981, where Ministry of Health & family Welfare (MoHFW) provides compensation for loss of wages to the beneficiary and also to service provider (& team) for conducting sterilisations.

Celebration of World Population Day & fortnight (July 11 – July 24):

The event is observed over a month long period, split into two phases:

- Mobilisation Fortnight or Dampati Sampark Pakhwada (June 27 to July 10)
- Population Stabilisation Fortnight or Jansankhya Sthirtha Pakhwada (July 11 to July 24)

The programme-wise budget is approved in advance for all States.

Free availability of commodities

To ensure better access of family planning items, all items are being made available at all public health facilities free of cost.

Demand Generation Activities:

Demand generation activities are being performed to promote acceptance of family planning methods, increase male participation, burst myths related to use of contraceptives and use of spacing



methods for improved health of mother and child. Display of different types of posters, billboards and other audio and video materials in the various facilities is a part of the activity.

National Commission on Population(NCP)

With a view to monitor and direct the implementation of the National Population Policy, the NCP was constituted in 2000 and it was re-constituted in 2005. The Chairman of the re-constituted Commission continued to be Hon'ble Prime Minister of India, whereas Deputy Chairman of the Planning Commission and the Minister of Health & Family Welfare are the two Vice-Chairmen. The present membership also includes the Chief Ministers of the States of Uttar Pradesh, Madhya Pradesh, Rajasthan, Bihar, Jharkhand, Kerala and Tamil Nadu.

The reconstituted National Commission on Population had decided that there should be Annual Health Survey of all districts so that health indicators at district level are periodically published, monitored & compared against benchmarks and setting up of five groups of experts for studying the population profile of the States of Bihar, Uttar Pradesh, Rajasthan, Madhya Pradesh and Odisha to identify weaknesses in the health delivery system and to suggest measures that would be taken to improve the health and demographic status of the States.

4: Education and Human Resource Development

The large population of India is an invariable human resource and with necessary skills of quality education, this may be empowered to lead a purposeful life and to contribute to the national economy.



In line with the goal of nation building, India has been committed to providing free and compulsory education to all children. Towards this end, Indian Parliament has enacted a legislation making free and compulsory education a Right of every child in the age group 6-14 years which has come into force from 1st April, 2010. Efforts are being made to create a robust and vast system of higher and technical education.

Building upon the existing capacities and recognizing the immense contribution to nation building that the large network of educational institutions has made in the post independent India; the country has embarked upon a second phase of expansion and establishment of centres of excellence in higher education. It is envisioned that strengthening the two ends of the spectrum, namely, elementary education and higher/technical education would help in meeting the objectives of expansion, inclusion and excellence in education.

The Central Advisory Board of Education (CABE) is the highest advisory body to advise the Central and State Governments in the field of education. National Knowledge Commission (2006) Report on higher education supports a strong reform agenda through public investment. The Yashpal Committee (1993) report on renovation and rejuvenation of higher education has recommended protecting the intellectual autonomy of educational institutions and the creation of an all-encompassing National Commission for Higher Education and Research (NCHER) to replace or subsume the existing regulatory bodies.

The Central Government continues to play a leading role in the formulation and implementation of educational policies and programmes, the most notable of which is the National Policy on Education (NPE) 1986, as modified in 1992. The modified policy envisages, inter-alia, a National System of Education to bring about uniformity in education, making adult education programmes a mass movement, providing universal access, ensuring retention and improving quality in elementary education, special emphasis on education of girls, etc.

4.1 ELEMENTARY EDUCATION

4.1.1 Sarva Shiksha Abhiyan (SSA)

Sarva Shiksha Abhiyan is one of India's important social sector programmes for universalisation of elementary education. SSA was launched in 2000-2001 with its goal to include universal access and retention, bridging of gender and social category gaps in elementary education, and achieving significant enhancement in learning levels of children. SSA is now the primary vehicle for implementing the Right to Free and Compulsory Education Act (RTE), 2009, which came into effect from 1.4.2010.

From 2010-11, 44,595 school buildings, 7,00,460 additional classrooms, 5,46,513 toilets and 34,671 drinking water facilities have been sanctioned to the States under SSA programme to augment school infrastructure for complying with the RTE norms.

Current efforts to promote elementary education among children from disadvantaged groups and weaker sections include expanding infrastructure for physical access, incentives like uniforms/ books/ cycles, tracking disaggregated data to reflect social groups and gender dimensions, provision of mid-day meals etc. Many specific/ targeted programmes like uniforms, books that were originally special provisions for SC, ST children have been expanded to cover all children. Hostels and scholarships under the Ministry of Social Welfare are examples of specific/ targeted programmes for SC children.

Under SSA, children from Muslim community joined elementary school in large numbers during 2007-08 to 2012-13 period. They

accounted for 59% of the incremental enrolment in Elementary Schools during 2007-08 to 2012-13.

The RTE Act, 2009, Section 3(1) entitles all children in the 6-14 years age group to a right to free and compulsory elementary education in a neighbourhood schools. This Act has given a new thrust to the education of Children with Special Needs (CWSN), and efforts would now have to be made to enrol and retain CWSN in the neighbourhood schools. Thus school preparedness for CWSN should be given paramount importance in the context of RTE.

SSA ensures that every child with special needs, irrespective of the kind, category and degree of disability, is provided meaningful and quality education. Hence, SSA has adopted a zero exclusion policy implying that no child having special needs should be deprived of the right to education and taught in the best suited environment. These include school readiness programmes for CWSN, home-based education for children with severe-profound disabilities. The ultimate aim, however, is to mainstream all CWSN in neighbourhood schools.

The norm under SSA for CWSN is ₹ 3000/- per child per annum, with ₹ 1000/- earmarked exclusively for engagement of resource teachers. The key interventions under SSA for inclusive education consist of identification of CWSN; functional and formal assessment; preparation of Individualized Educational Plan; provision of aids and appliances; teacher training; resource support; support services; barrier free access; parental training and community mobilization; and building synergy with special schools.

23.48 lakh of the 27.16 lakh identified CWSN (86.45%) are enrolled in schools. 33895 CWSN are being covered through School Readiness Programme in 11 States/UTs and 2.06 lakh CWSN are being provided home-based education in 32 States/UTs. In all 95.31% of the identified CWSN have been covered through various strategies.

36.06 lakh teachers have been covered through regular teacher training programme, which include a 2-3 days capsule on inclusive education. 26.03 lakh teachers have been provided 3-5 days additional training for better orientation to Inclusive Education. Besides, general teachers have also been oriented on specific disabilities. Further, specialised training has been imparted to teachers on low vision,

Braille, signing & total communication, mental retardation, multiple disabilities, autism, Cerebral palsy and learning disabilities. 35 States/UTs have appointed 21646 resource persons.

Schools are being made more disabled friendly by incorporating barrier free features in their designs. 11.42 lakh (79.78%) schools have been made barrier-free. 30.40 lakh (80.59%) CWSN have been provided assistive devices under the SSA. 764 NGO's across 31 States are involved in providing support to Inclusion Education.

4.1.2 Mid-Day Meal Scheme

With a view to enhance enrolment, attendance and retention and simultaneously to improve nutritional status of children, the National Programme of Nutritional Support to Primary Education (NP-NSPE) was launched as a Centrally Sponsored Scheme on 15th August 1995. The vide order dated 28th November, 2001 to serve hot cooked mid-day meals to the children. As per Hon'ble Supreme Court directions, the serving of hot cooked mid-day meals started from the academic year 2004. Later, the Scheme was extended to cover children of upper primary classes under changed name 'National Programme of Mid-Day Meal in Schools'.

The objective of the Mid-Day Meal Scheme is to address the pressing problems of hunger and education among the majority of children by improving the nutritional status of children in classes I – VIII in Government and Government aided schools, encouraging poor children, belonging to disadvantaged sections, to attend school more regularly and help them concentrate on classroom activities and providing nutritional support to children of elementary stage in drought-affected areas during summer vacation.

Table: Nutritional content of cooked mid-day meal

S. No.	Item	Primary	Upper Primary
1.	Calories	450 calories	700 calories
2.	Protein	12 grams	20 grams

The above nutritional content is ensured through a package consisting of the following ingredients per child per school day:

S. No.	Item	Primary	Upper Primary
1.	Rice/Wheat	100 gms	150 gms
2.	Pulses	20 gms	30 gms
3.	Vegetable	50 gms	75 gms
4.	Oil	5 gms	7.5 gms
5.	Micro-nutrients	Adequate quantities of micro-nutrients like Iron, Folic Acid, Vit-A etc. in convergence with NRHM	

The Mid Day Meal Scheme now covers 10.80 crore elementary class children in 11.58 lakh schools in the country, which is 78% of the enrolled children (13.87 crore) in these schools. Approximately, over **25 lakh** cook-cum-helpers have been engaged by the States/UTs under Mid-Day Meal Scheme and more than 80% are women for preparation and serving of the meals to the children at schools.

4.1.3 Scheme for Providing Quality Education in Madrasa (SPQEM)

National Policy on Education (NPE) has adopted the concept of national system of education, implying that up to a certain level all students irrespective of caste, creed, language or sex have access to education of comparable quality. The Policy lays special emphasis on removal of disparities and equalizing educational opportunities by attending to the specific needs of those who have remained educationally backward so far. Suitable incentives therefore, have to be provided to educationally backward sections of the society.

The objective of the Scheme is to encourage traditional institutions like Madrasas and Maktabas by giving them financial assistance to introduce modern subjects such as science, mathematics, social studies, Hindi and English in their curriculum. However, the process of modernization of traditional Madrasas and Maktabas will be voluntary. SPQEM has been operationalized since 2009-10 to augment qualitative improvement in madrasas to enable Muslim children attain standards of the national education system in formal education subjects. The scheme initiated with two

components, namely infrastructure support for educational institutions catering to educationally backward population and introduction of modern subjects in traditional institutions of Madrasas.

Year-wise progress during the last Five years under SPQEM

S. No.	Year	No. of Madarsas	No. of teachers
1	2009-10	1979	4962
2	2010-11	5045	11382
3	2011-12	5934	14412
4.	2012-13	9905	23146
5.	2013-14	14859	35157

The scheme provides Honorarium for teachers (maximum 3 teachers) and provides one time and recurring grants to meet infrastructure and training needs. The scheme provides opportunities to students to acquire education comparable to the National Education System especially for secondary and senior secondary levels and enable children studying in these institutions to progress to higher levels of learning and also open up better job opportunities for them. Maktaba/Madrasas/Dar-ul-Ulooms can opt to become accredited study centres with the National Institutions of Open Schooling (NIOS) for primary and middle levels of education or/and for secondary and senior secondary levels as well.

4.1.4 Restructuring and Reorganization of Teacher Education

The Centrally Sponsored Scheme of Restructuring and Reorganization of Teacher Education was initiated in 1987 pursuant to the formulation of the National Policy on Education, 1986. The National Policy on Education (NPE) envisaged teacher education as a continuous process with pre-service and in-service training being its inseparable components. It emphasized the significance and need for a decentralized system for the professional preparation of teachers, and District Institutes of Education and Training (DIETs), Colleges of Teacher Education (CTEs) and Institutes of Advanced Study in Education (IASEs) were established.

The Scheme has continued since 8th Five Year Plan and has been revised in 2012 consisting of the following components:

- (i) Modification in Centre-State financial sharing pattern; from the existing 100% central assistance to sharing pattern in the ratio of 75:25 for all State/UTs (90:10 for NER States; including Sikkim)
- (ii) Continuation of support to State Council of Educational Research & Training SCERTs/SIEs
 - a. Strengthening and re-structuring of SCERTs
 - b. Training for Educational Administrators, including Head Teachers.
 - c. Orientation/ Induction Training to Teacher Educators.
- (iii) Continuation of support to CTEs and establishment of new CTEs.
- (iv) Continuation of support to IASEs and establishment of new IASEs.
- (v) Continuation of support to DIETs and restructuring of DIETs.
- (vi) Establishment of Block Institutes of Teacher Education (BITEs) for augmenting Teacher Education capacity in SC/ST and minority concentrated areas.
- (vii) Professional Development of Teacher Educators
- (viii) Technology in Teacher Education
- (ix) Public-Private Partnership (PPP) in teacher education
- (x) Monitoring mechanism.

Till 2013-14, 96 Block Institutes of Teacher Education (BITEs) have been sanctioned in the Special Focus Districts.

4.1.5 Scheme of Infrastructure Development in Minority Institutions (IDMI)

IDMI has been operationalized since 2009-10 to augment infrastructure in private aided/unaided minority schools/ institutions in order to enhance quality of education to minority children. The scheme would facilitate education of minorities by augmenting and strengthening school infrastructure in Minority Institutions in order to expand facilities for formal education to children of minority communities.

The scheme gives preference to minority institutions (private aided/unaided schools) located in districts, blocks and towns having a minority population above 20% and encourages educational facilities for girls, children with special needs and those who are most deprived educationally amongst minorities.

The scheme funds infrastructure development of private aided/unaided minority institutions to the extent of 75% and subject to a maximum of Rs. 50 lakhs per institution for strengthening of

educational infrastructure and physical facilities in the existing school including additional classrooms, science / computer lab rooms, library rooms, toilets, drinking water facilities and hostel buildings for children especially for girls. The number of Institutions assisted has increased from 22 in 2009-10 to 229 in 2013-14.

4.2 SECONDARY EDUCATION

4.2.1 Rashtriya Madhyamik Shiksha Abhiyan (RMSA)

The scheme was launched in March, 2009 as part of the Central Government's commitment to make secondary education of good quality available, accessible and affordable to all young persons. The objective of the scheme is to universalize secondary education by enhancing access and to improve quality of education at secondary stage, while ensuring equity. The scheme envisages increasing the number of children enrolled for classes IX-X within 5 years by providing a secondary school within a reasonable distance of every habitation, improving quality of education imparted at secondary level through making all secondary schools conform to prescribed norms, removal of gender, socio-economic and disability barriers. 12th Plan Goal for the Secondary Education sector is to achieve near-universal enrolment in secondary education, with the Gross Enrolment Ratio exceeding 90 % by 2017.

9223 new secondary schools have been made functional out of the approved 10229 new secondary schools. Strengthening of 34891 existing schools have been approved under RMSA scheme in which 23407 new science lab, 28969 art/craft/culture rooms, 19401 toilet blocks, 12370 drinking water facilities and 2020 residential quarters have been approved. Out of these 4632 science labs, 3750 computer rooms, 4721 libraries, 4590 art/craft/culture rooms, 3863 toilet blocks, 3098 drinking water facility and 338 residential quarters have been completed. 49439 additional classrooms have been approved, out of which 10099 have been completed and 9684 are in progress. With regard to teachers, 107400 teachers (include 41507 additional teachers) have been sanctioned for secondary schools, out of which 59736 teachers have been appointed.

Leveraging technology to bring in efficiency to the overall governance as also capacitating the system to develop and use of digital content as part of the teacher training is another thrust area. Accordingly, National Repository of Open Education Resources was launched in August, 2013. NCERT syllabus and content from class 1 to 12 are being appropriately (pedagogy) digitized and made available in addition to collecting and curating online available material for the school level.

The scheme for Vocationalisation of Secondary Education has been revised mainly based on the pilot implemented in Haryana under the National Skill Qualification Framework (erstwhile National Vocational Education Qualification Framework) with the objective of mainstreaming of vocational education at the secondary and higher secondary levels while ensuring that the imparted skills are in alignment with the needs of the potential client, viz. the industry.

In collaboration with agencies including National Skill Development Corporation(NSDC), its Sector Skill Councils, and CBSE, the national anchor agency for this initiative, the Pandit Sunderlal Sharma Central Institute of Vocational Education (PSSCIVE) has identified skill sectors with specific job roles that are adaptable at the school level. Based on the National Occupation Standard (NOS) for these job roles, curriculum design and content development is underway. This mainly caters to the needs of the States that have taken up introduction of vocational education as part of formal school curriculum.

The Scheme notably incentivizes introduction and adoption of vocational education in private schools also, subject to the course being National Skills Qualification Framework(NSQF) compliant. The incentive provides for financial reimbursement to schools based on number of successful VE pass outs. This would significantly add to the overall self-assumed target of two lakhs students to be covered under the Govt. and aided sector.

As part of the external support from Development partners – World Bank, European Union(EU) and Department for International Development (DFID), a technical cooperation Fund has been established. As part of the Annual action Plan for leveraging the fund,

capacity building relating to use of Unified District Information System for Education (UDISE), conducting the NAS, developing guidelines for teacher management including professional development, supporting of the RMSA team at national level for planning and appraisal have been identified and work set in motion.

Equity related initiatives focusing on inclusion, especially, with reference to girl child and children with special needs (CWSN) have been funded for ensuring reduction in dropout of girls at the elementary graduation level and to ensure enrolment in the secondary stage. For the children with special needs, series of sensitization and orientation workshop and seminars are planned including a national seminar to bring focus to this area of intervention, and develop strategies to address the challenges at the implementation level.

The educational development of children belonging to educationally backward groups including SCs/STs/minorities is a priority under RMSA. The framework of the RMSA provides for various measures including intensive micro planning to provide flexibility to develop context specific interventions, reduction of educational inequalities by giving priority to SC/ST/Minority/ educationally backward areas and population sectors, regular enrolment drives, special camp and bridges courses, open and distance learning, providing hostel facilities, monitoring attendance in pockets identified for intensive activities, special coaching classes/remedial classes especially for educationally minority girls and children who are not doing academically well, teacher sensitization programme, etc. for ensuring access to these groups.

The scheme also recognizes the need for extending specific interventions and resource support, including providing textbook, workbook, stationery, uniform, footwear, bicycles, boarding and lodging for each child and stipend for day scholars, to the children belonging to SCs/STs including differently abled children and secondary and higher secondary stage.

To enhance enrolment of girls in secondary stage and to ensure cent percent transition from elementary stage, orientation and sensitization of teachers', targeted community advocacy programme

and development and introduction of specific gender (issue) based modules is being undertaken. States have been encouraged to necessarily take up gender based interventions under Quality Head of RMSA.

School Education as a Mission Mode Project (MMP)

School Education has been included in the Mission Mode Project (MMP) under the National e-Governance Plan implying that the objective and the scope are clearly defined having measurable outcomes and service-levels, and well-defined milestones and timelines for implementation.

The main target of the School Education MMP is to deliver the services that enable the stakeholders - including students, teachers, and administrators, both at the Centre and States and UTs to achieve the objectives to enable improvement in the quality of learning in schools, to improve efficiency of school administration and governance of schools, to improve service delivery of the school education department to the key stakeholders and to access to near real-time and better quality data for decision support

4.2.2 Model School Scheme (MSS)

The Model School Scheme (MSS) envisages setting up of 6,000 model schools – one in every block of the country as benchmark of excellence for providing quality education to rural children. Basically, a model school will have infrastructure and facilities of the same standard as in a Kendriya Vidyalaya and with stipulations on pupil-teacher ratio, ICT usage, holistic educational environment, appropriate curriculum and emphasis on output and outcome. The scheme was launched in November, 2008 and is being implemented from 2009-10.

The scheme has two modes of implementation, viz. (i) 3,500 model schools are to be set up in educationally backward blocks (EBBs) through State/UT Governments; and (ii) the remaining 2,500 model schools are to be set up under Public-Private Partnership (PPP) mode in blocks which are not educationally backward.

Under the state sector component of the MSS, the scheme provided for 75(GOI):25 (State) sharing patterns in 11th Plan period and a shift to 50:50 sharing pattern in the 12th Plan for both non-recurring and recurring grants. The sharing pattern provided 90:10 for

special category States and for upgraded Ashram schools in all States for both 11th and 12th Five Year Plan period. For the purpose of calculating the financial requirements, the Scheme provided for non-recurring cost for setting up a school on *Kendriya Vidyalaya* template with classes VI to XII with two sections in each class Rs. 3.02 crore. Similarly for calculating the recurring cost, the same was taken as around Rs. 0.75 crore per annum. For North Eastern and hilly States, a relaxation of up to 20% higher construction cost was allowed.

Since the launch of the scheme in 2009-10, the Ministry has approved 2415 model schools in 22 States and financial sanction has been accorded for setting up of 2166 schools with release of Central share amounting to Rs. 3184.64 crore. 1184 model schools have been made functional in 12 States since 2010-11, and an amount of Rs. 159.82 crore of recurring grants has so far been released. 358 model schools have been completed and construction in respect of 1102 schools is in progress. The Public-Private Partnership (PPP) component of the MSS for 2,500 model schools to be set up in blocks which are not educationally backward was approved by the CCEA on 24.11.2011. Thereafter, implementation of this component was initiated during 2012-13.

4.2.3 Centrally Sponsored Scheme of “Vocationalisation of Secondary and Higher Secondary Education”

The revised scheme of “Vocationalisation of Secondary Higher Secondary Education” was approved by the Cabinet Committee on Skill Development on 12.02.2014. The scheme has been revised to continue during the 12th Plan incorporating the learning emerging out from the Haryana Pilot and convergence with Rashtriya Madhyamik Shiksha Abhiyan (RMSA).

The components of the scheme include introduction of vocational education in Government schools from Class IX, capacity building of teachers through in-service training for existing vocational education teachers and induction training for new vocational education teachers, development of competency based modules for each individual vocational course, performance linked incentive to Govt. aided and recognized, unaided private schools.

The specific objectives of the scheme are to enhance the employability of youth through demand driven competency based, modular vocational courses; to maintain their competitiveness through provisions of multi-entry multi-exit learning opportunities and vertical mobility/ interchangeability in qualifications; to fill the gap between educated and employable; and to reduce the dropout rate at the secondary level and decrease the pressure on academic higher education.

4.2.4 National Means-Cum-Merit Scholarship Scheme (NMMSS)

The Centrally Sponsored National Means-cum-Merit Scholarship Scheme was launched in May, 2008 with the objective to award scholarships to meritorious students of economically weaker sections to arrest their drop-out at class VIII and encourage them to continue the study at secondary stage. One lakh scholarships of Rs.6000/- per annum (Rs.500/- per month) per student are awarded to selected students every year for study in classes from IX to XII in Government, Government-aided and local body schools under the scheme. There is quota of scholarships for different States/UTs. Students whose parental income from all sources is less than Rs. 1.5 Lakhs per annum are eligible to avail the scholarships. Reservation as per State Government norms is provided. The selection of students for award of scholarships under the scheme is made through an examination conducted by the State Governments. Scholarships are disbursed by State Bank of India directly by electronic transfer into the accounts of students on quarterly basis.

The scheme is covered under the Direct Benefit Transfer (DBT) scheme launched by the Government of India on 1.1.2013. The scheme is monitored regularly in the Department, Annual meetings of State Nodal officers as well as State Education Secretaries Conference.

Year-wise number of scholarships and amount sanctioned is as follows:

Year	No. of scholarships	Amount (Rs. in crore)
2008-09	55544	16.67
2009-10	78926	47.35
2010-11	81377	48.82
2011-12	103033	61.82
2012-13	102816	61.69
2013-14	145376	87.22

BE for 2014-15 is Rs. 70.00 crore including Rs.7.00 crore for eight States in NER.

4.2.5 National Scheme of Incentive to Girls for Secondary Education (NSIGSE)

The Centrally sponsored scheme namely “National Scheme of Incentive to Girls for Secondary Education (NSIGSE)” launched in May 2008 with the objective to establish an enabling environment to reduce the drop-outs and to promote the enrolment of girl child belonging mainly to SC/ST communities in secondary schools. According to the scheme, a sum of Rs.3,000/- is deposited in the name of eligible unmarried girls as fixed deposit on enrolment in class IX, who are entitled to withdraw it along with interest thereon on reaching 18 years of age and passing 10th class examination. The scheme covers all SC/ST girls who pass class VIII and all girls who pass VIII examination from Kasturba Gandhi Balika Vidyalayas and enrol in class IX in Government, Government-aided and Local Body schools.

Cent percent funds are provided by the Central Government for the Scheme. The scheme is covered under the Direct Benefit Transfer (DBT) scheme.

Financial Year-wise break-up of the funds released and number of beneficiary girls

Year	Sanctioned Amount	Beneficiaries
2008-09	Rs. 93.43 crore	311423 girls of 17 states/UTs.
2009-10	Rs. 45.80 crore	152660 girls of 14 states/UTs.
2010-11	Rs. 72.46 crore	241528 girls of 15 states/UTs
2011-12	Rs. 163.06 crore	543532 girls of 25 states/UTs.
2012-13	Rs. 93.43 crore	312457 girls of 17 states/UTs
2013-14	Rs. 94.11 crore	312693 girls of 18 states/UTs

More than 98% of the benefitted girls belong to SC and ST communities.

4.2.6 Scheme of Financial Assistance for Appointment of Language Teachers

The Scheme of “Financial Assistant for Appointment of Language Teachers” has three components. It provides for Hindi Teachers in the non- Hindi speaking States (since the second P), Urdu

Teachers in the schools of significant minority population districts (since 1999) and Modern Indian Language teachers for teaching third language in the schools of Hindi speaking States/UTs (since 1993-94). The schemes were brought together in the Xth Plan for increased linkages among the three and for better administrative efficiency.

Government of India would provide financial assistance for appointment of Urdu Teachers to any locality where more than 25% of the population is from Urdu speaking community in pursuance to the Prime Minister's new 15 Point Programme for the welfare of the Minorities. The scheme has been revised in March, 2014 *for appointment of Urdu Teachers* where 15 or more students in a class opt for it. The State Government may appoint contractual teachers. The appointment of permanent teachers of Urdu language may be made in places/schools where demand for Urdu language is persistently higher than 15 in a class so that permanent Urdu teachers do not remain idle. The previous criteria of appointment of Urdu teachers in any locality where more than 25% of the population is from Urdu speaking community has been changed.

4.3 ADULT EDUCATION

4.3.1 Saakshar Bharat (Centrally Sponsored Scheme of Adult Education & Skill Development)

The National Literacy Mission (NLM) was recast to focus on women. Literacy being the foundation stone for individual, societal and national development, the Saakshar Bharat programme is designed to effectively synergize and converge with other development initiatives of the Government and was launched in 2009. The programme is the world's largest adult literacy programme focused on women, SCs, STs, Minorities and other excluded groups in rural areas of low adult female literacy and Left Wing Extremism affected districts. The main goals of the programme are to raise literacy level to 80% (from 73% in 2011) and reduce gender gap in literacy to 10% points (from over 16% points in 2011) by 2017.

The scheme has four broad components

- (i) Imparting Functional Literacy to 70 million non-literates,
- (ii) Basic Education (Equivalency to formal education level) to neo literates/school dropouts,

- (iii) To impart Vocational Skills to improve the earning and living condition of non & neo literates; and
- (iv) Providing opportunities to neo literate adults for continuing education.

The programme has been sanctioned in 1.61 lakh Gram Panchayats of 383 low female literacy districts in 25 States and 1 Union Territory. Over 1.54 lakh Adult Education Centres (AECs) have been set up in equal number of Gram Panchayats which are manned by 2.65 lakh Preraks (village coordinators) half of whom are women. More than 34 million Primers in different Indian languages and dialects have been produced and distributed. About 2.47 Cr. learners (including 1.78 crore women, 57.2 lakh SCs, 31.7 lakh STs and 20.2 lakh minorities) have successfully passed the Assessment Tests for Basic Literacy conducted by National Institute of Open Schooling (NIOS) up to August, 2013. Around 53 lakh learners appeared in the last assessment test conducted on 9th March, 2014. Nearly, 2 million adults have been skilled in various vocational trades by Jan Shikshan Sansthan(JSSs). The JSSs provide vocational training to non-literate, neo-literate adults as well as school drop outs by identifying such skills as would have a market in the region of their establishment.

4.3.2 Scheme of Support to Voluntary Agencies for Adult Education and Skill Development

The Scheme of Support to Voluntary Agencies for Adult Education and Skill Development is a Central Sector Scheme being implemented by the Adult Education Bureau of the Department of School Education & Literacy. The scheme is an effort to promote wider involvement of NGOs in eradication of illiteracy and imparting of skill development by providing due support to them.

MHRD had been providing support to Voluntary Agencies (VA) through two separate schemes, namely, Assistance to Voluntary Agencies in the field of Adult Education and Jan Shikshan Sansthan(JSSs). The former was conceptualized as an overarching programme to encourage innovation and creativity in literacy and continuing education. It included establishment of State Resource Centers (SRCs) for technical and academic support to adult education. Starting with 14 SRCs in 1980, the number of these SRCs is now 32

across the country. On the other hand, first Shramik Vidhyapeeth {now known as Jan Shikshan Sansthan (JSSs)} was established in the year 1967 to cater to the vocational needs of industrial workers and urban slum dwellers. However in the context of literacy movement launched across the country in 1990, the focus shifted in the year 2000 from industrial workers in urban areas to neo-literates and unskilled/unemployed youth in the country especially the underprivileged in rural areas. Gradually, their number increased to 58 by the end of 8th Five Year Plan i.e., 1996-97 and the present sanctioned strength of JSSs is 271.

The two schemes got merged in 2009 and renamed as “Scheme of Support to Voluntary Agencies for Adult Education and Skill Development” and continue to support the Voluntary Agencies on project to project basis. It has been allowed to continue as per existing norms and financial parameters till September, 2014.

The functions of the State Resource Centres (SRCs) include development of teaching learning primers for the basic literacy and post literacy programmes, development of graded supplementary material for the continuing education phase, training of resource persons on various aspects of literacy, post literacy and continuing education, conducting research and evaluation, and media and documentation activities. In addition, they have adopted some blocks/districts of the State covered under Saakshar Bharat and created Islands of Success by providing support to SLMA to facilitate implementation of Saakshar Bharat in adopted areas. Besides, SRCs have played a significant role in facilitating process of assessment of learners through NIOS.

There are at present 32 functional SRCs throughout the country and under the scheme there is a proposal to sanction 7 more.

JSSs offer a variety of vocational courses. The Directorate of Adult Education (DAE) has developed curriculum for 36 courses and also developed and standardized 24 vocational courses through NIFT. The curriculum lays down the course duration, including instructional hours and weightage for theory and practical work, the methodology, system of evaluation and norms for certification. The curriculum for

each course also incorporates components relating to life enrichment education. Besides, JSS have been allowed to opt for curriculum of vocational course developed by NIFT, NIOS and DGE & T. Jan Shikshan Sansthan have provided vocational training to the large number of trainees. The year-wise details of beneficiaries are as follows:

Year	No. of beneficiaries (in Lakh)
2011-2012	5.96
2012-2013	5.38
2013-2014	4.87

4.4 AUTONOMOUS BODIES

4.4.1 Navodaya Vidyalaya Samiti (NVS)

The National Policy on Education, 1986, envisaged setting up of pace setting residential Navodaya schools with an aim of providing excellence coupled with equity and social justice. Consequent to this, Navodaya Vidyalaya Samiti was registered as a Society, under the Society Registration Act XXI of 1860 with the following objectives:

- (a) To provide good quality modern education – including a strong component of inculcation of values, awareness of the environment, adventure activities and physical education – to the talented children predominantly from the rural.
- (b) To provide facilities, at a suitable stage, for instruction through a common medium, viz. Hindi and English, all over the country.
- (c) Offer a common core-curriculum for ensuring comparability in standards and to facilitate and understanding of the common and composite heritage of our people.
- (d) To progressively bring students from one part of the country to another in each school to promote national integration and enrich the social content.
- (e) To serve as a focal point for improvement in quality of school education through training of teachers in live situations and sharing of experience and facilities.

The opening of a Jawahar Navodaya Vidyalaya (JNV) is based on the proposal from the concerned State/UT Governments offering about 30 acres of suitable land, free of cost. The State Government has also to provide sufficient temporary building and other

infrastructures, free of rent, to accommodate 240 students and staff for three to four years or till such time the Samiti constructs its own building at the permanent site.

In 2013-14, 40,603 students selected for admission in class VI out of 16,75,439 appeared. The Samiti has sanctioned 598 JNVs, out of which 588 JNVs are functional covering 576 districts out of 628 districts (excluding Tamil Nadu State, which has not accepted the scheme so far). Total Budget allocation for the 2014-15 is Rs. 2038.40 Crore out of which Rs. 1500.00 Crore is under Plan and Rs.538.40 Crore is under non-plan.

Details of students studying in the JNVs as on 31.1.2014

Number	Boys	Girls	Rural	Urban	Gen	SC	ST
237250	146285	90965	185263	51987	133797	59533	43920
%	61.66	38.34	78.09	21.91	56.39	25.09	18.52

4.4.2 Kendriya Vidyalaya Sangathan (KVS)

The scheme of Kendriya Vidyalaya Sangathan approved in November 1962 to provide educational facilities for the children of transferable Central Government/ Defence employees. In 1965, an autonomous body, namely Kendriya Vidyalaya Sangathan was registered as a Society under Societies Registration Act XXI of 1860, which took over the task of opening and managing the Central Schools, henceforth called Kendriya Vidyalayas. The Sangathan is financed from the non-plan and plan funds of the Government of India.

At present, there are 1090 functional Kendriya Vidyalayas in the country (including three Kendriya Vidyalayas functioning abroad (Kathmandu, Moscow and Tehran). The main objectives of Kendriya Vidyalayas are as under:

- To cater to the educational needs of the children of transferable Central Government employees including Defence and Para-Military Personnel by providing a common programme of education.
- To provide, establish, endow, maintain, control and manage schools, hereinafter called 'the Kendriya Vidyalayas' for the children of transferable employees of the Government of India, floating population

and others including those living in remote and undeveloped locations of the country and to do all acts and things necessary for or conducive to the promotion of such schools.

- To pursue excellence and set pace in the field of school education;
- To initiate and promote experimentation and innovativeness in education in collaboration with other bodies like the CBSE, NCERT etc., and
- To develop the spirit of national integration and create a sense of 'Indianness' among children.

The category wise break up is as follows:

Boys	Girls	SC	ST	PH
633493	487519	187169	56302	2621

4.4.3 National Council of Educational Research and Training (NCERT)

The National Council of Educational Research and Training was established on September 1, 1961 as an apex national body to lead qualitative changes in school education. NCERT has been playing an advisory role guiding Central and State Governments in formulating Policies, Acts and Government Programmes. NCERT has played a crucial role in the development of National Policies on Education (1968 and 1986) and National Curriculum Frameworks. The researches undertaken by the Council have led to building new perspective of schooling and also provided inputs for formulation of policies and programmes. NCERT has been designing and offering innovative and need-based courses for teachers, teacher educators and counsellors. The curricular and other learning materials developed by the Council have helped in bringing about quality schooling. NCERT has recognition both at national and international levels in the area of school education owing to its work done in the last 50 years. It is a unique institution in India, conducting researches, preparing skilled educational professionals and developing curriculum and curricular materials. The major constituent units of the NCERT are:

- a. National Institute of Education (NIE), New Delhi
- b. Central Institute of Educational Technology (CIET), New Delhi
- c. Pandit Sunder Lal Sharma Central Institute of Vocational Education (PSSCIVE), Bhopal

- d. Five Regional Institutes of Education (RIEs) at Ajmer, Bhopal, Bhubaneswar, Mysore and Shillong.

NCERT has been designated as the academic authority for implementation of the Right of Children to Free and Compulsory Education Act, 2009. NCERT publishes school textbooks, laboratory manual, exemplar materials, teachers' handbooks, supplementary readings, research reports, monographs, educational journals, etc. It published 111 textbooks in Hindi, 119 in Urdu, 102 in English and 9 in Sanskrit.

4.4.4 National Institute of Open Schooling (NIOS)

National Institute of Open Schooling (NIOS) is a premier open distance learning (ODL) institution at school level established in the year 1989 under Ministry of Human Resource Development as an autonomous institution with the authority to conduct examination and certify learners up to pre-degree level as a national level board equivalent to CBSE. It is governed through the society Registration Act of 1860 (Punjab Amendment Act 1957) as extended to the Union Territory of Delhi with the General Body as the supreme body headed by the Hon'ble Minister HRD, Govt. of India as ex-officio President of the society.

While the vision of the Institute is for the sustainable inclusive learning with universal and flexible access to quality school education and skill development; the mission of the institute is providing relevant, continuing and holistic education up to pre-degree level through Open Distance Learning System, contributing to the Universalisation of School Education and catering to the educational needs of the prioritized target groups for equity and social justice.

It is considered to be the largest open schooling system in the world. It offers courses up to pre-degree level ranging from elementary, secondary and senior secondary levels, including vocational courses in diversified areas for skill development of the target groups. It primarily stands for providing education to those who have missed their first chance education through the formal schooling system.

There has been 10-15% annual increase of enrolment during last five years leading to cumulative enrolment of 2.59 million learners with annual intake of 5.60 lakhs during the year 2013-14. It has certified 2.98 million learners at secondary and senior secondary level and 4.7 lakhs at elementary level through its open basic education (OBE) programme since 1991. During the year 2013-14, it had admitted 37082 learners for the vocational courses and certified 16981. It integrates Life Skills in its courseware through execution of Adolescence Education Programme (AEP) in collaboration with UNFPA. It also offers Diploma in Elementary Education (D.El.Ed.) for training of untrained teachers in states of Jharkhand, Meghalaya, Nagaland & Himachal Pradesh to fulfil mandate of RTE. Mukta Vidya Vani, an internet based live audio interactive programme, has been launched and High Definition studio for production of quality digital learning resources has been established.

Launching of Open Educational Resources (OER) in vocational subjects Assessment of 3.39 corers adult neo-literates under Sakshar Bharat Programme of Govt. of India is also undertaken. NIOS also undertakes skill development of drop-out Muslim Girls under Programme “Hunar” for their educational empowerment.

NIOS is a self-sustained institution that strives to take education to the un-reached segment of the population in the country. It is engaged to develop a new paradigm in taking education from classroom to anywhere, from teacher centric to learner centric with use of ICT based instructional system and imbibing the principle with ‘you learn what we offer’ in the formal education system to ‘we offer what you want to learn’.

NIOS has received National & International awards like Commonwealth Awards of Excellence (1999), National Award for e-Governance (2008-09), NCPEDP - MPHASIS Universal Design Awards (2012), Manthan Award South Asia & Asia Pacific (2012), Web Ratna Awards (2012).

4.4.5 National Council for Teacher Education (NCTE)

The National Council for Teacher Education started in 1973 was upgraded with statutory status under the National Policy on

Education (NPE), 1986 in pursuance of the National Council for Teacher Education Act, 1993 (No. 73 of 1993) on the 17th August, 1995.

The main objective of the NCTE is to achieve planned and coordinated development of the teacher education system throughout the country, the regulation and proper maintenance of Norms and Standards in the teacher education system and for matters connected therewith. The mandate given to the NCTE is very broad and covers the whole gamut of teacher education programmes including research and training of persons for equipping them to teach at pre-primary, primary, secondary and senior secondary stages in schools, and non-formal education, part-time education, adult education and distance (correspondence) education courses.

In order to enable the NCTE to perform the assigned functions including planned and co-ordinated development and initiating innovations in teacher education, the NCTE in Delhi as well as its four Regional Committees have administrative and academic wings to deal respectively with finance, establishment and legal matters and with research, policy planning, monitoring, curriculum, innovations, co-ordination, library and documentation, in-service programmes.

The NCTE was superseded by the Central Government in July, 2011, initially for a period of six months, which was extended upto 7th January, 2013. Thereafter the NCTE was reconstituted on 1.5.2013. After reconstitution of the council, the Chairperson, NCTE was appointed by the Central Government in November, 2013 under section 3(4)(a) of the NCTE Act, 1993. No. of Institutions (as on 2013) are :

Level	No. of Institutions	Intake
D.El.Ed.	7,292	4,07,344
B.Ed	6,848	7,94,149
M.Ed.	909	26,836
Others	1,013	67,472
Total Government	1,116	78,017
Private	14,946	12,17,784
Grand total	16,062	12,95,801

4.4.6 National Bal Bhavan (NBB)

The National Bal Bhavan is an autonomous organization fully funded by Ministry of Human Resource Development, which was envisioned by the first Prime Minister of India, late Pt. Jawahar Lal Nehru, dreamt of a place for children where they could come and participate in activities of their choice and learn at their own pace. From its humble beginning in 1956 till the present time the Bal Bhavan movement has spread across the length and breadth of the country and as of now, there are 179 Bal Bhavans and Bal Kendras affiliated to the National Bal Bhavan. These affiliated centres are spreading the Bal Bhavan methodology across the country. In addition, there are 52 Bal Bhavan Kendras at Delhi and also a rural unit at Mandi village at Delhi. They conduct varied creative activities for children specially children from deprived sections of society and also rural children. A Children's Creativity Centre – the first International centre on the pattern of National Bal Bhavan is functioning in Mauritius.

The objectives of National Bal Bhavan are to provide opportunities to children for education and creativity; to provide the children with experiences and activities not otherwise available to them; to offer certain educational services to the local schools in order to enrich their curricular and extracurricular activities; to provide leadership and guidance to teaching towards fostering a creative approach in teaching of art and science; to provide training facilities for recreational workers, and children's Museum personnel; to offer the Nation a prototype comprehensive children's institution, i.e. to establish an ideal Bal Bhavan; to develop personality talents of children through recreation and physical activities; to promote social and cultural contacts amongst the children of all classes and communities; to inculcate such values as would help them to develop modern Indian personality with a scientific temper; to promote the above-mentioned activities as a movement.

Ever since its inception in 1956 Bal Bhavan has been contributing to the creative enhancement of children in the age group 5-16 years. The focal point of the activities is the child and the programmes of National Bal Bhavan are so designed that all round personality development is taken care of. It is the learning by doing experience

given to children at Bal Bhavan which makes the centre very popular among them.

At Bal Bhavan children pursue in a joyful and conducive environment a variety of activities such as the visual arts and crafts, performing arts, science education, literary activities, photography, physical education, home management, publication, Museum techniques etc.. The inner potential of each and every child gets full opportunity of fruition at National Bal Bhavan where irrespective of caste creed / socio economic status they take part in activities and programmes of Bal Bhavan on a common platform.

4.4.7 Central Board of Secondary Education(CBSE)

CBSE was notified in February, 1962 to conduct Public Examination at secondary level and other such examination as it may consider necessary. Currently, CBSE conducts Secondary, Senior Secondary examination and also entrance examinations for medical and engineering. CBSE is a registered Society under Societies Registration Act 1860

CBSE is a self-financial body, generates its own funds through examination fee, text books, and affiliations fee. Its functions are managed by Governing Body and Finance Committee. These bodies are headed by the Chairman, CBSE. Secretary (SE&L) is the Controlling Authority of CBSE who appoints chairman and senior officers of CBSE. CBSE has 15170 affiliated schools as on 30.4.2014.

4.4.8 Central Tibetan schools Administration (CTSA)

The Central Tibetan schools Administration was established as an autonomous organization under the Ministry of Education in 1961 and was registered under the Societies Registration Act XXI of 1860 with the objective to run, manage and assist institutions set up for the education of Tibetan Children living in India. In order to provide modern education to these children while preserving and promoting Tibetan Culture and heritage, schools were set up at the places of concentration of Tibetan population in India.

There are 28 functional schools spread all over India, including 09 (nine) senior secondary (six of which were residential), 05

secondary, 05 middle, 02 primary and 07 grant-in-aid schools. 8321 students have been enrolled including 4849 in day-schools and 3472 in boarding-schools. The schools under CTSA achieved a pass percentage of 99.85 in class X and 83.64 in class XII during the year 2012-13 conducted by CBSE.

5 : Youth Mobilisation



Youth represent the most dynamic segment of the population and are the future of the Nation. India is one of the youngest nations in the world and is expected to have a very favourable demographic profile in near future. In India, youth in the age-group of 15-29 years constitute 27.5% of the population. It is expected that by the year 2020, the population of India would have a median age of 28 years only as against 38 years for US, 42 years for China and as high as 48 years for Japan. This 'demographic dividend' offers a great opportunity. The challenge before the nation is to develop and empower its huge youth population as productive work force. This would, inter-alia, involve, providing the right education, necessary skills to make them employable, to develop them as entrepreneurs, to make them healthy individuals, to inculcate right social and moral values and so on. Most of the Central Ministries/ Departments, State Governments as well as non-Government organisations are currently undertaking various programmes/ activities for development of youth. However, there is need for more focused and coordinated efforts so that the desired objective can be achieved.

1.1 National Youth Policy (NYP) 2014

Ministry of Youth Affairs and Sports (MoYAS) introduced NYP-2014 after extensive consultations with all the stakeholders over last few years. NYP-2014 was approved by the Council of Ministers in January, 2014 and was formally launched in February, 2014, nation-wide, through functions/ rallies organised at over 900 locations, accompanied by a media campaign, with a view to create wide publicity/ awareness for the Policy. The State Governments, Universities, Nehru Yuva Kendra Sangathan (NYKS), National Service Scheme(NSS), public representatives and other non-Government

stakeholders were actively involved in these Programmes. The Policy defines ‘youth’ as persons in the age-group of 15-29 years.

The NYP-2014 proposes a holistic VISION for the youth of India, which is ***“To empower youth of the country to achieve their full potential, and through them enable India to find its rightful place in the community of nations”***.

In order to realise this Vision, the NYP-2014 identifies 5 clearly defined OBJECTIVES which need to be pursued, the PRIORITY AREAS under each of the Objectives and the suggested Policy Interventions under each of these Priority Areas. The objectives and priority areas identified under the NYP-2014 are summarised below:

Objectives	Priority Areas
1. Create a productive workforce that can make a sustainable contribution to India’s economic development	1. Education
	2. Employment and Skill development
	3. Entrepreneurship
2. Develop a strong and healthy generation equipped to take on future challenges	4. Health and healthy lifestyle
	5. Sports
3. Instil social values and promote community service to build national ownership	6. Promotion of social values
	7. Community engagement
4. Facilitate participation and civic engagement at levels of governance	8. Participation in politics and governance
	9. Youth engagement
5. Support youth at risk and create equitable opportunity for all disadvantaged and marginalised youth	10. Inclusion
	11. Social justice

The underlying philosophy behind the above framework is as follows:

- a) Objectives 1 and 2 aim at making the youth a productive force by focusing on their education, health, skill development and employment.
- b) Objective 3 aims at instilling in the youth the right social and moral values and the spirit of community service in order to make them good human beings and good citizens.

- c) Objective 4 highlights the need to effectively engage with the youth and to involve them in the politics and governance, since the youth are the future of the Nation.
- d) Objective 5 recognises the fact that the youth are not a homogenous group and that there are sections of youth requiring special attention. This is an overriding objective calling upon all the stakeholders to take up programmes for supporting and developing youth requiring special attention.

5.1.1 Implementation: The policy interventions recommended under the NYP-2014 are required to be made by the concerned Central Ministries/ Departments as well as other stakeholders. Accordingly, a Plan of Action (PoA) is required to be prepared for implementing the Policy, by involving all Ministries/ Departments. NYP-2014 also recommends that the State Governments should also develop State Youth Policies to take care of specific needs and concerns of the youth of the respective States. The Policy suggests that the Plan of Action (PoA) should also suggest setting up of a Coordinating Mechanism at Centre and State levels, with MoYAS playing a facilitating & coordinating role.

5.1.2 Monitoring and Review: NYP-2014 suggests specific Leading (short-term) and Lagging (long-term) performance indicators for measuring success of the Policy. NYP-2014 mentions that the Policy shall be reviewed every 5 years and also suggests that the MoYAS shall publish a '*Status of the Youth Report*' every 2 years. All these measures will help in evaluating the effectiveness of the Policy and its implementation and in making necessary and timely course corrections.

5.1.3 The NYP-2014 makes some over-arching recommendations for effective implementation of the Policy. These are summarised as:

- a) **GOI needs to increase investment in the youth to capture the demographic dividend:** The current level of spending/ investment on youth is grossly inadequate and needs to be increased.
- b) **Mainstreaming youth issues in the development process:** This could be done in several ways, some of which could be (i) building youth development into RFDs (Results-Framework Documents), (ii) Key Ministries developing a 'Youth Connect' Programme.

- c) **Discuss and Define the Role of all stakeholders:** The role could be on a “Doer” responsible for creating programmes or that of “Enabler” who create a supporting environment for action. MoYAS has an important role to play as an Enabler.
- d) **Leverage various channels for effective youth engagement and participation:** There could be several channels, but it should essentially involve (i) use of ICT to engage with the youth, and (ii) promoting youth development through existing organisations.

A YOUTH COUNCIL has been constituted at the national level (under chairmanship of Minister for Youth Affairs and Sports), inter-alia, to monitor the implementation of NYP-2014 and the first meeting of the Council has been held on 05.05.2014.

5.2 Nehru Yuva Kendra Sangathan (NYKS)

With Objective *to develop the personality of the youth and to engage them in nation-building activities*, NYKS was launched in 1972, is one of the largest youth organisations in the world. NYKS currently has about 8 million youth enrolled through 2.62 lakh youth clubs/mahila mandals. NYKS has presence in 623 Districts through Nehru Yuva Kendras.

The areas of focus of the NYKS activities include education, health and sanitation, environment, awareness on social issues, women empowerment, thrift and cooperation, skill development and self-employment, entrepreneurship development, civic education, disaster relief and rehabilitation, etc. The youth associated with Nehru Yuva Kendras are not only socially aware and motivated but are also inclined towards social development work through voluntary efforts.

The activities of NYKS are carried out through a District Youth Coordinator in each District and 2 National Youth Corps (NYC) volunteers in each Block. In addition, NYKS has 28 Zonal Offices at State Level besides its National Headquarter at New Delhi.

5.2.1 Performance of Core Programmes of NYKS during 2013-14:

5.2.1.1 Youth Club Development Programme (YCDP): A 5-day programme involving 10 campaigners from 50 Youth Clubs to strengthen the existing network of Youth Clubs. The team members meet and interact with youth leaders, Gram Panchayat Pradhans &

Members and other opinion leaders in the villages. Rs.15,000/- was allocated for conducting each Programme. During 2013-14, total 2,465 Programmes were conducted, in which 2,86,995 youth volunteers participated.

5.2.1.2 Training on Youth Leadership and Community Development (TYLCD) which aims at enhancing capacity of young people to take leadership to help others to live a meaningful life and contribute towards nation-building. This is a 3-day programme conducted at Block level, involving 40 participants from 20 Youth Clubs. Rs.27,500/- was allotted for conducting each Programme. During 2013-14, total 2,424 Programmes were conducted, in which 98,584 youth club members participated.

5.2.1.3 Theme-based Awareness and Education Programme which aims at creating awareness among youth about the importance of health & family welfare, sanitation, environment conservation and other issues of social concern. This is a one-day programme, involving 80 youth from a cluster of 20 Youth Clubs. Rs.8,000/- was allotted for conducting each Programme. During 2013-14, total 5,042 Programmes were conducted, in which 3,77,568 youth club members participated.

5.2.1.4 Promotion of Sports (Sports Material to Youth Clubs) which aims at development of sports culture among the rural youth. Assistance is provided to the youth clubs for purchase of basic sports materials for sports activities. Rs.1,000/- was allotted for providing sports kit to each of the Youth Clubs. During 2013-14, 23,724 clubs were provided sports materials.

5.2.1.5 Skill Up-gradation Training Programme (SUTP) for Women to develop vocational skills of rural young women and to enable them to supplement their family income as well as enhancing their self-esteem. The endeavour is to enhance their employability by running a variety of employable skill-based training courses with the support of Master Trainers and reputed/ recognized Skill Development Agencies. In each course, 15-20 women are enrolled for skill training. The courses are identified as per local needs of the participants. The budget provision was kept at Rs. 11,400/- for a 3-month course and

Rs. 7,600/- for a 2-month course. During 2013-14, 6,934 skill upgradation training programmes were organised, in which 1,36,955 women participated.

5.2.1.6 Promotion of Folk Art and Culture with special reference to folk theatre, folk songs, folk dances, folklores etc. This is a one-day programme, organised at District level, giving opportunity to minimum 120 youths to display their folk art and culture. The budget provision was kept at Rs. 20,000/- for each District. During 2013-14, 596 programmes were organised, in which 1,54,718 youth participated.

5.2.1.7 Observance of Days of National and International importance: The Programme aims at generation of awareness about critical issues of national and international importance. Each of 623 district NYKs is required to observe a minimum of 10 days of national and international importance, including National Youth Day & Week. Rs. 40,000/- was provided to each district NYK for the purpose. During 2013-14, 6,106 programmes were organised, in which 9,29,960 youth participated.

5.2.1.8 District Youth Convention and Yuva Kriti: The Programme is organised annually by all District NYKs to provide opportunity and platform to rural youth leaders to display products and express themselves, share experiences and suggest best practices for the youth empowerment. It provides opportunity and platform to rural artisans to exhibit their produces and get motivation for further skill up-gradation. This is a one-day programme in which minimum 100 youths from equal number of Youth Clubs are involved. For organising the Programme, a budgetary support of Rs. 30,000/- per district was provided. During 2013-14, 580 programmes were organised, in which 1,56,525 youth participated. In addition, **State Youth Convention and Yuva Kriti** were organised in 25 States, in which 6,322 youth participated. This is a 3-day programme, in which minimum 175 youth are expected to participate.

5.2.1.9 Awards to Outstanding Youth Clubs to recognise the voluntary services rendered by the youth clubs and to motivate them to undertake community development & welfare activities. Each of

the 623 District NYKs and each State/ UTs confer an award on the best outstanding youth clubs. The Award comprises of a Certificate and the Award money (Rs. 10,000/- for District Level Award and Rs.25,000/- for State Level Award). In addition, 3 Awards are conferred at National Level (Rs.1,00,000/-, Rs.50,000/- and Rs.25,000/-). During 2013-14, Awards were conferred on youth clubs in 486 Districts and 21 States, in addition to 3 Awards at the National Level.

5.2.2 Programmes organised with funding from National Programme for Youth & Adolescent Development (NPYAD) during 2013-14:

5.2.2.1 National Integration Camps (NICs) is a 5-day residential programme to promote national integration by bringing together 150-250 youth from different parts of the country on common platform, giving them opportunity to understand cultural heritage of the country and enabling them to recognize threads of unity in diversity which bind all Indians together. During 2013-14, 94 NICs were organised by NYKS, in which 17,200 youth participated.

5.2.2.2 Youth Leadership and Personality Development Programme (YLPDP) is a 30- day residential programme to train the 30 youth leaders and to equip them with necessary qualities to assume responsibility for the village and the youth clubs and to act as catalysts for socio-economic and political-cultural development of the villages. The Programme creates awareness on social, economic, cultural and political aspects of the rural communities. During 2013-14, 34 Programmes were organised in which 1,020 youth were given extensive leadership training.

5.2.2.3 Life Skill Training for Adolescents (Empowerment of Adolescents) is imparted to develop among adolescents the behaviour which will empower them to make healthy choices, to strengthen their Life Skills to cope up with the risky situations that they encounter in their lives, to enhance knowledge to protect them from HIV, to manage adolescent reproductive sexual health issues and concerns and to mobilise their collective potential to solve these issues.

5.2.2.4 Adventure Camps (Promotion of Adventure) is a 7-day residential camp for 25 participants to encourage spirit of adventure and risk-taking amongst youth, building capacity of the youth to tackle situations during national calamities & other emergencies and inculcating spirit of appreciation of nature with emphasis on ecology and conservation of natural resources. During 2013-14, the Ministry sanctioned funds for 100 such Programmes.

5.2.3 Programmes organised in collaboration with other Ministries/ Organisations:

5.2.3.1 Tribal Youth Exchange Programme (TYEP): The Programme is being organised every year in collaboration with and funding from the Ministry of Home Affairs. In this Programme, tribal youth drawn from areas affected by extremist activities (out of 30 focused Districts from the list of 106 Districts covered under security related expenditure Scheme of Ministry of Home Affairs in 4 States, namely, Bihar, Chhattisgarh, Jharkhand and Odisha) and taken to other parts of the country to sensitize them to rich cultural heritage of the Country and to enable them to appreciate the concept of unity in diversity, to expose them to development activities and technological/ industrial advancement in other parts of the country, to enable them to develop emotional linkage with the people in other parts of the country and to develop their personality by enhancing their understanding of the core life skills, identifying their skill development needs and providing them necessary career counselling. During 2013-14, the 6th Tribal Youth Exchange Programme was organised at 5 locations, namely, Nagpur (Maharashtra), Thiruvananthapuram (Kerala), New Delhi, Bhubaneswar (Odisha) and Bengaluru (Karnataka). Total, 1,247 tribal youth participated in the Programmes. The tribal youth also got an opportunity to call on the Hon'ble President of India.

5.2.3.2 Adolescent Health and Development Project (AHDP): The Programme is being organised with funding from UNFPA. The objective of the Project is to empower out-of-school adolescents with (i) life skills focused experiential learning on reproductive and sexual health issues in a gender-sensitive manner, (ii) linkages with education

and skills building institutions for better employability; and (iii) improved access to youth friendly and gender-sensitive services in public and private sectors. The Project is being implemented in 10 identified Districts of 5 States (Maharashtra, Rajasthan, Madhya Pradesh, Odisha and Bihar) on pilot basis. Adolescents are organised in Teen Clubs and the extension work is done through trained Peer Educators. The implementation of CP-7 (Country Plan-7) phase has been completed and the implementation of CP-8 has been started during 2014. Currently, teen clubs are being formed/ revived, peer educators are being selected and capacity building programmes for NYKS staff and other functionaries are being taken up.

5.2.3.3 Collaboration with Tata Consultancy Services (TCS) on Employability Training and Skill Enhancement Programme for Youth:

This Programme is being taken up by TCS as part of their CSR initiative. Under the Programme, TCS provides a free training of about 80-100 hours with the objective of enhancing employability of youth by improving their English communication skills, corporate etiquette, analytical thinking, problem-solving skills, basic computer skills and personality development. 346 youth were trained through 9 programmes in the first batch. Currently, the process of finalisation of MoU between NYKS and TCS is under way, so that the programme can be continued in future on sustainable basis.

5.2.4 Programmes/ Activities in coordination with Development Departments/ Agencies:

5.2.4.1 NYKS organises various Programmes in coordination with various Development Departments/ Agencies. District NYKs and the NYCs volunteers closely work with other Development Departments/ Agencies and carry out the activities by actively involving the youth clubs/ mahila mandals. During 2013-14, major achievements were as follows:

Programme			Unit of Measurement	Achievement
Linking Youth Club Members with Employable Skill Development			No. of Youth	342154

Trainings		
Formation of SHGs	No. of SHGs	24139
Sapling Plantation and their survival	No. of Plants	5479574
Blood Donation	No. of Units	87559
Enrollment of Voluntary Blood Donors and their Blood Grouping	No. of Youth	155195
Motivated Girls and their Parents to postpone her marriage till attaining 18 yrs.	No. of Girls	132744
Immunization of Pregnant Mothers	No. of Pregnant Mothers	141368
Facilitated Institutionalized Deliveries	No. of Women	108656
Immunization of Children (0-5 yrs.)	No. of Children	252410
Cataract (Eye) operations	No. of Patients	46365
Providing access of iron Folic Acid Tablet to Adolescent Girls	No. of Adolescent Girls	269057
Health Check-up Camps (DOTs, Hypertension, Diabetics and others)	No. of Camps	58408
Collection of Polythene Bags to generate awareness and facilitate in protecting environment	No. of Villages	34792
Enrollment of children in schools	No. of Children	220744
Motivation resulting into construction of Toilets	No. of Toilets	36483
Facilitating into getting Voters ID Cards	No. of Persons	302251

5.2.4.2 Other Achievements/ Developments during 2013-14:

- Use of Information Technology (IT) for improving functioning:**
 During 2013-14, NYKS launched an ONLINE platform for Registration of Youth Clubs, thereby taking itself closer to the youth and at the same time, bringing transparency in the entire process. NYKS has also set up an MIS for online monitoring of all its activities. NYKS is also in the process of deploying Tally Software for computerization of accounts all over the country.
- National Award for Outstanding Services in the field of Prevention of Alcoholism and Substance Abuse:** Hon'ble President of India

conferred the first National Award for Outstanding Services in the field of Prevention of Alcoholism and Substance (Drug) Abuse, 2013 to Nehru Yuva Kendra, Thoubal (Manipur), in the category of Best Awareness Campaign, at Vigyan Bhawan, New Delhi on 26th June, 2013 on the occasion of International Day Against Drug Abuse and Illicit Trafficking. The Award was for successfully implementing a year-long Pilot Project titled *“Awareness and Education for the Prevention of Drug Abuse & Alcoholism”*, with the financial support of Ministry of Social Justice & Empowerment. The Project was implemented in 3,000 villages under 75 Blocks of 10 Districts in Punjab and 750 villages under 25 Blocks in 7 Districts in Manipur.

5.3 National Youth Corps (NYC) Scheme

NYC Scheme is a Scheme of the Department, but the same is implemented through NYKS. Under the Scheme, youth in the age-group of 18-25 years are engaged as volunteers to serve upto maximum 2 years in nation-building activities. The minimum qualification for NYC volunteers is Class-X passed and they are paid honorarium @ Rs.2,500/- per month. The selection of NYC volunteers is done by a Selection Committee, headed by District Collector/ Deputy Commissioner of the concerned District. The volunteers are given 10-day Refresher Training at the time of joining and 5-day Refresher Training in the second year of their tenure. At the end of the 2-year tenure of NYC volunteers, NYKS provides them skill development training so that they can get some employment after their term with NYKS ends. After 2 years, another set of NYC volunteers are recruited.

NYC volunteers are deployed normally @2 volunteers per Block. They act as an extended arm of NYKS in the Block and play an active role in implementation of various programmes and initiative of NYKS. The Scheme is being implemented in all 623 District where NYKS has presence. During 2013-14, total 12,383 NYC volunteers were deployed, of which 2,103 volunteers left due to various reasons.

5.4 National Service Scheme (NSS)

NSS was launched in 1969 with the primary objective of developing the personality and character of the student youth through

voluntary community service. The ideological orientation of the NSS, 'Education through Service' is inspired by the ideals of Mahatma Gandhi with the motto **"NOT ME, BUT YOU"** placing the 'community' before 'self'. NSS attempts to establish meaningful linkages between 'Campus and Community', 'College and Village' and 'Knowledge and Action'. NSS started with 37 Universities, about 40,000 volunteers spreading to 336 Universities, 15,908 Colleges/ Technical Institutions and 11,809 Senior Secondary Schools about 34.89 lakh volunteers. Since inception, over 4.25 crore students have benefited from NSS and NSS has adopted 38097 villages/slums.

The design of the NSS envisages that each educational institution covered under the Scheme has at least one NSS unit comprising of 100 student volunteers (normally), led by a teacher designated as Programme Officer (PO). Each NSS unit adopts a village or slum for taking up its activities. An NSS volunteer is required to undertake the following work/ activities:

- The work is undertaken in villages/ slums adopted by NSS unit or in school/ college campuses putting in minimum 120 hours of service per year for two years; and
- To participate in 7 days Special Camp once during the 2-year period.

NSS continues to evolve to the needs of the community through adult literacy, pre-school education, continuing education of school drop-outs, programmes on eradication of social evils, immunisation, blood donation, health education, AIDS awareness, plantation of trees and their preservation/ upkeep, cleaning and maintenance of streets, drains, service in hospitals, institutions for disabled persons, orphanages, old-age homes, women welfare institutions, awareness generation regarding women's rights, imparting skill training to women, educating people about improved agricultural practices, guidance in animal resource development, working with local authorities in rescue and relief operations.

NSS also undertakes

- Participation in Republic Day Parade Camp.
- Adventure Activities.
- Organisation of NSS Mega Camps, North East Youth Festivals.

- Organisation of 'Suvichar' and 'Youth Convention' events during the National Youth Festival, and
- Self-Defence Training for NSS Volunteers.

NSS is a Centrally Sponsored Scheme and funding is provided for running of NSS activities @Rs.250 per volunteer per annum for regular NSS activities and @Rs.450 per volunteer (once in two years) for special camping activities. For capacity building 7-day Training is being imparted to the Programme Officers under NSS to enable them to discharge their duties effectively.

During 2013-14, 14.75 lakh saplings were planted, 3.79 lakh units of blood donated and pulse-polio drops to 3.71 lakh children were administered. During the year, the Ministry of Youth Affairs and Sports (MoYAS) signed an MOU with Tata Institute of Social Sciences (TISS) and launched a Pilot Project called National University Students Skill Development (NUSSD) Project, in 10 Universities for providing Skill Training to 50,500 NSS volunteers over 3-year period. This Project will enable NSS volunteers to secure a Vocational Certificate/ Diploma while, at the same time, pursuing their academic course. 3,000 students have been enrolled for the Course so far.

The Ministry had introduced a Mechanism for setting up of Self-Financing Units (SFUs) of NSS so that the expansion of NSS is not constrained by lack of adequate Government funding. During the year, the Ministry simplified Operational Guidelines for setting up such units, resulting in better response. So far, about 1.66 lakh volunteers have been enrolled under SFUs. Further, in order to incentivize NSS to attract more students, the Ministry has been making efforts to get NSS introduced in educational institutions as an 'Elective Subject with credits'. During the year, in the meeting of Central Advisory Board on Education (CABE) held on 10.10.2013, it was decided that the UGC and AICTE would explore to introduce NSS as an elective subject (with credits), from next Academic Session.

The Indira Gandhi National Service Scheme (IGNSS) Awards for the year 2012-13 were conferred by the Hon'ble President of India on 19th Nov, 2013 in the following categories: (i) Best University & Upcoming University (ii) 10 Best NSS Units & their Programme Officers (iii) 30 Best NSS Volunteers.

5.5 Rajiv Gandhi National Institute of Youth Development (RGNIYD)

Rajiv Gandhi National Institute of Youth Development (RGNIYD), Sriperumbudur, Tamil Nadu, as an 'Institute of National Importance' by virtue of enactment of RGNIYD Act, 2012 with the vision to globally recognise and acclaim centre of academic excellence in youth development. The RGNIYD was set up in 1993 under the Societies Registration Act, 1975 and was conferred the status of 'Deemed to be University' under 'De-novo' category in 2008.

RGNIYD functions as a vital resource centre with its multi-faceted functions of offering academic programmes at Post Graduate level encompassing various dimensions of youth development, engaging in seminal research in the vital areas of youth development and coordinating Training Programmes for state agencies and the officials of youth organisations, besides the extension and outreach initiatives across the country.

The Institute functions as a think-tank of the Ministry and premier organization of youth-related activities in the country. As the apex institute at the national level, it works in close cooperation with the NSS, NYKS and other youth organizations in the implementation of training programmes. The Institute is a nodal agency for training youth as a facilitator of youth development activities in rural, urban as also tribal areas. The RGNIYD serves as a youth observatory and depository in the country thereby embarking on youth surveillance on youth-related issues. It has a wide network with various organizations working for the welfare and development of young people and serves as a mentor.

5.6 National Programme for Youth and Adolescent Development (NPYAD)

National Programme for Youth and Adolescent Development (NPYAD) is an "Umbrella Scheme" operational since 1st April, 2008 under which financial assistance is provided to Government/ non-Government organisations for taking up youth and adolescent

activities. The assistance under NPYAD is provided under 5 major components, namely,

- a) Youth Leadership and Personality Development Training
- b) Promotion of National Integration (National Integration Camps, Inter-State Youth Exchange Programmes, Youth Festivals, multi-cultural activities, etc.)
- c) Promotion of Adventure; Tenzing Norgay National Adventure Awards
- d) Development and Empowerment of Adolescents (Life Skills Education, Counselling, Career Guidance, etc.)
- e) Technical and Resource Development (Research and Studies on Youth issues, Documentation, Seminars/ Workshops)

A National Youth Festival is organised during 12-16 January every year in one of the willing States for which a financial assistance upto Rs.2.00 crore is provided for various cultural programmes (both competitive and non-competitive), youth convention, suvichar, exhibitions, adventure programmes, etc. About 5,000 youth come from all the States/ UTs to participate in the Festival. The 18th National Youth Festival was organized at Ludhiana, jointly with the Govt. of Punjab during 12-16th January, 2014.

National Youth Awards are conferred every year on young individuals and NGOs for excellent work done for nation-building/ community service. A cash award of Rs.40,000/- and a certificate of honour is given to each individual awardee. The award to voluntary youth organisations comprises a certificate and an amount of Rs.2,00,000/- This year, National Youth Awards were conferred on 32 youth and 2 Organizations from different States/ UTs.

A separate North East Youth Festival was decided to be conducted, is a 100 % central funding event, restricted upto Rs. 1.00 crore from 2008. The Festival is a three day event comprising delegates each from all the North East States and with contingents from NYKS and NSS hosting Competition Events, Non-competition events, Food Festival, Adventure activities and one musical night.

The Tenzing Norgay National Adventure Award is the highest national recognition for outstanding achievements in the field of

adventure on land, sea and air. A cash Award of Rs.5.00 lakh, a statue and a certificate of honour is given to each Awardee.

5.7 International Cooperation (IC)

To create an international perspective among youth in collaboration with other countries and international agencies/ organizations on various youth issues, various activities is being undertaken:

- Exchange of Youth Delegations with friendly countries on reciprocal basis for promoting exchange of ideas, values and culture amongst the youth of different countries and also to promote peace and understanding.
- Annual Youth Exchange Programmes with China (100-member delegations) and South Korea (20-member delegations) continuing since 2006. In addition, a 100-member youth delegation from Bangladesh has been visiting India since the year 2012.
- During 2013-14, MoUs were signed with Kuwait and Bahrain.

5.8 Youth Hostels

Youth Hostels are built to promote youth travel and to enable the young people to experience the rich cultural heritage of the country. The construction of the Youth Hostels is a joint venture of the Central and State Governments. While the Central Government bears the cost of construction, the State Governments provide fully developed land free-of-cost, with water supply, electricity connection and approach roads. Youth Hostels are located in areas of historical and cultural value, in educational centres, in tourist destinations, etc. Youth Hostels provide good accommodation for the youth at reasonable rates.

So far, 82 Youth Hostels have been constructed across the country and 2 Youth Hostels, namely, at Roing (Arunachal Pradesh) and Thoubal (Manipur), are in advanced stage of completion. Out of 82 Youth Hostels, 11 Hostels have been transferred to Nehru Yuva Kendra Sangathan (NYKS), Sports Authority of India (SAI) and the concerned State Governments for optimum use for youth and sports

development and the remaining 71 Hostels are under direct control of the Ministry.

5.9 Scouting and Guiding Scheme

The Scheme of Scouting and Guiding, a Central scheme, launched in 1980s, to promote the international Scouts and Guides movement aimed at building character, confidence, idealism and spirit of patriotism and service among young boys and girls. Scouting and Guiding also seeks to promote balanced physical and mental development among the boys and girls.

Under the Scheme, financial assistance is provided for various activities such as organization of training camps, skill development programmes, holding of jamborees, etc., to Scouting and Guiding Organisations. The activities, inter alia, include programmes related to adult literacy, environment conservation, community service, health awareness and promotion of hygiene and sanitation.

During the year 2013-14, an additional requirement was laid down, to the effect that the assistance shall be given to only those Scouting and Guiding Organisations who comply with the 'Good Governance' norms made applicable in case of various Sports Federations by the Department of Sports. A regular grant of Rs.15 lakhs for the year 2013-14 was released in addition to Rs.48 lakhs as 2nd instalment of 2012-13, to Bharat Scouts and Guides, New Delhi, for conducting various Scouting and Guiding activities.

During the year, 4 National Integration Camps, involving 1,358 Scouts and Guides, 5 Cub-Bulbul Utsav at regional level involving 800 Cubs and Bulbuls and Tribal-Gramin Youths Meets etc., were organised. 473 persons were trained in disaster preparedness and rescue and rehabilitation activities. 35 persons were trained on Wireless Radio for disaster relief operations. 2,080 persons were trained in leadership and vocational skills through 38 courses organized at National level. 4,035 persons were exposed to adventure activity through 22 Programmes conducted at Pachmarhi. Scouts and Guides also rendered services for more than one lakhs hours to community through service camps organized at Uttarakhand during "Cloud Burst" and various festivals all over the country. More than 200

young people from India participated in International camps and gatherings held in Japan, Sri Lanka, Nepal, Saudi Arabia, Austria and Bangladesh, with Sponsorships/ Scholarship programmes through Bharat Scouts and Guides.

6 : Promotion of the Status of Women

Women constitute 48.5% of the country's total population. The Constitution of India has not only accorded equality to women but also empowered the State to adopt measures of positive discrimination in their favour.

Drawing strength from the Constitutional commitments, Government of India has been constantly endeavouring to ensure all round well-being, development and empowerment of women. The Ministry of Women and Child Development (MWCD) has been striving for the holistic empowerment of women by reviewing the laws to remove gender bias, bringing new legal measures aimed at gender justice and implementing programmes to achieve social and economic empowerment of women.



In the active politics of the Country, the situation of women in parliament has not upgraded substantially. Starting from 24 women member in the first Lok Sabha, the present Loka Sabha has 62 women members, constituting only 11% share.

6.1 Legislations and Policies relating to Women Welfare

Various legislations and policy measures that have been put in place for addressing violence against women in both and public and private sphere are as follows:-

6.1.1 Sexual harassment of women at Workplace (Prevention, Prohibition and Redressed) Act, 2013-Sexual harassment at the workplace is a violation of women's right to gender equality, life and liberty. The Sexual harassment of women at Workplace (Prevention, Prohibition and Redressed) Act, 2013 and the Rules made there under were brought into force on 9th December, 2013. The Act covers all women, irrespective of their age or employment status and

protect them against sexual harassment at all workplaces both in public and private sector, whether organized or unorganized.

6.1.2 Criminal Law Amendment Act, 2013:- In order to prevent violence against women comprehensive amendments were introduced in the Indian Penal Code, Code of Criminal Procedure and the Indian Evidence Act through the Criminal Law (Amendment) Act, 2013. Under it, provisions relating to rape and sexual assault were made more stringent, new offences such as acid attack, sexual harassment, stalking, disrobing and voyeurism were inserted and duty was cast on all hospitals to provide free medical treatment to women victims of acid attack and rape.

6.1.3 Protection of Women from Domestic Violence Act, 2005:- to address the issue of domestic violence, the Protection of women from domestic Violence Act 2005 (PWDVA) came into effect in October, 2006. The law defines domestic violence to include all acts of omission and commission that cause injury to a women's physical or mental health and includes specific forms of violence such as physical, sexual, verbal, emotional and economic abuse. It seeks to provide relief to women in the form of protection orders, residence order, monetary relief, custody order and compensation orders. It also provides for an inbuilt mechanism to facilitate the entire system of access to justice.

6.1.4 Indecent Representation of Women (Prohibition) Act, 1986:- was enacted with the specific objective of prohibiting the indecent representation of women through advertisement, publication, writing, and painting or in any other manner. It defines "indecent representation of women" to mean the depiction of the figure/form/body/any part thereof, of a women which is indecent or derogatory to or denigrating women or is likely to injure public morality. It prohibits such representation in any form in any advertisement, publication, etc. and also prohibits selling, distributing, circulation of any books, pamphlets, and such other material containing indecent representation of women.

6.1.5 Dowry Prohibition Act, 1961:- Recognizing the need to address the social evil of dowry, the dowry Prohibition Act was enacted in 1961.

The Act defines “dowry” and penalizes the giving, taking and demand for dowry and also lays down a built-in implementation mechanism in the form of Dowry Prohibition Officer to ensure effective and efficacies enforcement of the law.

6.1.6 New initiative:- An Umbrella scheme for Protection and Empowerment of Women is being formulated with the sub-schemes-(i) SAAHAS (ii) IGMSY (iii) NMEW (iv) Assistance for Construction of integrated shelter/home for vulnerable and marginalized women including single and destitute women. SAAHAS aims to put in place an integrated programme for providing immediate care, shelter and women affected by violence.

6. 2 National Mission for Empowerment of Women (NMEW)

National Mission for Empowerment of Women (NMEW) was launched by Government of India on 8th March, 2010 with a view to empowering women holistically. The Mission aims to achieve empowerment of women by securing inter-sectorial convergence of schemes/programmes of different Ministries/Department of Government of India as well as State Governments. It has the mandate to strengthen and facilitate the process of co-ordinating all the women’s welfare and socio-economic development programmes.

Under the Scheme of NMEW, a **National Resource Centre for Women (NRCW)** has been set up with 8 functional domains, namely, Poverty Alleviation, Social Empowerment, Health and Nutrition, Gender Budgeting, Gender Rights, Vulnerable and Marginalised Groups, Media and Communication and Information Technology. In each of these domains, gender experts with relevant academic and field experience have been engaged. NRCW acts as a programme implementation and technical support for addressing various issues related to women and facilitating inter-sectorial convergence across different Ministries. It also provides technical support to the State Resource Centres for Women constituted as part of the Mission.

The **State Mission Authority (SMA)**, which is the highest policy making body at the state level for the NMEW, has been constituted in 27 States and 5 UTs for finalizing the priorities of the States/UTs and

for operationalizing the women empowerment agenda for alignment with the NMEW's Action Plan. The **State Resource Centre for Women (SRCW)**, the body responsible for planning, execution and monitoring of the Mission's vision and activities at the state level, has been set up in 31 States and UTs. Each SRCW has a team of 7 personnel and these positions are fully funded by the Centre.

Poorna Shakti Kendras (PSK), Since its operationalization in 2011-12, NMEW has been working on the mandate to strengthen the processes that promote all round development of women. One of the important initiatives is to set up convergence cum facilitation centres for women at the district and sub-district levels to improve access to government schemes and programmes spread across different departments. These centres have been named as *Poorna Shakti Kendra* or the PSK. Village coordinators at the Kendras reach out to the women with the motto, "***Hum Sunenge Naari Ki Baat!***"

The first PSK model was operationalized in District Pali, Rajasthan on 16th Sep, 2011. The second such pilot was operationalized in District Kamrup (Metropolitan), Assam on 23rd Dec, 2011. Total 32 PSK Projects have been implemented across the country; namely, in Medak (A.P.), Aurangabad, Nalanda & Begusarai (Bihar), Gulbarga (Karnataka), Dhar (M.P.), Daman & Diu, Salem (TN), Jaintia Hills (Meghalaya), Champai (Mizoram), Haridwar (Uttarakhand), West Singhbhum (Jharkhand), Solan (H.P.), Kohima (Nagaland), Mewat, Kalnaur Block in Rohtak District & Panipat (Haryana), West Tripura (Tripura), Kannauj & Banda (U.P.), Malda (WB), Pali & Bundi (Rajasthan), Chandigarh (Chandigarh), Kamrup (Assam), Bilaspur (Chhattisgarh), Kulgam District (J&K), Sabarkantha (Gujarat), Nayagarh (Odisha), Pune (Maharashtra), East Sikkim (Sikkim) and Puducherry (Puducherry).

A **National Plan of Action** for improving **Child Sex Ratio (CSR)** was developed through a series of consultations with other Ministries, States, Districts and CBOs/NGOs. The different stakeholders have agreed upon their respective role for implementing this plan with a special focus in 100 Gender Critical Districts. The Plan has been

approved by the Inter-ministerial Coordination Committee under NMEW headed by Cabinet Secretary.

52 innovative **Thematic Convergence Projects** have been approved for funding during 2013-14, across the country, on diverse women's issues.

Ahimsa Messenger, a programme to combat violence against women was kicked off on 31st August, 2013 with a large scale mobilisation of adolescent girls, has been anchored by the Mission through development of Training Modules, Information Education communication (IEC) kit, training & dissemination strategy for its operationalization on a nation-wide canvass.

A number of Manuals, Compendium and Research Studies with a thrust on convergence of efforts towards holistic empowerment of women have also been developed and undertaken. A series of sensitization and capacity enhancement programmes have been undertaken through-out the country to deal with gender issues. Similarly, participatory community engagement tools have been developed, demonstrated and replicated for engaging youth, women and girls and others for advocacy and awareness raising on critical women's issues through initiatives like Nari ki Chaupal, Beti Janmotsav etc.

6.3 Schemes for Women

6.3.1 Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) – SABLA

Sabla – a comprehensive scheme called Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (AGs)– was introduced in 2010. *Sabla* is initially being implemented in 200 selected districts across the country. In these districts, *Sabla* has replaced the Nutrition Programme for Adolescent Girls (NPAG) and Kishori Shakti Yojana (KSY). In the non-*Sabla* districts, KSY continues as before. The scheme has two major components i.e., Nutrition and Non-Nutrition Component. Nutrition is being given in the form of Take Home Ration or Hot Cooked Meal for 11-14 years out-of-school girls and 14-18 years to all AGs (out-of-school and in-school girls). In the Non-Nutrition Component, the out-of-school Adolescent Girls 11-18 years

are being provided Iron Folic Acid supplementation, Health check-up and Referral services, Nutrition & Health Education, Counselling/Guidance on family welfare, Adolescent Reproductive Sexual Health (ARSH), child care practices and Life Skill Education and accessing public services and 16-18 year old AGs are also being given vocational training. SABLA is being implemented by States Governments/UTs, with 100 percent financial assistance from the Central Government for all inputs other than nutrition provision for which 50 percent Central Assistance to States is provided. Anganwadi Centre is the focal point for delivery of all services under the scheme. The Scheme also envisages Vocational training for girls aged 16 and above, under the National Skill Development Programme. Till the end of March, 2014, a total of 1.11 lakh adolescent girls have already been provided vocational training as part of Sabla. Upto 72,876 adolescent girls have been mainstreamed to the school system.

6.3.2 Indira Gandhi Matritva Sahyog Yojana (IGMSY)

Indira Gandhi Matritva Sahyog Yojana (IGMSY) a 100% Centrally Sponsored Scheme, was launched in 2010 on pilot basis in 53 districts across the country. The scheme contributes to better enabling environment by providing cash incentives for improved health and nutrition to pregnant and lactating women. The scheme also attempts to partly compensate for wage loss to pregnant and lactating (P&L) women both prior to and after delivery of the child. In the scheme each P&L mothers (who are 19 years of age or above and upto two live children only) in selected districts receive a total cash incentive of Rs. 6,000 in their bank or post office accounts in two instalments i.e Rs. 3000 each at the end of 7th month of pregnancy and after completion of 6 months of birth, upon fulfilment of specified maternal and child health conditions.

The scheme is covered under Direct Benefit Transfer (DBT) programme commenced from 01.01.2013. At present 16 districts in 15 States are covered under IGMSY for implementation of DBT in Phase-I and Phase –II.

In the year 2013-14, the scheme has a budgetary outlay of Rs. 500 crore with a target of 10.47 lakh pregnant and lactating mothers. As on 31.03.2014, Rs. 232.05 crore has been released to the State

Government/ UT Administration. As per the reports submitted by the States, 3.86 lakh beneficiaries have availed the cash benefit under the scheme.

6.3.3 Gender Budgeting Scheme

Gender Budgeting (GB) is a powerful tool for addressing gender based disparities and achieving women empowerment through mainstreaming gender concerns across sectors. Gender Budgeting enables maintaining a gender perspective at all stages, including formulation of policies and schemes, allocations of resources, implementation, monitoring and review. It leads to translation of gender commitments into budgetary commitments. A Plan Scheme for Gender Budgeting was introduced in the year 2008 during the 11th Plan period, for conducting trainings/workshops, capacity building, research, surveys, impact analysis etc. The objective is to orient various stakeholders including officers across different levels of governance to the concepts and tools of Gender Budgeting in order to strengthen their capacities and build expertise to undertake gender mainstreaming of policies, programmes and schemes. For this, the Ministry of Women and Child D has been engaged in conducting a number of trainings, workshops, one to one orientation/discussions and development of resource material. More than 1800 Central and State Government Officials and other stakeholders have been trained on GB so far. As a result of these capacity building efforts, many Ministries/ States have initiated the process of Gender Budgeting.

As many as 32 trainings have been organised in the year 2013-14. In order to take forward the process of Gender Budgeting and as part fulfilment of the 12th Five Year Plan commitments, the Ministry has formulated draft Gender Audit Guidelines for undertaking gender audit of major programmes, schemes and policies of Government of India and sent to the Planning Commission for their consideration for finalisation.

6.3.4 Scheme for Combating Trafficking – UJJAWALA

Ujjawala- a comprehensive scheme to combat trafficking was launched on 4th December 2007 and is being implemented mainly through NGOs. The Scheme has five components-Prevention, Rescue,

Rehabilitation, Re-Integration and Repatriation of trafficked victims for commercial sexual exploitation. Some of the activities envisaged under the Scheme are:

- Formation of community vigilance groups, adolescents groups, awareness creation and preparation of IEC material, holding workshops etc.
- Safe withdrawal of victims from the place of exploitation.
- Rehabilitation of victims by providing them safe shelter, basic amenities, medical care, legal aid, vocational training and income generation activities.
- Re-integration of victims into society.
- Provide support to cross-border victims for their safe repatriation to their country of origin.

Under the Scheme, assistance is provided to eligible organizations for undertaking the above activities. Since its inception in 2007, 276 projects have been sanctioned under the scheme across the country.

6.3.5 SWADHAR Scheme

Swadhar- A Scheme for Women in Difficult Circumstances was launched by the Government in 2001-02 to address the specific vulnerability of each group of women in difficult circumstances, through a Home based holistic and integrated approach. The scheme through the provision of shelter, food, clothing, counselling, trainings, clinical and legal aid aims to rehabilitate women in difficult circumstances who include widows deserted by their families, women survivors of natural disasters and women prisoners released from Jail and without family support. As on date 311 Swadhar homes are functional across the country.

6.3.6 Support to Training & Employment Programme for Women (STEP)

Support to Training and Employment Programme for Women (STEP) launched as a Central Sector Scheme in 1986-87, aims to make a significant impact on women by upgrading skills for employment on a self-sustainable basis and income generation for marginalized and asset-less rural and urban poor women especially those in SC/ST households and families below the poverty line. The key strategies include training for skill development, mobilizing women in viable

groups, arranging for marketing linkages and access to credit. The scheme also provides for enabling support services in the form of health checkups, child-care, legal & health literacy, elementary education and gender sensitization. The scheme envisages each project to thrive on a self-sustainable basis with minimum governmental support and intervention even after the project period is over.

The scheme covers 10 sectors of employment i.e. Agriculture, Animal Husbandry, Dairy, Fisheries, Handlooms, Handicrafts, Khadi and Village Industries, Sericulture, Waste Land Development and Social Forestry. The scope and coverage of the scheme have been enlarged with the introduction of locally appropriate sectors.

This demand-driven programme has benefitted around 30,000 women in each of the last 3 years.

6.3.7 Hostel for Working Women (WWH)

The Scheme of Hostel for Working Women Hostel envisages provision of safe and affordable hostel accommodation to single working women, women working at places away from their hometown and for women being trained for employment. The salient features of the scheme are:

- Financial assistance for construction of hostel building to be given only on public land.
- Financial assistance available for rent of the hostels run in rented premises also
- Provision for maintenance grant of hostel building (maximum Rs. 5.00 lakh) and one-time non-recurring grant for furnishings @ Rs. 7500/- per beneficiary.
- State government agencies, Urban Municipal Bodies, Cantonment Boards, Civil Society Organizations, Panchayati Raj Institutions, Self Help Groups, Recognized Colleges/Universities and Corporate or associations like CII, ASSOCHAM and FICCI included under the revised scheme.

Since its inception in 1972-73, 913 hostels have been sanctioned under the scheme all over the country benefiting about 68,394 working women.

7: Promotion of Rights And Well-being of Child



India is home to the largest child population in the world. The Constitution of India guarantees Fundamental Rights to all children in the country and empowers the State to make special provisions for children. Considering that childhood is an integral part of life with a value of its own and that children are not a homogenous group and their different needs need different responses, especially the multi-dimensional vulnerabilities experienced by children in different circumstances, a need for long term, sustainable, multi-sectorial, integrated and inclusive approach has been felt necessary for the overall and harmonious development and protection of children.

7.1 Legislation and Policies for Children

7.1.1 National Policy for Children (NPC), 2013:

The Government has adapted a new National Policy for Children (NPC), 2013 on 26th April, 2013. The Policy reaffirms the Government's commitment to the realisation of the rights of all children in the country. The Policy lays down the guiding principles that must be respected by the national, state and local Governments in their actions and initiatives affecting children. The Policy has identified survival, health, nutrition, education, development, protection and participation as the undeniable rights of every child, and has also declared these as key priority areas. As children's needs are multi-sectorial, interconnected and require collective action, the policy aims at purposeful convergence and strong coordination across different sectors and levels of governance; active engagement and partnerships with all stakeholders; setting up of a comprehensive and reliable knowledge base; provision of adequate resources, and sensitization and capacity development of all those who work for and with children.

7.1.2 Early Childhood Care and Education (ECCE)

The ECCE policy was Gazette notified on 27.09.2013 and has been circulated alongwith the National ECCE Curriculum Framework, Quality Standards for ECCE and age-appropriate Assessment Cards to all States/UTs for making necessary arrangement for the implementation of the ECCE policy.

The objectives of National ECCE Policy are:

- i. Facilitate comprehensive childcare supports, infrastructure and services aimed at holistic well-being of children and responsive to their developmental needs along the continuum of care from conception to age six.
- ii. Universalise and reinforce ECCE and ensure adaptive strategies for inclusion of all children with specific attention to vulnerable children.
- iii. Engage capable human resources and build their capacity to enhance and develop quality services for children and their families.
- iv. Set out the quality standards and curriculum framework for ECCE provisions and ensure their application and practice through advocacy and enforcement through appropriate institutional arrangements.
- v. Raise awareness and create common understanding about the significance of ECCE and promote strong partnerships with communities and families in order to improve the quality of life of young children through institutional and programmatic means and appropriate use of technology as required.
- vi. Recognise diversity of contexts, develop and promote culturally appropriate strategies and materials and work within the framework of decentralised governance using participatory and locally responsive approaches.

7.1.3 The Protection of Children from Sexual Offences (POSCO) Act, 2012:

A special law ‘**The Protection of Children from Sexual Offences (POSCO) Act, 2012**’ has been enforced with effect from 14th November, 2012 to deal with child abuse cases. The Act defines a child as any person below the age of 18 years and provides protection to all children from the offences of sexual assault, sexual harassment and pornography.

7.2 Schemes for Protection of Children

7.2.1 Integrated Child Protection Scheme (ICPS)

Ministry of Women and Child Development(MWCD) is implementing this comprehensive Centrally Sponsored Scheme since 2009-10 through the State Government/UT Administrations on predefined cost sharing financial pattern. The objectives of the Scheme are to contribute to the improvement in the well-being of children in difficult circumstances, as well as reduction of vulnerabilities to situation and actions that leads to abuse, neglect, exploitation, abandonment and separation of children from parent.

ICPS provides preventive, statutory care and rehabilitation services to children who are in need of care and protection and children in conflict with law as defined under the Juvenile Justice (Care and Protection of Children) Act, 2000 and its Amendment Act, 2006 and any other vulnerable child. It provides financial support to State Governments/UT Administrations for running services for children either themselves or through suitable NGOs. These services include

- (a) Homes of various types for children;
- (b) Emergency Outreach services through Childline;
- (c) Open Shelters for children in need of care and protection in Urban and Semi Urban Areas;
- (d) Family Based Non-Institutional Care through Sponsorship, Foster Care and Adoptions. During the current financial year, 2013-14, Ministry assisted 1253 Homes, 244 Specialised Adoption Agencies (SAAs) and 193 Open Shelters through State Governments/UT Administrations.

Financial assistance under the Scheme is also provided for setting up of statutory bodies under the JJ Act namely, (a) Child Welfare Committees (CWCs) and Juvenile Justice Boards (JJBs). As reported by State Governments/UT Administrations, 619 CWCs and 608 JJBs have so far been set up across the country.

The financial norms under ICPS have been revised recently and these norms are applicable w.e.f. 1st April, 2014.

7.2.2 Rajiv Gandhi National Crèche Scheme (RGNCs)

Rajiv Gandhi National Crèche Scheme was launched w.e.f. 1st January, 2006 to provide day care facilities to children (age group of 0-6 years) of working and other deserving women belonging to families whose monthly income is not more than Rs. 12,000/-. The Scheme provides supplementary nutrition, health care inputs like immunization, polio drops, basic health monitoring, recreation, pre-school education (03-06 years), emergency medicine and contingencies. During 2013-14, there had been 24,000 functional Crèches under the scheme with approx. 6.00 lakhs beneficiaries.

7.2.1 Integrated Child Development Services (ICDS) Scheme

The objective of ICDS scheme is holistic development of children below 6 years of age and for proper nutrition and health education of pregnant and lactating mothers. The scheme was launched in 1975 with 33 projects and 4891 anganwadi centres (AWCs). This has been now universalised with cumulative approval of 7076 projects and 14 lakh AWCs including 20,000 Anganwadis 'On demand'. As on December, 2013, 7076 ICDS projects and 13.42 lakh AWCs are operational. They are currently providing services to 1026 lakh beneficiaries. The scheme has since been approved for strengthening and restructuring with an overall budget allocation of Rs. 1,23,580 crore during the Twelfth Plan. The restructured ICDS Scheme has since been rolled out in all the districts in three phases.

8 : Drug De-addiction, Rehabilitation and Reintegration



According to the National Survey conducted during 2000-01 by United Nations Office on Drugs and Crime (UNODC) and Ministry of Social Justice and Empowerment, about 732 lakh persons in India were users of alcohol and drugs. Of these 87 lakh used Cannabis, 20 lakh used opiates and 625 lakh were users of Alcohol. About 26%, 22% and 17% of the users of the three types respectively were found to be dependent on/addicted to them. The survey also indicated that other drugs such as Sedatives/Hypnotics, volatile substances, Hallucinogens, Stimulants and pharmaceutical preparations were also abused. However the sample size being small (40,697 males only) vis-a-vis the country's population, the estimates can at best be taken as indicative only.

The issues relating to control over intoxicating and habit forming drugs are handled in this country by a multiplicity of authorities, including the State / UT Governments. In the Central Government the responsibility is carried out through a number of Ministries, Departments and Organisations, which include:

- (i) The Department of Revenue, which has the nodal co-ordination role as administrator of the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985 and the Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act, 1988;
- (ii) The Narcotics Control Bureau (Ministry of Home Affairs) is the apex coordinating agency for co-ordination of actions by various offices, State Governments and other authorities under the NDPS Act, Customs Act, Drugs and Cosmetics Act and any other law for the time being in force in connection with the enforcement provisions of the NDPS Act, 1985. The Bureau has the powers and functions for taking measures with respect to co-ordination of

actions by various offices, State Governments and other authorities, implementation of the obligation in respect of counter measures against illicit drug traffic under the various international conventions and protocols, providing assistance to concerned authorities in foreign countries and concerned international organisations to facilitate coordination and universal action for prevention and suppression of illicit traffic in these drugs and substances and coordination of actions taken by the other concerned Ministries, Departments and Organizations in respect of matters relating to drug abuse. The Bureau functions as an enforcement agency and also collect and analyze data related to seizures of narcotic drugs and psychotropic substance, study trends, modus operandi, collect and disseminate intelligence and work in close cooperation with the Customs, State Police and other law enforcement agencies.

- (iii) The Ministry of Social Justice & Empowerment which is the nodal Ministry as per the Government of India (Allocation of Business) Rules, 1961 in respect of “All matters relating to alcoholism and substance (drug) abuse and rehabilitation of addicts/families”. All drug de-addiction measures including setting up of drug de-addiction centres by NGOs come under its purview.
- (iv) The Ministry of Health & Family Welfare runs a limited drug de-addiction programme. Under this programme it provides financial assistance augmenting the medical facilities in some Central Government hospitals and also State Government hospitals in North-Eastern States for post-abuse treatment. A national nodal centre, the “National Drug Dependence Treatment Centre (NDDTC)” has been established at Ghaziabad under the All India Institute of Medical Sciences (AIIMS), New Delhi. The NDDTC receives regular annual recurring grants-in-aid from the Ministry. The NDDTC regularly conducts training programmes and courses for General Duty Medical Officers (GDMOs) with the support from the Ministry of Health and Family Welfare. Other Central Government hospitals receiving regular annual recurring financial assistance under this programme are Dr. Ram Manohar Lohia

Hospital, New Delhi, Sucheta Kriplani Hospital, New Delhi, PGIMER, Chandigarh, JIPMER, Pondicherry and NIMHANS, Bangalore. Further, regular annual recurring grants of Rs.2 lakhs is provided to each drug addiction centre established in the Government Hospitals in North Eastern States. The Ministry has also provided one-time financial assistance of Rs.8 lakh each to 122 drug de-addiction centres in various Central / State Government hospitals across the country. Out of these 122 centres, 43 centres have been established in the North Eastern States. The drug de-addiction programme of Ministry of Health & Family Welfare does not cover the activities of Non-Government Organisations (NGOs).

8.1 Assistance to Voluntary Organizations for Prevention of Alcoholism and Substance (Drug) Abuse

'Scheme of Assistance for the Prevention of Alcoholism & Substance (Drugs) Abuse and for Social Defence Services' is the flagship scheme of the Ministry of Social Justice and Empowerment in the field of drug demand reduction. The Scheme has two parts viz. (i) 'Assistance for the Prevention of Alcoholism & Substance (Drug) Abuse' and (ii) 'Financial Assistance in the Field of Social Defence'.

8.1.1 Assistance to Voluntary Organizations for Prevention of Alcoholism and Drug Abuse

The Scheme of Assistance for the Prevention of Alcoholism and Substance (Drug) Abuse is being implemented for identification, counselling, treatment and rehabilitation of addicts through voluntary and other eligible organizations. Under this scheme, financial assistance up to 90% of the admissible expenditure is given to the voluntary organizations and other eligible agencies for setting up/running Integrated Rehabilitation Centre for Addicts (IRCA), Regional Resource and Training Centres (RRTC), for holding Awareness-cum-de-addiction camps (ACDC) and Workplace Prevention Programmes etc. In the case of North-Eastern States, Sikkim and Jammu & Kashmir, the quantum of assistance is 95% of the

total admissible expenditure. The balance has to be borne by the implementing agency. The Physical Achievements are as under:

Year	No. of NGOs assisted	No. of Beneficiaries (approx.)
2011-12	296	1,28,412
2012-13	187	74,904
2013-14	231	98,892

9: Management of Environment



9.1 Forest Conservation

The Forest (Conservation) Act, 1980 came into effect from October 25, 1980 which provides for prior approval of the Central Government for diversion of forest lands for non-forestry purposes. In the national interest and in the interest of future generations, this Act, therefore, regulates the diversion of forest lands to non-forestry purposes. The objective of the Act is to regulate indiscriminate diversion of forest lands for non-forestry uses and to maintain balance between developmental needs of the country and the conservation of natural heritage. The guidelines are issued under the Act from time to time, to simplify the procedures, to cut down delays and to make the process transparent.

Table: Forest and Tree Cover of India in 2013

Class	Area (km ²)	Share in Geographical Area (%)
Forest Cover		
Very Dense Forest	83,502	2.54
Moderately Dense Forest	318,745	9.70
Open Forest	295,651	8.99
Total Forest Cover*	697,898	21.23
Scrub	41,383	1.26
Non-forest	2,547,982	77.51
Total Geographical Area	3,287,263	100.00

* Includes 4629 km² area under mangroves.

Source: ISF Report 2013

9.1.1 Intensification of Forest Management Scheme (IFMS)

While aiming to expand forest cover in the country, it is equally important to improve the state of existing forests and protect them against various threats. This Centrally Sponsored Intensification of

Forest Management Scheme (IFMS) aims at strengthening forest protection machinery of the State/UT Governments and providing support for area-specific forest management interventions. The financial assistance is provided on cost share basis - All the North Eastern States including Sikkim and special categories States, namely, Jammu & Kashmir, Himachal Pradesh and Uttarakhand share 10% of the cost while the rest of the States/UTs share 25% of the cost of the annual plans of operations. The major components of the scheme include:

- Forest fire control and management.
- Strengthening of Infrastructure.
- Survey, Demarcation and Working Plan preparation.
- Protection and Conservation of Sacred Groves.
- Conservation and Restoration of Unique Vegetation & Ecosystems.
- Control and Eradication of Forest Invasive Species.
- Preparedness for Meeting Challenges of Bamboo Flowering and Improving Management of Bamboo Forests.

The scheme has helped the State/UT forest departments in modernizing the forestry sector by way of creating infrastructure such as field offices, forest stations, residential facilities for frontline staff; construction of roads and patrolling paths; introduction of modern technology including use of Personal Digital Assistant(PDA) for field surveillance and reporting; providing field vehicles, arms and ammunitions. Introduction of advanced technology helped in bridging the backlog in preparation of working plans. Forest fire control has become progressively effective by way of creation and maintenance of fire-lines for prevention of forest fires, early detection, reporting and quick mobilization of force for forest fire control. Modern technology has also helped in improving planning for forest fire control and management. This scheme has also provided incentives for involvement of local people through Joint Forest Management Committees (JFMCs) in forest protection.

Besides above, the National Afforestation & Eco-development Board in the Ministry of Environment, Forests and Climate Change is implementing the afforestation scheme namely, National Afforestation Programme (NAP) scheme, which is a 100% Centrally Sponsored Scheme for eco-restoration of degraded forests from the

year 2002. The Scheme is being implemented through three-tier structure with the State Forest Development Agency (SFDA) at the State level, Forest Development Agency (FDA) at the forest division level and Joint Forest Management Committee (JFMC) at the village level. Plantation under NAP are taken up through seven models of afforestation/ Eco-restoration such as Aided Natural Regeneration , Artificial Regeneration, Pasture Development/ Silvi-pasture, Bamboo plantation, Planting of canes, Mixed Plantations of trees having MFP and medicinal value, Regeneration of perennial herbs and shrubs of medicinal value as per demand of the site. The Scheme also provides for other support activities like soil and moisture conservation, fencing, entry-point activities, micro-planning, awareness generation, training and capacity building, value addition and marketing, use of improved technology, etc. Since the inception of the scheme 20.71 lakh hectares area have been sanctioned with an investment of Rs. 3399.85 crores. This programme is implemented through more than 42000 JFMCs and 800 Forest Divisions in the country.

9.1.2 Integrated Development of Wildlife Habitats

At present, India has a network of 670 Protected Areas (102 National Parks, 517 Wildlife Sanctuaries, 47 Conservation Reserves and 4 Community Reserves). The Government of India provides financial and technical assistance to the State/UT Governments for activities aimed at wildlife conservation through the Centrally Sponsored Scheme viz. 'Integrated Development of Wildlife Habitats'. The scheme has following three components:

- Support to Protected Areas (PA) (National Parks, Wildlife Sanctuaries, Conservation Reserves and Community Reserves)
- Protection of Wildlife Outside Protected Areas
- Recovery programmes for saving critically endangered species and habitats.

9.2 Biosphere Reserves

Biosphere Reserves are areas of terrestrial and coastal ecosystems which are internationally recognized within the framework of the Man and the Biosphere (MAB) programme of the

UNESCO. These Reserves are required to meet a minimal set of criteria and adhere to a minimal set of conditions before being admitted to the World Network of Biosphere Reserves designated by the UNESCO. The world's major ecosystem types and landscapes are represented in this network, which is devoted to conserving biological diversity, promoting research and monitoring as well as seeking to provide models of sustainable development in the service of human kind with special reference to the local communities which mostly consist of traditional societies. These Reserves are rich in biological and cultural diversity and encompass unique features of exceptionally pristine nature.

The goal is to facilitate conservation of these representative landscapes and their immense biological diversity and cultural heritage, foster economic and human development which is culturally and ecologically sustainable and to provide support for research, monitoring, education and information exchange. The scheme is a pioneering effort at pursuing the increasingly difficult yet urgent task of conserving ecological diversity under mounting pressures.

The programme was initiated in 1986 and till date, 18 sites have been designated as Biosphere Reserves (BRs) in different parts of the country. Some potential sites have also been identified. The Government provides financial assistance to the concerned State/UT Governments for conservation and management of the designated Biosphere Reserves. The Indian National Man and Biosphere (MAB) Committee constituted by the Government is the apex body to oversee the programme, provide policy guidelines and review the programme.

Out of the 18 Biosphere Reserves designated nationally, so far nine biospheres viz., Nilgiri (Tamil Nadu, Kerala and Karnataka), Gulf of Mannar (Tamil Nadu), Sunderban (West Bengal), Nanda Devi, (Uttarakhand), Pachmarhi (Madhya Pradesh), Simlipal (Orissa) and Nokrek (Meghalaya), Great Nicobar (Andaman & Nicobar Islands) and Achanakmar-Amarkantak (Chhattisgarh & Madhya Pradesh) have been included in the World Network of Biosphere Reserves of UNESCO. Efforts are on for getting remaining Biosphere Reserves included in

the World Network of Biosphere Reserves. Research and development projects are also supported in these designated Reserves.

Table: List of Designated Biosphere Reserves

Name of the Biosphere Reserve	Geographical Area (Km²)
Kachchh	12454
Gulf of Mannar	10500
Sunderban	9630
Cold Desert	7770
Nanda Devi	5861
Nilgiri	5520
Dehang Debang	5112
Pachmarhi	4982
Seshachalam	4756
Similipal	4374
Achanakmar-Amarkantak	3836
Agasthyamalai	3501
Panna	2999
Manas	2837
Khangchendzonga	2620
Great Nicobar	885
Nokrek	820
Dibru-Saikhowa	765

9.3 Control of Pollution

The concern for environmental quality has become the top most issue in the present scenario of rising population, increasing urbanization, industrial pollution, shipping, aviation and vehicular emission as well as pollution of water courses due to discharge of industrial effluents and sewage without conforming to the environmental norms and standards apart from agriculture run-off. Realising this trend of pollution in various environmental media like air, water, soil, etc., the Government earlier adopted Policy for Abatement of Pollution in 1992, which provides multi-pronged strategies in the form of regulations, legislations, agreements, fiscal incentives and other measures to prevent and abate pollution. To give effect to various measures and policies for pollution control, various

steps have been initiated which include stringent regulations, development of environmental standards and periodical revision therein, control of vehicular pollution, control of air and water pollution, abatement and prevention of noise pollution, spatial environmental planning, revisit and revision in the list of critically polluted areas and improvement plans therein, etc. The Government also adopted National Conservation Strategy and Policy Statement on Environment and Development, 1992. Afterwards, the Government adopted the National Environment Policy (NEP- 2006) which seeks to extend the coverage, and fill in gaps that still exists, in light of present knowledge and accumulated experience. This policy does not displace, but builds on the earlier policies of the Government. It lays emphasis on a number of new issues.

9.3.1 Air Pollution

The air pollution and the resultant air quality can be attributed to emissions from transportation, i.e. road, rail, shipping and airways, industrial and domestic activities. The air quality has been, therefore, an issue of social concern in the backdrop of various developmental activities. The norms for ambient air quality have been revisited and various industry specific emissions standards are evolved afresh or revisited and notified from time to time. For control of air pollution, with a view to initiate policy measures and to prepare ambient air quality management plans, 573 ambient air quality monitoring stations are operational covering 240 cities, towns and industrial areas in 27 States and five Union Territories. Presently, three out of five criteria pollutants namely; sulphur dioxide (SO₂), nitrogen dioxides (NO₂) and fine particulate matter having size less than 10 micron (PM₁₀) are monitored under National Ambient Air Monitoring Programme (NAMP) by the Pollution Control Boards, Pollution Control Committees, Universities and Research Institutes. Besides, additional pollutants for other toxic trace matters and polycyclic aromatic hydrocarbons are also being monitored in selected cities of the country. Installation of automatic air quality monitoring stations is undertaken in cities for continuous monitoring. The continuous monitoring has been introduced in twenty seven cities namely, Agra,

Ahmedabad, Bengaluru, Chandrapur, Chennai, Cuddalore, Delhi, Durgapur, Faridabad, Ghaziabad, Haldia, Howrah, Hyderabad, Jaipur, Jharia, Jodhpur, Kanpur, Kolkata, Lucknow, Mumbai, Panipat, Patna, Pune, Solapur, Tuticorin, Vadodara and Varanasi. The Government has published the Revised National Ambient Air Quality Standards, 2009 (NAAQS-2009) in the official Gazette on 16th November 2009. These ambient air quality standards/ limits provide a legal framework for the control of air pollution and the protection of public health.

Standard monitoring protocol to monitor 12 pollutants as per NAAQS has been developed during the year. In furtherance of the revised NAAQS, the CPCB is in the process of drawing a road-map for the creation of required infrastructure, operation and maintenance of network and handling of data on the ambient air quality.

The monitored ambient air quality data during the year while comparing with revised (NAAQS-2009) indicates that the annual average levels of Sulphur Dioxide (SO₂) are within the prescribed air quality norms across the country and that of Nitrogen Dioxide (NO₂) are within norms in most of the cities. However, the levels of fine particulate matter (PM₁₀) exceed the prescribed norms in many cities. PM₁₀ and NO₂ are the emerging air pollutants.

9.3.2 Noise Pollution

Noise levels have been a matter of concern due to various activities, religious functions, festivals, marriages, processions and related celebrations. The main sources of noise pollution include industrial activities, use of public address system, construction activities, use of generator sets, pressure horns, fire crackers etc. Keeping in view the increasing trend in noise levels, Government has issued various regulations from time to time to control noise pollution in ambient air, at source and at manufacturing stage. To control community noise, Noise Pollution (Regulation and Control) Rules, 2000 were notified and amended from time to time. The Central Pollution Control Board (CPCB) has been advised for revisiting the national ambient noise standards.

A road map has been drawn by CPCB for national ambient noise monitoring network. First phase of National Ambient Noise

Monitoring Network was commissioned in accordance with NEP-2006 starting from seven cities, namely, Delhi, Lucknow, Bengaluru, Kolkata, Hyderabad, Chennai and Mumbai by establishing 35 stations to monitor ambient noise on 24X7 basis. Monitoring data is available on the website of respective State Pollution Control Board and CPCB.

9.3.3 National Water Quality Monitoring Programme

In order to plan policies for prevention and control of pollution, Central Pollution Control Board in collaboration with State Pollution Control Boards has established a Water Quality Monitoring Network with the objectives of rational planning of pollution control strategies and their prioritisation; evaluate effectiveness of pollution control measures already in existence; evaluate water quality trend over a period of time; assess assimilative capacity of a water body thereby reducing cost on pollution control; understand the environmental fate of different pollutants and to assess the fitness of water for different uses.

The present network comprises of 2500 stations in 28 States and 6 Union Territories spread over the country. The monitoring network covers 445 Rivers, 154 Lakes, 12 Tanks, 78 Ponds, 41 Creeks/Seawater, 25 Canals, 45 Drains, 807 Wells and 10 Water Treatment Plants (Raw water). Among the 2500 stations, 1275 are on rivers, 190 on lakes, 45 on drains, 41 on canals, 12 on tank, 41 on creeks/seawater, 79 on pond, 807 on groundwater and 10 on Water Treatment Plant (Raw water). Presently the inland water quality-monitoring network is operated under a three-tier programme i.e. Global Environmental Monitoring System (GEMS), Monitoring of Indian National Aquatic Resources System (MINARS) and Yamuna Action Plan (YAP). The water samples are analysed for 9 core parameters and 19 general parameters. The monitoring agencies have also analysed the trace metals at few locations. The monitoring is done on monthly basis in surface waters comprising of Rivers, lakes, tanks, ponds, creeks/sea water, canals & drains and on half yearly basis in case of ground water.

9.4 Hazardous Wastes Management

Hazardous Wastes (Management, Handling and Transboundary Movement) Rules, 2008 were notified under Environment (Protection) Act, 1986 to ensure safe handling, generation, processing, treatment, package, storage, transportation, use, reprocessing, collection, conversion, and offering for sale, destruction and disposal of Hazardous Waste.

As per the information provided by CPCB, there are about 41,523 number of hazardous waste generating industries in India generating about 7.90 million tonnes per annum of hazardous waste. These wastes can be categorized into three components such as recyclable (3.98 million TA), land fillable (3.32 million TA) and incinerable (0.60 million TA).

9.4.1 National Inventory of Hazardous Wastes

As per information of Central Pollution Control Board (CPCB), there are about 40,000 industries in the country generating about 7.66 million Metric Ton (MT) of hazardous waste every year, of which landfillable waste is 3.39 million MT (44.26%), incinerable 0.65 million MT (8.50%) and Recyclable Hazardous Waste is 3.61 million MT (47.13%).

The Government has sponsored a project on GIS based National Hazardous Waste Information System. It is an online web based system, which can give the status of hazardous waste management in the country. The database is required to be regularly updated by all State Pollution Control Boards on web to ensure updated status at all times.

9.4.2 E-waste Management

According to CPCB, the e-waste inventory in India for the year 2005 has been estimated to be 1.46 lakh tonnes, which is expected to exceed 8.0 lakh tonnes by 2012. About sixty five cities in India generate more than 60% of the total e-waste generated in India. Ten states generate 70% of the total e-waste generated in India. Maharashtra ranks first followed by Tamil Nadu, Andhra Pradesh, Uttar Pradesh, West Bengal, Delhi, Karnataka, Gujarat, Madhya Pradesh and Punjab in the list of e-waste generating states in India.

Among top ten cities generating e-waste, Mumbai ranks first followed by Delhi, Bangalore, Chennai, Kolkata, Ahmedabad, Hyderabad, Pune, Surat and Nagpur.

The Government has notified E-Waste (Management and Handling) Rules, 2011 on 12th May 2011. These Rules will be applicable to e-waste generated from IT and telecommunication equipment and Consumer electrical and electronics i.e. Television sets (including LCD & LED), Refrigerators, Washing Machines and Air-conditioners. These Rules empower the concerned State agencies to control, supervise and regulate relevant activities connected with e-waste management such as collection, segregation, dismantling and recycling.

The concept of Extended Producer Responsibility (EPR) has been enshrined in these Rules. Accordingly, producers are required to set up collection systems and meet the costs involved in the environmentally sound management of e-waste generated from the 'end of life' of their own products. Besides, threshold limits, which are accepted globally, have been prescribed for six hazardous substances used in manufacture of electrical and electronics components. Producers are expected to achieve reduction in use of the hazardous substance (RoHS) to the prescribed limit within a period of two years from the date of commencement of these rules. These rules will be the main instrument to ensure environmentally sound management of e-waste.

9.4.3 Chemical (Industrial) Safety

The Ministry of Environment, Forests and Climate Change (MoEF&CC) is the nodal Ministry for management of industrial chemical disasters. In order to ensure safe handling of chemicals, the Ministry has notified two sets of Rules under the Environment (Protection) Act, 1986 viz. (i) The Manufacture, Storage and Import of Hazardous Chemicals Rules, 1989 (MSIHC); and (ii) The Chemical Accidents (Emergency, Planning, Preparedness, and Response) Rules (EPPR), 1996.

MSIHC Rules have been further amended in October, 1994 and again in January, 2000. The main objectives of the MSIHC rule is

to: (a) prevent major accidents arising from industrial activities; and
(b) limit the effects of such accidents.

9.5 Green India Mission

Green India Mission (GIM) has been initiated by the Ministry of Environment & Forest as one of the eight missions under National Action Plan on Climate Change (NAPCC). The mission has been approved by the Prime Minister's Council on Climate Change on 22nd February 2012 and an amount of Rs. 200 crore have been allocated in the budget for the preparatory activities in 2011-12 in the union budget for the year 2011-12. Total Mission cost is Rs. 46,000 crore over ten years starting from the year 2012-13, coinciding with the 12th and 13th Five year Plan Period. The Mission aims to increase forest and tree cover on five million hectare area and to improve quality of forest cover on another five million hectare area as well as to improve ecosystems services, forest based livelihood income of about three million households and to enhance annual CO₂ sequestration.

For 12th Plan Period, the mission has been approved for Rs 13,000 crores including convergence worth Rs 6000 crores with CAMPA, Rs 4000 crores with MNREGS and Rs 600 crore with National Afforestation Program. 12th Plan target for the Mission include coverage of about 2.8 million ha.

9.6 Environmental Education, Awareness and Training

The emergence of environmental issues at the top of the global agenda in the context of climate change concerns underline the need for collective endeavour for protection of environment. This warrants informed and voluntary participation of all sections of the people in the movement for conservation and participation of environment. Awareness of people about emerging environmental issues and the interconnections between the life styles and environment is an essential prerequisite for such participation. Population increase, rapid urbanisation and industrialisation, increasing needs of energy etc., have impacted the availability of natural resources besides denting the quality of environment. The environmental damage already inflicted cannot be reversed unless there is collective thinking, will and effort. These call for public

awareness and participation for bringing about an attitudinal change and finally restricting further damage to the environment. Effective implementation of environmental management and conservation programmes depends on education, awareness raising and training in the relevant areas. Without an adequate awareness of the impending challenges and their implications, few people would be motivated to participate actively in programmes on environmental conservation. Environment education and awareness thus assumes critical importance. The 'Environmental Education, Awareness and Training' is a flagship scheme of the Government for enhancing the understanding of people at all levels about the relationship between human beings and the environment and to develop capabilities/skills to improve and protect the environment. This scheme was launched in 1983-84 with the following basic objectives:

- To promote environmental awareness among all sections of the society;
- To spread environment education, especially in the non-formal system among different sections of the society;
- To facilitate development of education/training materials and aids in the formal education sector;
- To promote environment education through existing educational/scientific/ research institutions;
- To ensure training and manpower development for environment education, awareness and training;
- To encourage non-governmental organizations, mass media and other concerned organizations for promoting awareness about environmental issues among the people at all levels;
- To use different media including films, audio, visual and print, theatre, drama, advertisements, hoarding, posters, seminars, workshops, competitions, meetings etc. for spreading messages concerning environment and awareness; and
- To mobilize people's participation for preservation and conservation of environment.

9.6.1 National Green Corps (NGC) Programme

It is a well-established and recognised fact that the children can be catalysts in promoting a mass movement about the ensemble of the environmental issues. Being future citizens, inculcation of environment friendly attitudes and behavioural patterns amongst them can make a significant difference to the long term efforts for protection of environment. Children are triggers for a chain reaction, making a difference at the local and community level which in due course lead to awareness at village, city, State, country and global level. MoEF has hence, embarked upon a major initiative for creating environmental awareness among children by formulating National Green Corps (NGC) in 2001-02. The phenomenal response that NGC has received has made the network more than 1,00,000 Eco clubs across the country in 12 years, making it one of the largest conservation networks. The unique partnership between the MoEF, the states Government agencies alongwith the dedicated NGOs, working in the field of Environmental Education has contributed to the success of the programme. During financial year 2013-14; 88,447 Eco-clubs were supported by the Ministry across the country.

9.6.2 National Environment Awareness Campaign (NEAC)

The need for a mass movement for protection of environment needs no emphasis. The concerns of the people for environment need to be harnessed into voluntary action. This requires a network of nodal agencies and grass-root level organisations. The NEAC was hence launched in mid-1986 with the objective of creating environmental awareness at the national level. In this campaign, nominal financial assistance is provided to NGOs, schools, colleges, universities, research institutes, women and youth organisations, army units, government departments etc. from all over the country for conducting awareness raising and action oriented activities. The awareness activities could be seminars, workshops, training programmes, camps, padyatras, rallies, public meetings, exhibitions, essay/ debate/painting/poster competitions, folk dances and songs, street theatre, puppet shows, preparation and distribution of environmental education resource materials etc. Action components could be plantation of trees, management of household waste,

cleaning of water bodies, taking up water harvesting structures, use of energy saving devices etc. Diverse target groups encompassing students, youths, teachers, tribals, farmers, other rural population, professionals and the general public are covered under NEAC. The programme is implemented through designated Regional Resource Agencies (RRAs) appointed for specific States/Regions of the country. For the year 2013-14, the theme for the campaign was "Biodiversity and Conservation" with following subthemes:

- Critical, endangered and endemic species conservation
- Conservation of critical and fragile habitats & corridors
- Forest conservation
- Wetlands conservation
- Conservation of Mangroves & Coral Reefs
- Land degradation & biodiversity
- Conservation and promotion of Medicinal plants
- Renewable energy - solar, wind, biogas, etc
- Vermi-composting & organic farming
- Agro forestry
- Cultivation of Fruit trees
- Germplasm conservation
- Restoration of Grasslands
- Livestock- indigenous breed conservation
- Biodiversity conservation in Urban & peri-Urban areas
- Maintaining people's biodiversity registers
- Biodiversity & traditional knowledge and equitable benefit sharing
- Biodiversity based traditional crafts
- Biodiversity and sustainable practices (rainwater harvesting, use of eco-friendly bags, etc)
- Sustainable Tourism
- Gender in Biodiversity conservation

Thirty four Regional Resource Agencies (RRAs) appointed by the Government are involved in conducting, supervising and monitoring the NEAC activities. A total of 14,297 organisations have been involved in the campaign across the country.

9.7 Climate Change

Climate change is a global phenomenon but adversely affects developing countries particularly as their capacity and resources to

deal with the challenge is limited. India is already vulnerable to a large degree of climate variability. Studies indicate that climate change may exacerbate the problem of existing climate variability in India. It is projected that, by the end of 21st century, rainfall in India may increase by 15-40% with high regional variability. Warming may be more pronounced over land areas with northern India experiencing maximum increase. The warming could be relatively greater in winter and post-monsoon seasons. The annual mean temperature could increase by 3°C to 6°C over the century. The likely impacts of climate change on different regions and sectors have been studied and assessed from time to time. Initial assessments were carried out in National Communications in 2004. Recently, the Government carried out a major assessment for four sectors – water resources, agriculture, forests and human health – in four critical regions of India – the Himalayan region, North-East, Western Ghats and coastal prepared by INCCA. The report 'Climate Change and India: 4x4 assessment' provides a comprehensive, long-term assessment of impact of climate change in 2030s. The assessment will be further deepened and refined through a comprehensive exercise of preparation of National Communications (NATCOM) that issue in 2012.

9.7.1 Climate change and India's actions

Although India's contribution to global climate change is minimal and its total CO₂ emissions are about 4% only of total global CO₂ emissions, India has been conscious of the global challenge of climate change. In fulfilment of the international obligations under the UNFCCC, India prepares a National Communication (NATCOM) which gives an inventory of the greenhouse gases (GHG) emissions in India, and assesses the vulnerability and impacts. First NATCOM was presented in 2004. The Government is engaged in preparing NATCOM II, which will be presented to the UNFCCC in 2012. Preparation of NATCOM II is an exercise based on an extensive network of research and scientific institutions in India and draws upon expertise and assistance from different institutions. Steps have also been taken to increase capacity at the institutional level for conducting research into climate change science and making necessary assessments. The

Government has set up a network, namely the Indian Network for Climate Change Assessment (INCCA) comprising 127 research institutions tasked with undertaking research on the science of climate change and its impacts on different sectors of economy across various regions of India. The Government released, in May 2010, India's Green House Gas (GHG) Emissions Inventory for 2007 prepared by INCCA. The 2007 inventory was brought out in order to increase transparency of estimates of the GHG emissions in India. With this publication, India became the first 'non Annex I' (i.e., developing) country to publish such updated numbers. This constitutes a major step forward to improving the frequency of the preparation of NATCOMs and emissions inventory in India. India's strategy for addressing climate change is also reflected in many of its social and economic development programmes. The National Action Plan on Climate Change (NAPCC) coordinated by the Ministry of Environment & Forests is being implemented through the Nodal Ministries in specific sectors/areas. Eight national missions in the area of solar energy, enhanced energy efficiency, sustainable agriculture, sustainable habitat, water, Himalayan eco-system, increasing the forest cover and strategic knowledge for climate change form the core of National Action Plan. All national missions have been approved by the Prime Minister's Council on Climate Change and are at different stages of implementation. State Governments are also preparing, under advice of the Central Government, State Action Plans on Climate Change aimed at creating institutional and programme oriented capacities to address climate change. Government has announced a domestic mitigation goal of reducing emissions intensity of GDP by 20-25% by 2020 in comparison with 2005 level. This is in line with the projections of the energy intensity of India's output that has shown a declining trend owing to improvements in energy efficiency, autonomous technological changes and economical use of energy. This domestic goal and the objectives of the National Action Plan on Climate Change are proposed to be achieved through a sustainable development strategy that will be outlined in course of the Twelfth Five Year Plan.

9.7.2 Initiatives

Besides following a pro-active policy of domestic actions, India took several other initiatives during the year to advance domestic and international actions on climate change. Planning Commission has recognized climate change as a major area of environmental intervention. 'Climate Change Action Programme', a new thematic/umbrella Scheme has been approved by the Planning Commission for inclusion in the 12th Five year Plan. To be launched from the year 2012-13, the new scheme aims at advancing scientific research into and assessment of the phenomenon of climate change, building an institutional and analytical capacity for research and studies in the area of climate change, and supporting domestic actions to address climate change through specific programmes and actions at the national and state level. The activities under the Scheme will continue to be amplified and developed in later years. In 2011, Government launched an ambitious project on assessment of 'black carbon' and its impact on environment in consultation with other agencies of the Government. The project has been launched with support of Indian Space Research Organization (ISRO). India's participation in CDM projects continued to see an upward trend during the year. By the end of 2011, the total number of approved projects in India had risen to 2160 out of which 776 had been registered by the CDM Executive Board (EB) of the UNFCCC. The total investment potential of the approved projects is `3,64,034 crore. The Certified Emission Reduction certificates (CERs) for the projects approved by the EB are 124 million. At a nominal value of US\$ 10 per CER, this represents a likely flow of around US\$ 1,240 million. India continues to occupy the second position globally in terms of projects approved by the EB as also in terms of the value of CERs earned by the approved projects. Sixteen State Governments and Governments of Union Territories have prepared State Action Plans on Climate Change (SAPCC) in accordance with the template prepared by the Central Government. A Steering Committee at the Central level will examine the Plans following which the modalities for financing and implementing the SAPCCs will be considered in the 12th Five Year Plan.

10. Affordable Justice



Article 39A of the Constitution of India provides for free legal aid to the poor and weaker sections of the society and ensures justice for all. Articles 14 and 22(1) of the Constitution also make it obligatory for the State to ensure equality before law and a legal system which promotes justice on the basis of equal opportunity to all. In the year 1987, the Legal Services Authorities Act was enacted by the Parliament which came into force on 9th November, 1995 to establish a nationwide uniform network for providing free and competent legal services to the weaker sections of the society on the basis of equal opportunity. The National Legal Services Authority (NALSA) has been constituted in 1995 under the Legal Services Authorities Act, 1987 to monitor and evaluate implementation of legal aid programmes and to lay down policies and principles for making legal services available under the Act.

1.1 In every State, a State Legal Services Authority and in every High Court, a High Court Legal Services Committee have been constituted under the policies, principles, guidelines and effective & economical schemes framed by NALSA. District Legal Services Authorities, Taluk Legal Services Committees have been constituted in the Districts and most of the Taluks to give effect to the policies and directions of the NALSA and to –

- a. provide free legal services to the people,
- b. conduct Lok Adalats in the State and
- c. organize legal awareness camps in the rural areas.

Supreme Court Legal Services Committee has been constituted to administer and implement the legal services programme in so far as it relates to the Supreme Court of India. The Free Legal Services include:-

- a) Payment of court fee, process fees and all other charges payable or incurred in connection with any legal proceedings;
- b) Providing service of lawyers in legal proceedings;

- c) Obtaining and supply of certified copies of orders and other documents in legal proceedings.
- d) Preparation of appeal, paper book including printing and translation of documents in legal proceedings.

Persons eligible for getting free legal services include:-

- i) Women and children;
- ii) Members of SC/ST
- iii) Industrial workmen
- iv) Victims of mass disaster, violence, flood, drought, earthquake, industrial disaster.
- v) Disabled persons.
- vi) Persons in custody
- vii) Persons whose annual income does not exceed Rs. 1 lakh (in the case of Supreme Court Legal Services Committee the limit is Rs. 1,25,000/-).
- viii) Victims of Trafficking in Human beings or beggar.

Since inception till 30.04.2014 more than 175 lakh persons were benefited through legal aid and advice throughout the country out of which more than 16 lakh people belong to Schedule Castes and 6 lakh belong to Schedule Tribes. Around 14 lakh women have benefited out of the legal services rendered various Legal Services Authorities. Around 4.37 lakh prisoners (in custody) were also given legal services.

Lok Adalat is one of the Alternative Disputes Resolution Mechanisms to settle disputes/cases pending in the court of law or at pre-litigation stage amicably. The Lok Adalat has been given statutory status under the Legal Services Authorities Act, 1987. Under this Act, an award made by a Lok Adalat is deemed to be a decree of a civil court and is final and binding on all parties and no appeal lies against thereto before any court.

States of Andhra Pradesh, Assam, Chhattisgarh, Goa, Haryana, Himachal Pradesh, Jharkhand, Karnataka, Kerala, Madhya Pradesh, Mizoram, Orissa, Punjab, Rajasthan, Sikkim, Tripura, Uttar Pradesh, U.T. of Chandigarh and Andaman Nicobar Islands have established Permanent Lok Adalats for public utility services under Chapter VI-A.

Around 12.46 lakh Lok Adalats have been organized in the country since inception till 30.04.2014, in which 545 lakh cases have been settled. Of these settled cases, around 22 lakh cases were relating to

motor accident compensation. The compensation disbursed in these cases has been to the tune of around Rs. 150,17 Crore. Since there is no appeal or further challenge, these many cases have been removed from the formal court system. Through mediation, over the last one year, 34343 cases have been settled. Through pre-litigation conciliation 9257613 cases has been settled.

As a part of the preventive and strategic legal aid, NALSA conducts periodic legal literacy programmes through the State Legal Services Authorities. Legal Aid Clinics and Legal Aid Camps are being set up in villages and law colleges/law universities.

A National Lok Adalat for settlement of cases in all the courts right from the Supreme Court of India to the Taluk Courts was held on 23.11.2013 throughout the country, under the aegis of NALSA and 71.78 lakh cases had been disposed of or settled amicably out of which 20.92 lakh cases were settled at pre-litigation stage.

23 State Legal Services Authorities organized Mega Lok Adalats in which more than 27.82 lakh cases have been disposed of or settled amicably out of which 3.82 lakh cases were settled at pre-litigation stage.

NALSA launched a Programme for setting up of Village Care and Support Centres in one village in each Taluk/Sub-division throughout the country on 24th January, 2014 to encourage and strengthen the setting up of and functioning of Legal Services Clinic with the main aim to provide easily accessible legal services to the large population living in villages. About 10500 village legal care and support centres have been set up throughout the country as on 30.04.2014 and 41418 visitors were helped.

Mobile Lok Adalats have been formed for taking a team of judicial officers, lawyers and other legal services personnel to the distant villages through mobile vans funded by NALSA to organize lok adalat, for exhibiting publicity films, public address system for creating legal awareness.

SAARC SOCIAL CHARTER

Re-affirming that the principal goal of SAARC is to promote the welfare of the peoples of South Asia, to improve their quality of life, to accelerate economic growth, social progress and cultural development and to provide all individuals the opportunity to live in dignity and to realize their full potential.

Recognising that the countries of South Asia have been linked by age-old cultural, social and historical traditions and that these have enriched the interaction of ideas, values, cultures and philosophies among the people and the States and that these commonalities constitute solid foundations for regional cooperation for addressing more effectively the economic and social needs of people.

Recalling that all Member States attach high importance to the imperative of social development and economic growth and that their national legislative, executive and administrative frameworks provide, in varying degrees, for the progressive realization of social and economic goals, with specific provisions, where appropriate, for the principles of equity, affirmative action and public interest.

Observing that regional cooperation in the social sector has received the focused attention of the Member States and that specific areas such as health, nutrition, food security, safe drinking water and sanitation, population activities, and child development and rights along with gender equality, participation of women in development, welfare of the elderly people, youth mobilization and human resources development continue to remain on the agenda of regional cooperation.

Noting that high level meetings convened since the inception of SAARC on the subjects of children, women, human resettlements, sustainable developments, agriculture and food, poverty alleviation etc. have contributed immensely to the enrichment of the social agenda in the region and that several directives of the Heads of State or Government of SAARC Countries at their Summit meetings have imparted dynamism and urgency to adopting regional programmes to fully and effectively realize social goals.

Reiterating that the SAARC Charter and the SAARC Conventions, respectively on Narcotic Drugs and Psychotropic Substances, Preventing and

Combating Trafficking in Women and Children for Prostitution, Regional Arrangements for the Promotion of Child Welfare in South Asia and the SAARC Agreement on Food Security Reserve provide regional frameworks for addressing specific social issues, which require concerted and coordinated actions and strategies for the effective realization of their objectives.

Realizing that the health of the population of the countries of the region is closely interlinked and can be sustained only by putting in place coordinated surveillance mechanisms and prevention and management strategies.

Noting, in particular, that Heads of State or Government of SAARC Countries, at their Tenth Summit in Colombo in July 1998, re-affirmed the need to develop, beyond national plans of action, a regional dimension of cooperation in the social sector and that the Eleventh SAARC Summit in Kathmandu in January 2002 directed that a SAARC Social Charter be concluded as early as possible.

Convinced that it was timely to develop a regional instrument which consolidated the multifarious commitments of SAARC Member States in the social sector and provided a practical platform for concerted, coherent and complementary action in determining social priorities, improving the structure and content of social policies and programmes, ensuring greater efficiency in the utilization of national, regional and external resources and in enhancing the equity and sustainability of social programmes and the quality of living conditions of their beneficiaries.

The Member States of the South Asian Association for Regional Cooperation hereby agree to adopt this Charter:

Article I : General Provisions

1. States Parties shall maintain a social policy and strategy in order to ensure an overall and balanced social development of their peoples. The salient features of individual social policy and programme shall be determined, taking into account the broader national development goals and specific historic and political contexts of each State Party.
2. States Parties agree that the obligations under the Social Charter shall be respected, protected and fulfilled without reservation and that the enforcement thereof at the national level shall be continuously reviewed through agreed regional arrangements and mechanisms.

3. States Parties shall establish a people-centered framework for social development to guide their work and in the future, to build a culture of cooperation and partnership and to respond to the immediate needs of those who are most affected by human distress. States Parties are determined to meet this challenge and promote social development throughout the region.

Article II : Principles, Goals and Objectives

1. The provisions made herein shall complement the national processes of policy-making, policy-implementation and policy-evaluation, while providing broad parameters and principles for addressing common social issues and developing and implementing result-oriented programmes in specific social areas.

2. In the light of the commitments made in this Charter, States Parties agree to:

- i. Place people at the center of development and direct their economies to meet human needs more effectively;
- ii. Fulfill the responsibility towards present and future generations by ensuring equity among generations, and protecting the integrity and sustainable use of the environment;
- iii. Recognize that, while social development is a national responsibility, its successful achievement requires the collective commitment and cooperation of the international community;
- iv. Integrate economic, cultural and social policies so that they become mutually supportive, and acknowledge the interdependence of public and private spheres of activity;
- v. Recognize that the achievement of sustained social development requires sound, equitable and broad-based economic policies;
- vi. Promote participatory governance, human dignity, social justice and solidarity at the national, regional and international levels;
- vii. Ensure tolerance, non-violence, pluralism and non-discrimination in respect of diversity within and among societies;
- viii. Promote the equitable distribution of income and greater access to resources through equity and equality of opportunity for all;
- ix. Recognize the family as the basic unit of society, and acknowledge that it plays a key role in social development and as such should be strengthened, with attention to the rights, capabilities and responsibilities of its members including children, youth and the elderly;
- x. Affirm that while State, society, community and family have obligations towards children, these must be viewed in the context of inculcating in

- children intrinsic and attendant sense of duty and set of values directed towards preserving and strengthening the family, community, society and nation;
- xi. Ensure that disadvantaged, marginalized and vulnerable persons and groups are included in social development, and that society acknowledges and responds to the consequences of disability by securing the legal rights of the individual and by making the physical and social environment accessible;
 - xii. Promote universal respect for and observance and protection of human rights and fundamental freedoms for all, in particular the right to development; promote the effective exercise of rights and the discharge of responsibilities in a balanced manner at all levels of society; promote gender equity; promote the welfare and interest of children and youth; promote social integration and strengthen civil society;
 - xiii. Recognize the promotion of health as a regional objective and strive to enhance it by responding to urgent health issues and outbreak of any communicable disease in the region through sharing information with each other, imparting public health and curative skills to professionals in the region; and adopting a coordinated approach to health related issues in international fora;
 - xiv. Support progress and protect people and communities whereby every member of society is enabled to satisfy basic human needs and to realize his or her personal dignity, safety and creativity;
 - xv. Recognize and support people with diverse cultures, beliefs and traditions in their pursuit of economic and social development with full respect for their identity, traditions, forms of social organization and cultural values;
 - xvi. Underline the importance of transparent and accountable conduct of administration in public and private, national and international institutions;
 - xvii. Recognize that empowering people, particularly women, to strengthen their own capacities is an important objective of development and its principal resource. Empowerment requires the full participation of people in the formulation, implementation and evaluation of decisions and sharing the results equitably;
 - xviii. Accept the universality of social development, and outline an effective approach to it, with a renewed call for international cooperation and partnership;
 - xix. Ensure that the elderly persons lead meaningful and fulfilling lives while enjoying all rights without discrimination and facilitate the creation of an

- environment in which they continue to utilize their knowledge, experience and skills;
- xx. Recognize that information communication technology can help in fulfilling social development goals and emphasize the need to facilitate easy access to this technology;
 - xxi. Strengthen policies and programmes that improve, broaden and ensure the participation of women in all spheres of political, economic, social and cultural life, as equal partners, and improve their access to all resources needed for the full enjoyment of their fundamental freedoms and other entitlements.

ARTICLE III : Poverty Alleviation

1. States Parties affirm that highest priority shall be accorded to the alleviation of poverty in all South Asian countries. Recognising that South Asia's poor could constitute a huge and potential resource, provided their basic needs are met and they are mobilized to create economic growth, States Parties reaffirm that the poor should be empowered and irreversibly linked to the mainstream of development. They also agree to take appropriate measures to create income-generating activities for the poor.
2. Noting that a large number of the people remain below the poverty line, States Parties re-affirm their commitment to implement an assured nutritional standards approach towards the satisfaction of basic needs of the South Asian poor.
3. Noting the vital importance of biotechnology for the long-term food security of developing countries as well as for medicinal purposes, States Parties resolve that cooperation should be extended to the exchange of expertise in genetic conservation and maintenance of germplasm banks. They stress the importance of the role of training facilities in this area and agree that cooperation in the cataloguing of genetic resources in different SAARC countries would be mutually beneficial.
4. States Parties agree that access to basic education, adequate housing, safe drinking water and sanitation, and primary health care should be guaranteed in legislation, executive and administrative provisions, in addition to ensuring of adequate standard of living, including adequate shelter, food and clothing.
5. States Parties underline the imperative for providing a better habitat to the people of South Asia as part of addressing the problems of the

homeless. They agree that each country share the experiences gained in their efforts to provide shelter, and exchange expertise for effectively alleviating the problem.

ARTICLE IV : Health

1. States Parties re-affirm that they will strive to protect and promote the health of the population in the region. Recognizing that it is not possible to achieve good health in any country without addressing the problems of primary health issues and communicable diseases in the region, the States Parties agree to share information regarding the outbreak of any communicable disease among their populations.

2. Conscious that considerable expertise has been built up within the SAARC countries on disease prevention, management and treatment, States Parties affirm their willingness to share knowledge and expertise with other countries in the region.

3. Noting that the capacity for manufacture of drugs and other chemicals exists in different countries, States Parties agree to share such capacity and products when sought by any other State Party.

4. Realizing that health issues are related to livelihood and trade issues which are influenced by international agreements and conventions, the States Parties agree to hold prior consultation on such issues and to make an effort to arrive at a coordinated stand on issues that relate to the health of their population.

5. States Parties also agree to strive at adopting regional standards on drugs and pharmaceutical products.

Article V : Education, Human Resource Development and Youth Mobilization

1. Deeply conscious that education is the cutting edge in the struggle against poverty and the promotion of development, States Parties re-affirm the importance of attaining the target of providing free education to all children between the ages of 6 – 14 years. They agree to share their respective experiences and technical expertise to achieve this goal.

2. States Parties agree that broad-based growth should create productive employment opportunities for all groups of people, including young people.

3. States Parties agree to provide enhanced job opportunities for young people through increased investment in education and vocational training.
4. States Parties agree to provide adequate employment opportunities and leisure time activities for youth to make them economically and socially productive.
5. States Parties shall find ways and means to provide youth with access to education, create awareness on family planning, HIV/AIDS and other sexually-transmitted diseases, and risks of consumption of tobacco, alcohol and drugs.
6. States Parties stress the idealism of youth must be harnessed for regional cooperative programmes. They further stress the imperative of the resurgence of South Asian consciousness in the youth of each country through participation in the development programmes and through greater understanding and appreciation of each other's country. The Organized Volunteers Programme under which volunteers from one country would be able to work in other countries in the social fields shall be revitalized.
7. States Parties recognize that it is essential to promote increased cross-fertilization of ideas through greater interaction among students, scholars and academics in the SAARC countries. They express the resolve that a concerted programme of exchange of scholars among Member States should be strengthened.

Article VI : Promotion of the status of women

1. States Parties reaffirm their belief that discrimination against women is incompatible with human rights and dignity and with the welfare of the family and society; that it prevents women realizing their social and economic potential and their participation on equal terms with men, in the political, social, economic and cultural life of the country, and is a serious obstacle to the full development of their personality and in their contribution to the social and economic development of their countries.
2. States Parties agree that all appropriate measures shall be taken to educate public opinion and to direct national aspirations towards the eradication of prejudice and the abolition of customary and all other practices, which are based on discrimination against women. States Parties further declare that all forms of discrimination and violence against women

are offences against human rights and dignity and that such offences must be prohibited through legislative, administrative and judicial actions.

3. States Parties shall take all appropriate measures to ensure to women on equal terms with men, an enabling environment for their effective participation in the local, regional and national development processes and for the enjoyment of their fundamental freedoms and legitimate entitlements.

4. States Parties also affirm the need to empower women through literacy and education recognizing the fact that such empowerment paves the way for faster economic and social development. They particularly stress the need to reduce, and eventually eliminate, the gender gap in literacy that currently exists in the SAARC nations, within a time-bound period.

5. States Parties re-affirm their commitment to effectively implement the SAARC Convention on Combating the Trafficking of Women and Children for Prostitution and to combat and suppress all forms of traffic in women and exploitation of women, including through the cooperation of appropriate sections of the civil society.

6. States Parties are of the firm view that at the regional level, mechanisms and institutions, to promote the advancement of women as an integral part of mainstream political, economic, social and cultural development be established.

Article VII : Promotion of the Rights and Well-being of the Child

1. States Parties are convinced that the child, by reason of his or her physical and mental dependence, needs special safeguards and care, including appropriate legal protection, before as well as after birth.

2. The child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding.

3. States Parties shall protect the child against all forms of abuse and exploitation prejudicial to any aspects of the child's well-being.

4. States Parties shall take necessary actions to implement effectively the SAARC Convention on Regional Arrangements for the Promotion of Child Welfare and to combat and suppress all offences against the person, dignity and the life of the child.

5. States Parties are resolved that the child shall enjoy special protection, and shall be given opportunities and facilities, by law and by other means, to enable him or her to develop its full potential physically, mentally, emotionally, morally, spiritually, socially and culturally in a healthy and normal manner and in conditions of freedom and dignity. The best interests and welfare of the child shall be the paramount consideration and the guiding principle in all matters involving his or her life.

6. States Parties agree to extend to the child all possible support from government, society and the community. The child shall be entitled to grow and develop in health with due protection. To this end, special services shall be provided for the child and its mother, including pre-natal, natal (especially delivery by trained birth attendant) and post-natal care, immunization, early childhood care, timely and appropriate nutrition, education and recreation. States Parties shall undertake specific steps to reduce low birth weight, malnutrition, anemia amongst women and children, infant, child and maternal morbidity and mortality rates, through the inter-generational life cycle approach, increase education, literacy, and skill development amongst adolescents and youth, especially of girls and elimination of child/early marriage.

7. States Parties shall take effective measures for the rehabilitation and re-integration of children in conflict with the law.

8. State Parties shall take appropriate measures for the re-habilitation of street children, orphaned, displaced and abandoned children, and children affected by armed conflict.

9. States Parties pledge that a physically, mentally, emotionally or socially disadvantaged child shall be given the special treatment, education and care required by his or her particular condition.

10. States Parties shall ensure that a child of tender years shall not, save in exceptional circumstances, be separated from his or her mother and that society and the public authorities shall be required to extend particular care to children without a family and to those without adequate means of support, including where desirable, provision of State and other assistance towards his or her maintenance.

11. States Parties shall take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances as

defined in the relevant international treaties, and to prevent the use of children in the illicit production and trafficking of such substances. In this respect, States Parties shall expedite the implementation of the SAARC Convention on Narcotic Drugs and Psychotropic Substances at the national and regional levels.

Article VIII : Population Stabilisation

1. States Parties underscore the vital importance of enhanced cooperation in the social development and well-being of the people of South Asia. They agree that national programmes evolved through stakeholder partnership, with enhancement of allocation of requisite resources and well-coordinated regional programmes will contribute to a positive atmosphere for the development of a socially content, healthy and sustainable population in the region.

2. States Parties are of the view that population policies should provide for human-centered approach to population and development and aim towards human survival and well-being. In this regard, they affirm that national, local or provincial policies and strategies should aim to bring stabilization in the growth of population in each country, through voluntary sustainable family planning and contraceptive methods, which do not affect the health of women.

3. States Parties shall endeavour to inculcate a culture of self-contentment and regulation where unsustainable consumption and production patterns would have no place in the society and unsustainable population changes, internal migration resulting in excessive population concentration, homelessness, increasing poverty, unemployment, growing insecurity and violence, environmental degradation and increased vulnerability to disasters would be carefully, diligently and effectively managed.

4. States Parties shall take action to ensure reproductive health, reduction of maternal and infant mortality rates as also provision of adequate facilities to enable an infant to enjoy the warmth of love and support of his/her parents.

5. States Parties also agree to set up a SAARC Network of Focal Institutions on population activities for facilitating the sharing of information, experiences and resources within the region.

ARTICLE IX : Drug de-addiction, Rehabilitation and Reintegration

1. States Parties agree that regional cooperation should be enhanced through exchange of information, sharing of national experiences and common programmes in the specific areas, which should receive the priority consideration of the appropriate mechanisms both at the national and regional levels.
2. States Parties identify for intensive cooperation, the strengthening of legal systems to enhance collaboration in terms of financial investigation; asset forfeiture; money laundering; countering criminal conspiracies and organized crime; mutual legal assistance; controlled deliveries; extradition; the updating of laws and other relevant structures to meet the obligations of the SAARC Convention and other related international obligations, and developing of measures to counter drug trafficking through exchange of information; inter-country cooperation; controlled deliveries; strengthened SDOMD; regional training; frequent meetings at both policy and operational levels; strengthening the enforcement capabilities in the SAARC countries; enhanced control of production and use of licit drugs, and precursors and their essential chemicals.
3. Keeping in view the complementarities between demand reduction activities and supply control programmes, States Parties agree that all aspects of demand reduction, supply control, de-addiction and rehabilitation should be addressed by regional mechanisms.

ARTICLE X : Implementation

1. The implementation of the Social Charter shall be facilitated by a National Coordination Committee or any appropriate national mechanism as may be decided in each country. Information on such mechanism will be exchanged between States Parties through the SAARC Secretariat. Appropriate SAARC bodies shall review the implementation of the Social Charter at the regional level.
2. Member States shall formulate a national plan of action or modify the existing one, if any, in order to operationalise the provisions of the Social Charter. This shall be done through a transparent and broad-based participatory process. Stakeholder approach shall also be followed in respect of implementation and evaluation of the programmes under National Plans of Action.

ARTICLE XI : Entry into force

The Social Charter shall come into force upon the signature thereof by all States Parties.

ARTICLE XII : Amendment

The Social Charter may be amended through agreement among all States Parties.

IN FAITH WHEREOF We Have Set Our Hands And Seals Hereunto.

DONE In **ISLAMABAD, PAKISTAN**, On This The Sixth Day Of January Of The Year Two Thousand Four, In Nine Originals, In The English Language, All Texts Being Equally Authentic.

Begum Khaleda Zia

PRIME MINISTER OF THE PEOPLE'S
REPUBLIC OF BANGLADESH

Maumoon Abdul Gayoom

PRESIDENT OF THE
REPUBLIC OF MALDIVES

Jigmi Yoezer Thinley

PRIME MINISTER OF THE
KINGDOM OF BHUTAN

Surya Bahadur Thapa

PRIME MINISTER OF THE
KINGDOM OF NEPAL

Atal Behari Vajpayee

PRIME MINISTER OF THE
REPUBLIC OF INDIA

Mir Zafarullah Khan Jamali

PRIME MINISTER OF THE
ISLAMIC REPUBLIC OF PAKISTAN

Chandrika Bandaranaike Kumaratunga

PRESIDENT OF THE DEMOCRATIC SOCIALIST
REPUBLIC OF SRI LANKA

SAARC Development Goals

<u>Livelihood</u>	
Goal 1 Eradication of Hunger Poverty	
<i>Indicator 1</i>	<i>Malnutrition in children under five years</i>
<i>Indicator 2</i>	<i>Malnutrition for overall population (in average intake)</i>
Goal 2 Halve proportion of people in poverty by 2012	
<i>Indicator 3</i>	<i>Percentage of people living on less than 1\$ per day (PPP terms)</i>
<i>Indicator 4</i>	<i>Head count poverty ratio based on nationally determined poverty line(s)</i>
Goal 3 Ensure adequate nutrition and dietary improvement for the poor	
<i>Indicator 5</i>	<i>Percentage of the poor covered by various food support programmes</i>
<i>Indicator 6</i>	<i>Micro-nutrient supplements e.g. % of people having access to Vitamin A, iodized salt, etc.</i>
Goal 4 Ensure a robust pro-poor growth process	
<i>Indicator 7</i>	<i>Budgetary/ fiscal expenditure for pro-poor growth sectors as % of GDP, and as % of total government expenditures</i>
<i>Indicator 8</i>	<i>% of poor covered by micro-credit and similar programmes</i>
<i>Indicator 9</i>	<i>Reduction of income/consumption inequality (Gini Coefficient)</i>
<i>Indicator 10</i>	<i>Rate of growth of employment (disaggregated)</i>
<i>Indicator 11</i>	<i>Assets ownership by poor (quantifiable indicators to be developed)</i>
<i>Additional indicators</i>	<i>Rate of increase of income/consumption of bottom 20% of the population compared to top 20% of the population</i>
Goal 5 Strengthen connectivity of poorer regions and of poor as social group	
<i>Indicator 12</i>	<i>Transport connectivity for the poor in rural areas (e.g., length of rural roads, availability of boats per 1000 population, average time/distance to reach nearest road/major population centre)</i>
<i>Indicator 13</i>	<i>Communications connectivity : % of people using telephone/cell Phone</i>
<i>Indicator 14</i>	<i>% of rural population having access to electricity</i>
<i>Indicator 15</i>	<i>Representation of the excluded groups (dalits/tribals/indigenous groups) in local government</i>

Indicator 16 *Mass media connectivity : percentage of people using TV and radio*

Goal 6 Reduce social and institutional vulnerability of the poor, women and children

Indicator 17 *% of children who are working*

Indicator 18 *Share of women in employment
(wage/self/organized/unorganized)*

Indicator 19 *Coverage or amount of public expenditure as % of GDP on
Social Protection for the Vulnerable Groups*

Indicator 20 *Early marriage (average age at marriage, % of girls married
before legal age)*

Indicator 21 *Birth registration (% of children registered)*

Indicator 22 *Sex ratio at birth*

Goal 7 Ensure access to affordable justice

Indicator 23 *Average time required in disposal of legal disputes*

Indicator 24 *Access to alternate disputes resolution*

Indicator 25 *Access to free legal aid for the poor (marginalized group)*

Goal 8 Ensure effective participation of poor and of women in anti-poverty policies and programmes

Indicator 26 *Percentage of women in local governments/ parliament/ civil
services, etc.*

Indicator 27 *Gender Budgeting : Budgetary expenditures for women/ poor
as % of total budgetary amount*

Health

Goal 9 Maternal health

Indicator 28 *Maternal Mortality Ratio (MMR)*

Indicator 29 *Percentage of births covered by the skilled birth attendants*

Indicator 30 *Life expectancy of women as a ratio of life expectancy of men*

Indicator 31 *Age specific fertility rate of 15 to 24 years girls*

Goal 10 Child health

Indicator 32 *Immunisation coverage (measles can be a proxy)*

Indicator 33 *Under 5 mortality rate (CMR)*

Indicator 34 *IMR*

Indicator 35 *Neo-natal mortality rate*

Goal 11 Affordable health care

Indicator 36 *Out of pocket expenditure on health as % of total household
expenditure*

<i>Indicator 37</i>	<i>Total government expenditure on health as a % of GDP</i>
<i>Indicator 38</i>	<i>% of budget allocated to primary health care vis-à-vis total health budget</i>
<i>Indicator 39</i>	<i>Number of doctors per 1000 population</i>
Goal 12 Improved hygiene and public health	
<i>Indicator 40</i>	<i>% of population with access to safe drinking water</i>
<i>Indicator 41</i>	<i>% of population having access to sanitation</i>
<i>Indicator 42</i>	<i>Policies on health education (number of programmes, preventing and health promoting, on communicable diseases e.g. HIV/AIDS, TB and malaria</i>
<i>Indicator 43</i>	<i>Prevalence rate of HIV/AIDS, TB, Malaria</i>
<u>Education</u>	
Goal 13 Access to primary/community schools for all children, boys and girls	
<i>Indicator 44</i>	<i>% of children having access to primary schools by distance</i>
<i>Indicator 45</i>	<i>Gross Enrolment Rate/Net Enrolment Rate</i>
<i>Indicator 46</i>	<i>Public expenditure on education in terms of GDP</i>
<i>Indicator 47</i>	<i>Gender parity at primary and secondary level</i>
Goal 14 Completion of primary education cycle	
<i>Indicator 48</i>	<i>Survival rates (along with drop-out)</i>
Goal 15 Universal functional literacy	
<i>Indicator 49</i>	<i>Adult literacy rate</i>
Goal 16 Quality education at primary, secondary and vocational levels	
<i>Indicator 50</i>	<i>Percentage of trained teachers</i>
<i>Indicator 51</i>	<i>Students teacher ratio</i>
<i>Indicator 52</i>	<i>Percentage of schools with toilets for girls</i>
<u>Environment</u>	
Goal 17 Acceptable level of forest cover	
<i>Indicator 53</i>	<i>Percentage of forest cover</i>
<i>Indicator 54</i>	<i>Percentage or extent of community/social forest</i>
Goal 18 Acceptable level of water and soil quality	
<i>Indicator 55</i>	<i>Chemical fertilizers/ pesticides consumption per ha of arable land</i>
<i>Indicator 56</i>	<i>Percentage of contaminated wells/water sources</i>
Goal 19 Acceptable level of air quality	
<i>Indicator 57</i>	<i>Carbon dioxide emissions (metric tons per capita)</i>

Indicator 58 Particulate matter (PM 2.5/10) in the major metropolitan centres

Indicator 59 Percentage of firewood in total energy mix

Goal 20 Conservation of bio-diversity

Indicator 60 % and number of protected areas out of the total land area (with management plan)

Indicator 61 Number of protected species

Goal 21 Wetland conservation

Indicator 62 Number and % of protected wetland/Ramsar sites

Goal 22 Ban on dumping of hazardous waste, including radio-active waste

Indicator 63 Solid waste generation per capita (kg p.a.)

Indicator 64 % of waste treated

Indicator 65 Regulatory framework for hazardous waste treatment in place

Some Important Indicators in Figures (2014)

Indicator		Ref Year	Source
Population ('000)	1210569	2011	Population Census 2011, Office of RGI
Population growth rate (%) (Average annual exponential growth rate)	1.8		
Population density (per sq. km)	382		
Sex ratio (Number of males per 100 females)	106		
Urban population (% of total population)	31.2		
Crude Birth Rate (CBR) per 1000 population	21.6	2012	Sample Registration System, 2012, Office of RGI
Crude Death Rate (CDR) per 1000 population	7.0		
Total Fertility Rate (TFR) per Woman	2.4		
Life expectancy at birth, Males (Years)	64.6	2006-10	
Life expectancy at birth, Females (Years)	67.7		
Infant mortality (per 1000 live births)	42.0	2012	
Under five mortality (per 1000 live births)	52.0		
Maternal Mortality ratio (per 100000 live births)	178		
Birth attended by skilled health personnel	83.4		
Children under 1 immunized against measles (%)	74.1	2009	Coverage Evaluation Survey, UNICEF
HIV prevalence rate	0.27	2011	Department of AIDS Control, MoH&FW
Malaria Incidence rate per 100000 population	106	2012 Prov	Directorate of National Vector Borne Disease Control Programme
Tuberculosis detection rate under DOTS %	59	2011	
Tuberculosis prevalence rate per 100000 population	249	2012	MDG, 2014
Tuberculosis incidence rate per 100000 population	181		
Doctors (Physicians) per 10000 population	13.5	2011	National Health Profile, 2012, MoH&FW
Hospital beds per 10000 population	5.7		

Total health expenditure as % of GDP	1.4	2013-14	Economic Survey
Total expenditure on education as % of GDP	3.3		
Net enrolment ratio in primary education (%)	90.78	2012-13	District Information on School Education
Survival rate to last grade of primary education (%)	80.07		
Literacy rate (6 years and over)(%)	74.0	2011	Census 2011
Adult literacy rate (15 years and over) (%)	66.0	2007-08	Education in India, 2007-08
Labour force participation rate	55.9	2011-12	NSS 68 th Round
Unemployment rate	2.3		
Employment in agriculture (%)	48.9		
Population living below the national poverty line	21.9	2011	Planning Commission
Human development index	0.554	2011	Human Development Report, UNDP
HDI rank	136		
Female headed household (%)	10.90%	2011	Census 2011
Women in National Parliament (%)	11.75%	2011	LS & RS Secretariat
GDP at factor cost in Rs. Crore	9388876	2012-13	CSO
GDP per capita in Rupees	77148		
GNI per capita in Rupees	76188		
Growth rate of real GDP(at factor cost)	4.5		
Private consumption expenditure (% of GDP)	57.1		
Gross domestic capital formation (% of GDP)	34.8		
Export of goods and services (% of GDP)	24.0		
Imports of goods and services (% of GDP)	30.7		
Gross domestic saving (% of GDP)	30.1		
International tourists ('000)	6577	2013	Ministry of Tourism
Income from tourists (Rs. Crore)	107671		

Total road networks (km, '000)		4685.8	2012-13	Ministry of Road Transport and Highways
Total number of vehicles ('000)		141866	2012-13	
Total rail networks (Route KM)		64600	2012	Ministry of Railways
Total electricity generation (billion kWh)		911.7	2011-12	Ministry of Power
Total electricity used (per capital kWh)		879.22		
Gross electricity production (million KWh)		911652.3		
Household with electrification (%)	Rural	80.0	2012	NSS 69 th Round
	Urban	97.9		
Fixed telephone lines per 100 population		2.38	2013	July-September 2013, TRAI
Mobile cellular subscriptions per 100 population		70.63		
Internet users per 100 population		17.38		
Access to improved water source (% of population)	Rural	88.5	2012	NSS 69th Round
	Urban	95.3		
Access to improved sanitation (% of population)	Rural	38.8		
	Urban	89.6		
Co ₂ emissions (million tons)		1745.1	2011	International Energy Agency
Forest cover as % of total geographical area		21.23	2013	Ministry of Environment, Forests and Climate Change

Acronyms

ACDC	Awareness-cum De-addiction Camps
ADI	Average Daily Intake
AHS	Annual Health Survey
ANC	Ante Natal Care
ANM	Auxiliary Nurse Midwife
ARSH	Adolescent Reproductive and Sexual Health
ASHA	Accredited Social Health Activist
ASSOCHAM	Associated Chamber of Commerce
BCG	Bacillus Calmette Guerin
BPL	Below Poverty Line
BSUP	Basic Services to the Urban Poor
CBOs	Community Based Organisations
CBR	Crude Birth Rate
CBSE	Central Board of Secondary Education
CDR	Crude Death Rate
CDS	Community Development Society
CHC	Community Health Centre
CII	Confederation of Indian Industries
CMR	Child Mortality Rate
CPCB	Central Pollution Control Board
CSO	Central Statistics Office/Civil Society Organisation
CSSs	Centrally Sponsored Schemes
DISE	District Information System for Education
DLHS	District Level Health and Facility Survey
DOTS	Directly Observed Treatment Short Course
DPT	Diphtheria, Pertussis and Tetanus Toxoid
EBBs	Educationally Backward Blocks
ECCE	Early Childhood Care and Education
EGS	Education Guarantee Scheme
FICCI	Federation of Indian Chamber of Commerce
GDP	Gross Domestic Product
GHG	Greenhouse Gases
GIM	Green India Mission
ICDS	Integrated Child Development Services
ICPS	Integrated Child Protection Scheme
ICT	Information and Communication Technology
IAY	Indira Awaas Yojana
IEC	Information Education Communication
IFMS	Intensification of Forest Management Scheme
IGMSY	Indira Gandhi Matritva Sahyog Yojana
IHSDP	Integrated Housing and Slum Development Programme
IMR	Infant Mortality Rate

INCCA	<i>Indian Network for Climate Change Assessment</i>
IRCA	<i>Integrated Rehabilitation Centre for Addicts</i>
ISRO	<i>Indian Space Research Organisation</i>
IWMP	<i>Integrated Watershed Management Programme</i>
JFMC	<i>Joint Forest Management Committees</i>
JJ Act	<i>The Juvenile Justice (Care & Protection of Children) Act</i>
JNNURM	<i>Jawaharlal Nehru National Urban Renewal Mission</i>
JSSK	<i>Janani Shishu Suraksha Karyakram</i>
JSY	<i>Janani Suraksha Yojana</i>
KGBV	<i>Kasturba Gandhi Balika Vidyalaya</i>
KSY	<i>Kishori Shakti Yojana</i>
MGNREGA	<i>Mahatma Gandhi National Rural Employment Guarantee Act</i>
MMR	<i>Maternal Mortality Rate/ Ratio</i>
NAAQS	<i>National Ambient Air Quality Standards</i>
NAMP	<i>National Ambient Air Monitoring Programme</i>
NAPCC	<i>National Action Plan on Climate Change</i>
NATCOM	<i>National Communications</i>
NDDTC	<i>National Drug Dependence Treatment Centre</i>
NEAC	<i>National Environment Awareness Campaign</i>
NEP	<i>National Environment Policy</i>
NFBS	<i>National Family Benefit Scheme</i>
NFHS	<i>National Family Health Survey</i>
NGO	<i>Non-Governmental Organisation</i>
NHP	<i>National Health Policy</i>
NMBS	<i>National Maternity Benefit Scheme</i>
NMEW	<i>National Mission for Empowerment of Women</i>
NMR	<i>Neo-natal Mortality Rate</i>
NOAPS	<i>National Old Age Pension Scheme</i>
NPAG	<i>Nutrition Programme for Adolescent Girls</i>
NP-NSPE	<i>National Programme of Nutritional Support to Primary Education</i>
NPE	<i>National Policy on Education</i>
NRCW	<i>National Resource Centre for Women</i>
NREGA	<i>National Rural Employment Guarantee Act</i>
NRLM	<i>National Rural Livelihood Mission</i>
NRHM	<i>National Rural Health Mission</i>
NRY	<i>Nehru Rozgar Yojana</i>
NSAP	<i>National Social Assistance Programme</i>
NSIGSE	<i>National Scheme of Incentive to Girls for Secondary Education</i>
NSS	<i>National Sample Survey</i>
NSSO	<i>National Sample Survey Office</i>
NVBDCP	<i>National Vector Borne Diseases Control Programme</i>
NYC	<i>National Youth Corps</i>
NYKS	<i>Nehru Yuva Kendra Sangathan</i>
NSS	<i>National Service Scheme</i>

NUHM	National Urban Health Mission
OPV	Oral Polio Vaccine
PDA	Personal Digital Assistant
PH	Physically Handicapped
PHC	Primary Health Centre
PMIUPEP	Prime Minister's Integrated Urban Poverty Eradication Programme
PMGSY	Pradhan Mantri Gram Sadak Yojana
PPP	Public Private Partnership
PRIs	Panchayati Raj Institutions
RAY	Rajiv Awas Yojna
RCH	Reproductive and Child Health
RGNIYD	Rajiv Gandhi National Institute of Youth Development
RGSEAG	Rajiv Gandhi Scheme for Empowerment of Adolescent Girls
RMSA	Rashtriya Madhyamik Shiksha Abhiyan
RNTCP	Revised National Tuberculosis Control Programme
RRTCs	Regional Resource and Training Centres
RTE	Right To Education
RTI	Reproductive Tract Infections
SAARC	South Asian Association for Regional Cooperation
SAI	Sports Authority of India
SC	Scheduled Caste
SGSY	Swarnjayanti Gram Swarajgar Yojana
SHGs	Self Help Groups
SJSRY	Swarn Jayanti Shahari Rojgar Yojana
SRS	Sample Registration System
SSA	Sarva Shiksha Abhiyan
ST	Scheduled Tribe
STEP	Support to Training & Employment Programme for Women
STI	Sexually Transmitted Infections
TB	Tuberculosis
TFR	Total Fertility Rate
UIDSSMT	Urban Infrastructure Development Scheme for Small and Medium Towns
UIG	Urban Infrastructure and Governance
UIP	Universal Immunisation Programme
UNFCCC	United Nations Framework Convention on Climate Change
UNODC	United Nations Office on Drugs and Crime
VE	Vocational Education