

Social Sector Schemes For Women and Children In Assam : A Study

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Introduction :

Social Sector is one of the important sectors of Govt. of Assam. Social Sector includes Health, Education, and Employment. Many programmes/schemes in the area of social sector have been implemented by the Government to improve the well-being and standard of living of the women and children in Assam by targeting explicitly or implicitly education, health, employment etc. Working of the social sector schemes is an important prerequisite for the development of the poor masses especially the women and children in the developing world. Women and children are two vulnerable groups in the society for not only their physical weakness but also because they cannot lobby. Women are so disadvantageously placed in the society that they remain deprived of the social opportunities required for improving their capabilities. The social sector schemes have become all the more important in the pace of recent economic reforms. It has become imperative to make these schemes more efficient so that the poor and vulnerable sections of the society can prepare themselves to take the opportunities thrown open by globalization.

The Government of Assam has implemented many central social sector programmes like Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA), National Rural Livelihood Mission (NRLM)/ Swarnajanyanti Gram Swarozgar Yojana (SGSY), National Rural Health Mission (NRHM), Sarva Siksha Abhiyan (SSA), Mid-Day Meal (MDM) Scheme, Nirmal Bharat Abhiyan (NBA) etc. and so many state social sector programmes. Under this circumstance, it was felt that it is necessary to know how the social sector schemes are working in the state. It is necessary to find out the constraints and prospects of the social sector schemes in the state. Hence the study was undertaken.

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Social Sector Schemes in Assam for Women and Children ‘MAMONI’ UNDER ASSAM BIKASH YOJANA

Mamoni scheme is a scheme which encourages pregnant women to undergo three ante-natal check-ups that will help in identifying danger signs and offer proper treatment. Under this scheme, every pregnant woman will receive a booklet on tips of safe motherhood and for new born care. The same woman will receive an amount of Rs.1000.00 in the second and third antenatal check-ups for expenses related to nutritional foods and supplements. From 2009-10 to November 2013, a total of 17, 99, 511 (for 2nd ANC) and 15, 14, 865 (for 3rd ANC) cheques were provided to the beneficiaries.

‘MAJONI’ UNDER ASSAM BIKASH YOJANA

Social assistant to the entire girl child born up to second order is given a fixed deposit of 5000.00 for 18 years. Total 28, 2, 326 fixed deposits have been issued up to November 2013 since 2009-10.

‘MOROM’ UNDER ASSAM BIKASH YOJANA

The ‘morom’ scheme will provide financial support to indoor patient of government health institutions for supplementary nutrition and compensation for wage loss during hospitalization and post hospital expenses. Indoor patients admitted to a hospital will receive 75/- per day for medical college, 50/- per day for district hospital and 30/- per day for SDCH/ CHC / PHC. A total of 17.22 crore has been distributed under the scheme during the period 2010-11 to October 2013.

FREE OPERATION FOR CHILDREN HAVING CONGENITAL HEART DISEASE

Children having congenital heart disease are treated at Narayana Hrudayalaya, Bangalore and Kolkata. A total of 1576 children had been treated up to December 2013.

SUSRUSHA

Under this scheme an amount of 1.00 lakh is given as financial assistant to people who have undergone Kidney Transplantation after 1st April 2010, up to December 2013, a total of 218 patients got benefitted under the scheme.

SANJEEVANI

Village health outreach programme for early screening, diagnosis and follow up for no communicable and lifestyle diseases. Village Health

Outreach Programme (VHOP) covering 62 lakh populations every month. From 1st mar 2011 to 6th may 2014, total 24,82,234 patients visited sanjeevani.

ASSAM AROGYA NIDHI (AAN)

The Assam Arogya Nidhi provides financial assistance up to 1.50 lakh for general and specialized treatment of (i) life treating diseases (ii) of injuries caused by natural or manmade disaster to families which have a monthly income of less than 10, 000.00. life treating disease include Heart disease and Heart Surgery, Cancer, Kidney, and Urinary diseases, Orthopedic disorder that include artificial prosthesis for limbs, hip and knee joint replacement, bone diseases, implants for fractures and spinal surgery, Thalassemia, Bone marrow Transplant, AIDS, etc. The treatment taken at government hospital and other hospitals empanelled with state govt. are eligible under Assam ArogyaNidhi

SNEHA SPARSHA

Sneha Sparsha is the recent unique Health Care Initiative for children launched by the Department of Health & Family Welfare, Government of Assam and launching in 2013-14 in the state. Senha Sparsha literally meaning the touch of love, is aimed at extending financial assistance for specialized treatment of children below 12 years of age afflicted with some serious ailments such as a(1) Thalassemia requiring Bone Transplant, (2) Kidney Transplant, (3) Liver Transplant, (4) Cochlear Transplant, (5) Limb deformities requiring artificial and motorized limb, (6) Neurological anomaly (7) Specialized eye surgery. Target group/ Beneficiaries and criteria: Children below 12 years of age from families with annual income less than 2.50 Lakh while priority given to children belonging to BPL families. NRHM, Assam has released 2.29 crore to 55 beneficiaries under Sneha Sparsha.

RASHTRIYA SWASTHYA BIMA YOJANA

In Assam RSBY was first started in Jorhat in the month of October 2009, presently it has been extended to all the district of the state. A total of 13,43,445 numbers of cards have been issued to the beneficiary family covering 41, 80, 674 family members up to November 2013.

Universal Immunization Programme

Universal Immunization Programme is implemented to achieve 100% immunization and to reduce mortality and morbidity among infants and young children due to vaccine 6 (six) preventable disease such as

tuberculosis, diphtheria, whooping cough, tetanus, polio and measles. Expenditure incurred during 2009-10 was about 17.85 crore to carried out Universal Immunization Programme in the state. Number of beneficiaries under Universal Immunization Programme is given in the following Table

NUMBER OF BENEFICIARIES UNDER UNIVERSAL IMMUNIZATION PROGRAMME 2009-10

Vaccine Name	Beneficiaries
BCG	657562
DPT3	613229
OPV-3	611267
MLS	581680
TT (PW) 2+B	59554

Source: Economic Survey, Assam 2013-14

Operation Smile- Free Surgery for Children cleft palate and cleft lip

Children having cleft palate and cleft lip have been suffering for malnutrition as they cannot take their food normally for this deformity and so also they cannot speak normally like the other normal children. Such children remain to have left unattended for want of facilities of surgery of cleft palate and cleft lip in the state of Assam. Such treatment available in limited hospitals outsides Assam and is a costly affair hence it was a dream for most of the children as their guardians cannot afford to bear such cost. Realizing the pathetic condition of these children, govt. of Assam joined hand with the internationally reputed NGO the OPERATION SMILE having their required experts of international fame with sophisticated equipment's for the purpose to undertake treatment for those children in the state of Assam. Accordingly they agreed to provide their services at MMC hospital Guwahati by holding periodical camp treatment. Out of 4003 children screened so far, 2030 children have been cured from such deformity free of cost.

Sawayamsidha:

The Sawayamsidha (under the ICDS scheme of The Social Welfare Department of Assam) is an integrated Scheme for women's empowerment formally launched in 2001 replacing the erstwhile India Mahila Yojana and the Mahila Sambriddhi Yojana. The programme is based on the formation of Women Self Help Groups (SHGs) and enable the SHG to take up schemes and programmes for the social and economic empowerment of women. The long term objective of the programme is to bring about all round empowerment of women by ensuring their direct access to and control over resources through a sustained process of mobilization and convergence of all the on-going sectorial programmes of Government and other agencies. Under the Social Welfare Department, there are many beneficiaries right from children to women and aged person. Under this scheme, in Assam there are 24 numbers of ICDS project blocks. The various schemes for women have helped women in many ways right from their health in the forms of different nutritional supplements; their economic conditions also improve with the scheme for formation of various SHGs. So far 2400 SHGs have been constituted covering only 58,500 women. About 1173 numbers of SHGs is in nursing stage under this Sawayamsidha scheme. Though the various schemes under Welfare Department have benefitted many, there are many loopholes in the functioning of this programme. This is due to the irresponsibility of the different blocks that are supposed to look after the various implementation of the Social Welfare Scheme to the beneficiaries.

Swadhar :

The Ministry of Women and Child Development under Government of India set up a scheme for women in difficult circumstance known as Swadhar. The objectives of the scheme are the following:

- To provide primary need of shelter, food, clothing and care to the marginalised women/girls living in difficult circumstances who are without any social and economic support.
- To provide emotional support and counselling to such women.
- To rehabilitate them socially and economically through education, awareness, skill up gradation and personality development through behavioural training, etc.

- To arrange for specific clinical, legal and other support for women/girls in need of those intervention by linking and networking with other organizations in both Government and nongovernmental sector on case to case basis.
- To provide for help line or other facilities to such women in distress and
- To provide such other services as will be required for the support and rehabilitation to such ,Women in distress.

A number of Short stay homes and Swadharcenter have been set up in the state in order to provide shelter o women who are victims of violence or to women in difficult situation. One such NGO providing shelter to such women is WODWICHEE which functions in two different districts of Assam which is not at all sufficient to curve the women violence issues in the state.

National Rural Health Mission (NRHM) :

The government of Assam through National Rural Health Mission has introduced various schemes for women like Janani Suraksha Yojana, Mamoni, Majoni, Mamata, etc.

Janani Suraksha Yojana is a scheme to provide safe motherhood intervention with the objective of reducing maternal and neo-natal by promoting institutional delivery among the poor pregnant women. A beneficiary under this scheme should have a JSY card along with MCH card. Beneficiaries under this scheme are to receive cash assistance during their child delivery.

This scheme has been successfully implemented in the state of Assam and therefore the MMR has remarkably improved. There has been almost 22 times increase in institutional deliveries, but improving safe motherhood still remains a challenge in the state and Assam and still has the highest MMR in the country. This scheme could not be accessed by women from rural areas when ASHA worker failed to inform the women about the scheme.

Mid-Day Meal Scheme :

The Govt. of India has launched a countrywide programme of Nutritional support to Primary educationcommonly known as Mid-Day Meal Scheme on 15th August, 1995 through the state Governments in order to give boost to universalization of Primary education by increasing

enrollment, attendance and retention in Primary Education and to improve the standard of education. In Assam this scheme has been started on January 2005

The programme covered all the government and provincialized primary schools and primary section of MV school receiving financial assistance, EGS and AIE centres. During 2009-10, it has been proposed to cover all the aforementioned schools/centres as well as their enrollment from class I to V. The state Govt. provides 10% of total fund as state share for cooking cost@ 0.20 per student per teaching day for implementation of cooked Mid-Day Meal scheme. For this scheme, the government of India provides cost free food grains and the cost of cooking. The government of India also reimburses the transport charges under the scheme.

MAHATMA GANDHI NATIONAL RURAL EMPLOYMENT GUARANTEE ACT (MGNREGA)

MGNREGA provide employment to the adult member of a family having a job card and volunteer to do unskilled manual labour in each financial year. The other objectives of the Act are to create Durable Community Assets for development of rural infrastructure for upliftment of life of rural people. In Assam MGNREGA has empowered millions of lives of rural people to come out from the vicious circle of poverty and able to effort better education and health care for their children and families. At present the convergence of MGNREGA works have been taken up with the line department like Water resource, PWD, Irrigation, Sericulture, Handloom, and Textile, agriculture etc.

During the year 2013-14, an amount of Rs. 662.00 crore has been utilized as compared to Rs.651.00 crore in the previous year. About 98% of fund has been utilized under MGNREGA. More than 60% of works have been completed in 2013-14. A total of 12.62 lakh households were provided job under MGNREGA, and out of them 15505 household got 100 days employment during 2013-14.

Women participation has increased to 29% in Assam. In 2013-14 a total of 10786 women have been engaged as mates under this programme. Till the end of March 2014 41.48 lakhs rural household have been provided with job cards in the state.

Indira Awaas Yojana (IAY) :

Under IAY, house is provided to the rural shelter less/ houseless families living below poverty line. For the purpose, a

permanent wait list of the BPL families, requiring housing assistance, has been prepared in 2007. All IAY beneficiaries are being selected from this wait list. The Department has completed more than 144583 nos. of IAY houses out of which 66, 298 nos. of IAY houses has actually been constructed against the target of 13, 8, 698 during 2013-14. As far as the financial achievement is concerned the amount of Rs. 582.32 crore has been utilized during the year 2013-14 against the total available fund of 1, 389.36 crore. The quality of life of these beneficiaries is considered better of being provided with a unit of IAY houses which cost Rs. 75000/- . Now toilet has been made mandatory for IAY houses by the Govt. of India.

National Social Assistance Plan (NSAP) :

National Social Assistance Plan (NSAP) is a social welfare programme for BPL people; Economic assistant is given to socially disadvantaged people of BPL families. It consists of five sub components, viz. IGNOAPS (Indira Gandhi National Old Age Pension Scheme), IGNDPS (Indira Gandhi National Disable Pension Scheme), NFBS (National Family Benefit Scheme) And Annapurna. As reference to year 2013-14, is concerned, beneficiaries under IGNOAPS (80 years and above) are provided Rs. 550/- per month while the beneficiaries of the age group of 60-79 years are provided Rs. 250/- per month. Similarly pensioners have been provided with Rs. 300/- per month per beneficiaries under IGNWPS (40-79 YEARS) & IGNDPS (18-79 YEARS). During the year 2013-14 numbers of beneficiaries under IGNWPS (40-79 Years) were 64686 and under IGNDPS were 24391. As regard to NFBS, it is implemented with the objective of providing one time Economic/Financial assistant at the death of the breath earner of the family. The existing amount of assistant of Rs. 10000/-has been enhanced to Rs. 20000/- during 2013. In 2013-14 as many as 1344 families were provided assistant under the scheme. As regard Annapurna, the head of BPL families who attend 65 years of age and not cover IGNOAPS are provided at least 10 kg of rice free of cost. During the year 2013-14, 25, 308 nos. of family get benefit under this scheme.

SOCIAL SECTOR EXPENDITURE IN ASSAM :

In Assam, Social sector receives around 35-40% of total planned expenditure. As per the revised estimate, the annual plan revenue expenditure 2014-15 almost 40.7% of total plan expenditure has been

allocate for social services. The total allocation for social services was Rs. 11, 29, 897 lakh annual revenue expenditure for the year 2012-13. The expenditure allocation of Rs. 1764581 lakh in 2013-14 revised estimates and it became Rs. 20, 93,288 in revised estimate in 2014-15, which is approximately 45% more than 2012-13 annual expenditure. Of these social services, education Sports, Art & Culture has been allocated the major share, 12, 45, 987 of total social sector expenditure. Medical, Family Planning, Public Health & Sanitation receives only Rs. 843555 lakh and other receives Rs. 3, 746 lakh.

Although the share of the social sector in the state plan allocation is higher than the all India share of the social sector, the per capita expenditure on social sector in Assam is lower than the national average. Even in the North Eastern states, the per capita expenditure on health and education in Assam is the lowest.

A list of sectoral schemes have been identified which are expected to benefit women more. This like programme Tribal area sub plan etc. all these programme will have beneficial on both men and women and not necessarily having more influence on women's lives. Moreover, no information on the actual expenditure incurred on these schemes is available. Thus there does not seem to be sufficient budgetary support for directing the benefits of social sector schemes towards women and children.

CONCLUSION :

From the study, it can be concluded that there are large number of social sector schemes including both state and central sponsored schemes operate in Assam. However, the benefits of the schemes are not actually percolating to the target group they are intended for. The findings of the present study immediately draw the attention to a few serious gaps existing in the path of carrying benefits of the schemes to the people especially to the women and children. First, inadequacy of funds of the state government to run many a scheme. Second, inadequate dissemination of information. Third, lack of awareness and knowledge of the common people. Forth, due to the existence of the second and third factors, the middle men come into the picture. This paves the way for all sorts of leakages in the process, likes bias in selection of beneficiaries, improper use of funds etc.

Moreover, in Assam, it has been observed that, at present the employment creating and income generating social sector schemes are not very much in operation. There is over dependence on the social security schemes. Rather, in many a household, the pension amount is reported to be the only source of income. Although the need for continuation of these schemes cannot be denied, it must also be remembered that these are not likely to make any long run impact on the alleviation of poverty.

The observed facts about the lack of awareness and knowledge, health, and sanitation facilities, home hygiene habits and the lack of concern for the environment call for large scale intervention of NGOs or such other bodies for awareness creation.

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