

Conclusions and Recommendations



Chapter 9: Conclusions and Recommendations

9.1 Planning and Financial Management

- Government of UP has not adopted the Gender Budgeting even after 10 years of declaration of the State Women Policy statement and was not maintaining gender based budget data/information about allocation and expenditure.

(Paragraph 2.1.1)

Recommendation: The Government should take immediate steps to setup Gender Budgeting cells in its departments immediately and implement gender responsive budgeting in a time bound manner.

- Gender segregated data was not maintained by programme implementing agencies and, therefore, proper identification of beneficiaries, accurate need assessment of financial and other resources required, and setting realistic performance targets and goals were not feasible.

(Paragraph 2.1.2)

Recommendation: Gender segregated data should be maintained by the implementing agencies at all levels for proper planning and efficient implementation of the scheme and ensuring that the specific needs of women and girl child are taken care of adequately to minimise gender gap/disparities.

- In schemes such as PC-PNDT, MTP, MDR, Family Planning, KSY and UPVCS, there were significant savings ranging from 46 to 100 *per cent* indicating non-achievement of targets/goals in respect of these schemes due to lack of proper planning and inefficient implementation by implementing agencies and ineffective monitoring by the governance structure.

(Paragraph 2.2)

9.2 Missing Daughters

Pre-Conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994

- The department was not ensuring timely submission of application for renewal by USG centres and taking action against the defaulters as prescribed Format H (where details about USG centre such as date of receipt of application, Name, address of applicant, etc. are mentioned) was not maintained. Thus, these centres functioned as deemed to have been registered during the intervening period.

(Paragraph 3.1.4.1)

Recommendation: The Department should ensure timely renewal of registration to avoid functioning of centres as ‘deemed registered’.

- Irregularities such as illegal operations of ultrasound machines could not be ruled out as effective monitoring and inspection of all the USG centres in the district was not possible in the absence of proper maintenance of mandatory records and non-receipt of prescribed returns.

(Paragraph 3.1.4.3)

Recommendation: The Department should ensure the proper maintenance/up keep of mandatory records at USG centres as well as at DAA level.

- No inspection schedule was prescribed by GoUP for the period between April 2010 and June 2013. Only 4,681 inspections (25 *per cent*) were conducted by DAAs during 2014-15 against 18488 targeted in the State while only 1,561 against required 6608 inspections were carried out by DAAs of test-checked districts during 2014-15. Thus, there was a shortfall of 76 *per cent* in inspections in the test checked districts.

(Paragraph 3.1.4.4)

Recommendation: The Government should ensure regular inspection of USG centres by District Appropriate Authorities.

- The department did not take any action for mapping of sale of USG equipment and also did not call for information regarding sale, installation and possession of USG equipment from the manufacturers, suppliers, dealers, etc., Therefore, number of USG equipment installed and the location of their placement were not known to the authorities to regulate the use of all the ultrasound machines. In absence of these information the possibility of misuse of ultrasound machines could not be ruled out.

(Paragraph 3.1.4.6)

Recommendation: The Government should effectively monitor the sale, supply and installation of USG machines to regulate and ensure their proper use as per PC-PNDT Act.

- The department did not know the whereabouts of the machines sealed for breach of the provisions of PCPNDT Act as one sealed machine was found to have been sold and two other machines were found to have been removed from the centres, without any intimation to the department.

(Paragraph 3.1.4.9)

Recommendation: The Department should ensure effective tracking of seized machines to avoid their unauthorised usages.

- Important provisions of PC-PNDT Act such as non-maintenance of patient details, non-submission of returns etc. were breached by 58 percent USG centres, however, neither any action was taken nor was any penalty imposed on the defaulting USG centres.

(Paragraph 3.1.4.11)

Recommendation: The Department should ensure adherence to the provision of the Act by USG centres and penal action should be taken against the defaulting centres.

- On one hand SSB, SAC and DACs did not meet regularly and on the other, they did not ensure proper follow up action on the decisions taken and directions given by them. This rendered the entire system of monitoring, created under the provisions of the PC-PNDT Act, ineffective and largely dysfunctional.

(Paragraph 3.1.5.2)

Recommendation: The Government should ensure regular meetings of SAC and DAC for monitoring the proper implementation of the provisions of Act.

- SIMC did not conduct adequate inspections of USG centres and failed to discharge their responsibility to monitor and ensure the proper implementation of PC-PNDT Act.

(Paragraph 3.1.5.3)

Recommendation: The Government should ensure regular inspection by SIMC for enforcement of the provisions of the Act.

- No dedicated toll free phone line was established as of October 2015 for registration of complaints violating the direction of SSB to establish a website and provide a dedicated toll free phone number for registering complaints.

(Paragraph 3.1.6)

Recommendation: The Government should establish a dedicated toll free phone line for registration of complaints and should also effectively monitor redressal of grievances by maintaining a separate database of complaints received relating to violations of PC-PNDT Act.

Medical Termination of Pregnancy Act, 1971

- As 1.19 lakh (out of 2.8 lakh) Medical Termination of Pregnancies were conducted during the year 2010-14 in the State pertained to rural areas having 46 CHCs registered under the Act, possibility of operation of large number of unauthorised MTP centres in smaller towns in the vicinity of rural areas cannot be ruled out.

(Paragraph 3.2.3)

- Only six *per cent* of 773 Community Health Centres (CHCs) in the State were having MTP facilities. As a result, majority of women in rural areas had no access to safe abortion services at affordable cost and reasonable distance from their habitations.

(Paragraph 3.2.3)

Recommendation: The Government should increase MTP facilities in rural areas by registering more CHCs under the Act.

- Only 548 (26.3 *per cent*) of 2,083 nursing homes/hospitals, having MTP facilities and operating in test-checked districts, were registered under MTP Act. Safe and hygienic conditions were not ensured in 226 un-registered CHCs in test checked districts while it was observed that in 7 out of 226 un-registered CHCs/PHCs had carried out terminations.

(Paragraph 3.2.4.1)

- Due to lack of inspections and monitoring, the department failed to recognize unregistered centres conducting MTPs and number of MTPs cases shown by the department was un-realistic as the department did not ensure reporting from unregistered hospitals.

(Paragraph 3.2.5.3)

Recommendation: The Government should ensure regular meetings of DLC and required inspection by CMOs, for effective monitoring of the provisions of the Act.

9.3 Controlling Maternal Mortality

Janani Surakhsha Yojna

- Target for institutional deliveries was only 1.24 crore (46 *per cent* of registered pregnant women). Inadequate government health facilities, lack of access to government health centres and non-affordability of private nursing homes/hospitals may have forced rural poor to depend more on home deliveries to be done by unskilled birth attendant.

(Paragraph 4.1.2)

Recommendations:

(a) Achievement of targets for institutional deliveries should be ensured in all the districts of the State especially with higher population of rural poor.

(b) Adequate health infrastructure may be created in rural areas by establishing more CHCs/PHCs/Sub-Centres as per norms to ensure safe and hygienic institutional deliveries.

(c) Transparent system should be adopted by the Department for fixing the targets of institutional deliveries.

- Total number of safe deliveries in the State including Government institutions, Private nursing homes/hospitals and home deliveries by skill attendants would work out to 154.25 lakh against total registered pregnancies of 266.01 lakh during the period 2010-15. This implied that a large number of rural poor approximately 111.76 lakh (42 *per cent*) had to depend on home deliveries by unskilled birth attendants.

(Paragraph 4.1.3)

Recommendations:

(a) The shortfalls in achievement of targets for home deliveries by SBAs should be minimized by proper monitoring.

(b) Health infrastructure and Skilled Birth Attendant network in rural areas should be strengthened to minimize the number of unsafe deliveries through unskilled attendants.

Maternal Death Review

- Large number of maternal deaths (85 per cent) remained unreported and 86 per cent of maternal deaths remained un-reviewed to find the gaps in the service delivery and to ensure corrective measure.

(Paragraph 4.2.2)

Recommendation: The Government should put in place a more effective system to ensure that every case of maternal death is reported and reviewed to ascertain service delivery gaps for taking corrective measures.

Family Planning Programme

- 49 per cent of allotted funds (₹ 380.57 crore) under the scheme remained unutilized during 2010-15.

(Paragraph 4.3.1)

- Target fixed for females (tubectomy) was 20 times higher than the target fixed for males (vasectomy); while achievement for tubectomy was 41 times the achievement for vasectomy in terms of absolute numbers.

(Paragraph 4.3.2)

- There was short-fall in achievement of IUD targets ranging from 41 to 47 per cent while no targets were set for most common and non-invasive methods viz. oral-pills and condoms.

(Paragraph 4.3.3)

Recommendations:

- The Government should enhance awareness in the society through IEC activities to increase inclination towards vasectomy and set prudent targets for both vasectomy and tubectomy.
- The Government should enhance awareness in the society through IEC activities to adopt spacing methods for family planning.

9.4 Improving Health and Nutritional Support

Integrated Child Development Services (ICDS) Scheme

- The Department did not have authentic data relating to nutritional and anaemic status of girls and women, which deprived the Department from preparing plans to cater to the specific needs of girls and women to reduce the prevalence of anaemia among them.

(Paragraph 5.2.2)

Recommendation: The Government should evolve a mechanism to obtain gender segregated data at State level especially in respect of important

nutritional deficiencies for formulation of specific plan of action and taking corrective measures.

- Against the requirement of 2,85,429 AWCs in the State, only 1,90,145 AWCs (67 *per cent*) were sanctioned and 1,87,997 AWCs (66 *per cent*) were actually functional. Less number of functional AWCs, as compared to prescribed norms resulted in ineffective delivery of services.

(Paragraph 5.3.1)

Recommendation: The Government should ensure opening of AWCs as per population norms for effective implementation of the Scheme.

- Adequate infrastructure/basic amenities were not available in most of the AWCs thereby putting children, pregnant women and lactating mothers to lots of inconvenience and discomfort.

(Paragraph 5.3.2)

Recommendation: The Government should ensure required infrastructure and basic amenities at all AWCs for providing hygienic and safe environment to children and pregnant women/lactating mothers visiting AWCs.

- The State had 3.21 crore to 3.44 crore pregnant women, lactating mothers and children between six months and six years of age, however, supplementary nutrition was provided to only 2.33 crore to 2.52 crore beneficiaries. Hence, 22 to 32 *per cent* pregnant women, lactating mothers and children were deprived of the benefits of supplementary nutrition programme during 2010-15.

(Paragraph 5.4.1.1 (ii))

- Nutritional support was provided to the beneficiaries ranging between 20 to 22 days in a month and 240 to 269 days in a year during 2010-15 against the prescribed norms of 25 days per month and 300 days per year.

(Paragraph 5.4.1.1 (iii))

Recommendation: The Government should ensure distribution of supplementary nutrition to all eligible beneficiaries for minimum required 300 days to reduce and eliminate malnutrition among them.

- Number of girls not attending PSE activities has exponentially increased from three *per cent* in 2010-11 to 33 *per cent* in 2014-15.

(Paragraph 5.4.1.3 (i))

Recommendation: The Government should ensure supply of pre-school kits to AWCs every year for providing pre-school education to beneficiaries through non-formal methods.

- Pre-natal and post-natal health check-up services are inadequate as pre-natal and post-natal cards were not issued to expectant/lactating mothers in 217 (72 *per cent*) out of 300 test checked AWCs.

(Paragraph 5.4.2.1)

Recommendation: The Government should improve pre-natal and post-natal health check-up facilities at AWCs.

- Only ₹ 19.75 crore (34 *per cent*) of released amount of ₹ 58 crore was utilized for purchase of medicine kits during 2010-15 within the respective financial year. Medicine kits for common ailments like fever, cold, worm infection etc., were not supplied to 1,87,997 AWCs (100 *per cent*) in the State in 2012-13 and about 50 *per cent* AWCs were not issued medicine kits in 2011-12 and 2014-15.

(Paragraph 5.4.2.1 (i))

Recommendation: The Government should ensure supply of medicine kits to all AWCs without interruption for providing basic medical facilities to beneficiaries at AWCs.

- Records of referred patients containing name, age, reason for referral, date of referral, place where referred, details of treatment given and outcome of treatment was not maintained in 247 (82 *per cent*) out of 300 test checked AWCs. As such, referral services were neglected in AWCs.

(Paragraph 5.4.2.2)

Recommendation: The Government should ensure effective referral services at AWCs.

- Monitoring and Evaluation Committees at district, block and AWC level neither met regularly nor the functionaries of ICDS conducted regular inspections of AWCs. The revised web-based MIS was also not implemented in AWCs in the State.

(Paragraph 5.6)

Recommendation: The Government should ensure regular meetings of various committees and inspections by ICDS functionaries as per norms for effective monitoring of the scheme.

9.5 Adolescent Girls

Kishori Shakti Yojana

- Against the total population of 70,74,240 AGs, only 35,100 AGs were covered under the KSY scheme during 2012-15. Hence, only one *per cent* of the AGs in these districts could be covered under KSY. In other words, 99 *per cent* of the AGs in the districts were deprived of the nutritional support and vocational training.

(Paragraph 6.1.2)

Recommendation: The Government should expand the scope of the scheme to cover all adolescent girls, on the lines of SABLA.

- Shortfall was noticed in imparting training ranging between 28 and 70 *per cent*, except in 2012-13 when training was not imparted, and in test-checked districts shortfall was 87 *per cent*.

(Paragraph 6.1.4)

Recommendation: The Government should ensure that training is imparted to all eligible AGs and availability of requisite training funds to districts.

Rajiv Gandhi Scheme for Empowerment of Adolescent Girls or *SABLA*

- An expenditure of ₹ 1,186.41 crore was incurred on the scheme during 2010-15 incorporating Central share of ₹ 564.34 crore and 97.77 lakh adolescent girls were covered under the scheme.

(Paragraph 6.2.1.1)

- Take Home Ration (THR) was not provided to 13.45 lakh adolescent girls in the test checked districts during 2011-15. This implied that 28.21 *per cent* of the eligible AGs did not get nutritional support under the scheme in these districts.

(Paragraph 6.2.3.1)

Recommendation: The Government should monitor and ensure that THR to all eligible adolescent girls is provided in all the districts as per approved scale.

- Vocational training was not imparted to any adolescent girls in any six test-checked districts during 2011-15.

(Paragraph 6.2.3.2 (i))

Recommendation: The Government should ensure that vocational training is imparted to all adolescent girls as required under the scheme guidelines.

- Only 26,084 training kits (10 *per cent*) against requirement of 2,60,865 kits in 52,173 AWC's of 22 districts covered under the scheme were provided in the year 2014-15.

(Paragraph 6.2.3.2 (ii))

Recommendation: The Government should ensure that training kits are supplied timely and issued to all AWCs as per scheme guidelines.

9.6 Crime Against Women

- The incidence of crime against women in the State have been rising consistently during last five years. There has been 61 *per cent* increase in incidence of crime against women between 2010-11 and 2014-15. The increase in crime has been very steep during 2013-14 when the number of such incidence shot up from 24,652 in 2012-13 to 31,810 in 2013-14. The incidence of crime against women has not declined in 2014-15.

(Paragraph 7.1)

Police manpower

- Only 81 police personnel per one lakh population were available against the sanctioned strength of 178.48 police personnel per one lakh population in the State. Since Uttar Pradesh tops the list of the States having highest number of violent crimes accounting for 12.7 *per cent* of the total number of violent crimes in the country and also has maximum incidence of crime against women, shortage of about 55 *per cent* of the police manpower if not immediately bridged may further worsen the crime scenario in the State.

(Paragraph 7.4)

Recommendation: Government may ensure adequate police manpower to effectively control the increasing incidence of crime including crime against women in the State.

- Women police personnel constitute only 4.55 *per cent* of the total police force in the State against the Ministry of Home Affairs advisory of 33 *per cent*.

(Paragraph 7.4.1)

Recommendation: Given the large number of crimes against minor girls and women, GoUP may consider implementing MHA recommendations regarding employment of women police personnel.

Crime and Criminal Tracking Network and Systems

- Implementation of Crime and Criminal Tracking Network and Systems (CCTNS) has been considerably delayed in the State.

(Paragraph 7.6)

Recommendation: GoUP may issue directions for effective use of all functionalities of CAS such as investigation, prosecution, search and reporting to enhance operational efficiency of the police department.

Compensation schemes

- Under the direction of the Hon'ble Supreme Court, a scheme for restorative justice was formulated by GoI as 'Financial Assistance and Support Services to Victims of Rape: A Scheme for Restorative Justice'. The allocation of ₹ 15.03 crore by GoI during 2010-12 as financial assistance under this scheme, was not utilised by the State though 3544 rape cases were reported in the State during the same period.

(Paragraph 7.7.1)

Recommendation: Financial assistance and support services should be provided to rape victims promptly as per prescribed norms.

- Out of the total 18 cases for sanction of compensation under The Uttar Pradesh Victim Compensation Scheme, only two cases have been awarded

compensation and remaining 16 cases are pending for four to 20 months on account of procedural delays.

(Paragraph 7.7.2)

Recommendation: Compensation should be paid without any delay to victims and their dependents under 'The Uttar Pradesh Victim Compensation Scheme'.

Ujjawala – Support Services for Trafficked Women

- Grants were released to 13 *Ujjawala* projects for a period ranging between six and 15 months only and second and subsequent installments were not released to 12 projects. Further, due to non-release of grant in 12 out of 13 projects for a longer period, the scheme had become largely non-functional.

(Paragraph 7.9.1)

- No *Ujjawala* homes were established in districts bordering Nepal which are major transit areas vulnerable to trafficking as per UN report.

(Paragraph 7.9.2)

Recommendation: The Government should establish *Ujjawala* homes in districts bordering Nepal and other major destination centres for trafficked women.

- The State Level Monitoring Committee was not formed and periodic evaluation of the projects through reputed institutions was not done.

(Paragraph 7.9.3)

Recommendation: Government should constitute provisioned monitoring committees for proper monitoring of *Ujjawala* projects.

9.7 Destitute Women

- District Women Welfare Committees (DWWCs) for planning and implementation of the *Swadhar Greh* scheme in the districts were not constituted, as a result, the magnitude of prevalence of destitution in women in the districts remained un-assessed.

(Paragraph 8.2.1)

Recommendation: DWWCs should be formed in the districts to assess the magnitude of prevalence of destitution among women in the districts.

- *Swadhar Grehs* were established in only 42 out of 75 districts in the State as of March 2015.

(Paragraph 8.2.2)

Recommendation: The Government should undertake need based assessment to establish Swadhar Greh of required capacity in every district for destitute women.

- The State Department as well as implementing agencies had not established necessary linkages with other programme such as non-formal education, skill development, etc., which resulted in non-achievement of the objective of upliftment and economic rehabilitation of inmates of *Swadhar Greh* through linkage with other programmes.

(Paragraph 8.2.3)

Recommendation: The Government should ensure convergence with other departments for effective implementation of the Scheme.

- Inadequate infrastructure, excess reporting of beneficiaries, lack of support services, non-rehabilitation of inmates and improper maintenance of records were found in *Swadhar Grehs*, functioning in test checked districts.

(Paragraph 8.3)

Recommendation: Government should ensure functioning of *Swadhar Grehs* as per provisions of Scheme Guidelines regarding infrastructure, support services and rehabilitation of inmates.

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ALLAHABAD
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