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Women Empowerment



To become self-reliant and self-sufficient is the biggest lesson learnt from Corona pandemic says Prime Minister **'Do gaJ doori' is the Rural India's Mantra to fight COVID-19: PM**

Prime Minister launches e-Gram Swarajya App and Swamitva Scheme

Prime Minister Shri Narendra Modi interacted with Sarpanchs of Gram Panchayats throughout the country on 24th April through Video Conferencing, on the occasion of National Panchayati Raj Day 2020. During this event, he launched a unified e-GramSwaraj Portal and mobile application and Swamitva Scheme.

The e-GramSwaraj helps prepare and execute Gram Panchayat Development Plans. The portal will ensure real time monitoring and accountability. The portal is a major step towards digitization down to the Gram Panchayat level. The Swamitva scheme which is launched in pilot mode in six states helps to map rural inhabited lands using drones and latest survey methods. The scheme will ensure streamlined planning, revenue collection and provide clarity over property rights in rural areas. This will open up avenues for applying for loans from financial institutions by the owners. Disputes related to property would also be settled through the title deeds allotted through this scheme.

Addressing the Sarpanches all over the country, the Prime Minister said, the Corona pandemic has changed the way people worked and taught a good lesson. He said the pandemic taught us that one has to be self-reliant always. "This Pandemic has thrown at us new challenges and problems which we have never imagined, but it also taught us a very good lesson with a strong message. It has taught us that we have to be self-reliant and self-sufficient. It has taught us that we should not look for solutions outside the country. This is the biggest lesson we have learnt." "Every Village has to be self-sufficient enough to provide for its basic needs. Similarly every district has to be self-sufficient at its level, every state has to be self-reliant at its level and the whole country has to be self-reliant at its level", he said.

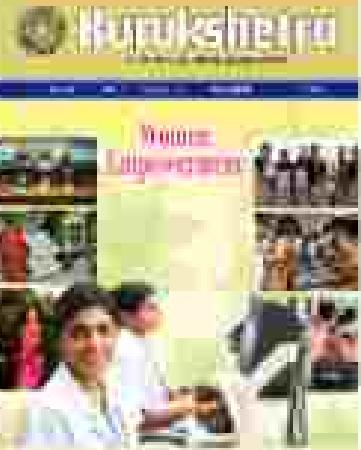
Shri Narendra Modi said that the Government worked hard in trying to promote self-sufficiency to villages and making the Gram Panchayats stronger. "In the last five years nearly 1.25 Lakh Panchayats have been connected through broadband from a mere 100 before. Similarly, the number of Common Service Centres had crossed 3 Lakhs", he said.

He said since mobile phones are being manufactured in India, the cost of smartphones has become cheaper and the low cost smartphones have reached every village and this would further strengthen the digital infrastructure at village level. The Prime Minister said the "Progress of Panchayati will ensure the development of the nation and democracy". The occasion today was an opportunity to establish direct dialogue between the Prime Minister and the Gram Panchayat representatives.

During his interaction with the sarpanchs, the Prime Minister complimented the villages for giving the mantra - 'Do gaJ doori' to define social distancing in simpler terms. He said that the slogan of "Do gaJ Deh hi doori" given by rural India showed the wisdom of the people. He appreciated the slogan, saying that it motivates people to practice social distancing. Prime Minister said that notwithstanding the limited resources at its disposal, India has taken the challenge proactively and showed its resolve to move forward with new energy and new ways. He said, "the collective power of the villages is helping the country move forward".

He urged the Sarpanches to provide correct information to every family on various aspects of COVID-19. He also appealed to people in rural India to download the Aarogya Setu app and asked Panchayat representatives to ensure that every person in their Panchayat downloads the app. The Prime Minister said that serious efforts are made to ensure that poor people of the village get the best healthcare. He said that Ayushman Bharat Yojana has emerged as a big relief for the poor of the village and nearly one crore poor patients have received free treatment in the hospital under this scheme. The Prime Minister wished the Sarpanches on Panchayati RaJ Diwas for defeating Corona with their collective efforts, solidarity and determination.

(Source: PIB)



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Responsible people have a duty of care to their development as well as to others as a result of their health and mental disease or the position of their

The next section will be the analysis of the new hybrid model, which is based on the assessment of the approach they used by the main companies to predict the losses in the environment, regarding their production and operation. Furthermore, the new hybrid model will be compared with the current models to evaluate its performance.

Editorial

"Empowering women is a prerequisite for creating a good nation, when women are empowered, society with stability is assured. Empowerment of women is essential as their value system leads to the development of a good family, society and ultimately a good nation."

DR API Abdul Kalam

Today, women have excelled in every field they have stepped into, be it in outer space or tilling soil. However, this success is the result of women's long struggle for equality, justice and freedom which continues till today. Women empowerment is no longer limited to economic progress but means living a dignified life, free from violence and discrimination with self-respect and positive self-esteem. Heeding to the call of the Prime Minister Narendra Modi, a shift is required from women development to women-led development. By framing policies and programmes that ameliorate socioeconomic conditions of women, India has contributed in supporting its female population in becoming drivers of their own destiny.

Health and Education are two essential wheels of women's progress. Considering the role women play in family, society and community, female health and hygiene not only affect the next generation but also have definite impact on collective well-being and nutrition. The National Health Mission addresses malnutrition among women through schemes like Anemia Mukt Bharat, organisation of Village Health and Nutrition Days and Sanitation and Nutrition days. Programmes like Pradhan Mantri Matru Vandana Yojana, Anganwadi Services Scheme, POSHAN Abhiyan aim at improving nutritional status of pregnant woman and children.

Women education is crucial as it affects the quality of life, awareness level and holistic development of the society. Initiatives like Ban Bachao, Ban Padhao that prevent gender-biased sex-selective elimination of girl child and safeguard their right to education is a step in the right direction. The Right to Education Initiative has helped alleviate the female literacy rate in the country from 51.7 per cent in 2001 to 64.5 per cent in 2011 with more and more female students enrolling in higher education.

Empowering rural women is critical for inclusive development. Ensuring that they become active contributors in the country's progress as well as receive its fruits is vital. Self-Help Groups are extremely effective and important part of rural development. Not only does the government resides several of its initiatives through SHGs but these groups also act as economic and social support system for the village. Programmes like MFLM have extended capitalisation support of Rs. 8334 crore to 64.39 lakh SHGs with 7.05 crore members. Banking and other financial institutions are also reaching out to such SHGs for financial empowerment.

The Government has actively promoted self-employment of women by ensuring that they become wealth and job creators instead of being job seekers in the economy. Programmes such as Stand-up India, MUDRA Yojana, Raamtha Maamta Yojna, etc., have focussed on dealing with challenges like poor access to funding and markets and bolstering the confidence of women to take on entrepreneurial risk.

Even though, India has launched several initiatives for empowering women there is a need to combat these challenges from inception and planning of policies and programmes. Gender Budgeting is key to addressing these issues at a budgetary level where in a dissection of the government budget is done to establish its gender-specific impact and assess how it will address the different needs of women.

Although women have been dominant part of the rural workforce, they are marginalised and disadvantaged in wages, land rights and representation in group activities. Nonetheless, women have carved a space for themselves such as the ASHA workers who are doing pivotal work in the COVID-19 crisis. In order to realise the dream of 'New India', the nation needs to help women harness their potential and shape the country's destiny.

The information in this issue mostly pertains to the pre-lockdown period. However, efforts have been made to update the articles as far as possible within the constraints of the lockdown.

ROLE OF WOMEN IN AGRICULTURE AND RURAL PROSPERITY

J P Misra

Women have been instrumental in agricultural development and rural prosperity. Rural women play a vital role not only in crop planning and cultivation but also in high value activities like agriculture, primary food processing, livestock rearing, fisheries and cottage industries. Although women have been contributing dominantly in the rural labour force they are marginalized and disadvantaged in wages, land rights and representation in group decisions.

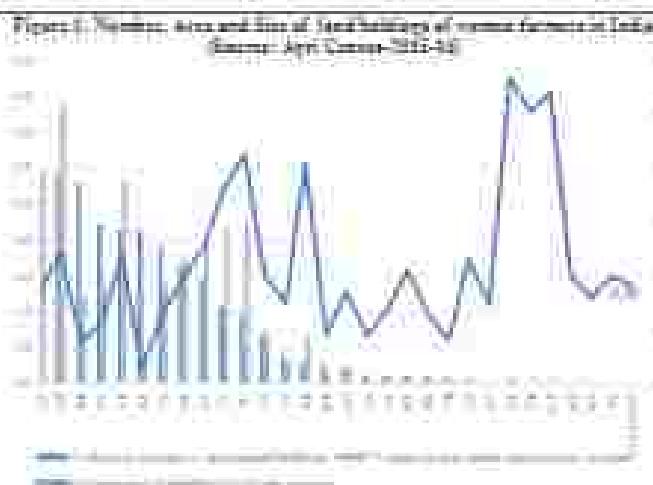
Agriculture in India, contributing about 15.5 percent of GDP, is a female intensive activity. In a typical rural-agri household, women pursue multiple livelihood strategies often managing complex issues. Her activities vary from performing multiple farm operations for producing the agricultural crops, rearing animals, and preparing food to working for wages in agricultural or other rural enterprises, collecting fuel and water, engaging in trade and marketing, caring for family members, and maintaining their homes. Though national accounts does not classify many of these activities as economically active employment but they are vital and essential to the well-being of rural households. The Agriculture Census, 2015-16 has revealed a very promising trend. The census established that the share of female operational holders has increased



from 12.79 per cent in 2010-11 to 13.87 per cent in 2015-16. In terms of operated area, the share of women increased from 10.36 per cent to 11.57 per cent. This signifies that more and more females are participating in the management and operation of agricultural lands. The state-wise distribution number, area and size of holdings of women farmers is presented in Figure 1. It shows that 11 states account about 92 percent of number of women farmers and area operated by them. The average land holdings with women farmers is 0.9 ha while the highest is of 2.84 ha in Nagaland.

Agriculture and Female Employment

The central role (in all) operations of agriculture and even rural household management is played by women. Their



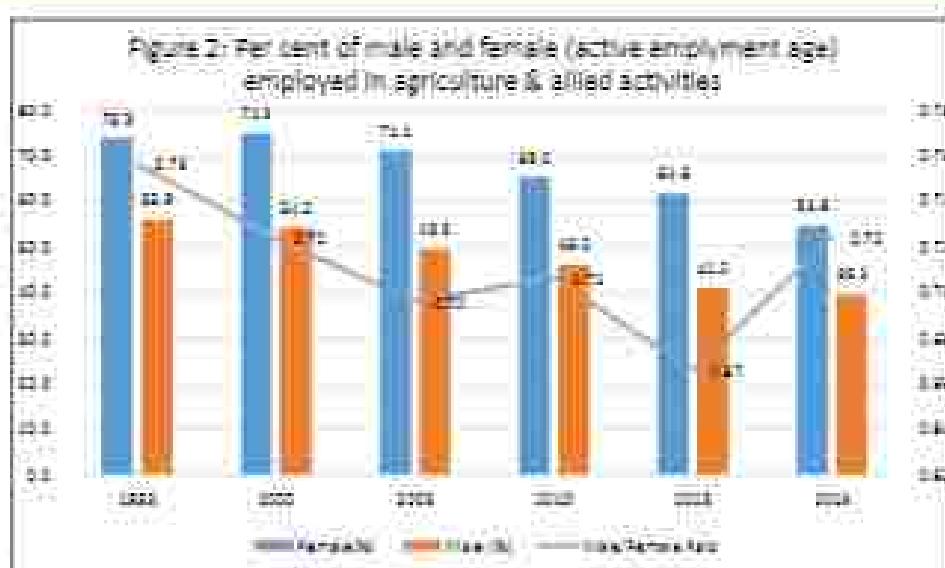
The information in the articles mostly pertains to the pre-lockdown period. However, efforts have been made to update the articles as far as possible within the constraints of the lockdown.

are involved in all aspects of agriculture, from crop and seed selection to harvest and post-harvest management, marketing, and processing. According to estimates, the agricultural sector employs about 45% of all economically active women. Women have clear edge in dairying and animal husbandry also. Close to 73 million women are engaged in dairying and 29 million in animal husbandry against 15 million men in dairying and 13 million in animal husbandry.

The data extracted from International Labour Organisation's Statistics (ILOSTAT) from 1995 to 2019 on percentage men and women of active employment age engaged in agriculture (cultivators, agricultural workers including labourers, marginal labourers and other activities in agriculture) indicated continuous withdrawal of women workforce since 1995 (Figure 2). Nevertheless, the percentage of female engaged in agriculture had beenossible at 34.5 percent in 2019 against 39.5 percent of male. It is obvious that the contribution of female workers and farmers has been much larger in agriculture and allied activities than the men. The withdrawal of women and men workforce from agriculture is a welcome move due to empowerment of women through better education, alternative employment opportunities and access to rights and resources, etc. In a developing nation like ours where urbanisation is becoming a social development order, the large number of women need to move out from agriculture to join services and industrial sector. When examining that of the participation of men, the decline is comparatively lesser to that of women.

Women have been instrumental in agricultural development and rural prosperity. Rural women play a vital role not only in crop planning and cultivation but also in high value activities like horticulture, primary food processing, livestock rearing, fisheries and cottage industries. Although women have been contributing

Figure 2: Per cent of male and female (active employment age) employed in agriculture & allied activities



dominantly in the rural labour force, they are marginalised and disadvantaged in wages, land rights and representation in group activities. Women have very limited access to productive resources which consequently limits their productivity. somehow, the needs and aspirations of women labour force could not get true focus in the rural development initiatives in the past.

Financial inclusion and Rural Women

India continues to enjoy the status of being an agrarian economy despite the various efforts being made to develop urban clusters and also in creating urban amenities in rural (rurban) India. NSO's All India Rural Financial Inclusion Survey (2016-17) indicated that the structure of rural income has been changing rapidly. Agriculture which happened to be a major source of income for the rural households few years earlier has been transformed and the wages (including labour wages) has taken a front seat both in agri and non-agri households in terms of earnings to households. However, agriculture is still an engine of growth and poverty reduction in rural areas being the main occupation for the poor. According to NASA&GSE estimates, close to 80 percent of women members participated in the survey were attending to domestic duties and not engaged in any economic activity. Women's participation in wage-related activities was dismal low. The level of participation in major economic activities was dominated by men as evident from the very

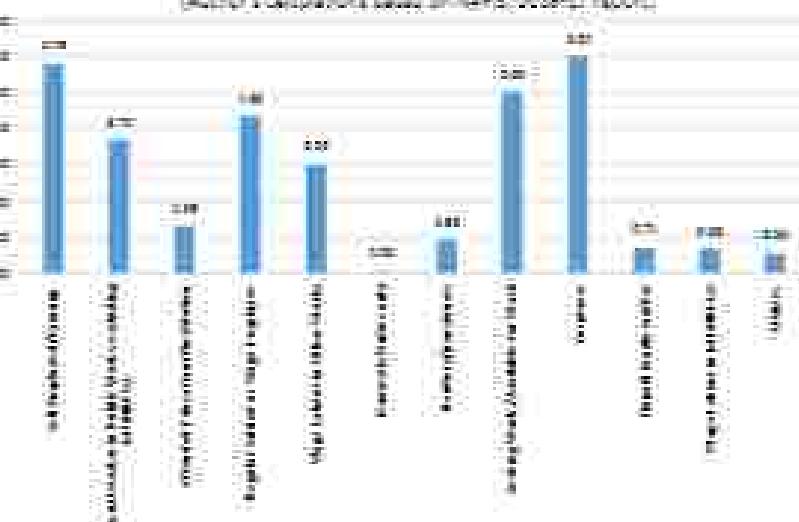
high ratio in favour of men for major income-generating activities in rural India (Figure 3).

The NASSO's survey indicated huge gender difference in the engagement and activities for employment in rural areas. While over one-fourth of the males were either self-employed including farmers only one-twentieth (0.5 percent) of women respondent were self-employed. Casual labour in public works emerged as the second most prominent activity with 21 percent of males and 5.7 percent female members reporting to be engaged in the same. To the great surprise above

Table 3: Per cent male and female involved in various economic activity in rural India

Employment	Male (%)	Female (%)
Farmers and other self-employed	27.8	4.8
Working as casual labour or Bonus Work (non-migrant migrants)	21.1	5.7
Participating in Educational institution activity	19.9	17.3
Seated regular and/or wage employees	24.0	3.2
Wage labour (MGNREGA)	1.5	1.2
Other workers - wage labour	1.7	1.9
Domestic duties only	2.6	52.4
Renters/renter-pensioners	2.4	2.6
Employer	1.8	0.3
Unpaid family worker	1.7	2.4
Not worked but seeking/available for work	2.5	0.6
Engaged in other household activities	2.5	4.3

Figure 3: Ratio of Men to Women Participation (Author's calculation based on NASSO 2009-10 record)

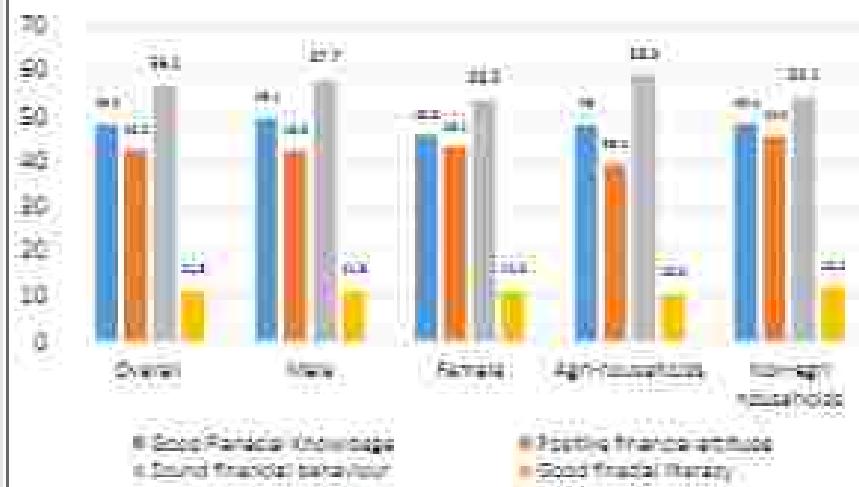


16 percent men and 12.3 percent women reported attending educational institutions as an activity. The percentage of males working as regular salaried or wage employee stood at 24 percent as against only 3.2 percent of females. Women participation in waged/salaried activities was abominably low because about 60 percent of women members reported to be attending to domestic duties only and not engaged in any economic activity. This implies that a huge population in rural India is still not economically utilised for better output. This also puts serious concerns for our education and vocational training systems to reinvigorate this very economically sensible population to be put in economic activities particularly in household-based group activities, which gel well with the social fabrics of the rural Indian customs.

It is evident from the above data that rapid urbanisation in India is yet to become inclusive to encourage the women to join the labour force. The jobs in rural areas have been decreasing and not enough rural women have been able to make the transition to working in urban areas. The only out reasons are very low level of connectivity and safety measures for women workers willing to work in the cities as a daily floating population. This calls for more safeguards and stringent measures for greater public safety and safer public transport systems. The gap is particularly very wide as any benchmark and unfortunately widening over time.

Figure 4: Practical knowledge attitude and behaviour towards open access publishing

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Financial Knowledge and Discipline in Rural Women

equated that everything is negative. The All India Rural Financial Inclusion Survey 2015-17 indicated that women have equal and very strong financial knowledge and have better positive financial attitude than their male counterparts. Over 53.3 percent female respondents in the survey have sound financial behaviour which was comparable to males at 53.7 percent, as seen in Figure 4. While agri and non-agri households were comparable for financial knowledge and financial literacy, wide difference appeared in positive attitude and sound financial behaviour. The agri-households were comparatively low in positive financial attitude but sound on financial behaviour against non-agri-households. These figures imply that given the opportunity the women can be equally productive financially as their male partners.

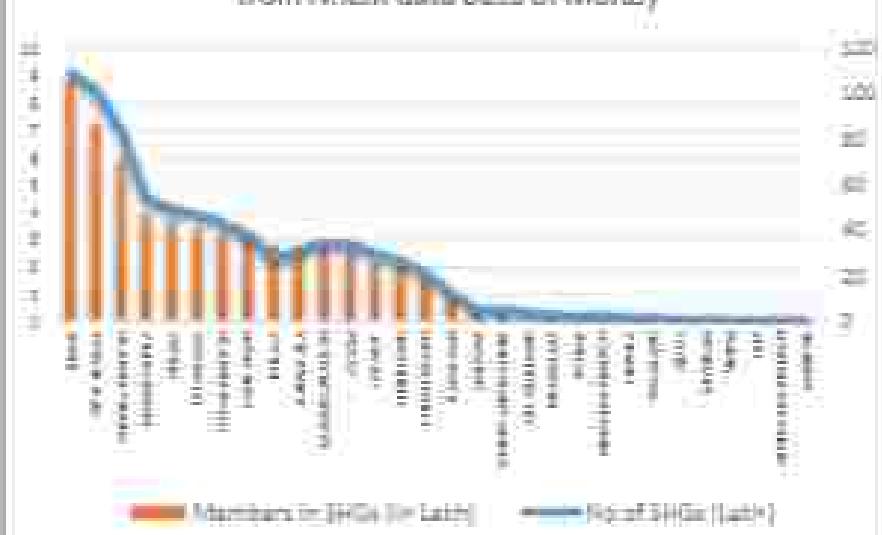
Mobilizing the Rural Women

Reaching out to rural women and women farmers through National Rural Livelihood Mission of Ministry of Rural Development

has created a remarkable milestone in the history of rural development of India. The total rural women mobilised into Self-Help Groups stood at 6.57 crore by December 2012. Under the programme 64.39 lakh SHGs have been promoted with a capitalisation support of Rs. 1334 crore extended to SHGs. The banking system in India also extended open arm support to women SHGs with bank credit accessed at Rs. 2.65 lakh crore by these SHGs. Apart from SHGs, 63 lakh women farmers were also provided support for

livelihood interventions about 1.47 lakh SHG members were supported under value chain interventions. Till date 63.39 lakh SHGs with 7.05 crore members have been established and revived under NEJM. To our great satisfaction, the low income the eastern states like Bihar, West Bengal, Odisha, Uttar Pradesh, Chhattisgarh, Jharkhand have participated in this endeavour vigorously (Figure 5). This movement needs to be continued along with more and more employment to women workers under another flagship rural employment programme MGNREGA.

Figure 5: Self-help groups under NRHM (extracted from NRHM database of MoHFW)



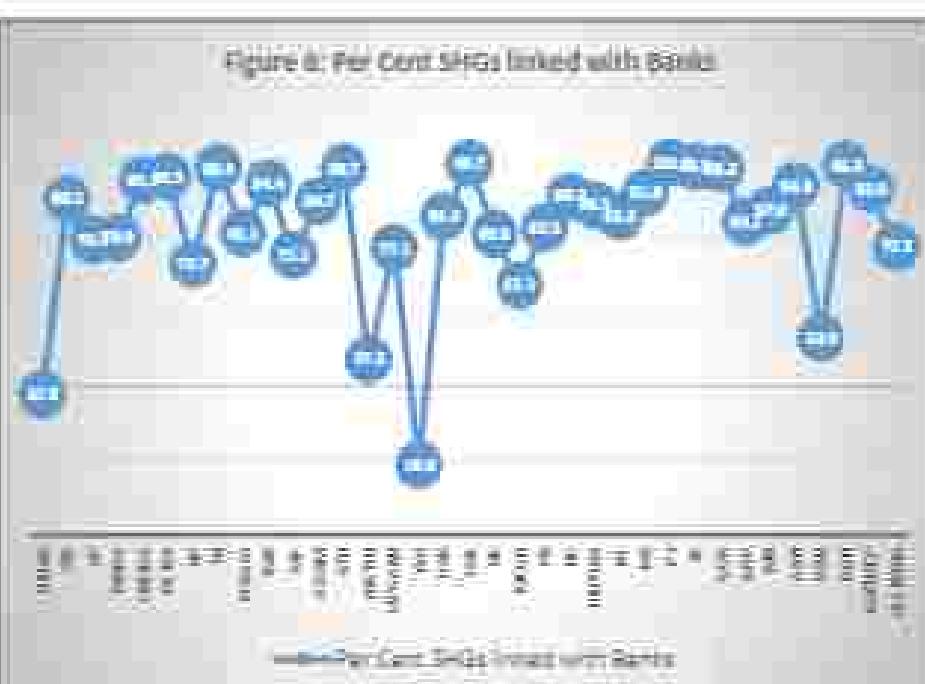
Role of Financial Institutions

While SHG movement in rural India under MGRM is on its course, the banking and other financial institutions need to proactively reach out to such SHGs for financial empowerment. The data for Banking linkage to the SHGs of MGRM presented in Figure 6 revealed that only 27.3 percent SHGs were linked with banks on all individuals. The numbers are very discouraging. In some of the eastern states like Bihar (37.3 percent), Jharkhand (47.2 percent), Uttar Pradesh (72.7 percent) and Chhattisgarh (77.2 percent), the lowest being in Rajasthan at 18.8 percent. The credit flow for working capital and other resources of the SHGs need to be augmented to make them more vibrant for participating in prosperity of rural India.

Learnings from the States

The estimates and projections for women participation in urban and rural workforce emphasized that it must be driven holistically on the front of education, skilling, connectivity, safety and social developments. There are positive signs emerging from different sectors which need scaling out with proper management of logistics and technology. Today the primary and secondary level schooling is mostly driven by young women who are staying in school for longer. India needs to evolve a social revolution to realize the development potential of women workforce. The trend of women attending only domestic works will have to be reversed to embark on the new success. Globally the societies developed and became prosperous by valuing contributions of girls and women in making societies. The women's economic empowerment is closely connected with poverty reduction as women also tend to invest more of their earnings in their children and communities.

Figure 6: Per Cent SHGs linked with Banks



Several states in India with the support of World Bank and other financial institutions have started progressive work for empowering women in economic activities. An investment of over \$ 3 billion has been made by World Bank during last 25 years through state governments to empower women and Self-Help Groups in rural areas. It provided an opportunity to over 43 million poor rural women to have access to skills, markets and business development services including some turning to be successful entrepreneurs and source of inspiration to others. Increase in the incomes of women members in the family has increased the access to food and finance and benefited their families as well as communities.

Skill Development

One of the very critical gap that often lowers the employability of women and their efficient and quality output at work place is low skilling commensurate with the job profiles of a particular company or agency. The Skill India Mission needs to map such requirement and design tailor made hands-on training modules for imparting skills to the willing women workers relevant to the prospective employees. Additionally, these training programmes need to be calibrated in a such a way that they are sensitive to the needs of women workforce such as providing safe

transport, flexible schedules as well as childcare support. The various models like women missions in Jharkhand, Krish Sakhi and Pasi Sakhi under NERI and World Bank model for supporting adolescent girls in Jharkhand Government for the completion of secondary education and providing mentoring services to succeed in the job market should be suitably updated. Similar examples of providing dedicated hostels to girl students in Patna and elsewhere should also be augmented.

Social and Behavioural Change

The developmental projects and interventions fall short unless the social and behavioural changes are not affected in the other 50 percent partners of the society. The social researches have established that the women tend to drop out in response to family pressures even after completing the skill programmes and consequently getting jobs. Hence, the developmental efforts need to be suitably complemented by changing the social norms around marriages, work and household duties. The society should own its responsibility to inculcate to respect girl and women. Hence, we as family need to see that our girls are as capable as future professionals.

The comfort in commuting and safety while travelling will go a long way for empowering the women workforce in rural areas. The Government needs to work to provide better connectivity between stations and their often-distant homes. In Tamil Nadu, safe working environment has been able to encourage women to work in garment manufacturing far from their village and homes. The girls have become the breadwinners for their impoverished families by supporting economically the fellow family members in education, etc. The availability of safe hostel facilities for their stay have encouraged their parents to allow them to work and stay away from home.

Summing Up

Several out-of-box initiatives of the Government for skills development, subsidized loans for businesses led by women, recent legislation doubling maternity leave, and childcare facilities in companies that employ more than 50 people will have the far-reaching impact on women empowerment and give

boost to India's economy. The number of women in the total workforce in India is only 37 percent, and more seriously, almost 23 million women had withdrawn from the workforce during 2005 and 2012. On a global landscape, India ranked 120th among 131 countries so far as women workforce participation is concerned, adding to woes. Is the worsening case of gender-based violence in India.

In spite of all odds, India undertook an impressive journey post 1991 reforms. About 338 million moved out of the poverty during the period of 1994 to 2012. The coordinated and concerted efforts could make it possible to happen. But the journey is not complete yet. The achievement could have been even more promising and impactful with the greater participation of women workforce in this journey of glorious transformation and economic empowerment of rural India. Globally, developed and developing economies have established that women participation is a must for inclusive and sustainable economy of a nation. We cannot think of a vibrant economy and prosperous society when 50 percent population is not involved fully in the various economic activities. India is 3rd largest economy of the world. However, compared to China where women contribute about 40 percent in economic activity and development, the contribution of Indian women is about 27–30 percent (World Bank estimates) which is less than half the global average. The estimates suggest the GDP growth in India can be boosted by 1.5 percentage points to achieve nine percent growth per annum by facilitating 30 percent of women joining the workforce in the country. Finally, the several social, cultural and institutional impediments have to be overhauled and removed, if needed, to empower the half of the population and ensure their participation in rural and agricultural prosperity. It is an opportune time to revisit and reform outdated legislation and policies that act as deterrents to women entering or staying in the labour market.

[The Author is Officer on Special Duty, Policy Planning & Partnership, ICAR. He is Former Advisor (Agriculture), NITI Aayog, and Former Deputy Commissioner/ OSD & Agriculture Commissioner, DAFW, M/o Agriculture, Government of India. Email: jumai1967@gmail.com]

Kisan Rath Mobile App Launched

The Union Minister of Agriculture and Farmers' Welfare, Shri Narendra Singh Tomar launched a farmer friendly mobile application in Rashtrapati Bhawan on 17th April to facilitate farmers and traders in searching transport vehicles for Primary and Secondary transportation for movement of agriculture and horticulture produce. Primary transportation would include movement from farm to Mandi, FPO Collection Centres and Warehouses etc. Secondary Transportation would include movement from Mandis to intra-state & inter-state mandi Processing units, Railway station, Warehouses and Wholesalers etc.



The Union Minister for Agriculture & Farmers Welfare, Rural Development and Panchayati Raj, Shri Narendra Singh Tomar speaking at the launch of the "Kisan Rath" Mobile App, In New Delhi on April 17, 2020. The Ministers of State for Agriculture & Family Welfare, Shri Piyush Goyal and Shri Balachandran Chaudhary are also seen.

The Mobile application named "Kisan Rath" facilitates Farmers and Traders in identifying right mode of transportation for movement of farm produce ranging from foodgrain (cereal, coarse cereal, pulses etc), Fruits and Vegetables, oil seeds, spices, fiber crops, flowers, bamboo, log and minor forest produce, coconuts etc. This App also facilitates traders in transportation of perishable commodities by Reefer (Refrigerated) vehicles.

Shri Tomar said, agricultural activities have to go on amidst the lockdown. He said concessions have been given to the agriculture sector on directions of the Prime Minister Shri Narendra Modi. While harvesting and sowing is going on, transportation will become easier with the Kisan Rath app as it will help farmers and traders for transporting produce from farm gate to mandi and mandi to market all over the country. At this juncture while the country is passing through the COVID-19 situation, this "Kisan Rath" App will greatly facilitate farmers, FPOs and Cooperatives in the country to have the choice to find a suitable transport facility to transfer their agriculture produce from farm gate to market.

Transportation of agri produce is critical and indispensable component of supply chain. Under the extraordinary situation prevailing in the country currently due to lockdown, "Kisan Rath" will ensure smooth and seamless supply linkages between farmers, warehouses, FPOs, APMC mandis and intra-State & Inter-State buyers and help in reduction of food wastage by providing timely services. All these will contribute in better prices for perishable commodities.

The Consignors (farmer, FPOs, buyer/ trader) places a requirement for transportation on this app which is disseminated to transport aggregators in the market, who in turn interface with various truckers and fleet owners for obtaining a competitive quote against the requirement and passes back the quote and trucker details to the Consignor. Thereafter, the Consignor directly negotiates off line with the trucker and finalizes the deal. Once the trip is completed, the user can provide a rating/ feedback for the trucker in the App which, over a period of time, becomes feedback mechanism for the transporter to improve their services.

Shri Tomar said, "Kisan Rath" mobile App will also help in giving boost to inter-mandi and inter-State trade of agriculture and horticulture produce in the country. The Minister said that this app, with the tagline "Kisan ka sastra Vayam", is an important milestone in agri-produce transportation. This Mobile App to be made available in 08 languages in Android version initially, and is ready for pan-India use.

(Source: PIB)

GENDER BUDGETING

WISDOM

The Constitution of India has mandated equality for every citizen of the country as a fundamental right. Women's economic empowerment plays a crucial role in tackling gender inequality. India's Gender Budgeting efforts stand out globally because they have not only influenced expenditure but also revenue policies at national and state government levels. The goal of Gender Budgeting in India is to ensure greater efficiency and gender equity in fiscal policy.

Gender budgeting is a policy with a primary goal of reorienting the allocation of public resources, advocating for an advanced decision-making role for women in important issues, and securing equity in the distribution of resources between men and women. Gender budgeting allows the governments to promote equality through fiscal policies by taking analyses of a budget's differing impacts on the sexes as well as setting goals or targets for equality and allocating funds to support those goals. Gender budgeting remedies the disadvantages and discrimination against women by incorporating them in the budgetary process and fighting marginalisation and exclusion from economic, political, and constitutional processes.

It is not a separate budget for women; rather it is a dissection of the government budget to strengthen its gender-specific impact and to translate gender commitments into budgetary commitments. Given differences in needs, Gender Budgeting is not about simply dividing government money 50-50 between men and boys on the one hand, and women and girls on the other. A simple 50-50 division may look equal, but it is often not equitable, or fair, because the needs of women and men and girls and boys may be different. Instead, Gender Budgeting looks at every part of the government budget to assess how it will address the different needs of women and men, girls and boys, and different groups of women and men, girls and boys. For example, in the area of health, male and female people will have similar needs in respect to influenza and malaria, but women will have greater needs than men in terms of reproductive health.



Gender and Sex

Before discussing Gender Budgeting, we need to understand what gender is, and the difference between gender and sex. Gender is the culturally and socially constructed roles, responsibilities, privileges, relations, and expectations of women and men, boys and girls. Because these are socially constructed, they can change over time and differ from one place to another. Sex is the biological makeup of male and female people. It is what we are born with, and does not change over time, nor differs from place to place.

There is a need to think about both gender and sex when making policies and allocating budgets to implement the policies. In respect of sex, it should be ensured that policies and programmes are available and adequately financed to address the different biological needs of women and men, including childbearing for women. In respect of gender, we need to have a vision of the type of roles, responsibilities, and relationship that we want to see in the country for women and men, girls and boys, and design, fund and implement policies and programmes to move towards this goal.

The information in the articles mostly pertains to the pre-lockdown period. However, efforts have been made to update the articles as far as possible within the constraints of the lockdown.

Need for Gender Budgeting

The Constitution of India has mandated equality for every citizen of the country as a fundamental right. Nevertheless, the reality is that women in India continue to face disparities in access to and control over resources. These disparities are reflected in indicators of health, nutrition, literacy, educational attainments, skill levels, occupational status among others. There are a number of gender-specific barriers which prevent women and girls from getting access to their rightful share in the flow of public goods and services. Unless these barriers are addressed in the planning and development process, the fruits of economic growth are likely to completely bypass a significant section of the country's population. This, in turn, does not bode well for the future growth of the economy.

Gender Budgeting serves varied purposes. These include, among others:

- identifying the needs of women and reorienting expenditure to meet these needs;
- supporting gender mainstreaming in macroeconomics;
- strengthening civil society participation in economic policymaking;
- enhancing the linkages between economic and social policy outcomes;
- tracking public expenditure against gender and development policy commitments; and
- contributing to the attainment of the Sustainable Development Goals (SDGs).

Women's economic empowerment plays a crucial role in tackling gender inequality. Currently, the contribution of Indian women to the GDP (17 percent) is not only far below the global average (37 percent), but is also less than that of China (41 percent) and sub-Saharan Africa (39 percent).⁴ Paradoxically, greater equality in educational attainment achieved through higher enrolment of girls in schools has not translated into equal opportunities for women in the labour market. Despite significant acceleration in economic growth, labour market outcomes for men far outweigh those for women. This becomes evident in the extremely unequal participation of women across sectors and increasing gender wage gaps in decision-making positions. Globally, women

spend three times more time on unpaid work than men. In India it is 2.8 times more. If that was assessed for wages, it would add ₹ 19,35 lakh crore to the GDP.⁵ The huge spectrum of skilled but unpaid work of women contributes directly to the economy. Yet its devaluation by not being accounted for as 'work' weakens women's status.



Towards a new dawn

Table 1. Unequal Participation of Women Across Sectors⁶

Indicator	Females (%)	Males (%)
Labour force participation rate (% 15+ years)	27	85
Representation in Lok Sabha (%)	12.1	87.9
Representation in Rajya Sabha (%)	12.6	87.4
Representation in Supreme Court (%)	3.2	96.6
Representation in High Court (%)	23	77.2

Gender-neutrality of macroeconomic policy ignores the feedback mechanism between gender relations and macroeconomic policy. Integrating the gender perspective into macroeconomic policy has dual dimensions: an equality dimension and an efficiency dimension. In the context of growing recognition that problems of inequality cannot be resolved by the trickle-down effects of macroeconomic policies, the concerns of gender inequality need to be built into the macroeconomic policy framework. Apart from the basic principle of promoting equality among citizens, gender equality can benefit the economy through efficiency gains. From the efficiency consideration, what is important is the social rate of return of investment in women, and in cases, this can be greater than the corresponding rate for men. There is a growing awareness that gender inequality is inefficient and costly to development.

Scope for Gender Budgeting

Generally, budgeting involves four components: the budgetary allocation of resources to various heads, the actual Government outlays on various heads, an accounting of how resources are utilised for a particular purpose and an evaluation of the

effectiveness of the resources utilized in delivering the intended results. Gender budgeting involves looking at all the four components from the point of view of women as beneficiaries.

While many public goods and services like defence are not amenable to gender partitioning, many others have differential impact on the two sexes. For example, cutbacks for augmenting the supply of safe drinking water can benefit women more than men by cutting down on the time spent in fetching water from the rivers or ponds.

Examples of possible activities for Gender Budgeting at the different stages of budgeting process are described below:

at the budget preparation stage:

- a. Ensure financial appropriations made in budgets enable the implementation of programmes, schemes and activities in a way that will match the needs;
- b. Assess likely impact of new revenue-raising methods on different groups, compared with their ability to pay;
- c. Compare Budget Estimates (BE) for the current year with Revised Estimates (RE) and Actual Expenditure (AE) of the previous year and ensure corrective steps are taken to ensure proper and full utilization of the budgets of current year.

When the budget is tabled:

- a. Analyse sector-wise or ministry/department-wise trends and shares of allocations and expenditure as an indicator of government's priorities;
- b. Analyse the revenue side as in what are the sources of revenue, subsidies, etc., and how will they impact men and women.

at the budget implementation stage:

- a. Is the budget being spent in the way it was intended and to the full extent? What are the delivery costs? Who is receiving subsidies? Is the budget being spent for the purpose and the people for whom it was intended?

Gender Budgeting can also be done and used by people outside the government such as in women's organisations, non-governmental organisations, academicians, the donor community, the legislature, as well as by ordinary citizens. For those outside

government, Gender Budgeting can encourage transparency, accountability and participation, and facilitate better advocacy. For those both inside and outside government, Gender Budgeting work provides information that allows for better decision-making on how policies and priorities should be revised and the accompanying resources needed to achieve the goal of gender equality.

Gender Budgeting in India

India's gender budgeting efforts stand out globally because they have not only influenced expenditure but also revenue policies at national and state government levels. The goal of Gender Budgeting in India is to ensure greater efficiency and gender equity in fiscal policy. Gender budgeting has been integrated into many aspects of public finance, which includes informing tax reforms, revising budget classification procedures to integrate gender in shaping intergovernmental fiscal transfers, fiscal decentralisation efforts, and local budgeting, and assessing the effectiveness of public expenditure through the development of benefit incidence analysis.

For long, the budget was considered a gender-neutral exercise. It was believed that budgetary provisions and policies benefit all genders equally. However, with the advent of the 21st century a paradigm shift was observed in the policy of the Government of India. The year 2001 proved to be a watershed year with respect to orientation of the budget making process towards gender sensitivity and gender empowerment. A special reference in the Budget Speech of the Finance Minister for the financial year 2000–01 was made pertaining to the access of women to natural resources. Subsequently, Economic Survey (2000–2001) contained an entire section on 'gender inequality' for the first time. Study on Gender Related Economic Policy Issues by National Institute of Public Finance and Policy (NIPFP) was commissioned by the then Department of Women and Child Development in the year 2001¹. Since 2005–06, the Expenditure Division of the Ministry of Finance has been issuing a note on Gender Budgeting as a part of the Budget Circular every year. This has been compiled and incorporated in the form of Statement 13 as a part of the Expenditure Budget Document of the financial year 2010–11 by the Expenditure Division of the

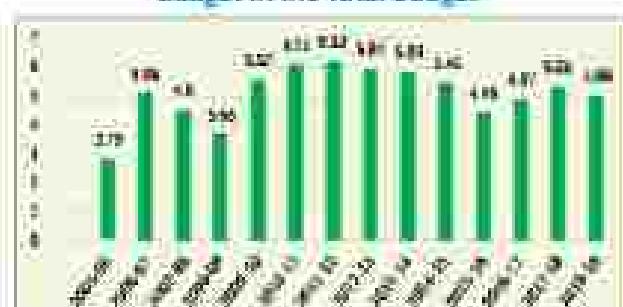
Ministry of Finance². This SB Statement comprises two parts: Part A and Part B; Part A reflects Women Specific Schemes, i.e. those which have 300 percent allocation for women. Part-B reflects Pro-Women Schemes, i.e. those where at least 30 percent of the allocation is for women.

India is a leading example of Gender Budgeting in the Asia Pacific region, as acknowledged by the United Nations (UNDP Asia Pacific, 2012; UN Women, 2012; UN Women, 2016). The gender budget statements have helped to ensure that budgets include allocations in both national and state governments for women's development, and this has led to more transparency and accountability in the budget exercises. The gender budgeting statements give space for government to build up sex-disaggregated or gender relevant data, though more sustained efforts are required to ensure that the data are used to guide effective programmes and policies.

The gender budget statement has helped the country to mainstream gender budgeting in prime-facie gender-neutral ministries, such as Science and Technology and others. In the Union Budget 2016–17, the Finance Minister has integrated gender budgeting in the energy sector by a policy initiative on core economy to uplift poor women in the energy ladder to liquefied Petroleum Gas (LPG) subsidies. The Cabinet Committee on Economic Affairs, chaired by the Prime Minister, approved the Pradhan Mantri Ujjwala Yojana Scheme for providing free LPG connections to women from below poverty line households. This was the first time in the history of the country that the Ministry of Petroleum and Natural Gas implemented a welfare scheme benefitting many women belonging to the poorest households. This is a good example of how a prime-facie gender-neutral ministry like the Ministry of Petroleum and Natural Gas can design a policy to address women's needs.

The trends in gender budget allocations derived from the gender budget statements of the latest ten-year period are shown in Figure 1. However, the increasing trend in the allocation in the graph is not exclusively due to an increase in the allocation of the budget on women-oriented spending because the number of demands for Grants/programmes included in the gender budgeting statement changed over time.

Figure 3 : Distribution of the Gender Related Budget in the Total Budget³



State-level Gender Budgeting in India has also used the national level analytical matrices and templates. In India, our own resources for supporting public expenditures at the state and local levels are meagre, and the lower tiers of the government depend on intergovernmental transfers from the central government. There is an ongoing debate in India to integrate gender in formula-based transfers, though it has not yet materialised. The Fourteenth Finance Commission of India, which reported in January 2015, integrated "climate change" variables in the formula-based fiscal transfers. Perhaps gender development variables may become the mandate for future Finance Commissions.

Gender Budgeting has both expenditure as well as revenue side. The revenue side of Gender Budgeting is still in the nascent stages. Several policies that provide favourable treatment to women may help to improve their paid work efforts, access to land and property, and their ability to accumulate financial savings and investments, as well as enhance their children's access to education and health, and increase their say in intra-household decisions. Up until Financial year (FY) 2011–12, women and men had different income tax slabs with women having to pay slightly less tax. However, from FY 2012–13, this was done away with and tax slabs for men and women were made the same. The personal income tax system recognises both individual taxation and the Hindu Undivided Family as a separate legal entity, reflecting an economic arrangement that is inherently biased against women as it assigns tax liability to the oldest male member of an extended family. However, looking at the income tax rule documents through a gender lens, one tax exemption is identified under Section 88C for women under which a woman below the age of 65 was entitled to an additional rebate on taxation. Tax exemptions under section 88C marginally benefited women in India as only 4 per

cent of economically active women are in the formal sector.¹ The 80C exemption for women was eventually phased out. Some states offer concession on stamp duty charge if a property is registered in the name of a woman. Similarly, certain municipal corporations also offer rebate on property tax. Apart from concession on stamp duty and rebate on property tax, banks also offer lower interest rates on home loans for property registered in a woman's name.

Impact of Gender Budgeting

There is a need to evaluate the impact of Gender Responsive Budgeting (GRB) that was adopted by India in 2005 following which at least 37 government ministries/departments set up Gender Budgeting Cells. An analysis conducted by National Institute of Public Finance and Policy reveals that GRB has not translated effectively into policies that impact women despite being a promising fiscal innovation to begin with.

Though some studies have shown encouraging results, one study shows that states with Gender Budgeting showed significantly greater reduction in spousal violence between 2005-06 and 2015-16 than those without it, using data from National Family Health Survey (NFHS) waves 3 (2005-06) and 4 (2015-16), where Gender Budgeting states demonstrated a 7 percent decline in spousal violence from 2005-06 to 2015-16, non-gender budgeting states demonstrated only a one percent decline.²

Whether Gender Budgeting has a positive impact on gender equality or not? As per latest research conducted on data available from the Asia Pacific region, the answer is in affirmative. The scores on GDI (Gender Development Index) and GI (Gender Inequality Index) for each country were used as measures of gender equality or inequality. The results show that GI is significantly determined by gender budgeting initiatives, public spending on health and female labour force participation. The estimates showed that a 3 per cent increase in public health spending in Asia Pacific can reduce GI by 0.0045 percentage points; while similar rise in female labour force participation can reduce GI by 0.0041 percentage point.³

Conclusion

In the 2018 Union Budget speech, Finance Minister Nirmala Sitharaman described Nari (woman) as Navayani (goddess) and said that she will constitute a committee to evaluate 15 years of

Gender Budgeting. She reminded us what Swami Vivekananda said in the context of gender equality. Vivekananda said, "It is not possible for a bird to fly on one wing." Gender budgeting is a powerful tool to give equitable power to both the gender-based wings of the economy. Gender Budgeting not only empowers women but also empowers the economy through efficiency gains to the GDP.

India has integrated gender budget within the Expenditure Budget and also given instructions to integrate it into the Outcome Budget. However, the capacity of sectoral gender budgeting cells to carry out specific analysis of gender-related needs and advocate for policies and programmes remains a challenge. Way forward is to build capacity at centre and state level for better implementation of gender budget and improvement in fiscal mainstreaming. Quantum of budgetary allocation for women focused schemes vis-a-vis total budgetary allocation should be increased and at the same time implementation of the policies should be so monitored that the allocated budget is spent strictly under the head it was allocated for. The revenue side of the gender budget should also be strengthened to empower women through innovative taxation policies. The Finance Ministry has worked hard to mainstream the gender budgeting, now the next step is to commission quantitative and qualitative study of its impact on ground level to calibrate the efforts being put in this direction in future to improve the efficacy of gender sensitive policies.

Footnote

1. http://nispoc.in/sites/default/files/2018-12/India_Accomplished.pdf
2. https://nispoc.in/sites/default/files/2018-12/mens_accomplished.pdf
3. https://nispoc.in/sites/default/files/2018-12/women_accomplished.pdf
4. <https://nispoc.in/gender-budgets>
5. http://www.indiaspend.com/money/money/2018/07/WP_173_2018.pdf
6. <http://www.indiaspend.com/gender-focuses-budgets-can-reduce-social-inequality-through-women-well-being/>
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8. <https://www.indiaspend.com/gender-focuses-budgets-can-reduce-social-inequality-through-women-well-being/>
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The author is alumna of IIT Roorkee and belongs to Indian Revenue Service, smritijoharwalia@gmail.com

NUTRITION AND HEALTH RELATED EMPOWERMENT OF WOMEN

Dr. Savitri Jain Paraj and Abha Jaiswal

It is important to reiterate that women empowerment is rather crucial for improving nutrition and health related outcomes of the family. Government has accorded high-priority to tackle malnutrition among women and is making conscientious efforts to address the issue. The broad vision and mission of the Ministry of Women and Child Development is to empower women so that they can live with dignity as well as contribute as equal partners in nation's development in a non-violent and discrimination-free environment.

Over the past few decades, empowerment of the masses in general and that of the women in particular has been gaining due attention globally. Women empowerment is specifically important not only from the perspective of social justice and equality but also as a means for achieving the various Sustainable Development Goals (SDGs) including poverty reduction as well as improving nutrition, health and education of the people at large. Researches indicate that women (as mothers/primary caretakers) are more likely to influence health and nutrition outcomes of their families, especially the children. Therefore, women empowerment is becoming a top priority in the formulation, implementation and evaluation of the policies/programmes of every nation.

While literature indicates numerous measures for achieving women empowerment, this write-up emphasises mainly on nutrition and health related empowerment of women at the family/household-level.

Some household-level indicators for measuring women empowerment vis-a-vis nutrition and health issues:

- Women's involvement in household decision-making:
 - economic decisions (financial, spending, resource allocation)
 - social and economic matters (e.g., marriage etc.)
 - children related decisions (like schooling, health & nutrition)
- Women's access/control over household resources (including cash assets, income, freedom of mobility).
- Power & money relationships (between the spouses): social hierarchy, association and sense of self-worth (self-esteem).



It is important to reiterate that women empowerment is rather crucial for improving nutrition and health related outcomes of the family. Since women are often the primary caregivers, they can influence their children's nutrition indirectly through their own nutrition/health status as well as directly through their childcare practices. Various studies have reported significant impact of women empowerment on their own as well as their children's health. Researches indicate that various measures of maternal autonomy favourably correlate with optimum infant feeding practices and child-growth outcomes. Further, it has also been reported that maternal autonomy is positively associated with

child's nutritional status, especially for children aged less than three years.

On the contrary, the disempowered women are more likely to suffer time constraints, poor mental health, non-negligible control over household-resources, inferiority complex and inadequate access to information/utilization of healthcare services. Also, a growing body of evidence indicates an adverse impact of domestic violence against women (an indicator of disempowerment) on their own as well as that of the family's nutritional outcomes.

Women empowerment in terms of employment activities and decision-making regarding household issues are the most evident factors that can affect the nutrition and health status of their families. Empowering women is not only essential for achieving the well-being of family members including children (the future citizens) but also for addressing developmental issues of the nation. Women empowerment is increasingly being viewed as a significantly important strategy in reducing maternal and child under-nutrition, which continues to be one of the major health burdens in low- and middle-income nations. It helps the women to realize their inner-most potential, the right to access resources, make independent choices along with the freedom of decision-making, both within as well as outside the household. In actual sense, empowerment would only be achieved when progress in women's condition is accompanied by their ability to influence social change by virtue of equal avenues in economic, social and political spheres of life.

The Constitution of India in its Preamble - Fundamental Rights/Duties, enshrines a powerful



mandate regarding the rights of women along with necessary emphasis on equality. Although for empowering women, newer opportunities/possibilities have emerged over the years, but at the same time cropping up of fresh challenges coupled with persisting socio-economic problems keep posing hindrances in attaining gender equality and holistic empowerment of women. The deep-rooted patriarchal system prevalent in most parts of our country positions women in disempowered socio-economic hierarchy which impedes realization of their rights. Recognizing the gravity and significance of various women related issues, the government has introduced a number of schemes to address atrocities against women as well as to uplift their self-esteem so that they get greater opportunities and equal participation in the country's development and economy.

The Government, both in pre- and post-independence periods, has taken necessary steps and introduced numerous regulations for reducing social hostilities towards women.

On the nutrition and health front, data from National Family Health Survey (NFHS-4, 2015-18)

Some important laws enacted prior to independence for reducing social inequalities towards women:

- Hindu Widows Remarriage Act, 1856
- Female Infanticide Act, 1871
- Married Woman Property Act, 1834
- The Child Marriage Restraint Act, 1929
- The Hindu Woman's Right to Property Act, 1897
- Various acts to ensure special provision/preserve the interest of women from immediate post-independence till date:

- Special Marriage Act, 1954
- The Hindu Marriage Act, 1955
- Immoral Traffic (Prevention) Act, 1956
- Dowry Prohibition Act, 1961
- Maternity Benefit Act, 1961
- Medical Termination of Pregnancy Act, 1971
- Code of Remuneration Act, 1976
- Indecent Representation of Women (Prohibition) Act, 1996
- The Commission of Sati (Prevention) Act, 1987
- National Commission for Women Act, 1995
- Prohibition of Child Marriage Act, 2006
- Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013
- Muslim-Women Protection of Rights on Marriage Bill, 2019

Indicate that 22.2 percent of the women (15–49 years) are underweight ($\text{BMI} < 18.5 \text{ kg/m}^2$) and 33.1 percent (15–49 years) are anaemic; only 21 percent of the pregnant women had complete antenatal care. As per the 2013–17 Sample Registration System (SRSS) bulletin, the Maternal Mortality Rate (MMR) is 122 per 1,00,000 live births. Further, the Infant Mortality Rate (IMR) is 41 indicating that out of every 1,000 live births, 41 infants die before attaining the age of 12 months and the Under-Five Mortality Rate (U5MR) is 50 deaths per 1,000 live births. All these indices are highly dependent on the mother's nutrition and health status.

Government has accorded top-most priority to tackle malnutrition among women and is making conscientious efforts to address this issue. The broad vision and mission of the Ministry of Women and Child Development (MWCD) is to empower women so that they can live with dignity as well as contribute as equal partners in national development in a non-violent and discrimination-free environment. Thus, efforts are being directed towards promoting their social and economic empowerment through criss-crossing policies, programmes/schemes, mainstreaming gender issues, generating awareness as well as facilitating institutional/legislative support for enabling them to recognize their human rights so that the women can contribute towards socio-economic growth upto their fullest potential.

Thus, several schemes and programmes with direct/indirect interventions for addressing women's health and nutrition related issues being implemented across the country include:

Sanchi Suraksha Yojana (SSY): A safe motherhood intervention under the National Health Mission (NHM) for curbing maternal and neonatal mortality by promoting institutional deliveries especially among the pregnant women belonging to weaker socio-economic strata (BC, SC, ST, BPL households).



National Health Mission (NHM): A flagship programme of the Ministry of Health and Family

Welfare; it addresses malnutrition among women. Its components include: Anemia Mukt Bharat, organization of Village Health and Nutrition Days, as well as Sanitation and Nutrition days (for providing maternal and child health services along with awareness generation on maternal and child care); Iron and Folic Acid (IFA) supplementation, calcium supplementation and promotion of iodized salt consumption.

Under the Umanglo scheme of ICDS, a number of programmes/schemes address nutrition and health related issues of the women which include:

- **Anganwadi Services Scheme** which aims to improve the nutrition/health status of pregnant women and nursing mothers, thereby lowering the incidence of mortality, morbidity and malnutrition among them. The beneficiaries are provided supplementary nutrition, nutrition and health education, immunisation, health check-up and referral services—all of which collectively help in uplifting their nutrition and health status.
- **Pradhan Mantri Matru Vandana Yojana (PMMVY)/Maternity Benefit Programme** launched in January 2017 under which pregnant women and nursing mothers receive a cash benefit of Rs. 5,000/- in three installments on fulfilling the respective conditions like early registration of pregnancy, antenatal check-up, child-birth registration and completion of first cycle of vaccination (applicable only for the 1st living child). The eligible beneficiaries also receive cash incentive under the Janani Suraksha Yojana (JSY). Hence, on an average, a woman gets Rs. 9,000/- for her first living child-birth.
- **Scheme for Adolescent Girls (SAG)** provides services to out-of-school adolescent girls (11–14 years) for their self-development and empowerment; improving nutritional & health status; promoting awareness regarding health, hygiene and nutrition; giving support to out-of-



school adolescent girls for successfully transitioning back to formal schooling or bridge learning/skill training and upgrading their home-based skills.

- POSHAN Abhiyan was launched in December 2017 to improve nutritional status of adolescent girls, pregnant women and nursing mothers in a time bound manner.

- Educated, well-nourished and healthy girl-child in the times to come will grow into well-nourished adolescent girls and later they will become healthy women and mothers who in turn are expected to bear well-nourished and healthy children. This can help in perpetuating an inter-generational cycle of healthy progeny.

As per the National Policy for Women 2012 (draft)—with reference to women's nutrition and health, the priority areas include:

- Lowering the existing Maternal Mortality (MMR) and Infant Mortality (IMR) rates.
- Increasing the outreach/capacity of ASHA, ANMs and ANMVs and that of the skilled home birth professionals in backward areas.
- Organising special health camps for the prevention and treatment of diseases affecting pregnant women/nursing mothers (e.g. anaemia, under nutrition, etc.) and launching special drives for imparting nutrition health educator.
- Recognising women's reproductive rights by formulation and implementation of gender specific health strategies.
- Apart from maternal health, focusing on other health related problems of women including communicable/non-communicable diseases (CVD, diabetic, cancer, mental health disorders, HIV/AIDS, etc.) with suitable strategies & interventions.
- Under the National Mental Health Policy (2014), systematic approach to facilitate timely screening, care and treatment particularly at primary level for recognising women with greater risk of mental disorders owing to discrimination, violence and abuse, etc.
- Health interventions focusing on physical and psychological well-being of women.

- Initiation of suitable health care interventions for menopausal women to tackle their physical/emotional health problem like osteoporosis, CVD, depression, etc.
- Strengthening healthcare facilities for elderly women (aged >60 years) including preventive, curative and rehabilitative/callopathic healthcare.
- Improving the Nutrition/health status of adolescent girls.
- Special emphasis on adolescent girl's sexual & reproductive health needs.
- Healthcare coverage to the surrogate (during pregnancy, post-pregnancy and treatment for preventing the risk of infection due to multiple births).
- Strengthening the interventions and services for addressing the inter-generational cycle of under-nutrition, with special focus on continued nutritional care for the first 1000 days (from conception till 2 years postpartum—270+365=635 days).
- Designing appropriate strategies for girls and women so as to end intra-household discrimination, particularly with reference to nutrition & health concerns.
- Ensuring availability of nutritious and safe food (through PDS) particularly for the unprivileged women/children in view of their greater susceptibility.
- Expansion of health insurance schemes including Rashtriya Swasthya Bima Yojana for benefitting the vulnerable and marginalised women in particular.

The Policy prioritises that the women's nutrition be accorded the highest priority since they are at an elevated risk of nutritional deficiencies during all stages of life cycle. Therefore, focused attention is to be paid at every stage - right from ANC/PNC (for healthy foetal growth) to addressing the needs of girl child, adolescent girls to the post-menopausal/elderly women.

The Progress on the Sustainable Development Goals, the Gender Snapshot Report (2019) under the lens of SDG-2 (Zero hunger) highlights that unequal power relations at the household-level render women more susceptible to food insecurity than men in any crisis situation or when food prices soar; women/girls are often the 'shock absorbers'

by consuming less nutritious food in order to support their families. They also tend to spend more time & energy than men/boys in securing and cooking food for the household consumption. Further, the gender gap is wider among the less educated, poor and the rural households.



The Report also highlights that in 2018 nearly 19.2 per cent of the world's population (more than 700 million) was suffering from severe stages of food insecurity.

Further, under the aegis of SDG-3 (Good health and Well-being), it comments that for majority of the women/girls, gender discrimination challenges their access to healthcare due to various reasons like limited financial resources, restricted mobility etc. Additional burdens imposed by gender disparities within the household/community limit them ability to remain healthy and such burdens include: prolonged household work, unsafe work environments, gender-based violence, inadequate mechanisms for prevention and protection of their rights.



The report has also documented that globally, almost 830 women die each day from preventable causes related to pregnancy/childbirth; during 2017, these causes had resulted in mortality of nearly 800,000 women.

There is a dire need to empower women to bring about necessary attitudinal change so that they are not only aware of the nutrition and health related schemes/programmes but also know how to avail the entitled services and are thus empowered to access the relevant services effectively—both for themselves and their families. Women need to be cognizant of the judicious use of resources like use of nutritious low-cost/seasonal foods over the expensive/off-season foods. Women should be empowered enough to consume/provide nutritionally wholesome meals themselves and their family members and they should be able to inculcate healthy dietary habits in their children.



right from younger ages. There are numerous ways of empowering women in nutrition and health related aspects, some of which include:

- Dietary diversification or bringing variety in the household diets;
- Adopting nutrient enhancing techniques like mutual supplementation, germination, fermentation, etc. in their day-to-day cooking/food preparation for the household;
- Promoting the use of nutrient rich local/seasonal/under-utilised foods or the so-called commonly-discounted foods (e.g. radish leaves, pea-peels, cauliflower stalks etc.);
- Home-based-gardening to maximize sustainable gain at the household/community level (increasing availability, access and consumption of wide variety of nutritious foods);
- In rural settings promoting mixed cropping and integrated farming systems;
- Using fortified/bio-fortified foods esp. micronutrient-enriched foods;
- Inculcating the habit of food and water conservation among family members with due emphasis on avoiding wastage at all levels;
- Nutrition education to encourage the consumption of nutritious, safe and healthy diets.

It is imperative to suitably modify the policies/programmes for addressing nutrition and health related empowerment of women, attending to the women's issues in all the facets, capturing emerging challenges, providing access to optimum healthcare services, ensuring nutritionally well-balanced meals and ultimately positioning women as equal partners in development and progress of the household, community and the nation. Only unrelenting nutrition, health and socio-economic empowerment of women can help them to claim their own and the family's rights/entitlements and they can play an important role in improving their family's as well as their own nutrition and health status.

A well-nourished, healthy and empowered woman is not only an asset to the family but to the society and the nation as a whole!

(Dr. Sonbati Jain Puri is Public Health Nutrition Expert and Former Director, Institute of Home Economics, University of Delhi, Email: sjpuri@gmail.com; Alankrita Jain—Assistant Professor in Nutrition, Shaheed Nivedita College, University of Delhi, Email: jain.alankrita24@gmail.com)

ASHAs – THE FIRST PORT OF CALL IN INDIA'S VILLAGES

Trupti Pathak

ASHAs are the first port of call for any health-related needs of deprived sections of the population, especially women and children who find it difficult to access health services. Over a period of time, these social activists have won enormous goodwill and trust of villagers who treat them as extended family. Empowered with knowledge and a drug-kit to deliver front-line healthcare, every ASHA is expected to be a fountainhead of community participation in public health programmes in her village.

Villages in India were blessed and empowered with Accredited Social Health Activists when the government began the National Rural Health Mission in 2005. The Union Cabinet through its decision dated May 1, 2015 approved the launch of National Urban Health Mission (NUHM) as a sub-mission of an over-arching National Health Mission (NHM), with National Rural Health Mission (NRHM) being the other sub-mission of National Health Mission. The National Rural Health Mission began with the objective of addressing the health requirements of rural India.

According to the Ministry of Health and Family Welfare, there are 2,53,667 ASHAs in India.

True to the Hindi meaning of the acronym ASHA, these community health workers are actually bringing a ray of hope in gloomy and challenging times when the Prime Minister is constantly trying to lift the spirit of fellow Indians. This visionary creation of a trained frontline work force is working wonders in a vast country like India which is fighting with the COVID-19 pandemic under the dynamic leadership of Prime Minister Narendra Modi.

According to the Ministry of Health and Family Welfare, one of the key strategies of the National Rural Health Mission is to provide a community health volunteer to every village with a population of 1000. The States have, however, been given the flexibility to relax the population norms as well as the educational qualifications on a case-to-case basis. These workers are expected to spread awareness on health and mobilise the community for local health planning and increased use of health services.

As part of the training imparted to them, the ASHAs are instructed to provide information to the community on determinants of health such as

nutrition, basic sanitation and hygienic practices, healthy living and working conditions. They are also expected to share knowledge on existing health services and need for timely utilisation of health and family welfare services.

In keeping with the noble objectives of policy planners, ASHAs are the first port of call for any health-related needs of deprived sections of the population, especially women and children who find it difficult to access health services. And over a period of time, these social activists have won enormous goodwill and trust of villagers who treat them as extended family.

Empowered with knowledge and a drug-kit to deliver front-contact healthcare, every ASHA is expected to be a fountainhead of community participation in public health programmes in her village, as explained by the National Health Mission of the Ministry of Health and Family Welfare.

ASHA is provided a drug kit containing a set of drugs/equipment and products that enable her give basic care to the community. The drug kits mainly contain drugs/formulations. They also provided a home-based new born care kit for providing growth assessment of newborn care after training in 8th and 9th module. Her kit includes Disposable Delivery kits for clean deliveries at home, Paracetamol tablets, Paeacetamol syrup, Oint tablets, Iron Folic Acid (IF) tablets, Cotrimoxazole syrup, Paediatric Cotrimoxazole tablets, ORS packets, condoms, emergency contraceptive pills, soap, sterilised cotton and sanitary napkins (to promote menstrual hygiene amongst adolescent girls) and Rapid Diagnostic kit. Besides these, the ASHA kit is equipped with Digital wrist Watch, thermometer, weighing scale (for newborn), baby blanket, baby feeding spoon and mucus extractor.

Although guidelines envisage a 23-day training in five modules to the ASHAs, the Ministry of Health has emphasised that training of ASHAs is a continuous process. After an ASHA is selected, she is assigned to understand the health status of the village.

The system has worked out very well in Indian villages. During a visit early this year to a village in Varanasi in Prime Minister Narendra Modi's constituency, the writer noticed that the rapport that the ASHAs have with villagers in Varanasi is extraordinary. They command enormous credibility and women surround them seeking solutions to health-related problems the moment they come to their door.

Every word they say is taken very seriously by villagers and otherwise the shy village women take their advice on immunisation, family planning methods and infant feeding practices very seriously. The villagers treat ASHAs with respect, welcome them to their doorsteps. The elderly say that the ASHAs are the 'Babus' (Daughters in law of the village). This writer also met ASHAs who had succeeded in persuading otherwise conservative men to opt for male sterilisation to control their family size to be able to provide the best to their families.

In the 14th edition of his popular radio broadcast 'Mann Ki Baat' in 2015, Prime Minister Narendra Modi drew attention to the network of dedicated ASHA workers in India. He said that Bill and Melinda Gates have also heaped praise on the ASHAs for their dedication.

He praised an ASHA worker from Odisha for her valuable work in the service of society. During his 30-minute address, Mr Modi acknowledged the contribution of a determined ASHA worker Jamuna Mani Singh from Balasore district for bravely fighting against malaria in the district.

In a small and poor village in Orissa called Tendagor, which is malaria infected, lives an ASHA worker Jamuna Mani Singh. She vowed not



to allow a single death in her village. Through her dedicated efforts, which included creating awareness about the disease, she tried her best to avert the damages malaria causes. She goes door to door and the moment she learns of anybody having fever in the village, she reaches their doorstep. She also ensures that all houses in the village use insecticide mosquito net. Through Jamuna Mani, I want to honour all ASHA workers for their services. They share happy and sad moments of society. If we look at them with respect, they will become a big strength of our country."

Anybody aspiring to serve a village as an ASHA must be an inhabitant of the same village and preferably be in the age group of 25 to 45 years. While selecting an ASHA, preference is given to an aspirant who is literate and is a matriculate. This condition may be relaxed only if no suitable person with this qualification is available. ASHAs are trained to work as an interface between the community and public health system. They are chosen through a rigorous process of selection involving various community groups, self-help groups, anganwadi institutions, block nodal officer, district nodal officer, village health committee and the gram sabha.

To be able to work efficiently in villages, ASHAs need adequate institutional support. Women's committees (like self-help groups or women's health committees), Village Health and Sanitation

ROLE OF ASHAs IN KEEPING INDIA'S VILLAGES PROTECTED FROM CORONAVIRUS

Accredited Social Health Activities, ASHAs, are playing an indispensable role in rural outreach by educating village people on arresting the spread of the much-dreaded Coronavirus.

Field reports from Prime Minister Narendra Modi's constituency, Varanasi, indicate that ASHAs credited with juggling multiple roles have been deputed to spread awareness on prevention of Coronaviruses in their areas. They are after all the backbone of primary healthcare in more than ten lakh villages of India.



On April 14, the day Prime Minister Narendra Modi announced extension of the 21-day lockdown till May 3, the Ministry of Health and Family Welfare advised in a COVID-19 related tweet that person having symptoms may approach national/ state helpline centres or frontline workers such as ASHA workers and field workers. The tweet said that these workers have been oriented about the process to be followed and can help in early detection and facilitate proper treatment in hospitals.

Rakha Sharma, a forty-year-old ASHA worker says that ASHA workers in Varanasi have been asked to cover 25 to 30 houses a day in the assigned villages till the end of May. In a telephone conversation with the author on the 20th and 21st day of lockdown, Rakha told that they have been instructed to focus on spreading awareness on COVID-19 in the villages that fall in their work territory. Rakha says that every morning, she steps out from her home determined to meet the daily target of covering 25 to 30 households. She is required to spread awareness on COVID-19 in Beda Gaon Bazaar, Sitapur, Madarsapur, Belpur and Kherpur. "Wearing a mask and gloves, I go door to door and tell people to take preventive steps such as wearing masks, remaining indoors and using hand sanitizers. I also ask them if they have had any visitors from other States. If so, I ask them to fill a form, provide details which I then forward to health authorities. After lockdown, some workers working in Bengaluru, Delhi, Pune and other cities have come back to the villages because they did not have any work in lockdown. They have been asked to undergo tests for COVID-19."

Working as an ASHA for almost 30 years, Rakha has developed a good rapport with the villagers. Over the year, she has encouraged many pregnant mothers to opt for institutional delivery and helped them with proper ante natal check-up. Not just this, like other ASHAs, Rakha has helped them get polio drops for their infants, educated young couples on the need for male and female sterilisation and advised adolescent girls to follow menstrual hygiene.

Mr Vinod Pradhan, Senior Programme Manager with a community based NGO, MAANVA Health Institute for Mother and Child says that they are educating volunteers, frontline workers like ASHAs, Anganwadi workers and Auxiliary Nurse Midwives besides village heads and Panchayat Raj members, by making optimum use of

technology. "From the time we came to know that COVID-19 is going to pose a big threat to India, we took it upon ourselves to strengthen our rural outreach. Since we have been working in several states of India with special focus on many districts of Uttar Pradesh for a long time, we offered our services to government departments like education, health, women and child welfare departments. We have made sure that all facts on COVID-19 that are being put out by the World Health Organisation and the Ministry of Health, are disseminated to the villages on a daily basis. As and when required, we are seeking the help of community-based organisations and other voluntary organisations."

Mr Pradhan explained that MAHTA is using the existing WhatsApp groups through which they normally function with senior government officers on several social welfare and development-oriented schemes, to spread awareness on COVID-19 as well. We are working in all eight blocks in the Prime Minister's constituency. We have also asked ASHAs, frontline workers; Nehru Yuva Kendra, NSS (National Service Scheme) and NCC (National Cadet Corps) volunteers to ask villagers to download Arogya Setu App / a mobile app developed by the Ministry of IT and Electronics to help others identify the risk of contracting COVID-19 infection. All government departments of Varanasi are already actively promoting Arogya Setu. To make it easy, we have shared the Arogya Setu link with all volunteers and social workers.

Surely, the army of dedicated and friendly health activists in India's villages are taking on the COVID-19 challenge by empowering people with knowledge.

Committee of the Gram Panchayat, peripheral health workers especially ANMs and Anganwadi workers, the trainers of ASHA are a major source of support to ASHAs.

The ASHAs are given performance-based incentives for promoting universal immunisation, referral and escort services for reproductive and child health and other healthcare programmes and construction of household toilets.

They counsel women on birth preparedness, importance of safe delivery, breast-feeding and complementary feeding, immunisation, contraception and prevention of common infections including Reproductive Tract infections/ Sexually Transmitted Infections (RTIs and STIs) and care of the young child.



A health worker spreading awareness on COVID-19 at a primary school in Varanasi

From time to time, the ASHA workers have been deservedly honoured as well.

In December 2019, Balvir Kaur, an ASHA worker from Khod Kalan village of sub-centre Koornkala of Ludhiana, Punjab was honoured with the National Universal Health Coverage Award by Union Minister for Health and Family Welfare, Dr. Harsh Vardhan. She was honoured for her contribution to promoting facilities of Health and Wellness Centres in her block. Likewise, Jamuna Meen Singh was also felicitated by the Odisha government.

(The author is a Chevening scholar and senior daily based journalist. She has been a health columnist and has reported extensively on health and women empowerment related issues. Views expressed by the author are her own. Email: tanjothreepsi@gmail.com)

INCLUSIVE DEVELOPMENT AND RURAL WOMEN

By Shalja Razzaq and Meekhi Jatoi

Rural women are key agents for achieving the transformational economic, environmental and social changes required for sustainable development. Empowering them is crucial not only for the well-being of individual families and rural communities but also for overall economic productivity given women's large presence in the agricultural work force worldwide. Handling multiple roles every single day, women are undoubtedly the backbone of our society.

Inclusive development is multi-faceted and can be achieved through growth with equity → social, economic and political. There is no automatic mechanism to achieve inclusive growth; rather it can only be attained through suitable policy formulation, proactive intervention, effective policy implementation and people's participation in the governance process. Rural development aims at improving rural people's livelihoods in an equitable and sustainable manner, both socially and environmentally, through better access to assets (natural, physical, human, technological and social capital) and services, and control over productive capital. Sustainable rural development refers to improving the quality of life for the rural poor by developing capacities that promote community participation, health and education, food security,

environmental protection and sustainable economic growth thereby enabling community members to leave the cycle of poverty and achieve their full potential. Sustainable rural development is vital to economic, social and environmental viability of nations. A healthy and dynamic agricultural sector is an important foundation of rural development, generating strong linkages to other economic sectors.

Rural women are key agents for achieving the transformational economic, environmental and social changes required for sustainable development. But limited access to credit, health care and education are among the many challenges they face, which are further aggravated by the global food and economic crisis and climate change. Empowering them is crucial not only for the well-



being of individual families and rural communities, but also for overall economic productivity given women's large presence in the agricultural work force worldwide. Handling multiple roles every single day, women are undoubtedly the backbone of any society. However, they have also been an ignored factor of the society in many parts of the world. A woman is the nucleus of the family, particularly in rural India. She not only collects water, fuel, wood, fodder and food, but also plays a significant role in preserving culture, grooming children and shaping their destiny.

Empowerment of women involves economic opportunity, social equality and personal rights. Education plays an important role in bringing about awareness on women's rights. Rural women and girls face the brunt of the feminization of poverty and its intergenerational consequences, the impacts of climate change, desertification, extreme weather events and natural disasters. They are also the most vulnerable in conflict situations, as migrants and refugees and in humanitarian crises. Disability rates are higher among rural women and girls; support systems are weak or non-existent, and they are stigmatized.

Therefore, empowerment of women that will have lasting impacts must involve consciousness raising before the social construction of gender, which subordinates women in the family, class, caste, religion or society can be changed. Empowerment is a multi-faceted, multi-dimensional and multi-layered concept. Women's empowerment is a process in which women gain greater share of control over resources – material, human and intellectual such as knowledge, information, ideas and financial resources like money as well as control over decision making in the home, community, society and nation so as to gain "power".

Governments should empower rural women to claim their rights to land, leadership, opportunities and choices, and to participate in shaping laws, policies and programmes. This spurs productivity gains, enhanced growth and improved development prospects for current and future generations. The initiative also engages with governments

to develop and implement laws and policies that promote equal rights, opportunities and participation so that rural women can benefit from trade and finance and make a strong contribution to inclusive sustainable rural development.

To restore their rightful and dignified status, the present government has initiated empowerment programmes for inclusive development for rural women that provide a solid foundation to nurture the inner strength and self-esteem of the rural women.

Government Empowerment Programmes for Rural Women

Beti Bachao Beti Padhao (BBBP): BBBP, the flagship scheme, was launched initially to address the declining Child Sex Ratio but as it graduated, it broadened and took under its ambit other concerns such as strict enforcement of PC-PNDT Act (Prenatal Diagnostic Techniques (Regulation and Prevention of Misuse) Act), provisions to motivate higher education for girls and related issues of disempowerment of women on a life-cycle continuum. Since its inception in 2015, it has been independently growing widely in local domains as well.

All India expansion of BBBP to cover all 640 districts was launched by the Prime Minister on March 8, 2018 for deeper positive impact on CSE with an outlay of Rs. 1133 crores during 2017-18 to 2019-20 which will include multi-sectoral intervention in 344 districts in addition to existing 161 where physical implementation of the scheme will happen while 235 districts will be covered through Alert District Model Advocacy and Outreach.

Premier Mantri Matru Vandana Yojana (PMMVY): PMMVY is a maternity benefit programme that has been made a pan-India phenomenon since December 31, 2016. The beneficiaries would receive cash incentive of Rs. 6000 during pregnancy and after institutional delivery. The scheme implementation guidelines, the software for its roll out i.e. PMMVY – CAS and its user manual were launched on September 1, 2017. Under PMMVY, Rs. 1016.37 crores to 88.35



states/UTs had been sanctioned during 2017-18 with a release of Rs. 1991.72 crores.

The Pradhan Mantri Ujjwala Yojana is an effective scheme to aid poor section of Indian society. The programme is anticipated to be implemented over a period of three years till fiscal 2018-19. The intent of this scheme is to make cooking gas (LPG) available to women from families that are financially backward. It is estimated that the Ujjwala Yojana will assist approximately 5 crore 50 lakh households that presently live below the poverty line. The programme is also expected to cover five crore such households in all.

The main objectives of Ujjwala Yojana are the following:

- Enhance the status of women and caring for their health.
- Help to decrease air pollution due to use of fossil fuel.
- Lessening the serious health risks related with cooking based on fossil fuel.
- Reducing the number of deaths due to unclean cooking fuel which is almost 5 lakh every year in India.
- Protecting young children from acute respiratory illness caused due to indoor air pollution by burning the fossil fuels.

Deen Dayal Upadhyay Aaryodaya Yojana (DDAYAY): Aaryaya is a major project of Ministry of Rural Development. It focuses on rural women and aims to achieve universal social mobilization by involving rural women. At least one woman member from each identified poor rural

household, is to be brought under the Self Help Group (SHG) network in a time bound manner. NLEM has devised special strategies to reach out to all these vulnerable communities and help them graduate out of poverty.

There are other two important components of Aaryaya that are relevant for improvement of livelihoods of rural women. Deen Dayal Upadhyay Gramin Kaushalya Yojana (DDU-KY) aims to skill rural youth who are poor and provide them with job having regular monthly wages or above the minimum wages. It is one of the clusters of initiatives that ensure full social inclusion of the candidates by mandatory coverage of socially disadvantaged group, where one-third of the persons covered should be women. Mahila Deen Sachakikaran Parivrajana (MDSP) is another component that aims to improve the present status of women in agriculture and enhance the opportunities for empowerment.

Rashtriya Mahila Kosh (RMK): Rashtriya Mahila Kosh (RMK), of Ministry of Women and Child Development, extends micro-credit to the women in the informal sector through a client-friendly, collateral-free and a hassle-free manner for income generation activities. RMK has taken a number of promotional measures to popularise the concept of micro-financing, enterprise development, thrift and credit formation and strengthening of women SHGs through intermediary organisations. Education of credit management has been integrated with the provision of credit, along with literacy and skill training for marginalised women and leadership training among groups for self-management;

Mahila Shakti Kendra (MSK): In order to support rural women and provide them with convergent support, Ministry of Women and Child Development, Government of India approved a new scheme namely Mahila Shakti Kendra (MSK) as a sub-scheme under the Umbrella Scheme 'Mission for Protection and Empowerment for Women' for implementation during 2017-18 upto 2019-20 to empower rural women through community participation. MSK scheme is envisaged to provide an interface for rural women to approach the government for availing their entitled benefits and for empowering them through training and capacity building. Convergent support is being proposed for equal access to healthcare, quality education, career and vocational guidance, employment, health and safety, social security and digital literacy at Gram Panchayat level in selected districts/blocks across the country with a view to create an environment in which women realise their full potential. The scheme is committed to play an important role for empowerment of rural women especially in the most backward 115 districts of the country.

Community engagement through College Students Volunteers is envisioned in 115 most backward districts as part of the MSK Block level initiatives. Student volunteers will play an instrumental role in awareness generation regarding various important government schemes/programmes as well as social issues and association with NSS/NCC cadre students will also be an option. The scheme at the block level will provide an opportunity to Student Volunteers to participate in the development process by bringing change in their own communities and ensuring that women are not left behind and are equal partners in India's progress. At the national, state, block level, websites/IT tools will be made available for monitoring and feedback. Web based/online feedback mechanism will be developed for submission of queries and grievance redressal.

National Repository of Information for Women (NARI): Ministry of Women and Child Development has also prepared a portal namely

National Repository of Information for Women (NARI) that will provide citizen easy access to information on government schemes and initiative for women. Rural women can access these schemes on their own or with the help of various frontline workers associated with government schemes at the ground level. The portal summarises over 350 government schemes and other important information for the benefit of women, with more being added every day. The Portal also provides information to women on issues affecting their lives, for example, there are tips on good nutrition, suggestions for health check-ups, information on major diseases, tips for job search and interviews, investment and savings advice, information on crimes against women and resorting procedures, contacts of legal aid cells and much more. All the information on various schemes/programmes relevant for women will be updated on a regular basis. This will be used by MSK staff to improve access and utilisation of government schemes by rural women at the ground level.

National Nutrition Mission (NNM): To deal with the problem of malnutrition, government has set-up the National Nutrition Mission (NNM) with a budget of Rs. 3045 crore. The aim is to achieve an improvement in the nutritional status of children of 0-6 years and pregnant and lactating women in a time bound manner during the three years beginning from 2017-18, with defined targets. Some of them are to prevent and reduce stunting in children (0-6 years) by 5 per cent @ 2 per cent p.a., prevent and reduce under-nutrition in children (0-6 years) by 5 per cent @ 2 per cent p.a., reduce the prevalence of Anaemia among young children (6-59 months) by 5 per cent @ 3 per cent p.a., reduce the prevalence of Anaemia among women and adolescent girls in the age group of 15-49 years by 5 per cent @ 3 per cent p.a., reduce low birth weight by 5 per cent @ 2 per cent p.a.

In 2015, Swadhar Grah scheme was launched to cater to primary needs of women in difficult circumstances. Women are provided with shelter, food, clothing, medical treatment and care are inclusively provided, meanwhile, legal guidance is

also given to enable their readjustment in family/society. Rehabilitation for their emotional and economic state is rendered to enable them to start life afresh. Presently, 581 Swadhar Grameen are functioning in the country benefiting 17,291 women. In addition, a widow home with the capacity of 600 people has been constructed at Surrikar-Benigar, Vrindavan.

Mahila Police Volunteers (MPVs) will prove to be an effective alternative against the local police for women. MPVs were launched in all States and UTs to serve as a public-police interface and facilitate women in distress. The MPVs report incidences of domestic violence, child marriage, dowry harassment, and violence faced by women in public spaces. Initiated in 2016, the MPVs are operational in 5 states.

Mahila-e-Haat is an initiative to economically empower women through financial inclusion. The government launched a bilingual portal Mahila-e-Haat, a direct online digital marketing platform for women entrepreneurs/SHGs/NGOs in March 2016. It received over 1450 lakh visitors. Women entrepreneurs/SHGs/NGOs from 22 states showcased approximately 1800 products/services. It has 23000 registered SHGs with 3 lakh beneficiaries. In 6 months, women entrepreneurs/SHGs/NGOs have transacted business of over Rs. 20 lakh.

Empowering Elected Women Representative (EWRs), Ministry of Women and Child Development, has launched an extensive training programme with an objective of empowering Elected Women Representative (EWRs) and help them assume the leadership roles expected of them and guide their villages for a more prosperous future. Past experience at the grassroots level has led to the realisation that capacity building of EWRs is critical to empower women to participate effectively in governance processes. An empowered EWR can ensure that the same can be translated among women in her community.

Government should empower rural women to claim their rights to land, leadership, opportunities,

and choices, and to participate in shaping laws, policies and programmes. This results in productivity gains, enhanced growth and improved development prospects for current and future generations. The initiatives engage with governments to develop and implement laws and policies that promote equal rights, opportunities and participation so that rural women can market their goods and make a strong contribution to inclusive sustainable rural development.

Conclusion

The role of rural women outside the home has become an important feature of the social and economic life of the country and in the years to come it will become still more significant. From this point of view, greater attention will have to be paid to the problems of training and development of rural women. The education of rural girls, therefore, should be emphasised not only on grounds of social justice, but also because it accelerates social transformation. In addition, the government programmes promoting women education and skill development should be pursued more vigorously. It is a challenging task and it requires multi-pronged efforts. With a strong determination, commitment and involvement of people and organisations with philanthropic motive and a rational outlook, the problem can be solved and hurdles be overcome for promoting empowerment of rural women.

Thus, the road to inclusive development cannot be travelled without the health, education and empowerment of women who form almost 30 per cent of the Indian population. A multi-directional organised approach to their development is sure to take the country way beyond this path. And in India the forces are marching in the right direction to take the nation to new horizons.

(Dr. Sohini Rao) is an economist and an academician. She is also an IITC Emeritus Fellow. Email: sohilirao@gmail.com and Ms. Nausheen Rao is a Management Consultant and Deputy Project Officer, Arka Jyoti University, Jharkhand. Email: nausheen.rao-18@gmail.com)

PRIORITIZING ECONOMIC EMPOWERMENT OF WOMEN

CONTENTS

The importance of women's participation in an economy cannot be overstated. The government is making sure that women realize their potential by ensuring gender equality and justice across the socio-economic milieu. Cross-sectoral interventions have been undertaken to break the glass barriers in the economy. As we move on the path towards creating a 'New India', the government is ensuring that empowered women will exercise their economic agency for their own and country's well-being.

"There is no chance for the welfare of the world, unless the condition of the women is improved. It is not possible for the bird to fly with one wing." Swami Vivekananda's words have echoed in the policies and schemes of the present government. There has been a structured orientation towards holistic empowerment of women taking a multidimensional overview.

Empowerment may be defined as the process by which women take control and ownership of their choices. It is the "expansion in people's ability to make strategic life choices in a context where this ability was previously denied to them." (Kabeer, 2001). Furthermore, there has

been a long-standing call to recognize "agency" of women which will empower them to exercise their economic choices. A limited role of women's active agency seriously affects the lives of all people, men as well as women, children as well as adults. (SEN, 1999). The Prime Minister resonated this sentiment when in a Mann Ki Baat address to the nation he argued to shift from "women development" to "women-led development".

The importance of women's participation in an economy cannot be overstated. In 2013, the globally renowned consultancy firm McKinsey released a report titled "Power of Parity".¹ This report stated that "India could add \$700 billion of additional GDP in 2025, upping the country's



The information in the articles mostly pertains to the pre-lockdown period; however, efforts have been made to update the articles as far as possible within the constraints of the lockdown.

annual GDP growth by 2.4 percentage points by bolstering gender parity. About 70 percent of the increase comes from raising India's female labour force participation rate by 12 percentage points, from 31 percent at present to 41 percent in 2025, to bring 63 million more women into the economy over this period." IMF Chief Christine Lagarde has on record stated, "according to IWT research raising women's participation in the workforce to the level of men can boost Indian economy by 27 percent." Hence women's active economic agency would help not only in their empowerment but would also augment the realisation of growth and development potential of India.

Recently, however, challenges have ensued from the declining trends of women's participation in the labour force. As per the latest Economic Survey 2019–20, the labour force participation rate for women has declined from 33 percent in 2011–12 to 25.3 percent in 2017–18. These estimates were based on a combination of NSO-SUS and PUFs-2017–18 statistics.³

Bankim Chandra Chatterjee had written one of the first political texts arguing for equality, titled *Somya*. He brilliantly articulated, "The areas in which there are differences in rights between men and women, do not correspond to sufficient natural differences between them. The evident differences are due to faulty social rules. The basic idea behind notions of equity is to amend these social rules."

The government has undertaken multifaceted interventions to share economic empowerment of women. The multiple interventions may be categorised under 4 broad heads: of Societal, Educational, Entrepreneurial and, finally, Interventions which create a financial security net for women.

A brief overview underlining different schemes under each intervention is provided below:

A. Societal Interventions: It is necessary to combat entrenched patriarchal and social norms which create an unequal opportunity structure for women in the economy. Hence the Government has undertaken various steps to take on this menace in society through various steps detailed below:

1. **Maternity Benefit (Amendment) Act 2017:** To ensure distributive justice as well as to encourage economic engagement of women, Government passed an amendment act which increased the duration of paid maternity leave available for women from the existing 12 weeks to 26 weeks. Introduced an enabling provision relating to "work from home" for women and also made crèche facility mandatory for every establishment employing 50 or more employees.

2. **She-Box:** To facilitate action against any form of sexual harassment at work which would disincourage women from participating in the economy, Parliament had enacted Protection of Women from Sexual Harassment at Workplace (Prevention, Prohibition and Redressal) Act 2019. The Government has proactively innovated to ensure access to redressal facilitated by this act by conceptualising the She-Box. This Sexual Harassment electronic Box (She-Box) is an effort to provide a single window access to every woman for registration of complaint related to sexual harassment. Once a complaint is submitted to the 'She-Box', it will be directly sent to the concerned authority having jurisdiction to take action into the matter.

3. **One Stop Centre:** It is envisaged for establishing a single integrated platform across the country to provide holistic support and assistance under one roof to women affected by violence, both in private and public spaces. These centres are intended to support women affected by any form of violence, in private and public spaces, within the family, community and at the workplace. Aggrieved women who are reaching out or have been referred to the One Stop Centre will be provided with requisite specialised services.

4. **Beti Bachao Beti Padhao:** The objective of this initiative is for prevention of gender-biased sex-selective abortion, ensuring survival and protection of the girl child and ensuring education of the girl child. The Finance Minister spoke of the results this scheme has gathered in his latest budget speech. Gross enrolment ratio of girls across all levels of education is now

- higher than boys at elementary level, it is 54.32 percent as against 53.28 percent for boys. At Secondary level, it is 83.30 percent as compared to 78 percent and at Higher secondary level girls have achieved a level of 59.70 percent as compared to 57.54 percent for boys.⁴
- B. Educational and Skilling Interventions:** While there has been a general rise in school level enrolment for girls, it is essential to focus on higher education for women. Further alongwith education, it is essential to ensure that women have the required skill sets which industry desires in order to raise their employability. For both these objectives various initiatives have been undertaken.
- C. Pradhan Mantri Sahaj Vidya Yojana (PMSVY):** It is a skill certification initiative that aims to train youth in industry-relevant skills to enhance opportunities for livelihood creation and employability. Individuals with prior learning experience or skills are also assessed and certified with a Recognition of Prior Learning. Training and Assessment fees are entirely borne by the Government under this programme. The encouraging fact about this skill development scheme is that close to 50 per cent of the candidates enrolled and trained under PMSVY are women.
- D. Mahila Shiksha Kendra (MSK) Scheme:** It has been conceptualised to empower rural women through community participation. Under the scheme, capacity building of women collectives is envisaged in not more than 50 per cent of the MSK blocks in 115 aspirational districts to address the livelihood needs of women. Special emphasis has been laid on those in remote/vulnerable areas where women are not in a position to move out from their immediate surroundings for formal skill training. This component is to be implemented in collaboration with NGOs/ Cooperative Societies/ Gram Vikas Kendras.
- E. Support to Training and Employment Programme for Women (STEP):** STEP has been envisaged to train women with no access to formal skill training facilities, especially in rural India. The initiative reaches out to all Indian women above 18 years of age. The programme imparts skills in several sectors such as agriculture, horticulture, food processing, handlooms, traditional crafts like embroidery, travel and tourism, hospitality, computer and IT services.
- F. Entrepreneurial Interventions:** The Government has actively promoted self-employment of women by ensuring that they become wealth and job creators instead of being job seekers in the economy. The programmes have focussed on dealing with challenges such as poor access to funding and markets as well as bolstering the confidence of women to take an entrepreneurial risk.



1. **Pradhan Mantri MUDRA Yojana:** Under this scheme, Government has provided credit up to 10 lakh to small entrepreneurs without the need for collateral or a guarantee. Women have made up 70 per cent of the beneficiaries under the scheme. Over 13 crore loans have been disbursed to women borrowers, amounting to Rs 4.78 lakh.⁴
2. **Stand-up India:** This scheme facilitates loans between 10 lakh and 1 crore to at least one schedule caste/schedule tribe and one woman per bank branch for setting up a greenfield enterprise. If the credit is given to a non-individual entity, then 51 per cent shareholding must be held by SC/ST or woman entrepreneur. An amount of Rs. 16712.72 crore has been sanctioned for women account holders and 51 per cent of the beneficiaries under the scheme have been women.⁵
3. **Rashtriya Mahila Kosh (RMK):** RMK provides loans to NGOs/MPs termed as intermediary organizations (IMO) which on-lend to Self Help Groups (SHGs) of women. Micro-credit is extended to women in the informal sector without collateral for income generation activities. The Annual report of Ministry of Women and Child Development 2018–19 elucidates on the growths scale of the scheme and also its annual reach out. The total loan disbursement in the last year has been Rs 31.5 crores which has reached out to 74000 beneficiaries.
4. **Mahila e-Rast:** It is a website which leverages technology for showcasing products made/manufactured/sold by women entrepreneurs; it provides access to markets for women entrepreneurs across the country.
5. **Women Entrepreneurship Platform (WEP):** The WEP is a portal to enable women across India to realize their entrepreneurial aspiration. The platform serves as an aggregator of information resources and services. It aims to offer services under various support areas of incubation, acceleration, entrepreneurship, skills, marketing assistance, funding and financial assistance. It also aims to initiate dialogues with various state governments and sensitive local stakeholders for building a conducive entrepreneurial ecosystem for women entrepreneurs.
6. **Financial Security Interventions:** Given that high proportion of women function in the informal sector, it is essential for the Government to build a plank of financial social security. It is on this plank, that women can aspire to become active agents in an economy. The government has resorted to various schemes for this purpose.

- Pradhan Mantri Jan Dhan Yojana:** The scheme has been envisaged to comprehensively enhance formal financial inclusion in the country. It is a National Mission for Financial Inclusion to ensure access to financial services, namely, Banking/Savings & Deposit Accounts, Remittances, Credit, Insurance, Pension in an affordable manner. As of February 2020, 53 per cent of the account holders (over 25 crore) are women. An immediate and substantial value of this financial inclusion is seen through a component of Pradhan Mantri Garib Kalyan Yojana. Around 20 crore women Jan Dhan account holders will get a direct benefit transfer of Rs. 300 per month for three months starting from April 2020. By April 23, 2020, a total transfer of Rs 2,580 crore had taken place as per data provided by Department of Financial Services. This is a noteworthy benefit in times of uncertainty brought on by the Covid-19 pandemic.
- Aadhar Prabhikari Yojana (APY):** The scheme envisages a universal social security system for all Indians, especially the poor and the underprivileged by offering guaranteed minimum monthly pension of Rs. 1000 to Rs. 5000 after the age of 60 years. The scheme is open for subscription through Banks and Post Offices on an ongoing basis. More than 93 lakh subscribers 42.43 per cent out of a total of around 2.35 crore subscribers under APY are women.
- Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY):** The objective of this scheme is to create a social security system for the poor and underprivileged in the age group of 18-50 years by providing a renewable life insurance cover of Rs. 2 lakh with a premium of just Rs. 330. Under the scheme 40.70 percent enrolments are of women members and 58.21 percent of claim beneficiaries are women.
- Pradhan Mantri Suraksha Bima Yojana (PMSBY):** The objective of this scheme is to provide affordable insurance scheme for the poor and underprivileged people in the age group of 18 to 70 years with a bank account at a premium of Rs. 12 per annum.⁴ It creates a risk coverage of Rs. 2 lakh for accidental death and full disability and Rs. 1 lakh for partial disability. Under this scheme, 41.50 percent enrolments are of women members and 51.29 percent of

claim beneficiaries have been women providing them with the much-needed support.

Rabindranath Tagore had expressed anguish at the state of women in India writing "Gandhi why have you not given woman the right to consider her destiny? Why does she have to wait head bowed, by the roadside. Waiting with fixed patience, hoping for a miracle in the morrow." The hope of that morrow is being realised in the conception of 'New India' by the Government. Although this hasn't come about by a miracle but by calibrated, structured and well-thought of interventions across various spheres in the country.

The Women, Business and Law Report 2020⁵ was recently released by the World Bank Group. The study examined laws and regulations affecting women's economic opportunities across 190 economies. To the credit of recent interventions by the government, India has taken the top spot in the South Asian region gaining 4 per cent year-on-year with a score of 74.4 out of 100 and was placed 117th out of 190 countries.

The government is making sure that women realise their potential by ensuring gender equality and justice across the socio-economic milieu. Cross-sectoral interventions have been undertaken to break the glass barrier in the economy. As we move on the path towards creating a 'New India', the Government is ensuring that empowered women will exercise their economic agency for their own and country's well-being.

Footnote

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(The author is Young Professional, NITI AAYOG. Email: azwilk.mph@gmail.com. Views expressed are personal).

SCHEMES TO UPLIFT WOMEN

Beti Bachao

Empowerment of women means equipping them to become economically independent, self-reliant, with a positive self-esteem that enables them to face any difficult situation and facilitates their participation in developmental activities. In order to ensure that women could be empowered and given equal opportunities, the government has started various schemes.

From social reformer Savitribai Phule to astronaut Kalpana Chawla, India has been home to many women icons who have time and again proven that if given the right platform and opportunities they can achieve anything they want. To empower women does not mean to give them power to dominate others or to use power to establish their superiority over others, as it may be commonly understood. Empowerment of Women means equipping them to become economically independent, self-reliant, with a positive self-esteem that enables them to face any difficult situation and facilitates their participation in developmental activities. But the reality exists that for centuries women have suffered various injustices which in many cases starts right from the time a girl child is born. In order to ensure that women could be empowered and given equal opportunities, Government of India has started various schemes.

Schemes Towards Empowering Women

1. Beti Bachao Beti Padhao

The trend of decline in the Child Sex Ratio (CSR), defined as number of girls per 1000 of boys between 0-6 years of age, has been unabated since 1991. The decline from 945 in 1991 to 927 in 2001 and further to 915 in 2011 was alarming. The decline in the CSR is a major indicator of women disempowerment and CSR reflects both, pre-birth discrimination manifested through gender biased sex selection, and post-birth discrimination against girls. Since coordinated and convergent efforts are needed to ensure survival, protection and empowerment of the girl child, the government has announced Beti Bachao Beti Padhao Initiative in 2013. The objectives of the initiatives: prevention of gender-biased sex selective elimination, ensuring survival and protection of the girl child and ensuring education



and participation of the girl child. This is being implemented through a national campaign and focused multi-sectorial action in 100 selected districts low in CSR covering all states and UTs.

As per Health Management Information System (HMIS) report of Ministry of Health and Family Welfare (MoHFW) that was shared by Women and Child Development Minister Smriti Irani on March 26, 2020, Sex Ratio at Birth has improved from 915 in 2014-15 to 931 in 2015-19.

2. One Stop Centre Scheme

Gender Based Violence (GBV) is a global health, human rights and development issue that transcends geography, class, culture, age, race and religion affecting every community and country in every corner of the world. In India, Gender Based Violence has many manifestations; from the more universally prevalent forms of domestic and sexual violence including rape, to harmful practices such as, dowry, honour killings, acid attacks, witch-hunting, sexual harassment, child sexual abuse, trafficking for commercial sexual exploitation, child marriage, sex-selective abortion, etc. etc. Other than these, India is also grappling with violence due to inequities in social life more particularly in times of displacement and communal incidents. In light of the above, Ministry of Women and Child Development (MoWCD) has formulated a Centrally Sponsored Scheme for setting up One Stop Centre. These Centres have been established across the country to provide integrated support and assistance under one roof to women affected by violence, both in private and public spaces in phased manner. As on March 6, 2020, a total of 728 OSCs are approved in 714 districts across the country. Out of these, 680 OSCs are operational so far.

3. Universalisation of Women Helpline Scheme

The right to a life free of violence is a basic human right enshrined in Article 21 of Indian Constitution. Violence or the threat of violence not only violate this right but restrict women's freedom and germinates imbalance of power between women and men.

The Scheme of Universalisation of Women Helpline provides 24-hour immediate and emergency response to women affected by violence through referral linking with appropriate authority such as police, One Stop Centre, hospital; and information about women related government schemes and programmes across the country through a single uniform number. The scheme of Universalisation of Women Helpline (181) is exclusively designed to support women affected by violence, both in private and public spaces, including in the family, community, workplace, etc. Women who are victims of physical, sexual, emotional, psychological and economic abuse, irrespective of age, class, caste, education status, marital status, race, culture, and geography will be provided support.

In addition, women facing any kind of violence due to attempted honour related crimes, acid attacks, witch hunting, sexual harassment, child

sexual abuse, trafficking, etc., will also be provided with immediate and emergency services. According to the data presented in Lok Sabha last year in July, the women helpline set up in 32 states have benefitted more than 25 lakh women.

4. UJAWALA

Trafficking of women and children for commercial sexual exploitation is an organised crime that violates basic human rights. The problem of trafficking of women and children for commercial sexual exploitation is especially challenging due to its myriad complexities and variation. Poverty, low status of women, lack of a protective environment, etc., are some of the causes for trafficking. Keeping the above issues and gaps in mind the MWCD has formulated a Central Scheme "Comprehensive Scheme for Prevention of Trafficking for Rescue, Rehabilitation and Re-integration of Victims of Trafficking for Commercial Sexual Exploitation-Ujawala". The scheme was conceived primarily for the purpose of preventing trafficking on the one hand and rescue and rehabilitation of victims on the other. It came into effect in 2016. The scheme is implemented by Ministry of Women and Child Development for combating trafficking with five specific components – Prevention, Rescue, Rehabilitation, Re-integration and Registration.



(cross-border) of victims of trafficking. As of July 2019, there are 134 Protective and Rehabilitative Homes in the country and the number of beneficiaries are 5,291.

5. SWADHAR Greh - A Scheme for Women in Difficult Circumstances

Recognizing the need to prevent women from exploitation and to support their survival and rehabilitation, the scheme of Short Stay Home for women and girls was introduced as a social defence mechanism, by the then Department of Social Welfare in 1969. The scheme is meant to provide temporary accommodation, maintenance and rehabilitative services to women and girls rendered homeless due to family discord, crime, violence, mental stress, social ostracism or are being forced into prostitution and are in more danger. Another scheme with the similar objectives namely, SWADHAR-A Scheme for Women in Difficult Circumstances was launched by the Department of Women and Child Development in 2001-02. The scheme through the provisions of shelter, food, clothing, counselling, training, clinical and legal aid aims to rehabilitate such women in difficult circumstances. Centre for Market Research and Social Development, New Delhi conducted an evaluation in 2007 to assess the performance of both the schemes. The evaluation report while on the effectiveness and positive impact of measures adopted under the schemes for counselling and rehabilitation found that the profile and category of residents, admission procedure, counseling, quality of service, vocational training, rehabilitation and follow up procedure are almost similar in both the schemes. It, therefore, recommended merger of these two schemes for better functioning and outcomes with lesser administrative burdens and procedures. It also recommended that the new scheme should focus on establishing one such home in every district.

As of November 2019, there are a total of 417 SWADHAR Greh across the country. The current occupancy level in all already established and running SWADHAR Greh is 12,758.

6. Nirbhaya Fund

Violence and abuse against women and girls is frequent on streets, in public transportation and in other public places. Such occurrences restrict women's right to mobility, discouraging their

freedom to walk freely and move in public spaces of their choice. Such violence also limits their access to essential services and adversely impacts their health and well-being.

In this context, and following the incident of December 2012, the Government had set up a dedicated fund – Nirbhaya Fund – which can be utilized for projects specifically designed to improve the safety and security of women. It is a non-repayable corpus fund, being administered by Department of Economic Affairs, Ministry of Finance. As per the guidelines issued by Ministry of Finance, the Ministry of Women and Child Development (MWCD) is the nodal Ministry to appraise/recommend proposals and schemes to be funded under Nirbhaya Fund. MWCD further has the responsibility to review and monitor the progress of sanctioned schemes in conjunction with the line Ministries and Departments. Some of the projects funded by the Nirbhaya fund are One Stop Centres, Universalisation of Women Helpline (WHL) and Mahila Police Volunteers (MPV) among others.

7. Mahila Police Volunteers

Gender Based Violence (GBV), faced by women both in public and private spaces, including domestic violence, sexual assault, rape, voyeurism, stalking, etc. is a major threat to women equality and empowerment.

It is a matter of common knowledge that women who are victim of violence or harassment may not find it easy to approach the police or other authorities for getting help or support. It would, therefore, be desirable to provide an effective alternative for getting help and support.

In order to promote these objectives and increase focused community outreach, the Government of India started the scheme of Mahila Police Volunteers (MPVs) in all States and UTs who will act as a link between police and the community, and facilitate women in distress.

MPVs are envisaged as empowered, responsible, socially aware women for fostering leadership in local settings to facilitate police outreach on gender concerns. They act as an interface between society and the police.

An MPPV serves as a public-police interface in order to fight crime against women. The broad mandate of MPPVs is to report incidences of violence against women (such as domestic violence, child marriage, dowry harassment and violence faced by women in public spaces). An MPPV is an honorary position.

Haryana was the first state to adopt the initiative at Karna and Mahindargarh Districts on a pilot basis under Sarvodaya Fund during the financial year 2015-2017. There are currently total of 9532 MPPVs of Andhra Pradesh, Gujarat, Madhya Pradesh and Chhattisgarh.

II. **Mahila E-haat**

The Ministry of Women and Child Development launched "Mahila E-haat" a bilingual portal on March 7, 2015. This is a unique direct online marketing platform leveraging technology for supporting women entrepreneurs/SHGs/HNGOs for showcasing the products/services which are made/manufactured/undertaken by them. It is an initiative for meeting aspirations and needs of women. This was done keeping in mind that technology is a critical component for business efficiency and to make it available to the majority of Indian women entrepreneurs/SHGs/HNGOs. The USP of this online marketing platform are facilitating direct contact between the vendors and buyers, as by displaying their contact number, address as also the basic cost of products/services. Since its launch over 17 lakh visitors/hits have been received by the Mahila E-haat portal. Women entrepreneurs/

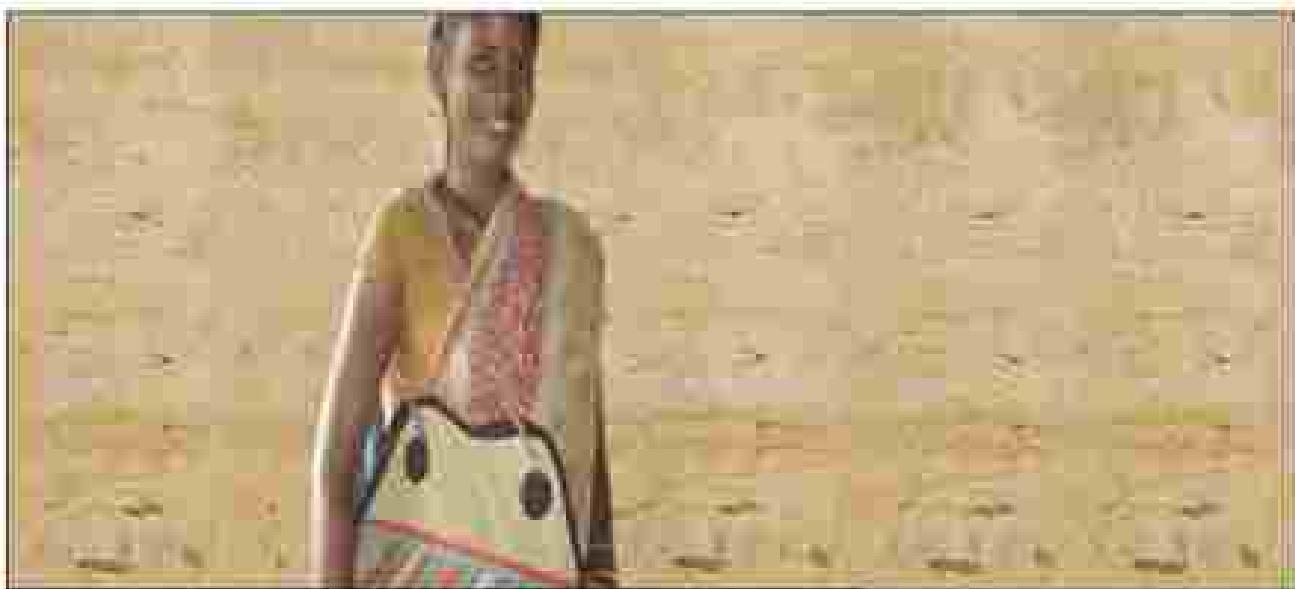
SHGs/HNGOs from 24 states are showcasing over 2000 products/services across 15 categories viz., clothing (men, women and children), bags, fashion accessories or jewellery, decorative and gift items, home décor, carpets or rug or foot mats and baskets, linens or cushion covers, boxes, pottery, grocery and staples or organic, natural products, file folders, industrial products, educational aids, soft toys and miscellaneous. This is impacting 3.90-lakh beneficiaries directly and indirectly and over 26000 SHGs. The portal is continuously being upgraded.

Sensitization, advocacy, training, packing and soft intervention workshops on Mahila E-haat are organized periodically with the support of State Governments & Women Development Corporations - New Delhi, Indore, Kochi, Bangalore, Nagaland, Chandigarh, Chhattisgarh, Mumbai, Raipur, Hyderabad, Varanasi, etc.

This exclusive portal is the first in the country to provide a special focused marketing platform for women. Being a bilingual portal, it aims at financial inclusion and economic empowerment of women.

3. **National Crèche Scheme (earlier named as Rani Gayatri National Crèche Scheme)**

This scheme is being implemented as a centrally sponsored Scheme through States/UTs with effect from January 1, 2017 to provide day care facilities to children (age group of 6 months to 5 years) of working mothers. The salient features of the National Crèche Scheme are as follows:- Day care facilities



including sleeping facilities, early stimulation for children below 3 years and pre-school education for 3 to 5 years old children, supplementary nutrition (to be locally sourced), growth monitoring, health check-up and immunisation. Further, the guidelines provide that, crèches shall be open for 25 days in a month and for seven and half hours per day, the number of children in the crèche should not be more than 25 per crèche with one worker and one helper respectively. As on March 11, 2020, 6453 crèches are functional across the country under the National Crèche Scheme.

10. Working Women's Hostels

With the progressive change in the socio-economic fabric of the country more and more women are leaving their homes in search of employment in big cities as well as urban and rural industrial clusters. One of the main difficulties faced by such women is lack of safe and conveniently located accommodation. The Government of India introduced a scheme in 1972-73 of grant-in-aid for construction of new/expansion of existing buildings for providing hostel facilities to working women in cities, smaller towns and also in rural areas where employment opportunities for women exist. Based on an evaluation, the existing scheme has been revised to promote availability of safe and conveniently located accommodation for working women who need to live away from their families due to professional commitments. The objective of the scheme is to promote availability of safe and conveniently located accommodation for working women, with day care facility for their children, wherever possible, in urban, semi-urban, or even rural areas. The scheme is assisting projects for construction of new hostel buildings, expansion of existing hostel buildings and hostel buildings in rented premises.

Since its inception in 1972-73, 952 hostels have been sanctioned under the scheme all over the country for benefit of about 72,363 working women. To provide safety for working women, a provision has been made to keep security guard and to install CCTV cameras in Working Women Hostels. To provide quality of stay for working women, provision has been made in the Scheme guidelines to provide safe and affordable accommodation for working women with clean and well-ventilated Day Care Centre for the children of inmates; medical first-

aid and providing washing machines and geyser/solar water heating system. The beneficiaries under the scheme are working women who may be single, widowed, divorced, separated, married but whose husband or immediate family does not reside in the same city/town. Particular preference is given to women from disadvantaged sections of the society. The Scheme guidelines also provide for reservation of seats for physically challenged beneficiaries.

Conclusion

India is on the cusp of becoming a super power but this dream cannot be achieved till 50 per cent of population consisting of women are empowered. In addition to these the government is also working towards bringing legislations to empower women and give them equal opportunities. It has been seen in history that whenever women are empowered those countries flourish because it is women who shape the destiny of the society and decide the future of the nation.

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(The author is Delhi based senior journalist covering Ministry of Women and Child Development. Email: com.othar@gmail.com)

WOMEN HEALTH: FUNDAMENTAL FOR A HEALTHY NATION

Dr Meeta Singh

For the balanced development and prosperity of any nation, the contribution of the female population cannot be ignored. The absence of health not only prevents one from contributing positively towards national development but places an additional burden on the healthcare delivery system. A healthy female translates into a healthy family because she is the building block of the home, society and nation. A healthy body and mind are the basis of social, political and cultural development of the country. The health status of women in the country cannot be ignored. The government is running a plethora of programmes and it is the duty of all responsible citizens to increase awareness about such schemes so that the benefits reach the poorest of the poor and most deserving sections of the society.

India is the second most populous country in the world and approximately one-fifth of the world's population resides in India. This fact states the importance of addressing the issue of women health in India as women comprise of almost 48 percent of about 137 crore Indians. For the balanced development and prosperity of any nation, the contribution of the female population cannot be ignored. The absence of health not only prevents one from contributing positively towards national development but places an additional burden on the healthcare delivery system. A healthy female translates into a healthy family because she is the building block of the home, society and nation. A healthy body and mind are the basis of social, political and cultural development of the country.

Unfortunately, in our country we cannot boast about the status of the health of our women. The Maternal Mortality Rate, which refers to the number of deaths due to complications from pregnancy and child birth in Indian women, is about 130 per 100,000 live births (2014–2015) as per the latest figures released by the Registrar General of India – Sample Registration System. Though it has declined, yet we still have a long way to go. India alone accounts for one-fourth of the world's cervical cancer patients, with estimates that 1 in 53 Indian women are likely to suffer from cervical cancer as compared to 1 in 100 in the developed countries, as stated in the paper 'Burden of Cervical Cancer and Role of Screening' in the Indian Journal of Medical and Paediatric Oncology.

The information in the articles mostly pertains to the pre-lockdown period. However, efforts have been made to update the articles as far as possible within the constraints of the lockdown.



Traditionally, being a patriarchal society, women are always accorded second importance in every aspect of life more so in the rural areas. Deprived of proper nutrition, thanks to the gender bias which is widely prevalent in not only rural India but even urban households, the female population is faced with innumerable challenges when it comes to addressing the issue of health.

Areas of Concern Pertaining to Women Health Malnutrition

According to World Health Organization, malnutrition refers to the deficiencies, excesses or imbalances in a person's intake of energy or nutrients. A malnourished mother is bound to produce malnourished children and is herself prone to diseases like anaemia, tuberculosis, and pneumonia. It is a major contributor to the high Maternal Mortality Rate and Infant Mortality Rate in India.

Factors responsible for Malnutrition are:

- Poor socioeconomic conditions resulting from and leading to poor educational status
- Early marriage and pregnancy
- Poor knowledge of birth control measures leading to unplanned pregnancies
- Prolonged lactation

Cervical Cancer

Cancer of the cervix contributes to approximately 5–23 percent of all cancers in Indian women. Unlike other cancers, this carcinoma is easier to detect by relatively simple screening procedures and preventable by use of vaccine. Nearly all cases can be attributed to Human Papilloma Virus (HPV). Other risk factors are:

- Early age of marriage
- Multiple sexual partners
- Multiple pregnancies
- Poor genital hygiene
- Malnutrition
- Lack of awareness

Breast Cancer

It is the most common cancer in women in India and accounts for 14 percent of all cancers in women. It can occur at any age but the incidence rates in India begin to rise in the early thirties and peak at ages 50–54 years.

Risk Factors are:

- Family History
- Presence of breast lumps
- Dense breast tissue
- Diet and lifestyle
- Obesity
- Estrogen exposure

Goiter

Goiter is a swelling of the thyroid gland most commonly resulting from a deficiency of iodine in the diet. Women in the reproductive age group are the most vulnerable as there is an increased demand for iodine especially during pregnancy. Deficiency of iodine in pre-pregnant state ultimately leads to hypothyroidism during pregnancy which is associated with adverse maternal and fetal side effects and may even lead to stillbirth.

Mental Health Issues

Depression is not only the most common of women's mental health problem, but may be more persistent in women than men. Discrimination on the basis of gender and sexual harassment at workplace constitutes a gross violation of women's right to equality and dignity. Often this is brushed aside as

The National Mental Health Policy announced in October 2014, is based, inter alia, on the values and principles of equity, justice, integration and evidence-based care; equity, participatory and holistic approach to mental health. Its goals and objectives include the following:

- to reduce distress, disability, exclusion, morbidity and premature mortality associated with mental health problems across life-span of a person;
- to enhance understanding of mental health in the country;
- to provide universal access to mental health care;
- to increase access to mental health services for vulnerable groups;
- to reduce rate and incidence of suicide and attempted suicide;
- to enhance respect for rights and protection from harm of persons with mental health problems; and reduce stigma associated with mental health problems;
- to enhance availability and distribution of skilled human resources for mental health.

The Government has approved the commensurate implementation of the National Mental Health Programme during the 12th Five Year Plan period with additional components. The financial support for establishment of each Centre of Excellence in the field of mental health has been increased from Rs. 20 crores to Rs. 25.70 crores per Centre.

With the objective to address the shortage of mental health professionals in the country, 26 Centres of Excellence in Mental Health and 35 PG training departments in mental health specialties to increase the PG training capacity in mental health as well as improving the tertiary care treatment facility have been located.

(Source: PIB)



Roles of Partner Ministries



- Advocacy
 - Awareness Generation
 - Community Mobilization
 - Throwing of Stakeholders
- Coordination
 - Recognition of Stakeholders
 - Improvement of Sex Ratio of Birth



- Implementation and Monitoring of PO & PWD Act including Dalit Committees
- Prohibition of Early Pregnancy
 - Registration, Institutional Delivery & FIRM Registration
- Capacity Building of Stakeholders



- Promotion of Universal Enrollment for Girls
- Prevention of Drop-Out
 - Girl Child Friendly Schools including separate toilets and canteens for girls
- Implementation of Right to Education



Role of Partner Ministries in Self-Bachao, Bach Peened

harmless and joyful but it is important to realise that such occurrences not only are an infringement of the basic constitutional rights of a woman but lead to serious repercussions in the form of mental health issues like anxiety and depression and low productivity at the work place.

Government Initiatives to Address Women-Related Health Issues

1. **Self-Bachao Bach Peened scheme** launched by the government in 2013 is a joint initiative of the

Ministry of Women and Child Development, Ministry of Health and Family Welfare, and Ministry of Human Resource Development.

The objectives of this initiative are:

- Prevention of gender-biased selective sterilisation
- Ensuring survival and protection of the girl child
- Ensuring education and participation of the girl child

Under this scheme, Sankalya Samridhi Rojya provides for opening a bank account for all girls less than ten years of age. A minimum amount of Rs. 1500 has to be deposited in this account and the government will provide an annual interest rate of 9.1 percent. The impact of this scheme is already visible in the form of rising sex ratio.

2. **Svanani Suraksha Rojana** is a safe motherhood initiative under the National Rural Health Mission with the objective of reducing maternal and neonatal mortality by promoting institutional delivery among the poor pregnant women. Each beneficiary under this scheme must have a ZSK Card along with a Maternal Health Card. The Accredited Social Health Activist (ASHA), Anganwadi Workers (AWW) act as a link between the beneficiary and the primary healthcare provider. Apart from regular antenatal check-up, cash assistance is provided to the mother at the time of delivery. The long-term objective is a reduction in Maternal Mortality and Infant Mortality Rates.

3. **Weekly Iron and Folic Acid Supplementation**, launched by the Ministry of Health and Family Welfare to meet the challenges of high prevalence and incidence of anaemia among adolescent girls and boys, aged 10–19 years. It includes:

- Administration of 100 mg elemental iron and 500 microgram of folic acid weekly on fixed day;
- Biannual deworming using Albendazole 400 mg six months apart for control of helminthic infestations;
- Screening of target groups for moderate or severe anaemia and referring these to appropriate health facility.



- A. Goiter Control Programme has been renamed as National Iodine Deficiency Disorders Control Programme to cover a wide range of Iodine Deficiency Disorders ranging from goiter to deaf mutism, cretinism, mental and physical retardation, abortions and still birth. The goals of this programme are:
- * To bring the prevalence of Iodine Deficiency Disorders down to below five percent in the country.
 - * To ensure 100 percent consumption of iodized salt (15 ppm) at the household level.
- The efforts are already being translated into results as the Total Goiter Free (TGF) has reduced significantly and the consumption of iodized salt has increased throughout the country.

In the year 2017, MNMCO launched an online complaint management system titled 'Sexual Harassment electronic Box' or She-Box (www.sexualharassmentonline.com) for registering complaints related to sexual harassment of women at workplace. She-Box is an effort of Government of India to provide a single window access to every woman, irrespective of her work status, whether working in organised or unorganised, private and public sector, including Central/State Ministries and districts, to facilitate the registration of complaint related to sexual harassment at workplace and for their speedy disposal. Those women who have already filed their complaints with the concerned committees constituted under The Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (SHAWPA), are also eligible to file their complaints over She-Box. The total number of complaints received through She-Box is 611 which includes 136 from Central Government, 109 from State Government and 363 from Private organisations.

(Source: PIB)

3. For prevention of sexual harassment at work, in 2013, Government of India notified the Sexual Harassment at Workplace (Prevention Prohibition and Redressal) Act. Consistent with the Vishakha judgement this act aspires to ensure women's right to workplace equality free from sexual harassment through compliance with the above-mentioned elements viz Prohibition, Prevention, and Redressal.

Simple Measures for Early Detection and Management of Health Concerns in Women

- Weight:** though looks is simple measure, its regular monitoring can help in early detection of malnutrition and on the other end of the spectrum increase in weight may indicate a propensity to develop diseases like hypertension and Diabetes in later life.
1. **Blood Pressure:** regular measurement is simple, cheap and quick and provides information about many health conditions.
 2. **Breast Examination:** self-examination of breast can aid in early diagnosis of breast cancer and identify the potential candidates who need a mammogram.
 3. **Pap Smear:** easy, cheap and reliable for early detection of Cervical Cancer.
 4. **Immunization:** Inquiry can be made into requirement of tetanus booster, flu shots and pneumonia vaccine.

Conclusion

In conclusion it can be safely stated that the health status of women in the country cannot be ignored. It is imperative to pay attention to and take remedial action wherever necessary to improve the health of our country's women. The government is running a plethora of programmes and it is the duty of all responsible citizens to increase awareness about such schemes so that the benefits reach the poorest of the poor and most deserving sections of the society. This can be our contribution towards nation building and can facilitate a better tomorrow for all of us.

(The author is a senior doctor by profession. Recipient of several awards, she completed her FDCS course conducted by International Society of Critical Care Medicine. Views expressed by the author are her own. Email: mstchulay@gmail.com)

Government Launches COVID India Seva

Union Minister of Health and Family Welfare, Dr. Harsh Vardhan launched the COVID India Seva on 21st April, which provided an interactive platform to establish a direct channel of communication with millions of Indians amid the pandemic. This initiative is aimed at enabling transparent e-governance delivery in real-time and answering citizen queries swiftly, at scale, especially in crisis situations like the ongoing COVID-19 pandemic. Through this, people can pose queries @CovidIndiaSeva, and get them responded to in almost real time. @CovidIndiaSeva works off a dashboard at the backend that helps process large volumes of tweets, converts them into resolvable tickets, and assigns them to the relevant authority for real-time resolution.

Commenting on the announcement of the Seva, Dr. Harsh Vardhan said, "Over time, Twitter has proved to be an essential service for both the government and citizens to interact and exchange information, especially in times of need. As #IndiaFightsCorona with social distancing, we are happy to make a concerted online effort by adopting the Twitter Seva solution. It is powered by a team of experts at our end who are trained and equipped to treat and respond to each query uniformly and at scale. This will enable us in establishing a direct channel with Indian citizens, connecting with them in real-time to provide authoritative health and public information."

The dedicated account will be accessible to people both local or national in their scope. Whether it's for latest updates on measures taken by the Government, learning about access to healthcare services or seeking guidance for someone who perhaps has symptoms but is unsure about where to turn to for help, @CovidIndiaSeva will empower public to reach out to the authorities. People can get their queries answered by tweeting to @CovidIndiaSeva.

As these responses are transparent and public, everyone can benefit from the responses received around common queries. It is important to note that the ministry will respond to broader queries and public health information. This does not require the public to share personal contact details or health record details.

Over the last three months, the Ministry has introduced several initiatives in the war against Corona- including as part of a strategic communication strategy. This includes focused travel and health advisories, various Guidelines/Standard Operating Procedures/Protocols for different stakeholders across the public and private sectors for the governments, hospitals, citizens, different healthcare workers, employees and various other knowledge resources. Different channels of communication spanning the print, electronic and social media have been deployed as part of a holistic awareness campaign. It is as a result of these collaborative efforts that today there is a widespread awareness regarding basic measures of social distancing, hand-washing and respiratory etiquettes to be followed for avoiding the virus.

On the launch of the interactive platform, Ms. Mahima Kaur, Director, Public Policy, India and South Asia, Twitter said, "We understand our role as an essential service for both the government to communicate with citizens and for the public to stay connected with each other. As #IndiaFightsCorona with social distancing, we are committed to working with the Government of India as they use the influence of social media to connect with the public at large."

(Source: PIB)

WOMEN EMPOWERMENT: MILESTONES AND CHALLENGES

Our點ofview

The role of women in the comprehensive development of a family, society and nation as a whole cannot simply be overemphasized. The Government of India's policies and programmes for improving the lives of the women and bringing about radical changes in their social status have truly played the decisive role in the growth and progress of the country.

"How wrong is it for a woman to expect the man to build the world she wants, rather than to create it herself?" said Anais Nin, the famous French novelist. Unlike other global issues, women empowerment brings back to mind the myriad problems women across countries have been vulnerable to since the dawn of civilisation on Earth. On the other hand, it also puts forth a slew of initiatives and programmes to ameliorate the socio-familial condition of women who make half of the population of the world.

There is no gainsaying the fact that the term women empowerment genuinely refers to the process of bringing the women, deprived of the socioeconomic, political and educational rights and privileges, into the mainstream development

It also lays great emphasis on bringing about holistic paradigm changes in the status of women in order to create an egalitarian society based upon the Constitutional philosophy of equality and social justice for all the people in the Republic of India. This facilitates the accessibility of women to the ocean of opportunities in the spheres of education, professions, lifestyles and their own passion and potential.

Women have made an array of advances and breakthroughs in almost all the domains of human endeavour since Independence. The ocean of social, household and economic statistics bear testimony to these veritable historical achievements and incredible laurels women have brought to their lives, families and the nation.



Women and Demographic Statistics

According to the Census 2011, the population of the country is above 121 crore out of which around 48.5 percent are females (see Table 1). The sex ratio is 939 females to 1000 males in rural areas vis-a-vis 932 females to 1000 males in the urban areas of the country. Puducherry, Tamil Nadu and Kerala have been placed on the better platform with better sex ratios while Orissa and Odisha has abysmal sex ratio of 898 females to 1000 males.

The North Eastern states and Union Territories like Arunachal Pradesh, Assam, Nagaland, Meghalaya, Delhi and Chandigarh have shown substantial improvement in the sex ratio over the last decade whereas the same ratio has actually worsened in states like Jharkhand, Bihar, Andhra

Pradesh, Dadra Nagar Haveli and Daman and Diu. The Civil Registration System, 2010 reveals that the sex ratio at birth is highest in Sikkim followed by Andaman and Nicobar Islands. Andhra Pradesh and Rajasthan have the lowest sex ratio across the country. The sex ratios are not merely figures showing the proportion of woman to that of man in a country but also a reflection on the way of treating and acceding respect to women in both family and society.

Women and Health

Ensuring healthy lives of women is not only vital for maintaining the health condition of nearly half of the population of the country but in a broader sense it also means ensuring better health condition

Table 1: State Wise Percentage Share of Female Population in Total Population and Sex Ratio 2011

State/Union Territory	% Share of Women			Sex Ratio		
	Total	Rural	Town	Total	Rural	Town
Andaman & Nicobar Islands	48.74	48.85	48.65	977	934	978
Armed Forces	48.89	48.97	48.81	999	997	999
Arunachal Pradesh	48.51	47.10	49.41	923	896	938
Assam	48.97	48.91	49.01	983	948	998
Bihar	47.94	47.23	47.95	911	895	903
Chandigarh	48.94	49.06	48.82	992	932	952
Chhattisgarh	47.23	47.87	46.76	1001	936	991
Delhi	48.93	48.99	48.81	989	932	992
Gujarat	48.89	49.52	48.21	984	934	939
Haryana	48.98	48.40	49.49	988	938	998
Jharkhand	47.50	47.16	47.92	1003	926	973
Karnataka	48.95	49.92	48.98	989	936	998
Kerala	48.53	48.41	48.77	992	972	978
Ladakh	48.62	48.54	48.70	989	937	992
Madhya Pradesh	47.53	46.54	47.52	902	845	939
Maharashtra	47.53	47.84	47.22	982	932	998
Manipur	48.32	48.86	47.78	982	932	998
Nagaland	48.43	48.21	48.71	973	933	973
National Capital	48.97	49.00	48.95	994	934	994
Odisha	48.75	48.18	49.43	992	945	945
Punjab	48.94	48.91	49.01	988	938	998
Rajasthan	47.78	47.42	48.17	953	923	973
Sikkim	48.21	47.84	48.58	958	912	958
Telangana	48.84	49.23	48.75	989	932	999
Tripura	48.71	48.94	48.48	912	898	924
Uttarakhand	48.48	47.50	48.31	940	938	952
Uttar Pradesh	48.94	48.81	49.08	989	934	998
Uttarakhand	50.43	51.21	50.52	1011	1042	1037
West Bengal	48.77	48.87	48.68	993	971	995
Others	48.27	47.24	48.14	953	934	928
Others	48.97	49.01	48.93	983	933	990
Tamil Nadu	48.33	50.20	46.45	993	1000	998
Tripura	48.31	49.28	48.33	953	973	962
Uttar Pradesh	47.25	47.21	47.71	913	894	912
Uttarakhand	48.91	48.72	49.09	999	934	993
West Bengal	48.79	48.28	48.31	993	944	959
Total	48.55	48.39	48.66	989	933	998

(Source: 2011 Issue of Social Statistics Division, Ministry of Statistics and Programme Implementation)

and well-being of the generations to come. Only a healthy mother can take care of the health of her child. There are various indices which reflect the general health condition of a woman, inter alia, total fertility rate, the infant mortality rate, crude birth rate, life expectancy.

The Infant Mortality Rate has also decreased steadily from 37 in 2005 to 34 in 2015 (see Table 2). The Maternal Mortality Rate, a crucial index to measure the general health condition of women in India, has declined significantly from 264 in 2004–2006 to 130 in

2012–15. Another vital index to measure the health condition of women is the life expectancy at birth which has been showing increasing trend over the last two decades. The life expectancy was 65.3 years for the period 2005–2015 whereas it was 65.8 years for 2010–2014 (see Figure 1). The percentage of live births too has been consistently increasing in both rural and urban areas of the country.

Women and Literacy

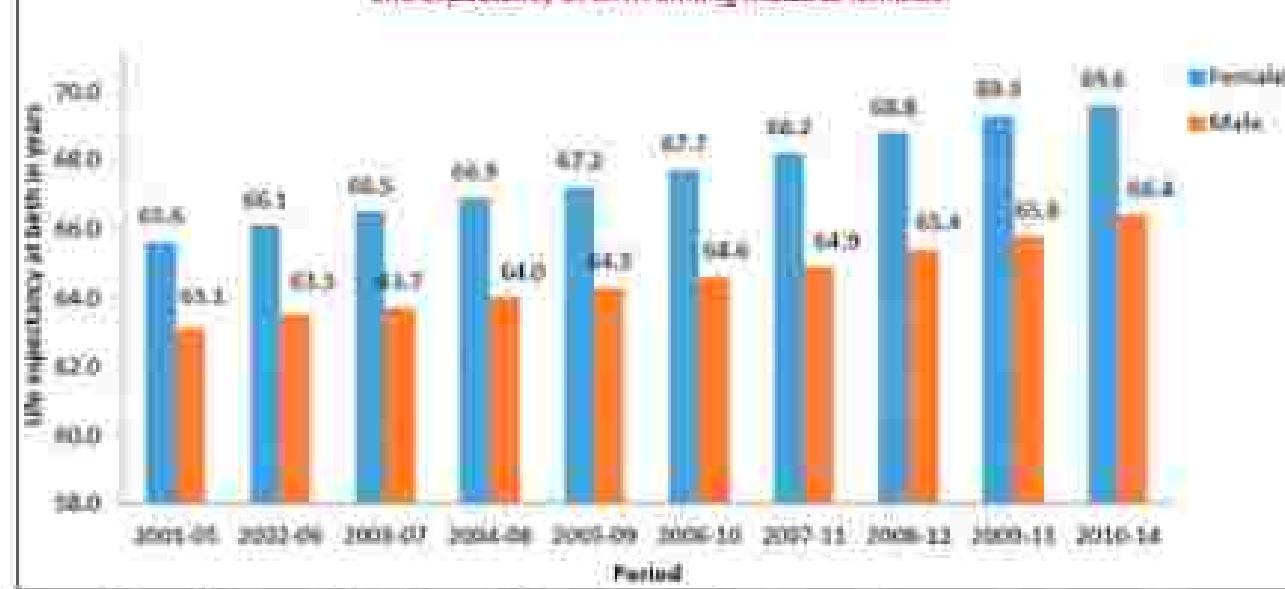
Education is the backbone of development and modernisation of the civilisation of a nation. At

Table 2. Infant Mortality Rate for last 10 year

Year	Females	Males	Total
2005	37	31	34
2006	36	32	33
2007	32	34	33
2008	36	35	37
2009	36	37	37
2010	34	35	34
2011	34	35	34
2012	34	35	34
2013	34	35	34
2014	34	35	34
2015	34	35	34
2016	34	35	34
2017	34	32	33

Source: 10th Five Year Plan, Government of India.

Life expectancy at birth among males & females



(Figure 1. Source: 2011 India's Social Statistics Division, Ministry of Statistics and Programme Implementation)

Table 3: Trend in Literacy Rates in Post Independent India

Year	Female			Male			Total			Combined		
	Females	Males	Total	Females	Males	Total	Females	Males	Total	Females	Males	Total
1951	4.87	19.03	12.10	22.33	40.80	34.59	5.88	27.12	18.52	5.88	27.12	18.52
1961	10.12	34.80	22.56	40.50	66.00	54.40	12.33	46.40	32.31	12.33	46.40	32.31
1971	15.59	48.60	37.90	48.80	86.80	60.20	21.87	45.96	34.45	21.87	45.96	34.45
1981	21.73	48.60	36.00	56.33	76.70	67.20	23.78	56.33	49.57	23.78	56.33	49.57
1991	30.17	56.96	36.00	64.03	81.09	67.20	33.23	64.13	52.21	33.23	64.13	52.21
2001	46.70	71.40	58.40	78.20	98.00	80.30	53.67	73.26	64.88	53.67	73.26	64.88
2011	57.83	77.13	66.77	79.11	89.76	84.11	64.63	80.86	72.96	64.63	80.86	72.96
% Increase in 2011 over 2001	22%	8%	12%	2%	2%	9%	20%	7%	13%	20%	7%	13%

(Source: 2011 Census of India, Statistical Bureau, Ministry of Statistics and Programme Implementation)

most, the education of women is more crucial as it affects the quality of life, awareness level and holistic development of the society.

The provision of the government to impart free and compulsory education to the children in the age group of 6–14 years under the Right to Education Act has considerably helped increase the literacy rate in the country. At the same time, the female literacy rate has increased fast from 5.87 percent in 2001 to 64.63 percent in 2011 (see Table 3). It is also remarkable that the gender gap in the literacy rate has declined sharply for the states of Meghalaya, Tripura and Jharkhand.

Women and Economy

The participation of women in the household management has been well known since the dawn of civilization on the earth. Their significant contribution to the various activities in all the three sectors of primary, secondary and tertiary as well as organized and unorganized sectors is testimony to the fact that women are the mainstay of agrarian economy like that of India. Women are engaged in various economic activities to eke out a living for their families as well as to contribute to the national income of the country.

In the matters of financial management too, women are more skilled now than ever. But

unfortunately, due to underutilization of women's potential, goals like sustainable development and higher rate of growth of economy will remain unfulfilled.

Women as Lawmakers

Women's steadily increasing representation in the various law-making bodies of the country shows their increasing hold on the decision-making and policy-making processes of the country. It is really a matter of great satisfaction that women's representation has steadily been rising in the Lok Sabha: in the first Lok Sabha election of 1951–52, only 5 percent of the Lower House of the Parliament consisted of women. But with the winning of 70 women in the last 17th Lok Sabha elections, this percentage has phenomenally shot up to 14 percent. This is the highest-ever number of women elected to the prestigious Lower House of the Indian Parliament.

The representation of women in Panchayati Raj Institutions also conveys the story of unprecedented progress made by women in the law-making process at grassroots level. The number of women representatives in the Panchayati Raj Institutions has improved with the 73rd and 74th Constitutional Amendments, passed by the Indian Parliament in December 1992, introducing the local self-government in the forms of Panchayat

Panchayats and Municipalities in rural and urban areas respectively. The provision of reservation of one-third of the seats for women has really proved to be the beacon of light for the women living somewhere far from the national development and polity.

Programmes to Boost Women Empowerment

The role of women in the comprehensive development of a family, society and nation as a whole cannot simply be over emphasized. The Government of India's policies and programmes for improving the lives of the women and bringing about radical changes in their social status have finally played the decisive role in the growth configuration of the country.

One Stop Centre Scheme

The main objective of the One Stop Centres (OSCs) is to urgently provide support to the women suffering from violence in private and public places, within the family, in the community and at the workplace. It also intends to facilitate immediate emergency and non-emergency access to services like those of medical, legal, psychological and counselling to fight against various types of atrocities against women.

Working Women Hostel Scheme

To further boost the commitment of Government of India to empower women, Working Women Hostel scheme has been launched by the Ministry of Women and Child Development.

The purpose of the scheme is to offer the working women the accessibility to affordable and safe accommodation facilities.

SWADHAR Greh

This scheme had been launched for the purpose of providing the opportunities to women, victims of the various adverse circumstances, to lead a life of dignity and self-esteem. Under this scheme, basic needs like those of food, clothing, medical facilities and shelter for women are taken care of for those who are deprived of socio-familial and economical support.

SWADHAR Greh is set up in each district of the country for 50 women and the main objectives of which, inter alia, is nourishing the emotional balance due to coming across of untoward incidents in their

lives. The scheme also provides the victims with legal aid and much-needed support to enable them to start a fresh life in both family and society.

Challenges Ahead in Women Empowerment

Notwithstanding the phenomenal achievements made by women in almost all the socio-economic spheres of the country, there are still a lot of obstacles we need to remove to enable women powerful vis-a-vis men in the truest sense. The term women empowerment simply means improvement in the socio-familial status of a woman. The Central government with the cooperation and coordination from the various state governments and global institutions has been sincerely taking all possible steps to liberate the women from the chronic vortex of the problems, prejudices and pains, but still challenges are galore.

It is usually said that a girl is not born, we make her a girl. What it implies is the bitter truth that the conventional and stereotyped thinking norm of the patriarchal society like ours does not permit the liberty to the women to have wings to fly in the sky of their beautiful dreams. This constraint needs to be removed.

The lack of education and awareness about its lifelong importance in the living of life with dignity is the Achilles heel of the betterment in the status of women. The rural areas suffer from the worse condition where dissemination of education and exposure has proved to be the biggest obstacle.

It is high time we strived hard to address the problems and uproot the bottlenecks in the direction of empowering women and imparting them what has been long-debt to them as their fundamental and birth rights. No doubt, the task is very challenging but not unfeasible; what we need to do inevitably is to take a solemn vow to wholeheartedly cooperate the government in its effort to realize the long-cherished goal of bringing light of progress and prosperity in the lives of half of the population who are mythically supposed to be the incarnation of deity of power, the ultimate power, in the whole universe.

(The author is Principal, Jawahar Navodaya Vidyalaya, Women's Polytechnic Campus, (Temporary site) Mamt, Email: satharanamulu@gmail.com)

Boosting Immunity During COVID-19

Ministry of AYUSH issued an advisory recently on various immunity enhancing steps from the time tested approaches of Ayurveda. The advisory is reiterated again in these testing times to support the efforts of all as a measure towards enhancing ones immunity.

The advisory issued on 31st March 2020, covenes the following five broad steps:

1. Backdrop:

In the wake of the Covid-19 outbreak, entire mankind across the globe is suffering. Enhancing the body's natural defense system (Immunity) plays an important role in maintaining optimum health. We all know that prevention is better than cure. While there is no medicine for COVID-19 at present, it will do good to take preventive measures which boost our immunity in these times.

Ayurveda, being the science of life, propagates the gifts of nature in maintaining healthy and happy living. Ayurveda's extensive knowledge base on preventive care, derives from the concepts of "Dinacharya" - daily regimen and "Rasayana" - seasonal regimens to maintain healthy life. It is mainly a plant-based science. The simplicity of awareness about oneself and the harmony each individual can achieve by upholding and maintaining his or her immunity is emphasized across Ayurveda's classical scriptures.

Ministry of AYUSH recommends some evidence guidelines (given in subsequent sections below) for preventive health measures and boosting immunity with special reference to respiratory health. These are supported by Ayurvedic literature and scientific publications.

2. General Measures for Enhancing Immunity:

- I. Drink warm water throughout the day.
- II. Daily practice of Yogasana, Pranayama and meditation for at least 30 minutes as advised by Ministry of AYUSH.
- III. Spices like Haldi (Turmeric); Jeera (Cumin); Dhaniya (Coriander) and Elaichi (Cardamom) are recommended in cooking.

3. Ayurvedic Immunity Promoting Measures:

- I. Take Chyawanprash 50gm (1tsp) in the morning. Diabetics should take sugar-free Chyawanprash.
- II. Drink herbal tea / decoction (Kashay) made from Tulsi (Basil), Usli (Cinnamon), Takkali (Black pepper), Shunthi (Dry ginger) and Muntakha (Fenugreek) - once or twice a day. Add jaggery, natural sugar and / or fresh lemon juice to your taste, if needed.
- III. Golden Milk- Half tea spoon Haldi (Turmeric) powder in 150 ml hot milk - sleep on twice a day.

4. Simple Ayurvedic Procedures:

- I. Nasal application - Apply sesame oil / coconut oil on Ghee (in both the nostrils) (Pratamarit Kaya) in morning and evening.
- II. Oil pulling therapy- Take 1 table spoon sesame oil / coconut oil in mouth. Do not drink. Suck in the mouth for 2 to 3 minutes and spit it off followed by warm water rinse. This can be done once or twice a day.

5. Procedures During Dry Cough / Sore Throat

- I. Steam inhalation with fresh Pudina (Mint) leaves or Ajwain (Caraway seeds) can be practiced once in a day.
- II. Lovang (Clove) powder mixed with natural sugar / honey can be taken 2-3 times a day in case of cough or throat irritation.
- III. These measures generally treat normal dry cough and sore throat. However, it is better to consult doctors if these symptoms persist.

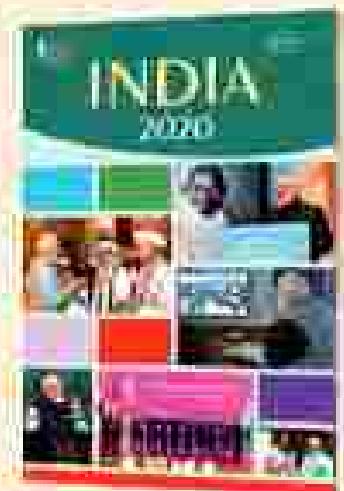
In addition to the above advisory, the Ministry of AYUSH has also proposed to include AYUSH solutions in the District level Contingency Plans being drawn up to contain Covid-19 in all the districts across the country. The Ministry has also put together the draft guidelines for practitioners of different AYUSH systems in the wake of Covid-19, which is expected to be published shortly after review by public health experts.

(Source: PIB)



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