

# Budget For Children

*A Brief analysis on provision for children  
in the Assam Budget 2012-13*

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In partnership with HAQ (Centre for Children Right)



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Budget for children in

## Child Labour and infant death free State.

Mr. Tarun Gogoi the Chief Minister of Assam in his speech on Freedom from Child Labour Day (12 June 2012) said that his Government will soon enact a law prohibiting employment of children below 18 years of age as domestic helps by public servants and representatives. As per the 2001 census, the total number of child labourers in Assam was 3,51,416 while the same statistics for the nation stood at a whopping 1,26,66,377. According to Government estimates there are over two lakhs children working in the organized and unorganized sectors in the state. However there is no estimate of children working as domestic helps in the state .

Mr. Tarun Gogoi the Chief Minister of Assam in his speech on Freedom from Child Labour Day (12 June 2012) said that his Government will soon enact a law prohibiting employment of children below 18 years of age as domestic helps by public servants and representatives. As per the 2001 census, the total number of child labourers in Assam was 3,51,416 while the same statistics for the nation stood at a whopping 1,26,66,377. According to Government estimates there are over two lakhs children working in the organized and unorganized sectors in the state. However there is no estimate of children working as domestic helps in the state 1 .

Budget Speech 2012-13

The Maternal Mortality Rate (MMR) has been brought down to 381 from 480 in 2004-2006. Infant Mortality Rate (IMR) has also been falling continuously. It records a drop of 3 points from 61 to 58 in 2010 as compared to 2009. This is equal to the national average drop recorded across the country.

In spite of the significant achievement in MMR reduction, the state continues to have the highest MMR in the country. IMR is above the national level of 47.

1. In Gogoi's ideal state no place for infant death, child labour, Seven Sisters Post, 12 June 2012

# In Gogoi's ideal state, no place for infant deaths, child labour

■ POST BUREAU  
GUWAHATI, JUNE 12

WITH his thrust on bringing down maternal mortality rate (MMR) and infant mortality rate (IMR) during or post-delivery in the state, Assam chief minister Tarun Gogoi released a vision document in Guwahati on Tuesday.

The IMR in the state is 58 per 1,000 live births against 47 at the national level, and the MMR is 390 per lakh against 210 at the national level.

In his honest admission to the enormity of the problem of child labour in the state, Gogoi said his government will soon enact a law prohibiting employment before 18 years of age as domestic help by public servants and representatives.

According to government estimates, there are over two lakh children working in organised and unorganised sectors in the state. However, there is no estimate of children working as domestic help in the state.

The ambitious scheme to achieve 16 goals for welfare of women and children by 2016 includes reduction of IMR and MMR, improving sex ratio, anaemia, malnutrition, underweight children, besides key issues like

“Most of the health and socio-economic problems exist in tea gardens, riverine and tribal areas. We want to develop these areas so that the people can avail all basic facilities”

**Tarun Gogoi,**  
Chief Minister, Assam

female literacy, witch-hunting, reduction of girl marriage before 18 years of age and improving enrollment of the girl child in the state, besides providing 33 per cent reservation for women in all skill development programmes of the state government, curbing trafficking of women and children within next four years.

Gogoi said though IMR and MMR have come down in the past five years, the state has to step up its efforts to bring them down. “Most of the health and socio-economic problems exist in tea gardens, riverine and tribal areas. We want to develop these areas so that the people can avail all basic facilities,” he said. ▶ Turn on P4

## In Gogoi's ideal state...

Continued from P1

The CM's vision for women and children 2016 includes reduction of total fertility rate to 2.1, improving child sex ratio by 30 points to 987, reducing anaemia among children by 45 per cent and achieving 100 per cent enrolment of girls up to class VIII.

The vision also seeks to reduce the percentage of underweight children from zero to five years by 25 per cent, the percentage of girls marrying before 18 years of age to 11 per cent, reduce school dropout rates by 50 per cent of the present lev-

el in 14 districts, achievement of 100 per cent gross enrolment of girls at the secondary level by 2017, creation of a women's cell with adequate women staff in every police station of the state, zero tolerance to witch-hunting and child trafficking, among others.

This apart, 10,00,000 women will be empowered through one lakh exclusive self help groups (SHGs) and 10,000 village federations under the national rural livelihood mission, while gaon panchayats will be given incentives for 50 per cent women attendance out of total attendance of each

gram sabha in at least four gram sabha.

To improve hygiene and sanitation, access will be provided to individual household sanitary toilets in all rural habitations, besides providing safe drinking water sources in all rural habitations.

On the other hand, minister for panchayat and rural development Rakibul Husain said to give women greater representation in public life, the state government is considering increasing reservation for women in local bodies to 50 per cent of the total seats, up from the current 33 per cent.

# Status of Children in Assam

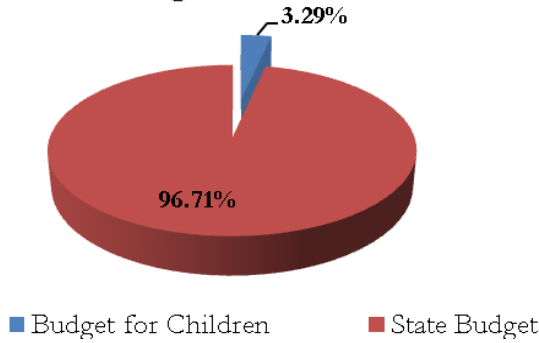
**Table 1: Some Human Development Indicators in 2011**

<i>Indicators</i>	<i>Assam</i>	<i>India</i>
<i>Population Census 2011 (in lakhs)</i>	<b>312</b>	<b>12,102</b>
Child Population (0-6 Age)	<b>45,11,307</b>	<b>1,58,80,000</b>
Sex Ratio 0-6 age group (females per 1000 males)	<b>957</b>	<b>914</b>
Literacy Rate	<b>73</b>	<b>74</b>
Percentage of population below poverty line	<b>37.9</b>	<b>29.8</b>
Birth rate	<b>23.6</b>	<b>22.5</b>
Death rate	<b>8.4</b>	<b>7.3</b>
Infant Mortality rate	<b>58</b>	<b>47</b>

Source: Census of India 2011, Provisional Tables, Registrar General of India, [http://www.censusindia.gov.in/2011-prov-results/prov\\_results\\_paper1\\_india.html](http://www.censusindia.gov.in/2011-prov-results/prov_results_paper1_india.html)

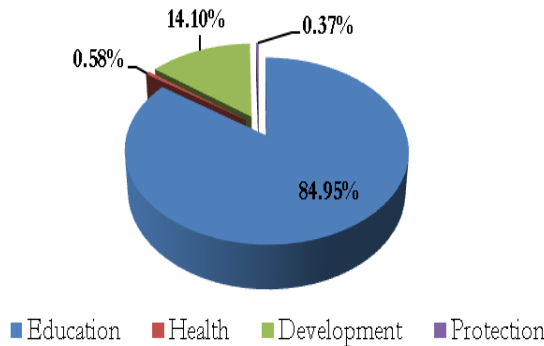
- According to the District Information System for Education (DISE) 2010-11, altogether 1,24,577 out-of-school children are yet to be covered under SSA as on March 31, 2011”
- The full immunization of children between the age group of 12-23 months has improved from 16 per cent (DLHS-2) to 48 per cent (DLHS-3);
- According to State Crime Records Bureau and police 1,071 female and 494 male children remained untraced in Assam during the year 2011-2012 which is the highest among all the North Eastern states. During the same period, investigating agencies were able to trace 965 missing children

Share of Budget for children in State Budget 2012-13

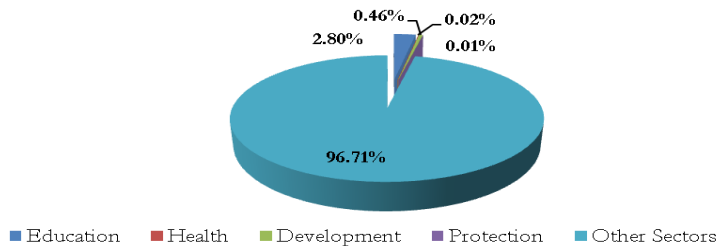


In terms of its proportion in the budget the Share for children has gone down from 5.99 percent in 2011-12 to 3.29 percent in 2012-13. However, in actual terms there has been an increase in allocation for children from Rs. 7,76,286.54 Lakhs in 2011-12 to Rs 9,38,304.15 lakhs in 2012-13, (20.87 per cent) and during the same period overall state budget has seen an increase in allocation by 120.01 per cent.

Sectoral Allocation in State Budget 2012-13 Percentage



Sectoral Allocation in Assam Budget 2012-13



Free bicycle distribution for girl BPL students up to Class-X  
Introduction of Science and Commerce in all Provincialized colleges and H.S Schools in the State over the next 5 years

Introduction of vocational courses in 1000 secondary schools over next 5 years

New scholarship scheme for 50,000 students each in lower primary and upper primary level. Under the scheme Rs. 5000 will be put in as fixed deposit to the meritorious students of L.P. and U.P level.

Study tour to NASA for the first three position holders of HSLC. The scheme will be dedicated in the name of Late Deba Kumar Bora

Corpus of Rs. 50 Crore over next five years for medical support for children below 14 years.

Extension of Gyanjyoti programme to cover places outside Assam and the number of students will be tripled.

Setting up of a separate women and Child Commission to improve basic health parameters including MMR, IMR and malnutrition etc under the Chairmanship of Chief Minister

Apart from the above mentioned initiatives the CM has also responded to various public demands in different occasions.

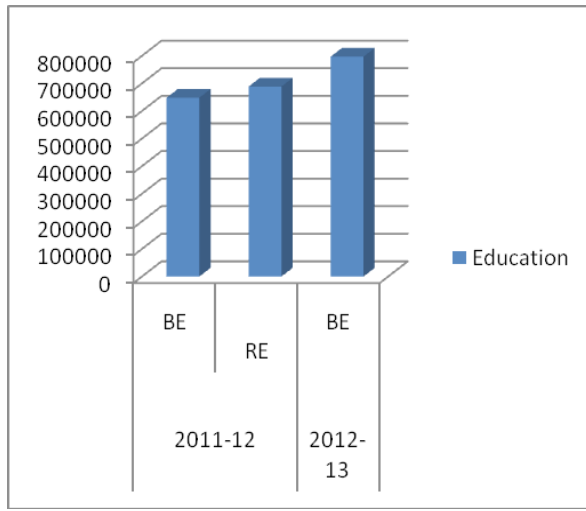
Financial assistance of Rs. 10 Lakh will be given to Guwahati Children Trust School

Like Gyanjyoti Schemes for students, teachers will also be taken on exposure visits to reputed educational institutions.

Government is contemplating to give rewards and commendation letters to the best performing teachers.

Computers will be provided as incentives to students securing 50 % or above marks in the HSLC Board and Madrassa examinations for next years.

It is proposed to set up a Children's museum to be named after Rajiv Gandhi and a school for meritorious students coming from poor families.



Rs. In Lakhs

**With 84.95 per cent education gets the largest share in the budget for children. Though the allocation for 2012-13 is more than that of 2011-12 the dropout rate of children is growing and remains high. According to the District**

**System for Education (DISE) 2010-11, altogether 1,24,577 out-of-school children are yet to be covered under SSA in Assam as on March 31, 2011”**

### Highlights

The allocation in education has increased by 22.99 per cent over the previous year.

Allocation for Sarva Shiksha Abhiyaan (SSA) has increased from Rs. 10,000 lakhs to Rs. 11,000 lakhs.

No funds were allotted in 2011-12 to venture L.P/Upper Primary/M.E/M.E Madrassa and Non-Government Middle Schools. In 2012-13, Rs 34,517.59 lakhs was allotted for these schools.

No allocation was made for Financial Assistance to non-government institutional incentives to children of Tribal Area Sub plan and the Scheduled Caste Component under Elementary education as well as in Secondary Education in 2012-13. Rs. 230 lakhs and Rs. 310 were allocated respectively to non-Government institutional incentives to children of Tribal Area Sub plan and the Scheduled Caste Component in Elementary as well as in Secondary Education in 2011-12.

Rs 50 crores have been earmarked for Grants for the Arundo Ram Barooh Award.

Allocation for Mid Day Meals (MDM) remains the same as in the previous year. The Amount allotted for MDM is Rs. 86,609.25



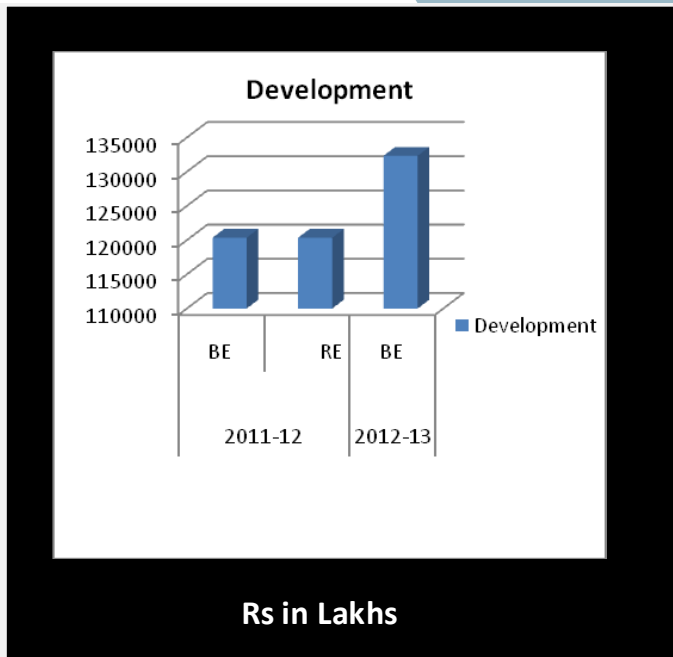
The major rise in allocation in the education sector is in the schemes for provision of supply of free text books and uniforms in schools up to class VII (Assam VikashYojana). It has increased from Rs 504.15 lakhs in 2011-12 to Rs 2209.15 lakhs in 2012-13.

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### *New Education Schemes announced by the CM*

- To provide footwear to the primary school students in the next financial year along with uniforms. For this Rs. 22 crores have been earmarked.
- Free bicycle distribution for girl BPL students up to Class-X
- Introduction of Science and Commerce in all Provincialized colleges and H.S Schools in the State over the next 5 years
- Introduction of vocational courses in 1000 secondary schools over next 5 years
- New scholarship scheme for 50,000 students each in lower primary and upper primary level. Under the scheme Rs. 5000 will be put in as fixed deposit to the meritorious students of L.P. and U.P level.
- Study tour to NASA for the first three position holders of HSLC. The scheme will be dedicated in the name of Late Deba Kumar Bora
- Corpus of Rs. 50 Crore over next five years for medical support for children below 14 years.
- Extension of Gyanjyoti programme to cover places outside Assam and the number of students will be tripled.



The development sector gets 14.10 per cent share of BfC in 2012-13, the second highest share and 2.8 per cent in the state budget. The allocation for the sector has shown a 9.94

## Highlights

The allocation for development sector has increased by 9.94 per cent over the previous year.

There is decrease by 50 per cent in the allocation for child development council compare to the previous year.

Allocation for Integrated Child Development Scheme has increased from Rs 69,530.00 to Rs. 73,855.00. i.e.

6.26 percent rise. But the present allocation seems to be not enough. As far as status of implementation is concerned of the total sanctioned number of anganwadi centres of 62153 only 57656 are operational as on December 2011 . 2

According to the reports of third National Family Health Survey (NFHS-III) the status of children under six years of age in Assam, is very poor.

The situation can be gauged from these figures:

*35 per cent of children under 3 years of age are stunted, almost 40 percent are underweight and almost 77 percent of children are anaemic. Only 32 percent of all children in the 12-23 months of age group have received all the recommended vaccines and almost two-third of the pregnant women did not have at least three antenatal check-ups. There was a less than 2 per cent fall in the per cent of severely underweight children in Assam between the last two NFHS survey.*

### *Information Achievements*

1. Total No of Projects sanctioned	228
2. Total No of Projects operational	223
3. Classification of Projects	
(a) Rural	188
(b) Urban	10
(c) Tribal	30
4. No of AWCs Sanctioned	59695
5. No of AWCs Operational	36918*
6. AWCs to be Operationalised	22777
7. No of AWTCs functioning	28
8. No of MLTC functioning	1

\* Due to Hon'ble High Court's Gauhati intervention 233 nos. of AWCs are vet to be operationalised.

There was a less than 2 per cent fall in the per cent of severely underweight children in Assam between the last two NFHS survey. The NFHS-III study further observed AWCs in the region do not have any weighing machine; health monitoring and counseling for pregnant and lactating mothers is the

most neglected part in most of the AWCs. Most AWCs are not fully competent with respect to the interpretation of growth charts and they fail to communicate effectively the meaning of children's growth patterns to mothers. Very few of the canters can claim that they regularly organize mothers' meetings and counsel them on health and hygiene practices.

From the financial year 2009-10, Government of India has modified the funding pattern of ICDS between Centre and States. The sharing pattern of supplementary nutrition in respect of North-eastern States between Centre and States has been changed from 50:50 to 90:10 ratio. So far as other States and UTs, the existing sharing pattern of 50:50 continues . **3 It is heartening to note that Assam is one among the states that spent less than Rs. 2 per beneficiary (children under six, both pregnant and lactating mothers) per day. 4**

**2** Answer to a Rajya Sabha Question No. 456, 15 March 2012

**3** <http://wcd.nic.in/>, accessed on 28 August 2012.

**4** 9th Report of the Commissioner to the Supreme Court appointed( WRIT PETITION (CIVIL) NO(s). 196 OF 2001), [http://www.righttofoodindia.org/data/icds\\_9th\\_report.pdf](http://www.righttofoodindia.org/data/icds_9th_report.pdf)[http://www.righttofoodindia.org/data/icds\\_9th\\_report.pdf](http://www.righttofoodindia.org/data/icds_9th_report.pdf)

Children's health receives only 0.58 percent of the budget for children and 0.02 per cent in the state budget.

The Third National Family Health Survey (NFHS-III) shows that the state of children's health 0-5 years is very poor in Assam. Over last four-five years the state government has been trying some new initiatives under the National rural Health Mission (NRHM) to improve the service delivery in the state as well as to maximize the access to health facilities.

Some of these initiatives are: boat clinic to reach a population of 24, 90,097, which have adverse affect on the health of the people. There are 2251 villages in these char areas with 52 PHCs and 132 SCs which are not sufficient to cover the entire population. To tackle this problem boat clinic was initiated in ten districts of the state.

The services include— a) antenatal & post natal checkup b) immunisation of children in which Japanese Encephalitis vaccine campaign was also included c) referral for complicated pregnancies d) general checkups for preventive and curative care along with emergency preparedness and response in case of flood, relief measures etc.

#### New Health Schemes announced by the CM

- Setting up of a separate women and Child Commission to improve basic health parameters including MMR, IMR and malnutrition etc under the Chairmanship of Chief Minister.
- A major initiative under the banner of Janani Sishu Suraksha Karyasuchi (JSSK) has been launched in the state which will provide absolutely free health care to all pregnant women including free drugs, diagnostics and consumables etc required for delivery or surgery.

This year the budget for children in the health sector has been increased by 46.34 per cent over the previous year. But when it comes to delivery of health services in Assam it's still a long way to go.

<b>Key Indicators on Infrastructure Facility and Accessibility</b>	
<b>Accessibility of the health facility</b>	
Villages with Sub-Centre within 3 KMs (%).....	83.2
Villages with PHC within 10 KMs (%).....	68.3
<b>Infrastructure, staff and services at Sub-Centre</b>	
Sub-Centre located in government building (%).....	52.8
Sub-Centre with ANM (%).....	96.1
Sub-Centre with male health worker (%).....	8.0
Sub-Centre with additional ANM (%).....	60.1
ANM living in Sub-Centre quarter where facility is available (%).....	50.6
<b>Infrastructure, staff and services at Primary Health Centre (PHC)</b>	
PHCs having Lady Medical Officer (%).....	23.1
PHCs having AYUSH Medical Officer (%).....	58.0
PHCs with at least 4 beds (%).....	64.6
PHCs having residential quarter for Medical Officer (%).....	90.8
PHCs functioning on 24 hours basis (%).....	65.6
PHCs having new born care services <sup>14</sup> (%).....	92.2
PHCs having referral services for pregnancies/delivery <sup>14</sup> (%).....	84.4
PHCs conducted at least 10 deliveries during last one month <sup>14</sup> (%).....	81.3
<b>Infrastructure, staff and services at Community Health Centre (CHC)</b>	
CHCs having Obstetrician/Gynaecologist (%).....	31.3
CHCs having 24 hours normal delivery services (%).....	91.6
CHCs having functional Operation Theatre <sup>15</sup> (%).....	24.1
CHCs designated as FRUs (%).....	32.5
CHCs designated as FRUs offering caesarean section <sup>16</sup> (%).....	37.0
FRUs having new born care services on 24 hour basis <sup>16</sup> (%).....	88.9
FRUs having blood storage facility <sup>16</sup> (%).....	25.9
<sup>14</sup> Based on the PHCs functioning on 24 hours basis.	
<sup>15</sup> If surgeries are carried out in the Operation Theatre.	
<sup>16</sup> CHC designated as FRU.	

Source: Fact Sheet Assam, District Level Household and Facility Survey 2007-08, DLHS-3

## Highlights

- 41.76 lakhs has been allotted for the training of health personnel.
- Allocation for the Training of Para Medical Personnel (G.N.M & A.N.M) for six GNM Training schools has been increased from Rs. 0.37 lakhs 2011-12 to Rs. 450.37 Lakhs this year.
- Despite the significant achievement in MMR reduction from 480 in 2004-05 to 390 in 2007-09 the state continues to have the highest MMR in the country. Also IMR is above the national level.

*2012-13 will witness completion of all Sick Neonatal Care Units (SNCU) and New Born Stabilization Units (NBSU). With these two initiatives we are confident of achieving a major reduction in MMR and IMR.*

-Budget Speech 2012-13

Allocation for the Scheme Immunisation of Infant and children against Diphtheria, Polio & Typhoid etc, which is the routine immunization for prevention from five preventable diseases in 2012-13, is Rs. 2423.03 Lakhs higher on the side of allocation that was in the

previous year of Rs. 2299.5 Lakh. In the year 2010-11 Rs. 1059.06 Lakh was allocated under the scheme but 757.17 Lakh was actually spent which is 28 per cent under spending. The under spending under this scheme really raises a question when still 50 per cent of the children in the state are not yet fully immunized (refer table no.1).

**Table No-1**

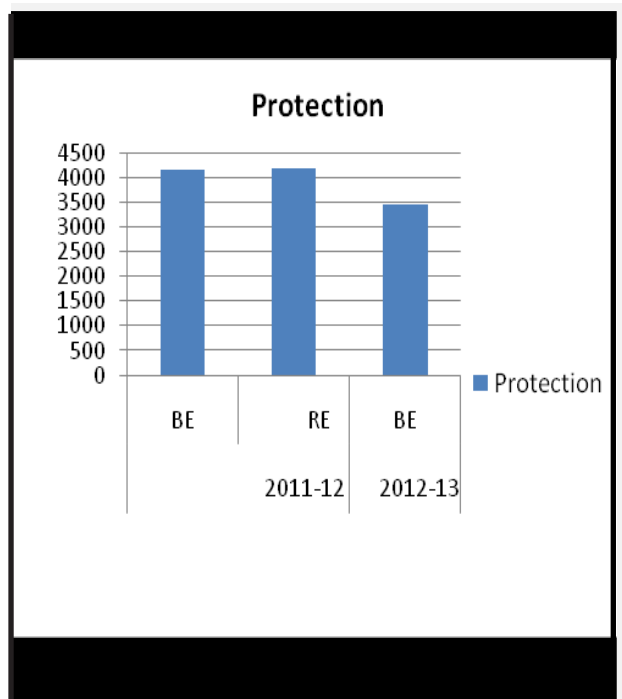
Indicators	DLHS-3 (2007-08)			DLHS-2 (2002-04)		
	Total	Rural	Urban	Total <sup>1</sup>	Rural	Urban
<b>Child Immunization</b>						
Number of children age 12-23 months .....	2,783	2,531	252	1,926	1,495	432
Children 12-23 months fully immunized (%).....	50.9	50.0	55.3	16.0	14.4	26.7
Children 12-23 months not received any vaccination (%).....	11.2	11.6	7.1	24.7	27.3	7.4
Children 12-23 months who have received BCG vaccine (%).....	83.8	83.4	88.0	61.3	57.9	83.9
Children 12-23 months who have received 3 doses of DPT vaccine (%).....	60.4	60.0	65.1	36.3	33.1	57.9
Children 12-23 months who have received 3 doses of polio vaccine (%).....	64.9	64.6	68.0	27.6	25.6	40.6
Children 12-23 months who have received measles vaccine (%).....	64.4	63.7	71.2	33.7	30.8	53.4
Children (age 9 months and above) received at least one dose of vitamin A supplement (%).....	67.9	46.6	61.2	17.3	15.3	30.3

The DLHS-RCH study of 2002-04 has found that 43 percent of the women in Assam go for three + ANC visit, less than the national average of 50 percent. The poor performing districts are Dhubri, Barpeta, Goalpara, Karbi Anglong, Nagaon and North Cachar Hills, where less than 30 percent of the women go for more than three ANC visits. It also shows that 16 percent of women in India and only 10 percent in Assam get a full ANC check-up and that Sibsagar has the highest amongst all the districts with 24 percent.

The share of the protection sector in the overall budget has always been the lowest, despite Assam been reeling under several conflicts. A study of the Union Ministry of Women and Child Development on child abuse in 2007 says that abuse of children is alarmingly high in Assam.

In a Child Rights Index developed by HAQ: Centre for Child Rights Assam has been ranked 20 among all the states in crimes against children. As per National Crime Record Bureau (NCRB) incidences of crimes against children in the state has increased from 197 cases in 2010 to 236 caes in 2011 a rise by 19.8 per cent.

The Government of Assam introduced the Integrated Child Protection Scheme to protect, promote and defend children below the age of eighteen years. But it has not yet been implemented properly

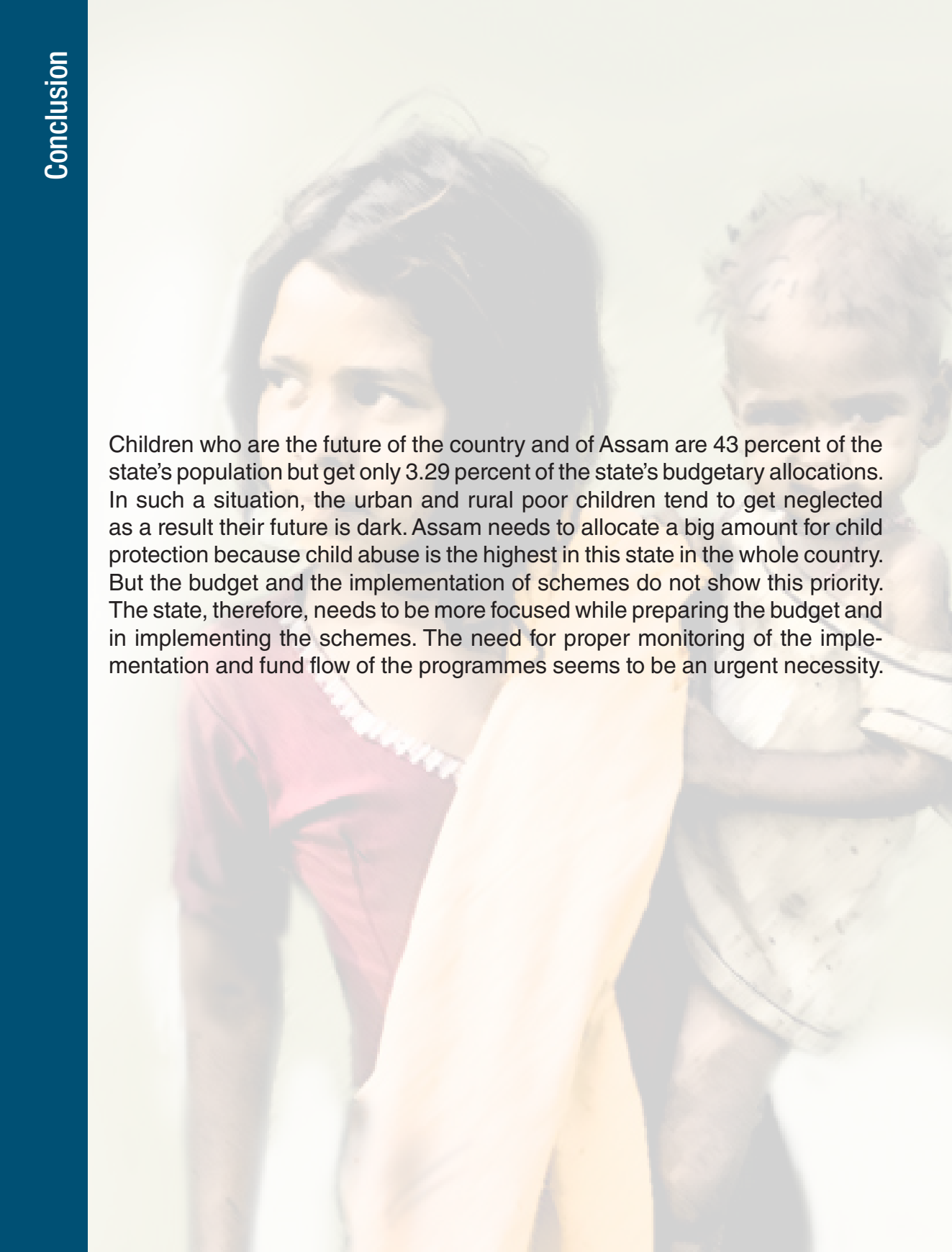


Rs. In Lakhs

Crimes against children	Incidences	
	2010	2011
Kidnapping & abduction	21	29
Procuration of minor girls	75	142
Rape	39	40



- ◆ The Protection sector gets 0.01 per cent in the State budget and 0.37 percent share within the Budget for children for 2012-13.
- ◆ Allocation for implementation of the Juvenile Justice Act, 2000 has been increased from Rs.170.11 lakhs to Rs.175.00 lakhs but the central share is zero this year. It was Rs.3,600.00 Lakhs in the previous year.
- ◆ Under the Integrated Child Protection Scheme (ICPS), Rs. 305.00 Lakhs state share and Rs. 2,745.00 Lakhs Central share has been allotted to the State Child Protection Society (SCPS). It was Rs. 229.89 Lakhs and Rs. 0 respectively in the previous year.
- ◆ Rs. 10 Lakhs have been allotted as Rehabilitation Grant to grown up inmates of Children's Home/Women's Home in 2012-13. It was zero in the previous year.
- ◆ The Rajiv Gandhi National Scheme for Adolescent Girls (SABLA) started last year, will continue next year too.

A faded background image of a woman with dark hair, wearing a red dress and a white necklace, holding a young child. The child is wearing a light-colored patterned shirt. The image is semi-transparent, allowing the text to be overlaid.

Children who are the future of the country and of Assam are 43 percent of the state's population but get only 3.29 percent of the state's budgetary allocations. In such a situation, the urban and rural poor children tend to get neglected as a result their future is dark. Assam needs to allocate a big amount for child protection because child abuse is the highest in this state in the whole country. But the budget and the implementation of schemes do not show this priority. The state, therefore, needs to be more focused while preparing the budget and in implementing the schemes. The need for proper monitoring of the implementation and fund flow of the programmes seems to be an urgent necessity.