

Children constitute almost 47 percent of the population in Meghalaya, which is higher than the percentage share of children in the population of the country. They belong to several ethnic groups and religions. The geographical location of the state also impacts their ability to access their rights.

The budget priorities for children are determined by their situation. At the same time the status of children are a reflection of the efforts made by any government to address their needs and rights through requisite programming, implementation and budgeting.

STATUS OF CHILDREN IN THE STATE

- According to census 2011, the total population for 0 upto 18 years age group is 46.52 percent and for 0-6 year's population it is 19.16 percent of the country's total population.¹
- The 50.27 percent of the child population above 7 years is male and 49.73 percent is female. Although this is a very marginal difference, given that the all the tribes of Meghalaya are matrilineal, this is a point to be noted.
- Child sex ratio in 0-6 years in Meghalaya is 970 which is much higher than the national average of 914.² But what is important is that between 2000 and 2011 there is a 3 point decrease in the ratio.
- Infant Mortality Rate (IMR) of the state is 47 which is a little bit higher than the national average of 44.3
- According to DLHS 4 (2012-13) more than 70 percent of both girls and boys in the 6-59 months
 are anaemic.
- What is more 71.7 percent in rural areas, 88.2 muslim children, 76 percent scheduled castes and 70.4 percent scheduled tribes are anemic.
- According to DLHS 4 (2012-13) almost 49 percent girls in the 6-19 year age group of school going
 girls are suffering from Anaemia.
- The Gross Enrolment Ratio within the age group 6-13 years was 153.6 during 2010-11 which is much higher than the national average of 104.3.⁴
- The Drop-out Ratio of children within 6-16 years of age was recorded as 77.89 in 2009-10 which
 is nearly 25 percent higher than the National average.⁵
- As per National Crime Records Bureau (NCRB), a total number of 218 cases are recorded as crime against children.⁶

¹ Census of India 2011

ibid

³ ibio

⁴ Economic survey of India,2012-13

⁵ Abstract of selected Educational Statistics.2009-10

	Child Rights Index											
State	Overall	Overall	Birth	Sex	Early	Child	Child	Edu-	Health	Crimes	Crimes	Crimes
	National	GDP	Regis-	Ratio	Child-	Mar-	Labour	cation		Against	Against	Ву
	Ranking		tration		hood	riage	5-14			Children-	Children-	Children
					Care					Incidences	Victims	
Kerala	1	9	1	3	21	29	1	2	1	14	15	7
Karnataka	2	7	6	8	12	26	21	7	10	1	6	4
Maharashtra	3	1	8	27	14	19	7	4	7	4	11	3
Tamil Nadu	4	4	2	6	18	25	8	6	3	17	9	13
Andhra	5	3	18	11	20	28	24	19	11	2	2	11
Pradesh												
Gujarat	6	5	9	22	16	10	10	9	19	3	16	5
Rajasthan	7	8	10	26	24	24	26	18	22	5	5	2
Punjab	8	13	1	20	15	4	6	15	12	10	13	16
Himachal	9	20	1	16	13	15	23	3	5	9	24	18
Pradesh												
Haryana	10	12	7	28	26	17	12	12	16	7	8	15
Madhya	11	11	17	21	8	23	20	17	23	6	3	8
Pradesh												
Delhi	12	10	1	24	27	11	2	1	14	19	17	19
Uttaranchal	13	19	16	25	29	14	5	13	13	15	18	14
Orissa	14	15	4	17	7	21	13	20	18	21	20	10
West Bengal	15	6	3	9	23	27	14	26	15	12	7	17
Bihar	16	14	14	13	25	18	11	29	24	13	19	1
Jharkhand	17	17	21	15	9	16	16	28	27	11	1	6
Uttar	18	2	19	23	10	13	9	24	28	16	10	9
Pradesh											,	
Chhattisgarh	19	16	11	5	28	20	22	16	20	8	4	20
Goa	20	22	1	19	19	9	3	22	2	26	23	23
Tripura	21	23	1	10	5	22	4	11	17	24	27	21
Assam	22	18	12	7	11	12	15	25	29	20	22	12
Mizoram	23	28	1	20	4	2	29	5	6	22	28	28
Jammu &	24	21	15	29	22	7	19	21	8	18	12	24
Kashmir	25	20	-	12	1.7	C	20	1.0	-	25	25	26
Sikkim	25	29	5	12	17	8	28	10	4	25	25	26
Meghalaya	26	24	12	10	6	<u>3</u>	25	23 14	21	23	21	22
Manipur	27	25	13	18	3		17		9	28	14	29
Nagaland Arunachal	28 29	26 27	20	14	2	<u>1</u> 5	27 18	8 27	26 25	29	29 26	25 27
Pradesh	29	2/	20	4			18	Σ/	23	27	20	27

Ranking 1-5 6-10 11-14 15-19 20-24 25-29

Source: India: Child Rights Index. 2011. HAQ: Centre for Child Rights

BUDGET FOR CHILDREN (BfC) IN MEGHALAYA: 2015-2016

Budgets are the most solid expression of a government's priorities, performances, decisions and intentions both at the national as well as the level of the states. This budget for children (BfC) in Meghalaya analysis is an attempt to understand the financial priorities of the government in regard to its commitments for the children in the state. The question being asked is how far has the Government been able to keep its promises towards the rights of the children through adequate budgetary provisions in the 2015-2016 state budget?

While similar attempts to study the allocation and spending for children have been made at the national level since 2000 and in other states, 6 this is the first time it is being attempted in Meghalaya.

Since this is the very first attempt of its kind it is important to provide a quick explanation about BfC. Budget for children is not a separate budget. It is merely an attempt to disaggregate from the overall allocations made, those made specifically for programmes that benefit children. This enables us to assess how far the policy and programme commitments are translated into financial commitments. This would also indicate political commitments of the government towards its young citizens.

Budget for children (BfC) is not a separate budget. It is an attempt to disaggregate from all allocations made, those made specifically for children.

Keeping in conformity with the definition of the child under the United Nations Convention on Rights for Children (UNCRC), a person up to the age of 18 years is defined as a child for this study.

However, children are not a homogeneous group. Their programme needs are determined by their age, gender, socioeconomic status, physical and mental well-being and where they live. For example, nutrition and health inputs in the early childhood years are critical for the child's growth. Therefore, inputs and interventions on these aspects in the early years are critical. In the later years, enrolment and retention in schools becomes crucial, as does the issue of prevention of entry into the labour market. The programme interventions in the adolescent years need to target their educational, health and sexual needs as well as their transition into adulthood. Besides, children who are especially socioeconomically vulnerable and children with disability need special attention. All these must be reflected in the budget.

The honourable Chief Minister of Meghalaya, Dr Mukul Sangma has placed the budget 2015-16 on 18th March, 2015 in the State Legislative Assembly. Dr. Sangma spoke about the government's commitment to women and children:

"The welfare of women and children in the State is addressed through the Integrated Child Protection Scheme (ICPS). The Government also implements the supplementary nutrition programme under Integrated Child Development Scheme (ICDS) for children, pregnant and lactating mothers and adolescent girls covering 5.20 lakh beneficiaries in 41 ICDS Projects. The programme will cover another 1.05 lakh beneficiaries during 2015-16, thereby, extending the nutrition coverage to 6.25 lakh beneficiaries under the re-structured ICDS. Financial assistance and support to NGOs engaged in the welfare of Women and Children will continue, and 85 NGOs have benefitted during 2014-15. For the welfare of the physically challenged, significant achievement has been made in providing services such as 1,096 scholarships, vocational training to 87 differently abled, grant for uniforms and books and conveyance allowance to 1,338 students."7

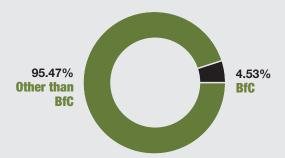


See http://www.haqcrc.org/budget-children Budget Speech 2015-2016, Government of Meghalaya.

MAJOR HIGHLIGHTS OF BfC 2015-16

- Children have been allocated 4.5 percent share in the State budget in 2015-16. However, what is a matter of concern is that this share has reduced from almost 8.6 percent in 2014-15
- While the share of children has reduced by over 50 percent between last fiscal year and the present, the overall state budget has reduced by only 6.5 percent what could be the reason for this sudden fall in three years? Has the situation of children improved drastically leading to a need to cut the budget?

Share of BfC (BE) in Meghalaya Budget 2015-2016 (In percent)



"While, allocations in the social and welfare sectors have been protected, it is expected that the States' will be bringing in greater share to give fillip to government spending in these sectors".

Source: Fiscal Policy Strategy Staten http://indiabudget.nic.in/ub2015-16

Of every 100 rupees in the Meghalaya Budget, Rs. 4 and 53 paise has been allocated for children

Table 1.1: Share of Children in the State Budget (in crore)						
Year	State Budget(BE)	BfC	Percentage of BfC			
2013-14	24803.45	1497.06	6.03			
2014-15	31140.09	2677.61	8.59			
2015-16	29127.50	1319.73	4.53			

• This cut in budget allocation is particularly alarming in the context of the 14th Finance Commission recommendations where in state will have more autonomy and fiscal space. As Dr. Sangma says in his speech, "One of the challenges emerging out of the recommendations of the 14th Finance Commission is creating the fiscal space for supporting ongoing projects under Special Plan Assistance which amount to over ₹ 2000 crore. We have resolved that we shall vigorously pursue this matter with Government of India so that the State receives all its due entitlements to complete these ongoing projects in a time bound manner."



Meghalaya State Budget & BfC (in Crores)



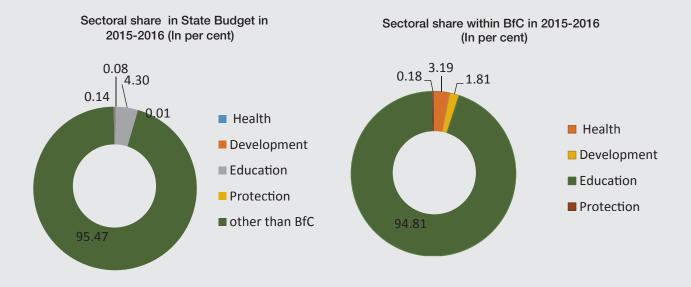
• It is in this context that it is to be noted with concern that the Budget Estimate (BE) for 2015-2016 for many schemes under the Centrally Sponsored head such as National Iodine Deficiency Disorder Control Programme, Integrated Child Development Scheme, SABLA, Sarva Shiksha Abhiyan, Integrated Child Protection Scheme etc. have received no allocation.

Table 1.2 Sectoral share within BfC (in percent)						
Year	Health	Education	Development	Protection		
2013-14	3.92	80.89	13.73	1.46		
2014-15	1.58	83.02	14.59	0.81		
2015-16	3.19	94.81	1.81	0.18		

• The sectoral share of allocations (Health, Development, Education and Protection) is calculated both as share of the state budget as well as within the overall BfC share. All sectoral shares have seen a fall within the overall state budget from 2013-14 to 2015-16 (table 1.3). This is an important indicator to restore attention to children in the state.

Table 1.3 Sectoral share in State Budget (in percent)						
Year	Health	Education	Development	Protection		
2013-14	0.23	4.88	0.82	0.09		
2014-15	0.14	7.22	1.27	0.07		
2015-16	0.14	4.30	0.08	0.01		

As is the case with all budget for children in India as well as other countries, the maximum share is for the education sector. However, this 94 percent of BfC (in Meghalaya in 2015-16) for education is much needed and would be creditable had it not been for the fact that it appears disproportionate context of the very little resources for the



health, development and protection sector initiatives. Moreover, while the allocated share for education sector has increased within the BfC, its share within the overall state budget has decreased.

- The Health sector received a share of 3.2 percent in BfC and 0.14 percent in the state budget in the current year which was comparatively higher to the previous year.
- Surprisingly, development sector which always received an average share in the state budget has witnessed a very
 little share of 1.8 percent within BfC and 0.08 percent in the state budget in 2015-2016. There has been a more
 than 12 percent slash in the programmes in the development sector in the 2015-2016 as compared to the previous year.
- Similarly, the least priortised child protection continued to receive the lowest share of 0.18 percent within BfC and 0.01 percent in the state budget this year.

CHILD HEALTH

The share of health sector for children, which is calculated by taking into account the child specific health schemes, has increased from 1.58 percent of BfC to 3.19 percent, which is welcome, except that there had been very sharp decline in the share between 2013-14 and 2014-15.

- The share of allocation for children's health in Meghalaya in 2015-16 remains lower than in 2013-14 both within the overall state budget as well as within the BfC. One of the reasons for this is the non-allocation of any fund under the centrally sponsored scheme like National lodine deficiency control programme. This scheme received an allocation of ₹ 0.59 crore under General Areas and ₹ 0.15 crore under Sixth schedule areas in its previous year.
- There are some other schemes too that saw a cut in allocation, all in the sixth schedule areas (see table 1.4). This needs to be noted with concern.

Health sector received a total allocation of ₹ 42.16 crore in 2015-16 which has slightly decreased by ₹ 0.62 crore from the previous year's allocation i. e ₹ 42.78 crore in 2014-15.

However, schemes like expanded Immunization/ universal Immunization Programme, Child Safe Motherhood Project, Special School Health checkup, Pulse polio Immunization programme are mentioned in the Budget document of 2015-16 but there was no trace of showing fund under those schemes.

 In the total allocation under health sector, the General Area's allocation is ₹21.69 crore and allocation made under Sixth Schedule part II areas is ₹20.47 crore which has increased by 1.02 percent and decreased by 3.94 percent respectively in the current year.

Over 60% children in Meghalaya malnourished

Manosh Das, TNN | Aug 28, 2013, 06.12AM IST

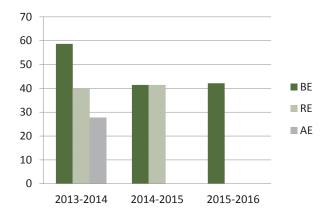
SHILLONG: Around 64.4 percent of the children in the state are suffering from malnutrition while 47.2 percent of the women are anaemic. This was revealed in a heath camp organized by the Martin Luther Christian University (MLCU) in Moodymmai village under Thadlaskein block in the Jaintia Hills district.......

A total of 336 people attended the camp, including 143 schoolchildren. The most common diagnoses were nutritional anaemia, dental caries, cataract, allergic conjunctivitis and refractive errors.....

Last year, the Meghalaya government had decided to conduct a research to understand the reasons for the high prevalence of anaemia in the state. "It was found that many women died after childbirth due to lack of blood. This is also one of the reasons for the increase in the maternal mortality rate in the state," a health official said.

Source: http://timesofindia.indiatimes.com/city/guwahati/Over-60-children-in-Meghalaya-malnourished/articleshow/22110509.cms

BE, RE & AE under Health Sector (in Crore)



All the major schemes like *Post Partum Programme at District level, School Health Programme, BCG programme, Training of Nurses and other Para Medical, Prevention and Control of Malaria, Manufacture of Sera & Vaccine, Maternity & Child Welfare* both under General Areas and Sixth Schedule part II areas have seen a considerable increase in the allocation and this notably leads to overall improvement in the allocation under health sector this year.

Table 1.4 Allocation under major Schemes in Health Sector (in crore)							
Schemes	General Areas		Sixth Schedule Areas				
	2014-15	2015-16	2014-15	2015-16			
School Health Schemes	0.28	0.29	0.14	0.15			
BCG programme	0.32	0.35	0	0			
Training of Nurses and Other Para Medical	0.95	1.04	1.45	1.04			
Prevention and Control of Malaria	1.19	1.26	9.29	9.66			
Prevention and Control of Small pox	0	0	2.18	2.54			
Manufacture of Sera and Vaccine	6.97	7.57	0	0			
National lodine Deficiency Disorders Control Programme (CSS)	0.59	0	0.15	0			
Maternity and Child Welfare Scheme	0.04	0.05	1.37	1.42			

Under Sixth Schedule areas component the centrally sponsored scheme like Scheme for Auxiliary Nurses and Mid-Wives Training Programme (Female Health Workers), failed to receive any allocation this year (In the year 2014-2015 an amount of ₹ 1.34 crore was allocated for this scheme)

Allocation for Prevention and Control of Smallpox Scheme under General Area is completely neglected both in 2014-15 and 2015-16 while under the Sixth Schedule areas , this scheme has been favoured with an allocation of ₹ 2.18 and ₹ 2.54 crore respectively. In fact, the fund allocated under the scheme in the current year was almost 16 percent higher as compared to the previous year in the Sixth Schedule Districts.

The tragedy of child health is that the government considers child health interventions as those meant for infants.

 Adolescent health and diseases remain neglected areas as most of the child health related initiatives are confined to the young child.

CHILD DEVELOPMENT

Early childhood care and development is an important area for which the state is committed to provide adequate resources. Along with the nutrition and other development related inputs are critical for the healthy growth of mind and body of children. But, the share of development sector was very poor, both in the state budget and within BfC in 2015-16.

MAJOR THRUST: AS PER BUDGET SPEECH 2015-2016

- Promotion of health care by strengthening and consolidating the existing health care facilities and extension of outreach services through the network of 12 hospitals, 28 Community Health Centres, 110 primary Health Centres, 422 primary Health Sub-centres and 12 dispensaries is the main thrust of Government. Government will not spare any effort to see that proper health care delivery services reach the people.
- Implementation of the Universal Immunization programme will be further strengthened to bring down the present rate of Infant Mortality to below 30 as per the goal set under the National Population Policy.

"Pointing out that teenage pregnancies are very common in Meghalaya, Dr Lyngwa said that the effects of pre-marital intercourse should be discussed frankly and openly by the parents and teachers with young people of both sexes.

Dr Lyngwa also stated that most of the boys in the state do not own up to their responsibility. "When a teenaged girl becomes pregnant the boy is equally responsible and it is his duty to own the baby and share the burden of the mother," she said.

She also mentioned that many young girls who delivered their baby without any medical supervision at home could be at grave risk."

Shillong Times. 'Total fertility rate in Meghalaya alarming', By Our Reporter | Saturday, August 11, 2012

- Even if one were to confine the examination of allocations to that for the young child, especially through the Integrated Child Development Services (ICDS), the amount of fund allocated under this sector is not enough to comprehensively meet the development needs of the large number of children in this age group.
- Given the Supreme Court Directives for the universalisation of ICDS to address hunger and malnutrition, and in the light of the number of children in Meghalaya's who are suffering from malnutrition, it cannot but be asked as to why the allocation for this sector has been reduced by nearly 94 percent (from ₹ 395.04 crore in 2014-2015 to ₹ 23.88 crore in 2015-16).

The Government also implements the supplementary nutrition programme under Integrated Child Development Scheme (ICDS) for children, pregnant and lactating mothers and adolescent girls covering 5.20 lakh beneficiaries in 41 ICDS Projects. The programme will cover another 1.05 lakh beneficiaries during 2015-16, thereby, extending the nutrition coverage to 6.25 lakh beneficiaries under the re-structured ICDS.

Source: Budget Speech 2015-2016

Table 1.5 Allocation under major schemes in Development Sector (in crore)							
Schemes	General Areas		Six Schedule Areas				
	2014-15	2015-16	2014-15	2015-16			
Youth camp	0.005	0.005	0.003	0.003			
Scholarship for Physically handicapped	0.006	0.006	0.45	0.45			
ICDS	0.10	0.10	4.84	4.84			
ICDS (CSS)	22.10	0	235.53	0			
Incentive to Anganwadi	0.008	0.008	0	0			
Training Programme of Anganwadi workers under ICDS	1.26	0	0.22	0			
Kishori Shakti Yojana	0.43	0	0	0			
SABLA	0.83	0	0	0			

This is due to non-receipt of any allocation under the schemes like Kishori Shakti Yojana, SABLA, Training programme of Anganwadi workers under ICDS and the central share under ICDS etc in the current financial year i. e. 2015-2016. All these schemes had very low allocations to begin with - Integrated Child Development Services is one of the major centrally sponsored schemes for child development. But it is very disappointing to see that it failed to receive the attention and no allocation was made under the central share.

• Though the sixth schedule areas received higher allocation of ₹ 4.839 crore against the scheme ICDS in the year 2015-16, and the General Areas could avail a very minimum allocation of ₹ 10.10 lakhs under the same.

CHILD EDUCATION

Education is considered to be the most important input in promoting human resource development to achieve rapid economic and technological progress. Keeping these objectives in view, the Government has initiated a number of innovative flagship schemes like Sarva Shiksha Abhiyan (SSA), Mid-Day Meal Scheme (MDM), Rashtriya Madhyamik Shiksha Abhiyan (RMSA) etc.

Considering the importance of education of children at the elementary and secondary level, it has always been favoured with a higher allocation as compared to the other sectors. However, given the importance accorded to education it is a matter of concern that there have been a 44 percent cut in

- Teacher training has been undertaken to train untrained teachers in 78 centres through National Institute of Open Schooling.
- Mid-Day Meal scheme has covered more than 11000 elementary schools and more than 5.7 lakh children of the state.
- Government has provided funds for kitchen sheds and cooks at all the schools.

Source: Budget Speech 2015-2016, Meghalaya

the allocation in 2015-16 as against the allocation last year (it is ₹ 1251 crore in 2015-16 as against ₹ 2247.70 crore in 2014-15). In fact as can be seen from Table 1.6, some of the important schemes have not received any allocation at all, especially in the Sixth Schedule Areas. Why is that so?

Minutes of the 9th meeting of Project Approval Board held on 2.4.2014 states the following:

- The state had proposed 47 primary schools, 6 Upper Primary and 3 residential hostels for 2014-15. After discussion 5 primary schools and 2 upper primary schools were approved.
- The state committed to complete the coverage of toilets and drinking water in all the schools.
- PAB expressed concern about the poor performances under special training to cover out of school children in two blocks where children were out of school due to involvement in economic activities. The state was strongly asked to address this urgently.
- PAB approved an outlay of 1055.99 lakhs for free text books for children not previously covered by the statement of the
- PAB approved an outlay of 1419.68 lakhs for two sets of uniforms to all girls, SC & ST and BPL boys @ RS 400 per child.
- PAB approved 6 days non-residential training for 1100 teachers focusing on teaching of Mathematics etc and also follow up a cluster level for 5 days for same teachers and 6 days of non-residential training for 845 resource persons.
- At Upper Primary level the state has decided to focus on teaching learning of Mathematics.
- PAB approved Mathematics kits for 74 schools at a unit cost of rupees 1000 per school.

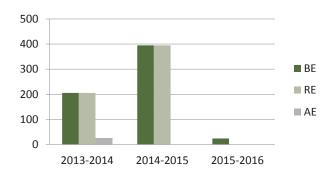
Schemes/Programmes	General Areas	Sixth Schedule	Sixth Schedule Areas	
	2014-15	2015-16	2014-15	2015-16
Elementary Education	247.26	253.34	357.27	370.49
Secondary Education	95.08	76.55	176.36	184.78
Rastriya Madhyamik Shiksha Abhiyan	1.50	1.50	0	0
Sarva Shiksha Abhiyaan	150.00	162.00	20.00	20.00
Sarva Shiksha Abhiyaan (CSS)	500.00	0	0	0
Mid-Day Meal Scheme	12.00	12.00	15.80	15.80
Mid-Day Meal Scheme (CSS)	150.00	50.00	0	0
Middle English school Scholarship	0.03	0.03	0	0
Secondary School Scholarship	0.00	0.00	0.05	0.05
Merit Scholarship	0.03	0.03	0	0
SCERT	3.95	4.55	0	0
Teachers' training	5.20	5.20	0	0

• It is to be noted that more emphasis was laid on elementary education and it had been favoured with more than thrice of the amount allocated under secondary education, in order to fulfill the legal commitment of Right to Education. Elementary education received 76.8 percent of the fund while secondary education has got 23.2 percent only. The allocation of funds at the secondary level becomes critical to ensure that children do not drop out of school before completing at least class 10 the minimal qualification for entry into any professional skill training courses.

A close examination of some of the flagship schemes is as follows:

Sarva Shiksha Abhiyan which aimed at universalisation of elementary education by ensuring quality education to all children in the age group of 6 to 14 years has also failed to receive any allocation from the centre in the current year's budget. However state share increased by only 8 percent in this year as compared to previous year. Sixth schedule areas are being neglected in getting any state share.

BE, RE & AE under Development Sector (in Crore)



- Mid-Day Meal scheme (MDM) which plays a significant role in universalisation of elementary education was not being favoured with an encouraging allocation in the current year as central share under this scheme was one third to the previous year's amount.
- Rashtriya Madhyamik Shiksha Abhiyan (RMSA), though considered as a comprehensive and integrated flagship programme for ensuring 100 percent enrolment in the state, there was no enhancement in the allocation under it in the current year and it had received an allocation of ₹ 1.5 crore both in the year 2014-15 and 2015-16 under the General Areas component. Surprisingly there was no allocation under the most vulnerable Sixth schedule areas.

A miniscule amount of ₹ 3 lakhs to ₹ 4 lakhs was allocated for offering scholarship to the children at primary as well as secondary level is considered to be very meager. Thus it does not reflect any seriousness in implementing the schemes and achieving the target set forth by the government.

Sixth Schedule areas are being deprived of getting any fund under the various training programmes of teachers in the current year.

Allocation under SCERT was enhanced by only 15 percent in 2015-16 as compared to previous year under General Areas. On the contrary there was no trace of getting any fund under the Sixth schedule areas.

CHILD PROTECTION

Trafficking, child labour and other forms of abuse and exploitation are major concerns in the state that have been reported widely.

The National Commission for Protection of Child Rights has found that "several children from Meghalaya were being sent to Karnataka to pursue education because of the urge of poor parents for quality education. Also the pull factor was that the institutions in Karnataka wanted children and Lei Synshar Cultural Society of Jaintia Hills facilitated travel and admission. The terms of schooling differed and depended on the background of children. Poor parents paid for the transportation of children and education was free. They were kept in ashrams, or housed with a couple who had several children from north east in their house. None of these spaces were inspected or regulated. Quality of education was negligible and children were compelled to learn Kannada. Children lost contact with their homes, felt homesick and

Child labour rampant in Meghalaya

Manosh Das, TNN | Jan 9, 2013, 11.28AM IST

SHILLONG: Meghalaya is not a good place for children to grow up in. Child labour, especially in coal mines, has always been rampant in the state. And now it is earning the dubious distinction of being a hotbed of child 'soldiering'. Insurgent groups in the state are unlawfully recruiting children as combatants or for labour. Needless to say, they exploit them sexually as well.

http://timesofindia.indiatimes.com/city/guwahati/Child-labour-rampant-in-Meghalaya/articleshow/17950520.cms

Children Toil in India's Mines, Despite Legal Ban

Gardiner Harris, FEB. 25, 2013

Poverty, corruption, decrepit schools and absentee teachers are among the causes, and there is no better illustration of the problem than the Dickensian "rathole" mines here in the state of Meghalaya...

 $Source: Full\ Text\ available\ at\ http://www.nytimes.com/2013/02/26/world/asia/in-india-missing-school-to-work-in-the-mine.html?_r=2$

suffered a lot. The well to do children paid hefty amounts as school fees and had better facilities."8

It has also found that, "Around the Lad Rymbai area of Jaintia Hills, there has been a phenomenal demand for cheap labour to work in the coal mines. Children are preferred because they are the cheapest form of labour to work in inhuman conditions and also because of the mining practice famously known as 'rat holes mining' as it is humanely not possible for an adult to enter those holes to extract the coal. Children are also engaged in loading of coal, sorting of coal according to the size, cleaning the trucks and helping the drivers."

⁸ http://www.ncpcr.gov.in/view_file.php?fid=463

In this context, it is truly a matter of concern that not only does the protection sector receive the lowest miniscule share of the budget (0.18 percent in the State Budget and 0.01 percent in BfC), there has been an almost 90 percent cut in allocations for this sector. (It has gone down to ₹ 2.44 crore in 2015-16 from ₹ 21.83 crore in 2014-15).

In fact, what one sees is token amount allocated to prevent and protect children from abuse, neglect and exploitation. It is even less than the cost of a single vehicle that the government buys for itself, or spends in organising an event.

Non-allocation of central share under ICPS in the current year is mainly responsible for the overall shortfall in the budget under protection sector

Table 1.7 Allocation under major schemes in Protection sector (in crore)							
Schemes	General Areas		Sixth Schedule Areas				
	2014-15	2015-16	2014-15	2015-16			
Services in need of care and protection	0.09	0.09	0.06	0.06			
SCPCR	0.13	0.13	0	0			
ICPS (State share)	0.50	0.50	0	0			
ICPS (CSS)	19.00	0	0	0			
Protection of Children against Sexual offence (POCSO Act- 2012)	0.03	0.03	0	0			

The scheme Integrated Child Protection Scheme (ICPS) was designed to ensure that children do not become vulnerable to abuse and exploitation by creating a protective environment.

Although it has received an allocation of ₹ 19 crore in 2014-15, why has it failed to receive any share under the same head in the current year? The allocation in other schemes under the sector remained almost same in the two subsequent years 2014-15 and 2015-16.

The Sixth Schedule areas were deprived of availing any fund under the schemes like State Commission for of Child Right (SCPCR), Integrated Child Protection Scheme, Protection of Children against sexual offence both in the year 2014-15 and 2015-16.



CONCLUSION

It has been revealed from the Budget Speech, 2015-16 that the State's own revenue is reduced by around ₹ 600 crore annually on account of the ban on coal mining leading to a fall of 6.5 percent in the budget for the current year in Meghalaya. But despite the scarcity of resources, how can one explain the 50 percent reduction in allocations for children?

Despite receipt of major share, the Education sector of the state failed the student's need. However, as per the Meghalaya's Chief Minister's Budget speech 2015-16, Government's initiative on setting up three Pinemount International Schools as well as other residential schools in the state is indeed an encouraging aspect.

Moreover, the major flagship programmes that have been launched under centrally sponsored schemes time to time, like Integrated Child Development services (ICDS), Integrated Child Protection Schemes (ICPS), SABLA, Kishori Shakti Yojana(KSY), Sarva Shiksha Abhiyan (SSA) etc failed to receive any central share during the current year. What does that reflect in terms of commitment to children?

Further, it is much regrettable that the vulnerable Sixth Schedule areas are being deprived of receiving funds against different schemes under priority sectors.

RECOMMENDATIONS

- Children's concerns need to be given priority and reflected in budget commitments.
- The inconsistent trend of allocations under different sectors needs to be address most effectively.
- There is an increasing need of ensuring proper justice on constant flow of fund under all the schemes
- The problems of most vulnerable Sixth schedule areas need to be addressed effectively.
- Under the health sector especially the schemes oriented to the benefit of children must be strengthened through the services of National Rural Health Mission.
- Since many schemes like Sarva Shiksha Abhiyan,
 Rastriya Madhyamik Shiksha Abhiyan etc have been
 launched to achieve time bound goals, effective
 planning, sincere management and proper delivery of
 services will only be able to lead to their total success.
- The state mainly depends on central fund due to the limitation of its own financial resources. So a constant flow of fund from the central government is most essential.
- The state must explore all possible sources to generate additional revenue which will facilitate in maintaining fiscal, social and economic stability.
- Follow-up-action or proper monitoring is to be done time to time to ensure the transparency in implementation of the schemes.

