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India contributes the highest share of global deaths (about 10.8 lakh, as against China’s 1.7 lakh in 2016) among children under five. Its enormous population and a relatively high under-five mortality rate (U5MR) as an emerging country are key factors. As India’s achievement in reducing child deaths matters a lot at the global level, it can help shape global child mortality indicators. India has shown a consistent decline in mortality rates. Introduction of the National Rural Health Mission (NRHM) accelerated this reduction especially in the post-neonatal period. Yet our recent study shows that the extent of this reduction is still not enough to achieve the Sustainable Development Goals (SDG)-3 goals for the neonatal mortality rate (NMR) and U5MR by 2030. We have found that that over 52% of districts in India are unlikely to meet SDG3 to reduce NMR to 12 (per 1000 live births). Similarly, about a third of the districts in India are unlikely to meet U5MR of 25 (per 1000 live births) by 2030.

Unlike many other emerging countries, India exhibits exceptional regional and socio-economic inequality in demographic and health outcomes. For instance, the U5MR rate for male children varies between 6.3 in the southwest district of the National Capital Territory of Delhi to 141.7 in the tribal-dominated district of Rayagada in Odisha (about 22 times). In general, the majority of high-risk districts for NMR and U5MR are in Assam, Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Rajasthan and Uttar Pradesh. Yet, the high-risk districts in NMR are not limited to poorer States but spread across even rich and advanced States such as Andhra Pradesh, Haryana, Gujarat and Telangana, particularly for male neonates. There are two States in particular, namely, Chhattisgarh and Uttar Pradesh, where 97% of districts are unlikely to meet the SDG targets for both NMR and U5MR (irrespective of gender).

Our findings are crucial for policy makers, health professionals, administrative authorities and organisations striving to improve maternal and child health. The government should lay emphasis on local level intensive programmes that cater to the specific needs of individual districts or other population subgroups. More investment is needed for neonatal health. Under the National Health Mission, there are a number of programmes such as the Integrated Management of Neonatal and Childhood Illnesses, Navjaat Shishu Suraksha Karyakram, home-based care of newborns, universal immunisation through the mother-and-child tracking system, and early detection and appropriate management of various diseases.

These programmes have certainly helped to reduce child mortality rates. Yet, to maximise their impact, the focus must shift more intensively to how these programmes are executed in low performing districts. There has to be more awareness about district-level intervention programmes through community-based awareness programmes and educating parents about possible high-risk factors and preventive measures of child health. Second, States should give priority to the improvement of public health facilities by reinforcing institutional deliveries, filling eligible and trained human resources, making available adequate testing machines and infrastructure at sub-centres, primary and community health centres, and district hospitals. We expect that low-performing districts with a high mortality rate would respond faster in mortality reductions if these strategies are adopted. A long-term solution lies in raising the level of education among girls and mothers especially among the poor, rural and deprived sections of society. Apart from child mortality reduction, it will help in the overall health and development of children.
Nandita Saikia is at the Jawaharlal Nehru University, Delhi and the International Institute for Applied Systems Analysis (IIASA), Austria. Jayanta Kumar Bora is with the Indian Institute of Dalit Studies, Delhi and IIASA, Austria

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What has the govt. decided? From September 1, the Union Health Ministry will impose a highly controversial ban on the retail sale and private

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Earlier this month, the country’s insurance regulator, the Insurance Regulatory and Development Authority of India (IRDAI), reiterated that insurance companies are required to offer insurance cover for mental illness, thus making treatment on a par with physical illness. While the Mental Healthcare Act, 2017, which came into force this May, requires insurance agencies to offer such coverage, patients, doctors and experts say little has changed on the ground.

“The IRDAI announcement comes at a time when mental health conversations are a part of mainstream dialogue. By reducing the economic burden, people with mental illness (in many cases, life-long) will now have the option of a more productive and integrated life," says Dr. Ambrish Dharmadhikari, a psychiatrist with Mpower, a company that works in mental health diagnosis and care. “But the immediate ground reality of the high cost of treatment for mental health-related issues hasn’t changed for many just yet," he adds.

Studies show that government spending on health care is 1,112 per capita, or only 3 per day for the health care of an average Indian. There are direct and indirect costs that patients and agencies must bear such as medications, hospital visits and hospitalisation.

The indirect costs involve intangible expenses such as loss of income from work and societal costs. Though direct costs are tangible and can be clearly elucidated, indirect costs are relatively difficult to be uniformly applied and vary across health systems. A World Health Organisation study (2015) shows that one in five Indians (or the equivalent of 200 million people) may suffer from depression in their lifetime.

Because mental illness requires prolonged medical attention, continuous care and support from professionals, it constitutes a significant financial burden. It is not uncommon to have people stop treatment mid-way (especially for women and even the elderly) due to increasing costs of treatment. “Importantly, insurance could stamp out any and all stigma associated with mental health, ensure dignity and stop discrimination," adds Neerja Birla of Mpower.

“The math is simple to work out — cost of consultation, medicines, travel, hospital stay, reduced income from the person under treatment (who may be on leave or could be under-employed due to his illness), loss of income for the person accompanying the patient, cost of looking after the patient at home (nurse, attendants) and the escalation in health-care costs,” says Rosamma Jacob, whose husband has been battling depression for over 17 years now and has recently retired from a private firm.

She has heard of the IRDAI clause but is unsure of the details. “There are several areas that we would like clarity on. Does it apply to people who are currently under treatment? Is this benefit available to people who have another underlying health condition in which mental illness is a part of it? Which are the diseases covered? And, most importantly, for how long, as most mental health issues linger for a life time?” asks Ms. Jacob.

Dr. Nand Kumar, Department of Psychiatry, All India Institute of Medical Sciences, New Delhi, says there are also a lot of administrative “blind spots” that need to be addressed. “Mostly, people (with mental health ailments) are out-patient department-based so we need to be clear if this scheme will cover that and again, for how long," he adds.
What has the govt. decided? From September 1, the Union Health Ministry will impose a highly controversial ban on the retail sale and private

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REPLACE ‘DALIT’ WITH SC: I&B MINISTRY TELLS MEDIA

The Information and Broadcasting Ministry has issued an advisory to all media outlets not to use the word “Dalit” to refer to people belonging to the Scheduled Castes.

The advisory is based on an order of the Bombay High Court on June 6, based on a petition filed by Pankaj Meshram. “It is advised that the media may refrain from using the nomenclature ‘Dalit’,” the guideline said.

In a circular on March 15 this year, the Ministry of Social Justice had issued a similar advisory to all State governments that all official communications should use the constitutional term Scheduled Caste instead of the word “Dalit”.

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The official numbers of out-of-school children in India are either out of date or contradictory. According to the 2011 Census, the number of out-of-school children in the 5-17 age group was 8.4 crore. However, according to a survey commissioned in 2014 by the Ministry of Human Resource Development, the number of out-of-school children in the 6-13 age group was only 60.64 lakh. This is a gross underestimation. It is quite unlikely that the number of out-of-school children came down so drastically from 2011 to 2014, especially given that there were no significant changes in objective conditions, warranting such a miraculous reduction.

We recently calculated the number of out-of-school children in India on the basis of the 71st round of the National Sample Survey (NSS) carried out in 2014. We took into account the 6-18 age group, which we consider to be the most appropriate for estimating out-of-school children, even though the Right of Children to Free and Compulsory Education (RTE) Act covers only the 6-14 age group. According to our estimate, out-of-school children in this age group were more than 4.5 crore in the country, which is 16.1% of the children in this age group. In big States such as Odisha (20.6%), Uttar Pradesh (21.4%), Gujarat (19.1%), Bihar (18.6%), Madhya Pradesh (18.6%), Rajasthan (18.4%) and West Bengal (16.8%), about one-fifth of the children in this age group were out of school. In Kerala, Goa, Sikkim, Himachal Pradesh and Tamil Nadu, the proportion of out-of-school children was lower than the national average. It is a matter of serious concern that nearly 10 years after the enactment of the RTE Act, and 16 years after the right to education was elevated to a fundamental right, such a large number of children are out of school.

Marginalised from school
We also found that the proportion of out-of-school children was higher in rural India (17.2%) than in urban India (13.1%). In rural areas, the proportion of out-of-school girls (18.3%) was higher than of boys (16.3%). The proportion of children from Scheduled Castes and Scheduled Tribes (SC/ST) was the highest, followed by Other Backward Classes (OBCs). Among religious groups, the proportion of Muslims was as high as 24.1% in rural areas and 24.7% in urban areas. On the whole, the data show that out-of-school children came mostly from the rural areas, and a high proportion of them are SCs, STs, Muslims and from other economically backward communities.

Recently, we completed a study on the extent, location (rural/urban), and distribution by social and religious groups of out-of-school children in the Fatuha and Bihta blocks of Patna district in Bihar. Our survey covered all those households in these two blocks which had one or more children in the 6-18 age group, the total number of households being 4,205. Our survey confirmed the national-level finding that out-of-school children came mostly from low-income, landless and marginal families — 99.34% of the families from which out-of-school children came were either landless or marginal. The annual income of the fathers of 58.19% of such children was less than 50,000. Also, fathers of 51.18% of out-of-school children and mothers of 88.45% of out-of-school children were uneducated. Moreover, fathers of 56.84% and mothers of 33.28% of such children were casual labourers.

Analysing the data collected from these two blocks, we found that the most important reason for boys to drop out of school was to take up jobs to supplement the family earning; for girls, it was the compulsion to participate in household work. There is sufficient evidence to conclude that this is an all-India phenomenon. According to the RTE Act and the Child Labour (Prohibition and Regulation) Amendment Act, these out-of-school children fall under the category of child labour. It is, therefore, not surprising that the largest number of child labourers in the world is in India.

Several of the reasons given for the non-enrolment of children and their dropping out of school indicated the prejudice against educating girls that is prevalent in India. This prejudice has been
brought out more sharply in the Telangana Social Development Report, 2018, prepared and published by the Southern Regional Centre, Hyderabad, of the Council for Social Development. This report also draws on the data of the 71st round of the NSS. According to these data, a proportionately larger percentage of girls than boys was not enrolled. In the rural areas, the gender gap on this count was as high as 13 percentage points. A relatively lower percentage of girls was found going to high fee-charging private schools. Similarly, a relatively lower percentage of girls took private coaching, which involves costs additional to those incurred for schooling. Very few students in Telangana resorted to private coaching, but among those who did, the share of girls was only 2% of the total number; the share of boys was 6%. A much higher proportion of girls than boys dropped out of school after Class 10, after which education is not necessarily free. An additional collaborative evidence is that in Telangana, the average expenditure on the education of girls was less than that for boys. In Telangana, 50% of the children walked to their schools. Among these, the proportion of girls was higher than that of boys.

We would not have been confronted with this high proportion of drop-outs if all the provisions of the RTE Act had been implemented within the time limit prescribed in the Act (latest by April 2015). For example, the Act provided for the availability of a school at a distance of 1 km from the residence of the child at the primary level and 3 km at the upper primary level. If these provisions had been implemented, a major reason for drop-out (distance of school) would have been eliminated. If all the infrastructure facilities prescribed in the Act had been put in place during the period of implementation, another reason for drop-out (environment not friendly) would have disappeared.

The most important reason for drop-out (socio-economic conditions of the parents of the children) calls for a more comprehensive approach that is not reflected in the RTE Act. Until an adequate number of schools at the prescribed distances from the children’s homes becomes available, it would be necessary to provide secure modes of subsidised travel to schools, particularly for girls. Another important provision which ought to have been included in the RTE is financial support to poor parents, adequate to enable them to send their children to school. There is incontrovertible evidence of a positive correlation between economic incentives and a lower drop-out.

The most important social reason for drop-out is lack of awareness of the importance of school education and of the fact that education is now a legal right. Ironically, education is the most important instrument for creating this awareness. Thus education is a quintessential example of being vested with intrinsic as well as instrumental value — being both the means and the end.

Muchkund Dubey is President, Ashok Pankaj is Director, and Susmita Mitra is Assistant Professor of the Council for Social Development, New Delhi

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WHAT’S IN A NAME?: ON THE USE OF THE TERM 'DALIT'


The advisory from the Union Information and Broadcasting Ministry to the media saying they “may” refrain from using the term ‘Dalit’ while referring to members of Scheduled Castes is unnecessary, intrusive and issued with little application of the mind. On the face of it, this has been done in compliance with a direction from the Nagpur Bench of the Bombay High Court. But a reading of the court’s June 6 order shows it only wanted the Centre “to consider the question of issuing such direction to the media and take a suitable decision upon it”. The court did not go into the merits of using the term. After it was brought to its notice that the Union Ministry of Social Justice and Empowerment had issued a directive to use only the term ‘Scheduled Castes’ in all official matters, the court merely noted that since media institutions were not a party before it, the I&B Ministry could consider the question of issuing a similar direction to the media. The I&B Ministry’s advisory is confusing as it uses the words “for all official transactions, matters”, though the media’s references to the community are usually beyond official contexts. The advisory must be withdrawn as there is no reason to tell the media how to do their job, even if it is couched in the form of gratuitous advice.

Of course, the debate over the appropriateness of using the term ‘Dalit’ to refer to members of the Scheduled Castes is far from new. A decade ago, the National Commission for Scheduled Castes disfavoured the use of ‘Dalit’, which it felt was unconstitutional. This is because belonging to a ‘Scheduled Caste’ is a legal status conferred on members of castes named in a list notified by the President under Article 341 of the Constitution. Therefore, arguably, ‘Scheduled Caste’ is the appropriate way to refer to this class of people in official communications and documents. However, it is inexplicable to oppose the use of the term ‘Dalit’ in the media and in non-official contexts — a nomenclature chosen and used by the community itself. Doing so lends itself to the charge that there is an attempt to deny the powerful and emotive meaning of the word Dalit. The term has evolved over a period of time and has come to symbolise different things in different contexts — self-respect, assertion, solidarity and opposition to caste oppression. In the past, Dalits were referred to as ‘untouchables’, but the official term during British rule was ‘depressed classes’. Mahatma Gandhi sought to remove the stigma of ‘pollution’ by using the term ‘Harijans’, or ‘children of god’. In course of time, the community rejected this appellation as patronising and sanctimonious. It was only some decades ago that they began to refer to themselves as Dalits. ‘Dalit’ literally means ‘downtrodden’ or ‘broken’, but it is a word pregnant with meaning, reflecting the struggle of a community to reassert its identity and lay claim to the rights that were denied to them for centuries.

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WHY NOT DALIT?


In pre-Independence India and after 1947, during the several unyielding movements for justice for Dalits, multiple terms have been used to convey the idea of the caste system which B.R. Ambedkar described “as an ascending order of reverence and descending order of contempt.” We have been seeing the “descending order of contempt” for thousands of years manifested in the worst manner possible in the practice of untouchability.

The many movements launched by social reformers and activists against the caste system and against untouchability have used terms such as Antyajas, suppressed castes, pariahs, depressed castes, Dalits, Harijans, Ati Shudra and Adi Dravida. Jyotiba Phule is credited to have used the term Dalit. Even Mahatma Gandhi accepted the term Dalit when he wrote in 1927 that “from now on, we will describe Antyajas too as dalit.” Explaining that “the term was first used by Swami Shraddhanand”, Gandhi added that “Swami Vivekananda chose an English word having the same meaning. He described the untouchables not as ‘depressed’ but as ‘suppressed’ and quite rightly. They became, and remain, what they are because they were suppressed by the so-called upper classes.”

In 1931, many people disapproved of the use of the word Dalit. Mahatma Gandhi wrote in an article, “Use Another Name”: “Formerly the name Antyaja was not felt as expressing contempt. The names Dhed and Bhangi were disliked. I think the term ‘Dalit’ was first used by the late Swami Shraddhanand. Now it seems that name also is not liked. The real explanation is that as long as the poison of untouchability exists in our society, any name that may be given will probably come to be disliked after some time. Hence the right thing to do is to get rid of that poison.” He added: “Though it is thus necessary to attack the root cause, if a better word than Antyaja or Dalit occurs to anyone he may send it to me.”

In the absence of a better word, Dalit has been the preferred word in the movements for justice for Dalits till now. It is well known that the term Harijan was coined by someone who was a victim of untouchability. He suggested that Gandhi use it to describe the so-called untouchables. That term was widely used during the freedom struggle and many, including Ambedkar, considered it humiliating and patronising. In 1946, Gandhi received a complaint from someone who wrote, “From the psychological point of view, I think the name ‘Harijan’ instils into the minds of the people to whom it is applied a feeling of inferiority, however sacred that name may be. This feeling is very difficult to wipe out from them — to whatever extent they are advanced — if they are always called ‘Harijan’. Similarly if a man in the street is asked about a ‘Harijan’, the first thing he will speak of is ‘untouchability and the Depressed Class’.”

Gandhi responded to that question by writing an an article, “What is in a name?”, in which he said: “The name ‘Harijan’ has sacred associations. It was suggested by a Harijan as a substitute for Asprishya (untouchable), Dalita (depressed), or for the different categories of ‘untouchables’ such as Bhangis, Mehtars, Chamars, Pariahs, etc.” He added: “The Government officers put them in a schedule and, therefore, called them the Scheduled Classes, thus making confusion worse confounded.”

The historical narrative conveys the point that many terms have been generated in the movements against caste. The British government did not prefer one term over another even as it put certain castes in a schedule and called them Scheduled Castes. Now, the confusion has become more pronounced with the Bharatiya Janata Party-led National Democratic Alliance.
government issuing an advisory to the media saying they “may refrain” from using the word Dalit, based on an order by the Nagpur Bench of the Bombay High Court. Previously, the Madhya Pradesh High Court had stated that it would “have no manner of doubt” that the government would “refrain from using the nomenclature ‘Dalit’ for the members belonging to Scheduled Castes and Scheduled Tribes as the same does not find mention in the Constitution of India or any statute.” This has caused hurt among the Dalits, who feel that the term is not offensive or violative of any law, and that such an advisory is not based on sound reasoning.

My book, Marx and Ambedkar — Continuing the Dialogue, co-authored with N. Muthumohan, discusses the Dalit question extensively. Gail Omvedt’s Dalits and the Democratic Revolution deals with Dalit issues. Can the government dare to dictate terms used in books, and in public discourse and analysis?

‘Dalit’ had become the preferred term in Maharashtra during the 1970s. The word Harijan is not used now (the government issued a circular to officials in 1982 saying they should not use the term while describing members of the Scheduled Castes). The word Dalit denotes the pain of all those who suffered because of the caste system; it defines their identity to launch struggles based on Ambedkar’s slogan: Educate, Organise and Agitate. The government’s advisory indicates its anti-Dalit posture. The term Dalit, used by Jyotiba Phule, Swami Shradddhananda, Gandhi, and Ambedkar, cannot be dismissed by an executive order. In fact, the seven-judge Bench of the Supreme Court in S.P. Gupta v. President of India (1981) had observed that society is “pulsating with urges of gender justice, worker justice, minorities justice, Dalit justice and equal justice between chronic un-equals.” In using the term “Dalit justice”, the Constitution Bench of the Supreme Court validated the use of the term Dalit. It is painful to state that what the present government is trying to do was not done even during British rule. Such an advisory sounds strange when no such demand has been made by any Dalit organisation or leader, and when the term is used by the Supreme Court.

Such an advisory at a time when the term Dalit is empowering Dalits in their relentless fight against the increasing levels of atrocities against them, and at a time of heightened Dalit consciousness in the country, only signals the intent of the government to further marginalise the community, which is being asked to conform to the identity determined by the government. This is unacceptable. The government should withdraw its circular and challenge the order passed by the Bombay High Court in the Supreme Court.

D. Raja is National Secretary of the Communist Party of India and a Member of Parliament.

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The Supreme Court.

India “underestimated" leprosy and diverted funds meant to eliminate the curable disease for 18 long years, the Supreme Court said on Friday.

In its 22-page judgment, a Bench led by Chief Justice of India Dipak Misra pointed out that though the country was declared leprosy-free on December 31, 2005, the reality is “entirely different”.

The Supreme Court referred to progress reports of the National Leprosy Eradication Programme (NLEP) to show that only 543 districts of the total 642 districts in the country had achieved the World Health Organisation-required prevalence rate of less than one case of leprosy for 10,000 persons.

Suffering continues

“The underestimation of cases of leprosy and the declaration of elimination of leprosy has resulted in the integration of leprosy in general health services thereby leading to diversion of funds which would have otherwise been dedicated to eliminating leprosy,” Chief Justice Misra, who authored the verdict, wrote.

Meanwhile, patients and their families continue to suffer from leprosy and its stigma. They are even denied their fundamental right to food. They are not issued BPL (Below Poverty Line) cards to claim the benefit of various welfare schemes such as the Antyodaya Anna Yojana (AAY). They are deprived of housing, basic civic amenities, adequate sanitary facilities and rehabilitation programmes.

“At present, majority of the populace afflicted with leprosy live as a marginalised section in society, deprived of even basic human rights. This manifestly results in violation of the fundamental right to equality and right to live with dignity,” Chief Justice Misra observed for the Bench also comprising Justices A.M. Khanwilkar and D.Y. Chandrachud.

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Nearly 37 lakh women have received cash incentives under the Centre’s maternity benefits programme since the launch of Matru Vandana Saptah last year, a release from the Ministry of Women and Child Development said.

The Pradhan Mantri Matru Vandana Yojana (PMMVY) offers pregnant women and lactating mothers Rs. 5,000 as assistance for the first birth in the family. The programme’s aim is to reduce malnutrition.

A sum of Rs. 1,000 is also given to women after institutional delivery under the Janani Suraksha Yojana.

The scheme has an estimated 51.6 lakh beneficiaries a year.

As many as 48.11 lakh women have been enrolled in the Matru Vandana Saptah and the Centre has disbursed an amount of Rs. 1,168.63 crores to various States, the release said.

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Failed by State

Realme 2 or Redmi 6 Pro? Know which smartphone you should buy

The litmus test for any government programme should be the impact it has on the most vulnerable section of the country’s population. If a report of an expert committee of the Union ministries of health and family welfare and tribal development is anything to go by, projects that deal with primary healthcare, nutrition and sanitation have some work to do to satisfy this fundamental criteria of success. The report, released last week, points out that tribal communities in India live at least three years less than the non-tribal population, have higher malnutrition, significantly lower immunisation coverage, substantially higher low-birth-weight children and are much more susceptible to diseases like malaria, tuberculosis and leprosy.

The committee was set up in 2013 to assess the gaps and special health needs of the country’s 705 Scheduled Tribes. It does note that tribal groups have registered substantial improvement in health indicators since the past two decades. However, several of its findings raise questions about the delivery of government programmes. For example, the finding that three out of four tribal people continue to defecate in the open point to the unfinished task of the Clean India Mission. Similarly, the report’s conclusion that an “unacceptably high” number of tribal people suffer from malnutrition throws light on the shortfalls of the Right to Food Programme and the Public Distribution System. The fact that only about 30 per cent of tribal children of different age groups consume diets “adequate in both protein and energy,” shows that implementation problems continue to dog the Integrated Child Development Services 17 years after the Supreme Court began to monitor the programme. Even more worrying is the report’s conclusion that “the intake of various nutrients, calories and vitamins in tribals has decreased in the last decade”.

The report is a reminder that the country’s health divide is also about the development disparity between tribal and non-tribal areas. Its conclusion that access to health services, even where they exist, is bedeviled by poor roads should hold salience for the government as it plans to bolster the country’s primary and secondary healthcare network. But another endeavour demands as much urgency: The lack of a regular system of data collection of morbidity in tribal areas often comes in the way of a comprehensive health picture of tribal health in the country. Government programmes, as a result, are often ad hoc. A project for the tribal areas along the lines of the recent state-level analysis of the country’s disease burden may well be in order.

END
A CHILD UNDER 15 DIES EVERY 5 SECONDS AROUND THE WORLD: UN

An estimated 6.3 million children under 15 years of age died in 2017, or 1 every 5 seconds, mostly of preventable causes, according to the new mortality estimates released by UNICEF, the World Health Organization (WHO), the United Nations Population Division and the World Bank Group on Tuesday.

The report notes that for children everywhere, the most risky period of life is the first month.

In 2017, 2.5 million newborns died in their first month while 5.4 million deaths — occur in the first five years of life, with newborns accounting for around half of the deaths.

Also, a baby born in sub-Saharan Africa or in South Asia was nine times more likely to die in the first month than a baby born in a high-income country. And progress towards saving newborns has been slower than for children under five years of age since 1990.

Most children under 5 die due to preventable or treatable causes such as complications during birth, pneumonia, diarrhea, neonatal sepsis and malaria. By comparison, among children between 5 and 14 years of age, injuries become a more prominent cause of death, especially from drowning and road traffic.

Within this age group, regional differences exist, with the risk of dying for a child from sub-Saharan Africa 15 times higher than in Europe.

The report adds that even within countries, disparities persist. Under-five mortality rates among children in rural areas are, on average, 50% higher than among children in urban areas. In addition, those born to uneducated mothers are more than twice as likely to die before turning five than those born to mothers with a secondary or higher education.

Laurence Chandy, UNICEF director, data, research and policy, said: “Without urgent action, 56 million children under five will die from now until 2030 – half of them newborns.”

He added that though the world has made remarkable progress to save children since 1990, but millions are still dying because of who they are and where they are born.

“With simple solutions like medicines, clean water, electricity and vaccines, we can change that reality for every child,” the report said.

Globally, in 2017, half of all deaths under five years of age took place in sub-Saharan Africa, and another 30% in Southern Asia.

Despite these challenges, fewer children are dying each year worldwide. The number of children dying under five has fallen dramatically from 12.6 million in 1990 to 5.4 million in 2017. The number of deaths in older children aged between 5 to 14 years dropped from 1.7 million to under
a million in the same period.

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Joint study details diseases, risks over 26 years.

With the HIV-infected numbering 21.40 lakh, the target of ending AIDS by 2030 won't be easy
DR JITENDRA SINGH INAUGURATES ‘ALL INDIA PENSION ADALAT’


Ministry of Personnel, Public Grievances & Pensions

Dr Jitendra Singh inaugurates ‘All India Pension Adalat’

Anubhav Awards 2018 presented to six pensioners

Posted On: 18 SEP 2018 4:38PM by PIB Delhi

The Union Minister of State (Independent Charge) Development of North-Eastern Region (DoNER), MoS PMO, Personnel, Public Grievances & Pensions, Atomic Energy and Space, Dr Jitendra Singh inaugurated the ‘Pension Adalat’ here today, organised by the Department of Pension & Pensioners’ Welfare, Ministry of Personnel, Public Grievances and Pensions, Government of India. He also presented the ‘Anubhav’ awards 2018 to six pensioners for their contribution towards creating institutional memory for the departments. On the occasion, Dr Jitendra Singh also launched a booklet—“An era of sustained reforms for Central Government Pensioners” enumerating simplification of rules and steps initiated to strengthen the Grievance Portal and make it user friendly.

Inaugurating the All India Pension Adalat, Dr. Jitendra Singh said that Pension Adalats will help in on-the-spot redressal of pensioners’ grievances. This has given the right of “Ease of Living” to the pensioners, he added. Dr. Jitendra Singh said that the Prime Minster Shri Narendra Modi has directed that Pensioners be provided a hassle-free administrative system to resolve their grievances. Dr. Jitendra Singh also appealed to the States to implement the Good Governance measures taken by the Central Government.

Speaking about the benefits of the Grievance Portal for the Central Government pensioners called CPENGRAMS, the Minister said that we have saved huge resources and precious time of the people by using the technology.

The Minister said that a number of reforms have been undertaken by the Government to facilitate the pensioners. Highlighting the initiatives of the Government, he said that one of the main initiatives taken was to fix the minimum pension at Rs 1,000. He said that other initiatives such as Bhavishya, Sankalp, Jeevan Praman—digital life certificates, doing away with the obsolete laws and self-attestation, among others have also been taken. He said that a mechanism has been put in place where pensioner will get PPO on the day of his retirement. He further said that the retired population is increasing in India and we should do our best to channelize their energies in a positive manner. There should be smooth transition from their active life to retired life, he added. The pensioners should re-orient themselves to a new
beginning, the Minister said.

The Pension Adalats are being convened with the objective of bringing on a common table the aggrieved pensioner, the concerned department, the bank or CGHS representative, wherever relevant, so that such cases can be settled across the table within the framework of extant rules.

On the occasion, Dr. Jitendra Singh gave away the third Anubhav Awards-2018 to six Central Government employees to recognise their contribution to the Anubhav portal which is designed to create an institutional memory for successive generations of Central Government employees. Congratulating the awardees, Dr Jitendra Singh said that under Anubhav, the retiring employees give an account of their experiences during service. He said that these experiences are an important account for research and resource for administrative reference and thus will help in improving our working.

The Anubhav scheme was instituted at the call of the Prime Minister Shri Narendra Modi in the year 2015. Till date, more than 5,000 contributions have been made for Anubhavs by Government employees from 91 Departments.

The Secretary, Department of Pension & Pensioners’ Welfare and Department of Administrative Reforms & Public Grievances, Shri K.V. Eapen, in his welcome address, said that the aim of the Department is to provide a life to dignity to the pensioners post-retirement.

Besides the Pension Adalat, a Pre-Retirement Counselling (PRC) was also conducted for the Central Government employees who are about to retire in the next six months. 600 retiring Central Government employees participated in this PRC out of which a significant number were from the Central Armed Police Forces. The objective of the PRC Workshop is to create awareness about post-retirement entitlements as well as to educate them on advance planning for retirement including medical facilities and participation in voluntary activities after retirement.

Senior officers of the Department were present on the occasion.

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BB/PK/SS

(Release ID: 1546519) Visitor Counter : 279

Read this release in: Marathi
The Narendra Modi government’s Ayushman Bharat health insurance initiative will be launched on Sunday. There will doubtless be fierce debates about its policy direction as implementation data comes in. The five research papers released by the India State-level Disease Burden Initiative last week and published in *The Lancet* family of journals deserve attention in this context. Each report focuses on a specific non-communicable disease (NCD)—they account for the majority of India’s health burden now—and aims to inform Modicare’s state-specific planning. One of them is particularly welcome, focusing on an issue that has received short shrift so far: suicide and the associated mental health issues.

Last November, speaking at the National Institute of Mental Health and Neurosciences, President Ram Nath Kovind noted that India was facing a possible “mental health epidemic”. The paper, which is an exhaustive analysis of the variations in suicide death rates (SDRs) across states and causes of ideation of suicide in the 1990-2016 period, bears this out. It notes that suicide is the largest killer of India’s 15-29 and 15-39 age cohorts. Worryingly, the situation has worsened over the decades: “India’s contribution to global suicide deaths increased from 25·3% in 1990 to 36·6% in 2016 among women, and from 18·7% to 24·3% among men.” The jump far outstrips the approximately 1.4 percentage point increase in India’s share of global population in that period.

A more granular look reveals a complicated picture. Typically, suicide makes up a higher percentage of deaths in the more developed states of the south and western and central states have mid-level SDRs. The northwest and less developed north have low SDRs, while the east and north east have mixed rates. This is counterintuitive in many ways. The paper attributes the variations to the different levels of urbanization, proportion of literate population, and difference in literacy attainment. How exactly these map to SDRs deserves further study at the state level.

Breaking down SDRs by gender is less complicated. Indian women’s SDRs are almost three times higher than the rates expected globally for countries at similar levels of socio-demographic development. By contrast, Indian men’s SDR, although higher than peer countries’ average, is less strikingly so.

There are a few takeaways from this. Firstly, here as in so many other spheres, women are struggling with disproportionate socio-economic burdens. As the paper points out, their high SDRs relative to men are rooted in factors as varied as the difference in socially acceptable methods of dealing with stress and conflict for women and men, domestic violence and the different ways in which poverty affects the genders. A particularly important detail is that married women form the biggest victim group of suicide deaths among women in general. This group becomes more vulnerable due to arranged and early marriage, young motherhood and economic dependence—each following from the previous—among other factors.

Second, the rise in SDRs and, more broadly, mental health disorders, should not be surprising. This is not a developing country problem; the US has seen a surge in SDRs since 1990 too. The past few decades have witnessed economic, labour and social changes on a scale rarely seen before. Such rapid change—with the economic dislocation and change in social and community links it brings—can be destabilizing. Take India’s large migrant labour population. There is a cost to the loss of social links for the men who migrate, as well as for their families that stay behind. The parlous state of agriculture doesn’t help.
Third, the social stigma attached to mental health disorders in India is a major hurdle in addressing them. After all, until last year, suicide was a criminal offence in India, which was a major cause of under-reporting of suicide deaths in the National Crime Records Bureau of India. The stigma and general lack of knowledge and understanding when it comes to mental health disorders prevent timely intervention. For instance, suicide is often preceded by a history of depression, stress, or anxiety.

Fourth, state capabilities for addressing mental health issues are close to non-existent. As Kovind had pointed out last year, the country has about 5,000 psychiatrists and less than 2,000 clinical psychologists. This is minuscule, given population size. It doesn’t help that expenditure on mental health accounts for a tiny fraction of total public health spending.

There have been some positive developments over the past few years. The decriminalization of suicide last year was long overdue and welcome. The same holds true for the Insurance Regulatory and Development Authority of India’s mandating last month that insurance companies are to make provisions to cover mental illnesses in their policies along with physical illnesses. But it remains to be seen how well this will be implemented, given that a standard health insurance policy covers in-patient hospitalization, while mental illnesses more often require out-patient care like counselling and psychotherapy. The National Mental Health Policy 2014 shows how wide the gap between good intentions and effectiveness can be, after all.

Modicare has focused government and public attention on India’s decrepit healthcare system. This is to the good. But in the heat and noise, the challenges and needs of India’s mental health landscape should not be forgotten.

*What can be done to raise social awareness about mental illnesses? Tell us at views@livemint.com*
SUSTAINED EFFORTS MUST TO REDUCE INDIA’S INFANT MORTALITY BELOW 25 BY 2030

India’s under-five mortality rate (U-5MR) dropped four points in a single year in 2016, to 39 deaths per 1,000 live births from 43 in 2015. Apart from being the sharpest fall in a year, the decline also brought down India’s U-5MR below the global average of 39.1, according to data released by the United Nations on Tuesday. With 26 million births each year, India has the world’s largest birth cohort, and the four-point reduction in Infant Mortality Rate has led to 120,000 lives saved in one year. Another first for India is that its proportion of child deaths equals its share of the global births, with India accounting for 18% of the total births and 18% of U-5MR deaths worldwide.

Just three years ago, more than one million children died before reaching their fifth birthday from preventable and treatable causes, such as preterm birth complications, acute respiratory infections such as pneumonia, intrapartum-related complications, congenital anomalies and diarrhoea. Neonatal deaths, or newborn deaths within 28 days of birth, because of pregnancy-related complications, accounted for 53% of all under-five deaths in 2016. Many of these newborns and children could have been saved by increasing institutional deliveries, postnatal follow-ups, improving mother and child nutrition, and providing water, sanitation and immunisations. Only one in five new mothers in India get the full antenatal care, shows National Family Health Survey 2016.

The sharp decadal increase in institutional deliveries in public and private hospitals, up from 38.7% in 2006 to 78.9% in 2016, has lowered birth-related complications and helped India eliminate maternal and neonatal tetanus. But more needs to be done. It is imperative to widen the immunisation net so that all children are protected against vaccine-preventable diseases, such as diarrhoea and childhood pneumonia. Boosting breastfeeding is another low-resource method to heighten childhood immunity and lower risk of infections. Only 41.6% of children under the age of three were breastfed within one hour of birth in 2015, up from 23.4% in 2005.

Though there has been fourfold decline in the gender gap in survival of the girl child from 10% in 2012 to 2.5%, the bias against the girl child remains high in India. Globally, girl child survival rates are 11% higher than boys.

Further increasing institutional delivery, strengthening routine immunisation under Mission Indradhanush, scaling up of special newborn care units to treat malnourished and ill newborns, providing holistic nutrition under Poshan Abhiyan (national nutrition mission), and meeting the national commitment to make the country open-defecation free by 2019, will collectively help reach its Sustainable Development Target to bring down U-5MR below 25 by 2030.

First Published: Sep 19, 2018 17:44 IST
SEX OFFENDERS’ REGISTRY LAUNCHED WITH 4.4 LAKH ENTRIES


The first-of-its-kind national sex offenders’ registry launched on Thursday has names and details of some 4.4 lakh people convicted for various sexual offences across the country.

The database is for those convicted for sexual offences 2005 onwards. It includes name, address, photograph and fingerprint details of the convict. A Home Ministry statement said the database would not compromise any individual’s privacy.

Following suit

India became the ninth country in the world to have a National Database on Sexual Offenders (NDSO), accessible only to law enforcement agencies for the purpose of “investigation and monitoring”. The proposal to set up a registry was mooted by the UPA government after the 2012 Nirbhaya gangrape case in New Delhi.

The database will be maintained by the National Crime Records Bureau, that will also track whether the State police were updating the records on time. The database will include offenders convicted under charges of rape, gang rape, Protection of Children from Sexual Offenders Act (POCSO) and eve teasing.

While launching the database, Union Women and Child Development Minister Maneka Gandhi expressed concern over sexual assaults in children’s shelter homes and increasing incidents of NRI grooms abandoning their brides.

The Minister asked the police force to keep a close watch on such crimes and the arrest of culprits.

She also raised the issue of States not responding to a letter sent by her ministry for procurement specially-designed forensic kits that would help in tamper-proof collection of evidence leading to better conviction in such crimes.

Responding to Ms. Gandhi, Joint Secretary of the Home Ministry Punya Salila Srivastava said as many as 79 lakh rape kits were in the process of procurement and distribution across the country.

“In Muzaffarpur in Bihar, the head of a shelter home allegedly sexually assaulted several children, but he was not arrested immediately. There was a tunnel from the shelter home to his residence. That means the crimes must have taken place in his residence. I appeal to all DGPs to keep a close eye on all shelter homes,” she said.

Home Minister Rajnath Singh, who was present, launched another portal, cybercrime.gov.in, that will receive complaints from citizens on objectionable online content related to child pornography, child sexual abuse material, and sexually explicit material such as rape and gang rape.

Track complaints
“This will not only aid the victims/complainants but also help the civil society organisations and responsible citizens to anonymously report such complaints … The complaints registered through this portal will be handled by police authorities of respective State/UTs. There are other features, such as a victim or complainant can track his/her report by opting for ‘report and track’ option using his/her mobile number,” the statement said.

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PROTECTING PERSONS WITH HIV/ AIDS


The Act was born out of an urgent need to prevent and control the virus and syndrome. It has highlighted the necessity for effective care, support and treatment for HIV and AIDS. The Act spawns from the commitment to the global community under the Declaration of Commitment on Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (2001) for enhanced coordination and intensification of national, regional and international efforts to combat the virus and syndrome in a comprehensive manner.

The statute aims to provide equal rights to persons with HIV and bring them into the mainstream. The Act gains importance as it makes it a legal obligation to protect the privacy of persons with HIV and AIDS.

The law addresses discrimination meted out to persons with HIV and AIDS. It fortifies the health and medical health-care system for them and introduces legal accountability along with formal mechanisms to inquire into complaints and redress grievances.

The Act lists various grounds on which discrimination against persons with HIV is prohibited. These include the denial, termination, discontinuation or unfair treatment with regard to employment, educational establishments, health-care services, standing for public or private office, and insurance.

The requirement for HIV testing as a pre-requisite for obtaining employment or accessing health care or education is also prohibited.

The Act provides that every HIV infected or affected person below the age of 18 years has the right to reside in a shared household. The Act prohibits any individual from publishing information or advocating feelings of hatred against HIV positive persons and those living with them. Section 37 makes such propagation of hatred punishable with a term of imprisonment which shall not be less than three months but which may extend to two years, with fine which may extend to 1 lakh.

As per the provisions of the Act, every person in the care and custody of the state shall have the right to HIV prevention, testing, treatment and counselling services.

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Last week Ram Kadam, a BJP MLA from Maharashtra, told the men in an audience that if they were interested in women who didn’t reciprocate the feeling,

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UNION HOME MINISTER LAUNCHES TWO PORTALS TO STRENGTHEN WOMEN SAFETY

Union Home Minister launches two portals to strengthen Women Safety

Cyber Crime Prevention against Women and Children (CCPWC) portal to check objectionable online content;

National Database on Sexual Offenders (NDSO) to aid in monitoring & investigation of sexual crimes

Posted On: 20 SEP 2018 5:37PM by PIB Delhi

Union Home Minister, Shri Rajnath Singh here today launched two separate portals to strengthen Women Safety. The portal “cybercrime.gov.in” will receive complaints from citizens on objectionable online content related to child pornography, child sexual abuse material, sexually explicit material such as rape and gang rape.

The National Database on Sexual Offenders (NDSO), which is accessible only to law enforcement agencies, will assist in effectively tracking and investigating cases of sexual offences.

Addressing the Officers from the States through a video conference, Union Home Minister Shri Rajnath Singh said that the Government has taken several measures to check crime against Women and Children, including provision of stringent punishment and creation of modern forensics facilities to improve investigation, creation of the Women’s Safety Division in the Ministry of Home Affairs and launching of Safe City projects for Women’s Safety. He added that the two portals launched today are part of efforts in the direction of strengthening security of women and children. However, he said that the field level challenges have to be overcome by the Police at the ground level to ensure speedy justice to the victims. He urged them to fully utilize potential of the two portals and update the database regularly for greater effectiveness. Shri Rajnath Singh appreciated measures introduced by some of the states to check crimes against women and children, and urged them to share the best practices for adoption by others.

Speaking on the occasion, the Women & Child Development Minister Smt. Maneka Sanjay Gandhi urged the law enforcement agencies to pay special attention to the safety of children at shelter homes. She also underlined the need for provision of
forensic kits at police stations for quick investigation of sexual crimes. She also asked the police to take prompt action in cases where a husband abandons wife shortly after marriage.

The Union Home Secretary Shri Rajiv Gauba highlighted the need for timebound completion of investigation in sexual crimes to instill deterrence among potential offenders. While appreciating the progress made by Madhya Pradesh and Uttar Pradesh Police, he said MHA will monitor progress in all the States. He added that the two portals will be extremely helpful to the law enforcement agencies especially in investigation where offenders migrate to other states after committing the crime.

The Cyber Crime Prevention Against Women and Children (CCPWC) portal is convenient and user friendly that will enable complainants in reporting cases without disclosing their identity. This will not only aid the victims/complainants but also help the civil society organizations and responsible citizens to anonymously report complaints pertaining to child pornography, child sexual abuse material or sexually explicit material such as rape and gang rape. Complainants can also upload the objectionable content and URL to assist in the investigation by the State Police. The complaints registered through this portal will be handled by police authorities of respective State/UTs. There are other features such as a victim or complainant can track his/her report by opting for “report and track” option using his/her mobile number.

The National Crime Records Bureau (NCRB) will proactively identify such objectionable content and take up with intermediaries for its removal. For this NCRB has already been notified as the Government of India agency to issue notices under Section 79(3)b of IT Act.

The second portal unveiled by the Union Home Minister today relates to the National Database on Sexual Offenders (NDSO). It is a central database of “sexual offenders” in the country which will be maintained by the NCRB for regular monitoring and tracking by the State Police. The database is accessible only to the law enforcement agencies for investigation and monitoring purpose. The database will include offenders convicted under charges of rape, gang rape, POCSO and eve teasing. At present the database contains 4.4 lakh entries. The State Police have been requested to regularly update the database from 2005 onwards. The database includes name, address, photograph and fingerprint details for each entry. However, the database will not compromise any individual’s privacy.

Ministry of Home Affairs has already released a grant of Rs. 94.5 crore to States/UTs for establishing cyber forensic-cum-training laboratories to strengthen cybercrime investigation and conduct training programmes to enhance capabilities of Police officers, public prosecutors and judicial officers.

Senior Officers from MHA, Ministry of Women & Child Development and senior police officials from States and UTs through video conference attended the meeting.

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BB/NK/PK/SS

(Release ID: 1546835) Visitor Counter : 494

Read this release in: Marathi, Tamil

END
THE SETTING UP OF THE SEX OFFENDERS REGISTRY IS TIMELY


India on Thursday joined eight other countries that maintain a registry of sex offenders. The registry, which will be maintained by the National Crime Records Bureau (NCRB), will include names, address, photographs and fingerprints details of convicted sexual offenders.

In the United States, the sex offender registry is available to the public, whereas in India, and countries such as the United Kingdom, Australia, Canada, Ireland, New Zealand, South Africa, and Trinidad & Tobago, the registry is available only to law enforcement agencies. The Indian registry is expected to list 4.4 lakh cases but the state police have been asked to update data from 2005 onwards. The government has promised that the database will not compromise any individual’s privacy. The database will have details of offenders convicted under charges of rape, gang rape, POCSO and harassing women.

The opening of the registry is timely because crimes such as rape, voyeurism, stalking and aggravated sexual assault are on the rise. The latest National Crime Records Bureau data shows there has been a 12% rise in rapes between 2015 and 2016, and that the majority of offenders are known to the victim. In a situation like this, the sex offenders’ list can definitely help the investigation and monitoring process as well as work as a deterrent.

However, there are some issues that need to be tackled before the registry starts its work.

First, what will be the process of categorising offenders? For example, can the recent rape of a minor in Kathua, Jammu and Kashmir, be termed more heinous than the rape that has been reported at a school in Dehradun, or vice versa?

Second, while in a digital age it is reasonable to expect the use of technology in crime detection and investigation, despite a promise to not to compromise the privacy of any individual, there will be legitimate concerns about the misuse of data. This concern has been tackled partly by allowing access to the registry only to law enforcement agencies.

Third, there is a possibility that this registry may tarnish a person’s life forever even if he is reformed after serving his legal sentence.

While the sex offenders’ list could help in enabling justice and monitoring an offender’s behaviour, the State must ensure that there is no overreach and misuse of the list. The government has also launched another portal to record complaints from citizens on objectionable content related to child pornography and other sexually explicit material.

First Published: Sep 20, 2018 18:02 IST
As we approach M.K. Gandhi’s 150th birth anniversary, it is perhaps fitting to revisit the Gandhian approach to rural development. In this context, an analysis of the idea of women self-help groups (SHGs) as a vehicle to transform the rural landscape would be timely. These SHGs can act as powerful institutions of participation and can contribute to India’s growth trajectory.

SHGs are essentially diminutive and economically homogeneous groups of rural poor. More often than not, they consist of 10-15 members. They act as safety nets to achieve twin goals—economic security and social well-being. The underlying philosophy guiding a SHG is that members periodically save a small amount of money, unanimously agreeing to make a contribution to a common pool. United leadership coupled with an informal horizontal network helps to create social capital among the poor, especially among the women.

The central question therefore becomes: Why are SHGs relevant in the context of a forward looking and inclusive developmental agenda?

Women SHGs can be an avenue for achieving the goal of financial inclusion by making women’s access to the banking system easier and hassle-free. This happens because SHGs filter out the potentially high-risk borrowers through local information. As a result, banks are more willing to lend as it minimizes their risk.

Once women entrepreneur-led SHGs are recognised by banks, they get access to all banking facilities such as overdraft, debit and credit cards. Most importantly, they help mobilize small-scale savings.

Besides, women are seen as better savers and this augments their repayment capacity in comparison to that of their male counterparts.

The creation of women SHGs helps finesse the widespread problem of adverse selection that plagues the Indian banking system.

Under normal circumstances, when a bank lends money to a potential borrower, creditworthiness is seen as an essential prerequisite. More often than not, banks do not have access to relevant local information regarding the creditworthiness of the borrower, which can either lead to denial of credit or increasing number of defaults and bad debts.

However, in the case of women SHGs, women entrepreneurs possess the required local information regarding potential members, which banks do not. As SHGs are based on the sound principle of joint liability, a woman entrepreneur would be pairing up with a creditworthy and low-risk partner. This also ensures the enforcement of credit discipline within the SHG.

The mechanism of credit works through what in economic theory is termed as ‘asset creation’. The credit amount is generally used to create an asset that creates cash inflows, which are then used to pay off the loan.

The problem of a non-performing asset (NPA) arises in two cases. One, when there is no asset creation to begin with. Two, when there is asset creation, but the asset fails to generate enough cash flow because of various reasons.
This is where women SHGs can successfully tackle the NPA risk. As they are built on the concept of joint liability, there is common interest, which ensures the creation of an asset. As far as adequate cash flow generation from the underlying asset is concerned, again, as each and every member has joint and individual liability to pay off the loan, the problem of moral hazard (inability of the bank to observe the efforts of the debtor) is circumvented.

By bringing women into the financial net, SHGs act as potent agents of change that go a long way in empowering them and, consequently, their families as well. It is no secret that women suffer a vast range of socioeconomic disadvantages in India. This includes being denied basic rights that range from the freedom to engage in economic activities to the right to choose their calling in life. However, the access to credit through the SHG channel helps women to break through these barriers.

Financially empowered, they find themselves in a better position to assert themselves in family matters such as family planning, child education, financial investments and everything in between. They thus emerge from the ashes like the proverbial phoenix, assuming the role of a decision maker in the family.

On a field trip to Rae Bareli, Uttar Pradesh, we found that women SHGs are gaining momentum. The change is palpable. Our interaction with members of women SHGs brought out several interesting revelations. Several dozen confident, independent women shared the stories about the working of their SHGs. They addressed a multitude of issues such as menstrual hygiene, sanitation, domestic violence and higher education.

SHGs are a realistic, viable and sustainable option for achieving rural development objectives. A greater push for the creation of more SHGs in rural India is needed. This will help reduce the dependence of women borrowers on informal sources of credit and help work towards their continual inclusion into the formal financial system.

Women SHGs can potentially be a potent means of breaking free from the vicious circle of poverty. How soon this opportunity can be leveraged on a wide scale is the question.

*Chitvan Singh Dhillon and Mamta are in the Indian Economic Service. Views expressed are personal*
DEPWD CELEBRATES ‘INTERNATIONAL DAY OF SIGN LANGUAGES’


Ministry of Social Justice & Empowerment

DEPwD Celebrates ‘International Day of Sign Languages’

Posted On: 23 SEP 2018 6:19PM by PIB Delhi

“International Day of Sign Languages” was celebrated by Indian Sign Language Research and Training Centre (ISLRTC) under Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice and Empowerment here today. Shri Krishan Pal Gurjar, Minister of State for Social Justice and Empowerment was the Chief Guest on the occasion. Smt. Shakuntala D. Gamlin, Secretary, DEPwD, Smt. Dolly Chakravarty, Joint Secretary & Director, ISLRTC and many Deaf and Dumb persons along with their families were present. A special calendar of year 2019 with Sign Languages designed by ISLRTC was released on the occasion.

Addressing on the occasion, Shri Krishan Pal Gurjar congratulated all Deaf and Dumb persons on the International Day of Sign Languages and said the Union Government is committed to the welfare of Divyangjan and many important steps have been taken during past 4 years. He said that his ministry has written to all ministries to make special provision for Sign language interpreter in all their functions and programmes so that the deaf and dumb persons may also get benefitted. He said that Sign language is a powerful visual language which can revolutionize deaf education and develop qualified human resources.

International Day of Sign Languages is celebrated annually across the world on 23 September every year along with International Week of the Deaf. The choice of 23 September is the same date that the WFD was established in 1951. The theme of International Day of Sign Languages is "With Sign Language, Everyone is Included!" With Sign Language, Everyone is Included! IDSL held today, along with IWDeaf, which runs between Monday, September 24 and Sunday, September 30, 2018.

Sign language has been used for over centuries. The language capabilities of deaf children who use sign language are better. There is no advantage to delaying exposure to sign language, and research on the development of language has found that early exposure reduces the risks of language development. Lot of intensive therapy is needed after CI, even then the success is not guaranteed.

Earlier the schools focused on the oral education. However, now the educators and policy makers have gradually started bilingual schooling which is considered ideal for the deaf children as they acquire sign language as first language and are taught other spoken language through
first language. This helps in enhancing their literacy skills. A child can express anything through sign language because it is a natural language. Each deaf child is different therefore one type of education may not be fit for all. A deaf child can have a CIAND use sign language simultaneously.

The longer a person waits, the more his child’s brain has to deal with the harmful effects of language loss. Sign languages are complex grammatical languages just like the spoken ones. They have their own grammar and vocabulary. No one form of sign language is universal. Different sign languages are used in different countries or regions. For example, British Sign Language (BSL) is a different language from ASL, and Americans who know ASL may not understand BSL.

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Sanjay Kumar/M/o SJ&E/23.09.2018
सांकेतिक भाषा दिवस
“सांकेतिक भाषा के रूप में, हर कोई पहलिया”
लाभ प्रदान करने के रूप में, जनता के लिए हमें जिम्मेदारी है।
मुख्य अध्यक्ष
डॉ. वासुक नेहरू
लगभग 500 की एवं लगभग 50 बीस
का विश्व स्तर पर कर्मचारी संगठन
भाषा संग्रह
भाषा दिवस
"साथ, हर कोई शामिल!"

(Release ID: 1546995) Visitor Counter : 395
The norms were okayed by a scientific sub-committee under the NTBN.

India’s top nutrition panel has recommended that severely malnourished children must be fed freshly cooked food prepared from locally available cereals, pulses and vegetables, and distributed by anganwadi centres, as part of the country’s first-ever guidelines for nutritional management of children suffering from severe acute malnutrition (SAM).

“The National Technical Board on Nutrition (NTBN) has approved guidelines proposed by our Ministry for severe acute malnutrition,” Secretary, Women and Child Development, R. K. Shrivastava told The Hindu.

The measures are part of the community-based health management of children suffering from SAM. The government had, till now, only put in place guidelines for the hospitalisation of severely wasted children who develop medical complications. Those norms were made public in 2011.

The norms were okayed by a scientific sub-committee under the NTBN, according to the minutes of the meeting issued last week.

Anganwadi workers

The guidelines outline the role of anganwadi workers and auxiliary nurse midwives (ANMs) in identifying severely wasted children, segregating those with oedema or medical complications and sending them to the nearest health facility or nutrition rehabilitation centres.

The remaining children are enrolled into “community based management”, which includes provision of nutrition, continuous monitoring of growth, administration of antibiotics and micro-nutrients as well as counselling sessions and imparting of nutrition and health education.

According to the recommendations, anganwadi workers have to provide modified morning snacks, hot cooked meals and take home ration for SAM children.

The morning snacks and hot-cooked meals, which are served at anganwadis to children between the age of three to six years, should be “prepared freshly and served at the centralised kitchen/ anganwadi centres. Locally available cereals, pulses, green leafy vegetables and tubers, vitamin C rich fruits, as well as fresh milk and 3-4 eggs every week” have also been prescribed.

Importantly, the government has also revised the method to be used to measure wasting and advised calculating weight based on the height of children instead of the mid-upper arm circumference.
A Constitution Bench of the Supreme Court on Wednesday modified a 2006 judgment requiring the State to show quantifiable data to prove the “backwardness” of a Scheduled Caste/Scheduled Tribe community in order to provide quota in promotion in public employment.

The 58-page judgment by a five-judge Bench led by Chief Justice of India Dipak Misra gives a huge fillip for the government’s efforts to provide “accelerated promotion with consequential seniority” for Scheduled Castes/ Scheduled Tribes (SC/ST) members in government services.

Directly contrary

Writing the verdict for the Bench, Justice Rohinton Nariman held that this portion of the M. Nagaraj judgment of another five-judge Constitution Bench in 2006 was directly contrary to the nine-judge Bench verdict in the Indira Sawhney case. In the Indira Sawhney case, the Supreme Court had held that the “test or requirement of social and educational backwardness cannot be applied to Scheduled Castes and Scheduled Tribes, who indubitably fall within the expression ‘backward class of citizens’.”

Justice Nariman pointed out that the Presidential List for Scheduled Castes contains only those castes or groups or parts as “untouchables.” Similarly, the Presidential List of Scheduled Tribes only refers to those tribes in remote backward areas who are socially extremely backward.

“Thus, it is clear that when Nagaraj requires the States to collect quantifiable data on backwardness, insofar as Scheduled Castes and Scheduled Tribes are concerned, this would clearly be contrary to the Indira Sawhney and would have to be declared to be bad on this ground,” Justice Nariman wrote.

But the unanimous judgment differed with the Centre’s argument that Nagaraj misread creamy layer concept to apply it to SC/ST.

March ahead

“The whole object of reservation is to see that backward classes of citizens move forward so that they may march hand in hand with other citizens of India on an equal basis. This will not be possible if only the creamy layer within that class bag all the coveted jobs in the public sector and perpetuate themselves, leaving the rest of the class as backward as they always were,” Justice Nariman said and upheld Nagaraj’s direction that creamy layer applied to SC/ST in promotions. It said that when a court applies the creamy layer principle to Scheduled Castes and Scheduled Tribes, it does not in any manner tinker with the Presidential List under Articles 341 or 342 of the Constitution of India.

The caste or group or sub-group named in the said List continues exactly as before.

“It is only those persons within that group or sub-group, who have come out of untouchability or backwardness by virtue of belonging to the creamy layer, who are excluded from the benefit of reservation,” Justice Nariman wrote.

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The Constitution protects religious freedom in two ways. It protects an individual’s right to profess, practise and propagate a religion, and it also assures similar protection to every religious denomination to manage its own affairs. The legal challenge to the exclusion of women in the 10-50 age group from the Sabarimala temple in Kerala represented a conflict between the group rights of the temple authorities in enforcing the presiding deity’s strict celibate status and the individual rights of women to offer worship there. The Supreme Court’s ruling, by a 4:1 majority, that the exclusionary practice violates the rights of women devotees establishes the legal principle that individual freedom prevails over purported group rights, even in matters of religion. The three concurring opinions that form the majority have demolished the principal defences of the practice — that Sabarimala devotees have constitutionally protected denominational rights, that they are entitled to prevent the entry of women to preserve the strict celibate nature of the deity, and that allowing women would interfere with an essential religious practice. The majority held that devotees of Lord Ayyappa do not constitute a separate religious denomination and that the prohibition on women is not an essential part of Hindu religion. In a dissenting opinion, Justice Indu Malhotra chose not to review the religious practice on the touchstone of gender equality or individual freedom. Her view that the court “cannot impose its morality or rationality with respect to the form of worship of a deity” accorded greater importance to the idea of religious freedom as being mainly the preserve of an institution rather than an individual’s right.

Beyond the legality of the practice, which could have been addressed solely as an issue of discrimination or a tussle between two aspects of religious freedom, the court has also sought to grapple with the stigmatisation of women devotees based on a medieval view of menstruation as symbolising impurity and pollution. The argument that the practice is justified because women of menstruating age would not be able to observe the 41-day period of abstinence before making a pilgrimage failed to impress the judges. To Chief Justice Dipak Misra, any rule based on segregation of women pertaining to biological characteristics is indefensible and unconstitutional. Devotion cannot be subjected to the stereotypes of gender. Justice D.Y. Chandrachud said stigma built around traditional notions of impurity has no place in the constitutional order, and exclusion based on the notion of impurity is a form of untouchability. Justice Rohinton F. Nariman said the fundamental rights claimed by worshippers based on ‘custom and usage’ must yield to the fundamental right of women to practise religion. The decision reaffirms the Constitution’s transformative character and derives strength from the centrality it accords to fundamental rights.

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OPENING THE GATES

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The Supreme Court, in a 4:1 judgment, has ruled that women of all ages should be allowed the visit the Sabarimala shrine and stuck down the Kerala Hindu Places of Public Worship (Authorisation of Entry) Rules 1965, which prohibited entry of women aged between 10 and 50 in Sabarimala, as unconstitutional. The majority also found that the exclusionary practice at the Sabarimala shrine did not pass the essential practices doctrine test or the principle of constitutional morality; the court also ruled that Ayyappa devotees will not constitute a separate religious denomination. It was held that “the heart of the matter lies in the ability of the Constitution to assert that the exclusion of women from worship is incompatible with dignity, destructive of liberty and a denial of the equality of all human beings. These constitutional values stand above everything else as a principle which brooks no exceptions, even when confronted with a claim of religious belief”.

Hence, it was concluded that “a claim for the exclusion of women from religious worship, even if it be founded in religious text, is subordinate to the constitutional values of liberty, dignity and equality” and “exclusionary practices are contrary to constitutional morality”.

The verdict is in with the spirit of the times and expands the rights and freedoms guaranteed in the Constitution. However, the powerful majority of four should not be read as a sanction to ignore Justice Indu Malhotra’s lone dissenting view, which asks for a nuanced reading of constitutional rights and morality. It is ironic that the dissent on a matter projected as an issue of the rights and freedoms of women has come from a woman judge itself. Justice Malhotra has problematised the manner in which matters of faith, tradition and custom are tested against the rationality embedded in the Constitution. “The equality doctrine enshrined under Article 14 does not override the Fundamental Right guaranteed by Article 25 to every individual to freely profess, practise and propagate their faith, in accordance with the tenets of their religion,” writes Justice Malhotra, who had recently ruled against Section 377 and the adultery law. Accordingly, “constitutional morality in a secular polity would imply the harmonisation of the fundamental rights, which include the right of every individual, religious denomination, or sect, to practise their faith and belief in accordance with the tenets of their religion, irrespective of whether the practise is rational or logical”.

At a time when the Supreme Court, by its own admission, is underlining the very importance of constitutional morality, Justice Malhotra’s words are a cautionary reminder that it may need more than a judicial pronouncement to enable social reform.

END
BAN AN ‘ESSENTIAL PRACTICE’, SAYS DISSENTING JUDGE

Judges should not impose their personal views, morality or rationality with respect to the form of worship of a deity, Justice Indu Malhotra on Friday wrote in her judgment, dissenting with the majority verdict to open up the Sabarimala temple for women of all age groups.

“A pluralistic society and secular polity would reflect that the followers of various sects have the freedom to practise their faith in accordance with the tenets of their religion. It is irrelevant whether the practice is rational or logical. Notions of rationality cannot be invoked in matters of religion by courts,” Justice Malhotra pronounced in her judgment, dismissing the appeals challenging the centuries-old ban in the temple.

“The manifestation is in the form of a Naishtik Brahmachari. The belief in a deity, and the form in which he has manifested himself is a fundamental right protected by Article 25(1) of the Constitution,” she held.

She said the prohibition in vogue for time immemorial qualified to be an “essential practice”. A religion can lay down a code of ethics, and also prescribe rituals, observances, ceremonies and modes of worship.

Imposing the court’s morality on a religion would negate the freedom to practise one’s religion according to one’s faith and beliefs. It would amount to rationalising religion, faith and beliefs, which is outside the ken of courts, Justice Malhotra observed.

Diverse practices

“India is a country comprising diverse religions, creeds, sects each of which have their faiths, beliefs and distinctive practices. Constitutional morality in a secular polity would comprehend the freedom of every individual, group, sect, or denomination to practise their religion in accordance with their beliefs and practices,” the dissenting judge said.

Justice Malhotra upheld the status of Ayyappa devotees as a separate religious denomination. She banked on the notifications issued by the Travancore Devaswom Board in 1955 and 1956, which refer to the devotees as “Ayyappans”.

Distinct creed

“The worshippers of Lord Ayyappa together constitute a religious denomination, or sect thereof, as the case maybe, follow a common faith, and have common beliefs and practices,” Justice Malhotra observed.

The worshippers constitute a religious denomination, or sect thereof, as the case maybe, following the “Ayyappan Dharma”.

They are designated by a distinctive name wherein all male devotees are called “Ayyappans”; all female devotees below the age of 10 and above the age of 50 are called “Malikapurnams”. A pilgrim on his maiden trip is called a “Kanni Ayyappan”. The devotees are referred to as
“Ayyappa Swamis”. A devotee has to observe the “vratham” and follow a code of conduct, before embarking upon the “Pathinettu Padikal” to enter the temple.

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