

Child Sex Ratio on the Rise!



TRANSFORMING HARYANA THROUGH SDG IMPLEMENTATION

SDG 5: Achieve gender equality and empower all women and girls



SDGCC

SUSTAINABLE DEVELOPMENT GOALS
COORDINATION CENTRE

ARRESTING THE DECLINE IN THE CHILD SEX RATIO AT BIRTH IN HARYANA

An Abstract

A recent news report showed a couple from rural Haryana, ecstatic when their daughter-in-law gave birth to a baby girl. They joyfully performed the chhati-kuan puja reserved till recently only to celebrate the birth of a baby boy.

This is not the only change. The overall attitudinal shift is also slowly and steadily reflecting in a healthier CSR – from a dismal 834 to 1000 to now a healthier 914 to a 1000

Very clearly, the on-ground efforts for sensitization are paying results.

The PMs Beti Bachao Beti Padhao (BBBP) Campaign in Haryana gave a new fillip and purpose for the implementation of PC&PNDT(Pre-Conception and Pre-Natal Diagnostic Techniques) Act.

This case study maps out the trajectories of the progressive strategies adopted by the state; courage and conviction to the cause shown by the government functionaries especially medical practitioners and auxiliary health workers and a systematic and strong day to day surveillance to save the girl child.

The study also chronicles the exemplary determination and courage of the people on ground.



HARYANA IS WITNESSING THE BEGINNING OF A NEW NARRATIVE OF HOPE IN A PREDOMINANTLY AGRARIAN SOCIETY

The PMs Beti Bachao Beti Padhao (BBBP) Campaign in Haryana gave a new fillip and purpose for the implementation of PC&PNDT(Pre-Conception and Pre-Natal Diagnostic Techniques) Act.

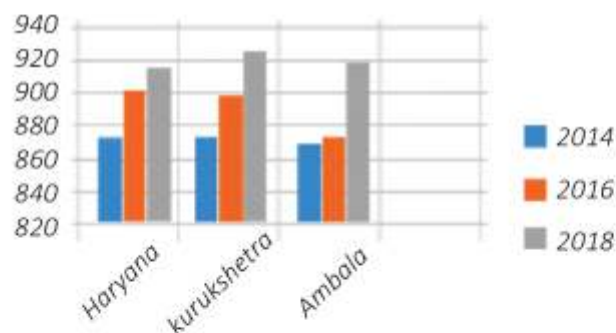
A well-conceived, holistic strategy delivered through a 24x7 technology based communication network, and the direct involvement & unshaken commitment of the Chief Minister, concerned civil servant and grassroots workers of the state, made a near impossible target possible.

This case study maps out the progressive strategies adopted by the state; the courage and conviction to the cause shown by the government functionaries, especially medical practitioners and auxiliary health workers, and a systematic and strong day-to-day surveillance to save the girl child. The study records this turnaround by documenting the field experiences in the two districts of Kurukshetra and Ambala.



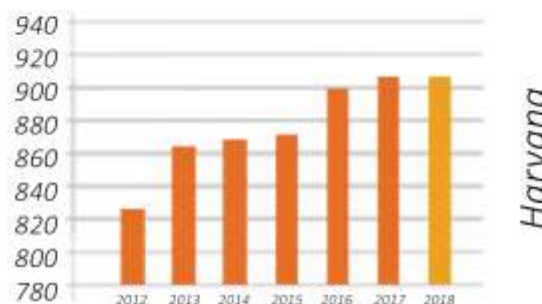
Since the launch of the programme, the Sex Ratio at Birth displayed an upward trend in all districts of Haryana (fig.1a and 1b).

Changing trends in Sex Ratio at Birth in 2014, 2016 & 2018 for the State Haryana; district Kurukshetra & Ambala



[Source: Women and Child Department / Health Department, Haryana].

Sex Ratio at Birth in Haryana 2012-2018



[Source: Records of Women & Child Department / Health Department, Haryana].

OBJECTIVES:

The core objectives of the PC&PNDT Act-BBBP campaign in Haryana is to ensure the survival of every girl child by protecting her rights from womb to tomb.

In this regard, the prerequisite is to ensure strict surveillance from the pre-natal stage to prevent any misuse of pre-conception and pre-natal diagnostic techniques.

KEY STAKEHOLDERS OF THE PC&PNDT-BBBP CAMPAIGN



AWARENESS CAMPAIGN TO SENSITIZE STAKE HOLDERS



KEY STAKEHOLDERS

The PC&PNDT Act implementation under Beti Bachao Beti Padhao campaign confronts the age-old patriarchal belief that daughter and family lineage are antithetical to each other.

To begin with the government aggregated the various functionaries of Ministry of Women and Child Development, Ministry of Health and Family Welfare and Ministry of Human Resource Development [in case of Haryana, Education Department fulfils the role of HRD], under this flagship programme of Prime Minister of India.

The collective (multi-stakeholders) endeavor of all these departments saw the campaign spread across villages, gram panchayats/ward levels, tehsils, districts, and the entire state to save, empower, and include the participation of each girl to ensure her safety, security with equality.

IMPLEMENTATION STRATEGY



The campaign is the result of convergent action between the CMO, Deputy Commissioners, Women and Child Development, Health and Education departments. The CM communicates with the HODs of concerned departments to keep a check on - the child sex ratio, cases on PCPNDT and the health of neo-natal, post-natal and infant mortality rate (IMR).

Besides, on the CMs instructions, the HODS also track the changing mindsets through local level community engagements, training and sensitization of functionaries and community members.

Accordingly a multi-pronged strategy was devised to counter deep-rooted patriarchal mindsets and orthodoxy by organizing gender sensitization drives.

For the campaign, the state govt initiated a multi-pronged strategy to counter deep-rooted patriarchal mindsets and

Foremost was an awareness campaign aimed at sensitizing various stakeholders.

- Young and newly married couples were sensitized and counseled through mass media and NGO's.
- Pregnant and lactating mothers were closely monitored by ANMs (Auxiliary Nurse and Midwife) and ASHA (Accredited Social Health Activist) workers.
- Parents and grandparents to be were imparted cultural sensibilities through radio talks, advertisements on public hoarding.
- Youth in schools and colleges were involved in rallies.
- The medical fraternity along with medical institutes, educational authorities, and policy implementers, religious organizations - all played an important role to achieve the vision of safe and inclusive society for girls.

- The Deputy Commissioner (DC), who led the programme implementation, is given a specific set of guidelines for conducting coordinated Interstate raids.
- DCs regularly debrief stakeholder departments and officers from Beti Bachao Beti Padhao, CM Secretariat.
- The campaign is reviewed through a video conferencing by the Chief Minister on a regular basis.
- The CM has established a BBBP Secretariat at his office. An advisor and a project coordinator for the effective implementation of the campaign have been appointed.
- A WhatsApp group is moderated by the Additional Principal Secretary with policy implementers like Deputy Commissioner, Commissioner of Police, SP along with the office bearers from CMO keeping a close watch.

MEDIA HOUSES & LAW ENFORCEMENT AGENCIES CREATED LEGAL AWARENESS ON THE PC&PNDT ACT AND MTP ACT



SEX-SELECTIVE DRUGS & SALE OF MTP KIT (WITHOUT PRESCRIPTION) BARRED



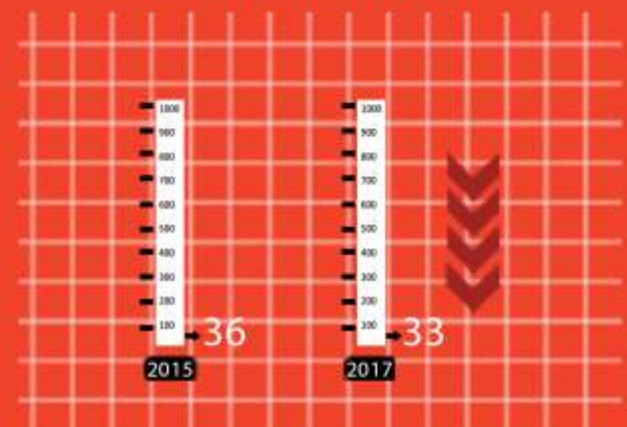
INCENTIVES PROVIDED TO INFORMERS FOR DECOY OPERATIONS

EXECUTION



IMPACT

INFANT MORTALITY RATIO

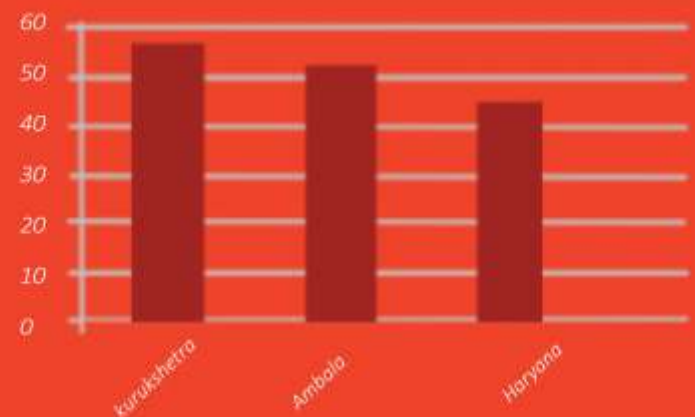


At the inception of the BBBP campaign in 2015, the Sex Ratio at Birth (SRB) was 876 girls per 1000 boys. In the year 2016 it swiftly glided up to 900 girls per 1000 boys.

In the year 2017, it reached the mark of 914 girls per 1000 boys. The figure was sustained in 2018.

In district Kurukshetra in Nov 2018, Sex Ratio at Birth, recorded 1033 female per 1000 male infants as compared to 743 females per 1000 male infants in the year 2012!!

The IMR was 36 per 1000 infants in 2015 also came down to 33 per 1000 infants in the year 2017.



Increase in the SRB from 2014 to 2018



To further strengthen the surveillance mechanism, the DG General Police addresses the Commissioner of Police, Inspector General of Police and Superintendent of Police of all districts of Haryana through video-conferencing.

- Regular meetings at Panchkula, (HQ for the State) are organized for implementation of BBBP campaign.
- Awareness rallies are conducted at village, block and district level.
- A strong emphasis is being placed on changing social customs. Kuan Pujan, Lohri, Ahoi Ashtmi, which were earlier celebrated on the birth of a male child are now being encouraged on the birth of a girl child too.
- Supporting the social change are the media houses and law enforcement agencies who work in tandem to create legal awareness on prohibited and punitive acts under the PC&PNDT Act and MTP Act.
- Decoys were incentivised to help raid clinics that were practising illegal sex determination and abortion. Raids were also conducted in liaison with the administration of neighboring states to trap quacks and doctors who ran, cross-border ops for sex determination practice.
- Also, through Anganawadi workers, ASHA workers, ANM/Lady Health Visitors (LHV), village coordinators and district coordinators, the surveillance was/is further strengthened. This involves closely monitoring expecting mothers by way of home visits to check on their overall health and wellbeing and

reasons for medical termination of pregnancy, if and when. This monitoring by the government authorities ensures that the expectant mother and the unborn child are safe and well protected.

- Efforts continue to involve district media for advocacy by following a 360-degree approach, with a focus on positive reinforcement of girl child and sustained local level engagement with the community.
- The state government has instituted an award of rupees one lakh for any person who reports of any practice of prohibited act as prescribed under Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994.
- The State has barred the sale of Sex-Selective Drugs and sale of MTP kit without the prescription of Registered Medical Practitioner (RMP). The state of Haryana has also booked the first ever case of online sale of gender kits in the country

RESOURCES UTILIZED



PC&PNDT-Beti Bachao Beti Padhao campaign has a proposed allocation of Rs. 280cr (FY 2018-19) vs GOI allocation of Rs.135.71cr(2017-18) (Source: Statement of Sh. Virendra Kumar, Union Minister of WC&D). In addition, finances were mobilized through Corporate Social Responsibility at the State level.

In Haryana, available financial, human, and technical resource are used beyond the concerned departments. Therefore, it has received widespread exposure across the state through mass media, IEC material like signage and slogan captioned on public transport and goods carrier on national and state highways.



"I have three daughters and expecting my fourth child.... I volunteered as a decoy customer to assist a raid on a clinic in UttarPradesh to protect girl child....I want daughters should be educated and empowered."Jyoti, Decoy Customer and mother of three daughters for PCPC&PNDT, Ambala.



**"IF WE CAN ERADICATE
ERADICATE GENDER D
DR. BALWINDER KAUR DEPU**



"Kurukshetra was known for Mahabharata War, now we have initiated a war to save the girl child on this land. Consequently, blocks in Kurukshetra like Ismilarbad, Durhaha, Shahabad, and Jhansa which had low in CSR in the year 2016-2017, now in the year 2018-2019 have crossed the mark of 900+ CSR."Dr. R.K Sahai, Deputy Civil Surgeon, Kurukshetra



“One reason of sex preference among people was right of the son to light his father’s pyre for ‘moksha’. Now in Haryana girls too are lighting the pyre of the deceased member of their family. Earlier people were also not aware that sex determination was illegal but stern and punitive action by the government to stop sex determination brought a change in the society. Awareness drives by the government

“...I have twice acted as a decoy customer to raid the clinics where the prohibited act of sex determination was practiced.... we ASHA workers aim to bring ‘ASHA’ (hope) to the government campaign of BBBP.” Ms. Suman Lata, Block-coordinator, Shahabad, District Kurukshetra.



“I and my wife, Sarojni are expecting our first child and we just want our child to be normal and healthy. Earlier people were concerned if their horoscope reveals any possibility of a male child, but now there is a change in the trend. People are just concerned about a normal child who is healthy. If I am even asked now, I would not want to answer a question on sex preference of a child. Mr. Girish Chandra, Astrologer (Expecting father), Ambala.



7

KEY CHALLENGES



The stakeholders in the campaign came across diverse challenges in the implementation. Some were even threatened for life. But this inspired them all the more to nab the offenders who practiced sex determination/sex-selective abortion.

- While there were legal penalties laid by the government it was evident that unless the mindset of the people was changed, the problem would recur.
- Sometimes cases became jurisdictional or territory barred, while sometimes non-cooperation of the other states delayed the operation or raids. Accordingly inter-departmental, and even interstate linkage to address the problem became essential.
- Pre-existing workload on the courts also interfered in timely delivery of justice. Special courts to help the process of courts timely and effective could help here.
- Pressure on expecting mothers by the family members in a matrimonial home too sometimes jeopardizes her, so to identify such homes are another challenge in the implementation of the scheme.
- it's important to remember that a change in the current political, administrative, and local leadership without a robust system, can also derail the current success of the campaign.

REPLICABILITY & SUSTAINABILITY



Haryana has moved up rapidly from the lowest position among the States/UTs on the parameters of CSR. Today it is one of the top five states in India with an SRB of 914 (2017/18).

By 31st March 2019, 682 FIRs were registered against a

1000 plus culprits under the PC&PNDT Act and MTP Act(Source: Health department, Haryana)

Today the daughters of Haryana are excelling in both education & sports. More girls enroll in schools, and many excel in sports - even sports like wrestling, cricket, hockey, sports which were once considered 'male' sports.

While this is evidence of the success of BBBP in the state what makes it sustainable is

- the proactive monitoring of health of women in their first trimester. This helps to foil sex determination practices and termination of pregnancy without valid medico-legal reasons.
- Many districts, wards and blocks today are following the best practices adopted by successful districts like Kurukshetra to monitor and surveillance quacks, illegal medical practitioners, and sex-selective practices.
- At the grass root, Anganwadi workers, ASHA workers, ANM to the Chief Medical Officer, District Attorney, Child Programme Officer, Deputy Commissioner till Chief Minister office continue to resist the pressures of political patronage and the money power of quacks and unethical doctors.
- ASHA workers ensure no sex determination practice happens in their district by routinely and diligently tracking ante-natal checkups of expecting mothers even in the deep interiors.
- Collaborative action of the health department, police and law implementers to conduct intra-state and inter-state raids.

IN CONCLUSION

For a just and equitable society, the girl child must be valued. And for a world that seeks sustainability it becomes even more imperative.

Evidently this needs an attitudinal correction for our largely patriarchal society as well as legal intervention. While the former takes time, systemic changes can reap quicker and encouraging returns.

This case celebrates the correct implementation of the Medical Termination of Pregnancy Act, 1971 and PC&PNDT Act, 1994, leading to a hugely improved Sex Ratio at Birth (SRB). The state which was once languishing at the bottom of the heap with a poor SRB has shown a dramatic improvement. Going forward, the resounding success of this leads us to some very encouraging best practises.

1. When the state commits to a cause it will achieve it unflinchingly. That the CM, Additional Principal Secretary to the CM and DC of Districts were at the forefront of the campaign, ensured that all plans were successfully implemented.

2 The experience of Ambala and Kurukshetra proves that involvement of various stakeholders and an integrated approach and coordinated action can reap rich dividends.

3 To make the plans comprehensive it is imperative that all stakeholder's are repeatedly sensitized plus legislative changes and law enforcement are carried out effectively. Such a comprehensive action makes it sustainable and replicable.

4. Yet none if this would have been possible without the ceaseless efforts of village & block representatives and ward & district coordinators. It was their sincere and hard work that arrested the declining CRB and SRB to put it on an upward curve. It's clear now. The responsibility of protecting the girl child rests with one and all.



Theme

Prevention from Sex Selective Elimination of Girl Child and Educate the Girl Child

Nodal Implementing Agency

Women and Child Health Department, Department of Health and Family Welfare,

Geographical Coverage

All Districts of Haryana State

Target Group

Additional Principal Secretary, Deputy Commissioners, Commissioner of Police, Superintendent of Police, CMO's along with the office bearers from Chief Minister Office, village coordinators and district coordinators Anganawadi workers, ASHA workers, ANM/ Lady Health Visitors (LHV), Doctors, Protection Officers, School Teachers, Parents, Young married couples, Girls of marriageable age & Adolescent Girls.

Years of Implementation

2015 to present date