# Budget for ASSAM 2012-13 to 2016-17









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'Mankind owes to the child the best it has to give', thus ends the preamble of the Declaration of the Rights of the Child 1959. It is 57 years since these words were adopted and it is appropriate to ask: are we, the older lot of the humankind, giving the best to our children? It is with such a question in mind that this exercise of looking at the Assam State budget from the lens of a child is undertaken.

Children are a significant section of the population in Assam: they number 1,27,68,623 or constitute 40.92 per cent of Assam's 0-18 years' population. They represent the next generation and in their hands rest the possibility of creating a better world. Their proper growth and healthy upbringing has a huge bearing on the future of Assam. It is of paramount importance that adequate financial resources are allocated for their growth and development.

Budget allocations are a reflection of a concerned government's political and policy priorities for its citizens. Should children not be a priority for the government? Put another way, will inadequate allocation of funds for children alter the wellbeing of the nation? These are some overarching questions that guide the present

General Comment No. 19 (2016) on public budgeting for the realization of children's rights (Art. 4): "to assist States parties in the implementation of article 4 in relation to public budgets. It identifies States parties' obligations and makes recommendations on how to realize all the rights under the Convention, especially those of children in vulnerable situations, through effective, efficient, equitable, transparent and sustainable public budget decision-making."

budget for children study in Assam.

The Government of India, in 2008, asserted its commitment to its

#### **Budget for Children (BfC)**

The Ministry of Women and Child Development defines Child Budget as:

The total magnitude of child specific budget outlays, i.e. the total magnitude of budget outlays on child specific programmes/schemes, is what we refer to as the 'Child Budget'. Thus, 'Child Budget' is not a separate budget, but a part of the usual government budget.

In the context of the Union Government, 'Child Budget' refers to the total outlays for child specific schemes in the Union Budget.

'Child Budgeting' has emerged as an analytical tool for assessing the priority accorded to children in public spending in the country.

Source: http://wcd.nic.in/ar0708/English/Chapter-7.pdf

children by inserting a separate statement for children (Statement 22) in its Expenditure Budget. In a significant move, the United Nations Committee on the Rights of the Child adopted a general comment in 2016 that emphasizes careful budget decision-making which addresses the concerns of children.

## The Ministry of Women and Child Development has recognised the importance of the inclusion of Statement 22 in its Annual Report 2015-16 (page 54):

A statement of 'Child Budgeting' was introduced in the Union Budget for 2008-09 (i.e. Budget Provisions for Schemes for the Welfare of Children, Statement 22, Expenditure Budget Vol. I, Union Budget 2008-09). This statement has been carried over in subsequent Union Budgets and captures all child specific schemes in the Union Budget. In 2008-09, when the 'Child Budgeting' statement was introduced in the Union Budget, the 'Demands for Grants' with child-specific schemes included those of the Ministries of Women and Child Development, Human Resource Development, Health and Family Welfare, Labour and Employment, Social Justice and Empowerment, Tribal Affairs, Minority Affairs and Youth Affairs and Sports. The 'Child Budgeting' statement now covers 18 'Demands for Grants' (including Union Ministries/ Departments of Atomic Energy, Industrial Policy and Promotion, Posts, Telecommunication and Information and Broadcasting among others), marking a significant increase from an initial eight.

Of the 17 Sustainable Development Goals (SDGs), five engage with concerns of children: end poverty, end hunger, ensure healthy lives, ensure equitable education and ensure gender equality. While all these national and international commitments bode well for the welfare of children, it might be useful to fact check these commitments against the reality on the ground.



#### **GOAL 1**

End poverty in all its forms everywhere



#### **GOAL 2**

End hunger, achieve food security and improved nutrition, and promote sustainable agriculture



#### GOAL 3

Ensure healthy lives and promote wellbeing for all at all ages



#### **GOAL 4**

Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all



#### **GOAL 5**

Achieve gender equality and empower all women and girls

### Sustainable Development Goals (SDGs): What they mean for India's children

The SDGs place focus on children in several important ways. Not only is the entire agenda important for children, given the impact all the goals will collectively have on today's children and tomorrow's adults, but there are specific commitments for children. These include ending preventable deaths, ending hunger and ensuring children's access to the nutrition that will help them thrive; promoting learning and educational outcomes for all children and ensuring children live without fear of violence, through efforts to end all forms of violence and promote peaceful and just societies.

9 October 2015, Ramya Subrahmanian. www.knowviolenceinchildhood.org/blog/sustainable-development-goals-what-they-mean-for-indias-children/

Recognising the importance of the Sustainable
Development Goals, the government of Assam has come out with a vision and document.



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



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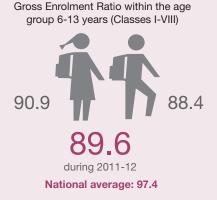
37.4%

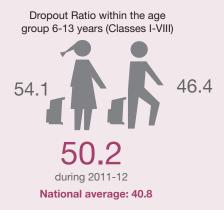


20.2%









40.92% Total population in the 0 to 18 years age group.

- According to the Sample Registered Survey (SRS) 2013, the maximum Infant Mortality Rate (IMR) in the country has been observed in Assam at 54 while the national average is 42 and the minimum IMR is 12 in Kerala. While the rural IMR in Assam is 56, the urban IMR is 32, thus registering a huge rural-urban
- The Under Five Mortality Rate (U5MR) in Assam is 73 as against the national average of 59. The minimum U5MR has been observed in Kerala at 12.2
- While overall sex ratio of Assam rose from 935 in 2001 to 957 in 2011, the child sex ratio of 0-6 age group fell from 965 to 962.3
- Assam has recorded a disturbing decline in child sex ratio in rural areas with a dip of 10 points in 2011 against the data of 2001 even as more than 85 per cent of the state's population continued to live in rural areas.4
- According to National Family Health Survey (NFHS)-4, as much as 35.7 per cent of children between 6-59 months are anaemic. Similarly, approximately 46.1 per cent of non-pregnant women

- and 44.8 per cent of pregnant women between 15-49 years are anaemic.5
- According to SRS 2013, Maternal Mortality Rate (MMR) in Assam at 300 per 1 lakh live births is the highest in the country, the corresponding national number being 167.6
- Nutrition status of children below five years is very alarming. According to World Health Organisation (WHO) standards, Assam has very high prevalence of underweight children (30.8 per cent), high prevalence of stunting (37.4 per cent) and critical prevalence of wasting (20.2 per cent).7
- According to Assam's Crime Investigation Department, as many as 4,754 children went missing from January 2012-October 2014. The number of female children who go missing every year is more than double of male children. (The Times of India, 4 November 2015).
- As per the data of the National Crimes Records Bureau there has been an increase of 623.21 per cent in crimes against children between 2012 and 2015 (from 392 cases in 2012 to 2835 in 2015).

http://www.censusindia.gov.in/vital\_statistics/SRS\_Reports\_2013.html

http://www.census2011.co.in/census/state/assam.html

https://www.google.co.in/search?newwindow=1&site=&source=hp&q=child+sex+ratio+i n+assam&og=child+se

http://rchiips.org/nfhs/pdf/NFHS4/AS\_FactSheet.pdf

http://www.censusindia.gov.in/vital\_statistics/SRS\_Reports\_2013.html

http://www.censusindia.gov.in/2011census/hh-series/cab.html

#### **Budget for Children in Assam**

In Assam, BfC or Budget for Children exercise was first undertaken in 2006 by HAQ: Centre for Child Rights, New Delhi and North Eastern Social Research Centre (NESRC), Guwahati. Since then, apart from the annual budget analysis exercise, which is published in the form of handout every year, two other volumes containing trend analysis for five years each of the Assam State budget have also been published.

Till 2006-07, the share of children in the Assam Budget was in double digits. In 2005-06 it had gone up to 16.19 per cent. Then the fall started. It fell to 10.33 per cent in 2006-07, finally falling to 5.53 per cent in 2007-08. Since then it was a downslide. In 2015-16 there has been a slight increase.

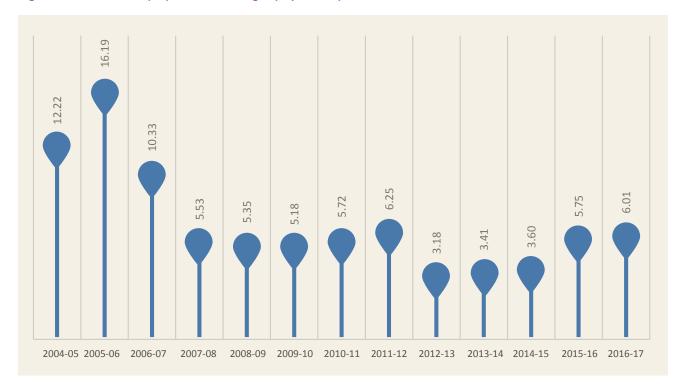


Figure 1: Share of BfC (BE) in Assam Budget (In per cent)

This five-year analysis (2012-13 to 2016-17) allows us to study the trend of allocation and expenditure for children. The context for the analysis is the promise made to the children through national and state commitments in the form of laws, policies, programmes and schemes.

The situation of children and the needed outcomes determine the nature of investment required. A look at the situation of children in Assam reveals huge gaps both in terms of overall statistics, where it stands vis-à-vis other states on indicators for children, as well as intra-state (inter district disparities) that need to be addressed.

While this gradual increase in share of budget for children in the State budget, from 3.18 per cent in 2012-13 to 6.01 per cent in 2016-17, is an encouraging sign, it has not been reflected in the wellbeing of children as can be noted from the report on status of children given above.

Children are not a homogeneous group. Their needs are determined by their age, gender, socio-economic status, physical and mental well-being and where they live, for which interventions have to be designed. 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 school 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 socio-economically vulnerable and children with disability need special attention. All these must be reflected in the budget.

The national child rights index (see below) helps locate Assam in the national context. In a national index prepared by HAQ in 2011, using government data on different indicators, Assam ranked 22 of the 29 states. It needs to pay greater attention to most indicators. Indeed, it is absolutely disturbing to note that Assam is ranked the lowest in health – right at the bottom! In education, it is ranked 25<sup>th</sup>.

Table 1: India - 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	1	4	2	29	5	6	22	28	28
Jammu &	24	21	15	29	22	7	19	21	8	18	12	24
Kashmir												
Sikkim	25	29	5	12	17	8	28	10	4	25	25	26
Meghalaya	26	24	1	2	6	3	25	23	21	23	21	22
Manipur	27	25	13	18	3	6	17	14	9	28	14	29
Nagaland	28	26	1	14	1	1	27	8	26	29	29	25
Arunachal	29	27	20	4	2	5	18	27	25	27	26	27
Pradesh												

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

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

Even within a state, the needs of the districts may differ and hence the allocation of resources has to be planned and made accordingly. The District Index of Assam ranks them according to their performance based on different indicators (based on Census of India 2011 data). It may be noted that while the overall sex ratio in the 0-6 age group is a matter of concern for the state as a whole, some districts are faring worse than the state sex ratio of 962. It is also important to note the falling sex ratio in 7-14 and 15-18 age groups that goes un-noticed and therefore un-addressed. Some districts have higher number of child labourers than others. The same is the case with child marriage.

Table 2: Assam - District Index

District	Sex Ratio At birth	Sex Ratio 0-6 years	Sex Ratio 7-14 years	Sex Ratio 15 - 18 years	Sex Ratio All ages	Child La- bour (5-14 years)	Child Mar- riage Males (0-17 years)	Child Marriage Females (0-17 years)
Baksa	24 (936)	10 (966)	6 (965)	15 (915)	1 (974)	12	10	17
Barpeta	15 (952)	17 (961)	25 (946)	27 (701)	19 (953)	27	23	8
Bongaigaon	4 (965)	2 (969)	19 (951)	25 (764)	6 (966)	22	21	4
Cachar	22 (942)	24 (954)	9 (960)	3 (965)	13 (959)	23	26	25
Chirang	27 (922)	6 (968)	13 (957)	19 (876)	3 (969)	3	7	12
Darrang	9 (960)	4 (969)	24 (946)	24 (773)	16 (954)	16	17	2
Dhemaji	23 (939)	26 (950)	16 (954)	14 (915)	20 (953)	1	6	21
Dhubri	8 (960)	5 (968)	27 (937)	26 (752)	18 (953)	4	5	1
Dibrugarh	11 (957)	16 (962)	26 (946)	5 (956)	12 (961)	14	4	24
Dima Hasao	2 (983)	8 (967)	15 (954)	1 (978)	27 (932)	17	15	23
Goalpara	20 (945)	15 (963)	22 (950)	23 (774)	8 (964)	21	11	3
Golaghat	13 (953)	14 (963)	8 (964)	6 (951)	7 (964)	9	13	20
Hailakandi	25 (930)	23 (954)	1 (983)	4 (962)	22 (951)	26	22	13
Jorhat	12 (956)	12 (964)	23 (949)	7 (948)	11 (962)	2	12	27
Kamrup	6 (962)	9 (967)	14 (955)	21 (846)	24 (949)	7	25	11
Kamrup Metro	16 (952)	27 (946)	20 (951)	13 (932)	26 (936)	10	14	22
Karbi Anglong	10 (960)	20 (960)	10 (959)	8 (947)	23 (951)	8	8	19
Karimganj	18 (948)	3 (969)	5 (968)	2 (971)	9 (963)	24	24	10
Kokrajhar	17 (950)	25 (954)	17 (953)	22 (844)	14 (959)	5	1	7
Lakhimpur	26 (930)	21 (959)	12 (958)	16 (910)	4 (968)	6	3	9
Morigaon	3 (970)	22 (956)	7 (964)	20 (868)	5 (967)	11	9	6
Nagaon	7 (962)	13 (964)	3 (969)	18 (886)	10 (962)	18	16	5
Nalbari	14 (953)	7 (967)	11 (959)	17 (904)	25 (949)	25	27	14
Sivasagar	19 (947)	18 (960)	18 (953)	11 (936)	17 (954)	19	19	26
Sonitpur	5 (964)	11 (966)	2 (969)	12 (934)	15(956)	13	18	15
Tinsukia	21 (945)	19 (960)	21 (950)	10 (945)	21 (952)	15	2	16
Udalguri	1 (997)	1 (973)	4 (968)	9 (947)	2 (973)	20	20	18

Ranking key

Best performing districts
(1-7)

Moderately performing districts districts
(8-14)

Districts need attention (15-21)

Worst performing districts (22-27)

Source: HAQ: Centre for Child Rights

At 922, Chirang district in Assam has the lowest sex ratio at birth. It is 930 in Lakhimpur and Hailakandi. Child labour seems to be the highest in Barpeta, followed by Hailakandi, Nalbari and Karimganj. Child marriage for boys is more in Nalbari followed by Cachar, Kamrup (rural) and Karimganj. Jorhat has highest number of child marriages for girls followed by Sivasagar, Cachar and Dibrugarh.

#### A note on methodology

15(3) of the Constitution of India mandates that in recognition of the vulnerability of children and women, states must make special provisions for them. Allocation of resources for children in the budget is one such step. So while all budgetary provisions for the public at large also has an impact on children, there are still special provisions made for them in the budget. Article 4 of the UN Committee on the Rights of the Child that India has ratified in 1992, also requires allocation of adequate resources for children.

Child budgeting or Budget for Children (BfC) monitoring can loosely be described as research that examines how well governments are using programme development, budget allocation and programme implementation to respond to obligations. BfC is not separate budget. It is merely an attempt to disaggregate from the overall allocation made, those made specifically for programmes that benefit children. The analysis of BfC in India both at the level of the union and a particular Indian state entails a rather complex exercise at disaggregating from various heads of account in the overall union or state budget to arrive at a comprehensive understanding of how financial allocation is impacting the lives of children. This enables us to assess how far the policy and programme commitments are translated into financial commitments.

This methodology and analysis was developed by HAQ in 2000 and has continued to be the same since then. This is the same method that has been adapted by most others undertaking similar analysis, in India and in other countries as well.

The departments/ministries that run the programmes for children are selected for calculating the Budget for Children. Further, child related expense heads in the detailed demands for grants (DDG) of the concerned departments are selected for the purpose of calculation. All three budget figures [Budget Estimate (BE), Revised Estimate (RE) and Actual expenditure (AE)] pertaining to the selected heads are entered and tabulated for comparison and analysis.

For preparing the BfC report, the programmes/schemes are divided into four sectors specific to children, which are health, development, education and protection. In other words, the total budget for children is the sum total of the allocations made towards above mentioned four sectors. Then the sectoral totals and the BfC are compared with the total state budget. The share of BfC is calculated with the total state expenditure which is available in the Annual Financial Statement.

# Share of BfC in Assam State Budget (2012-13 to 2016-17)

The average share of budget for children in the Assam State budget from 2012-13 to 2016-17 is 4.25 per cent (Figure 2). For a child population which comprises 40 per cent of the total population of Assam, would this average share be adequate to address their concerns?

During the five years under study, the share of BfC in Assam has witnessed considerable increase. The share of allocation or Budget Estimate (BE) has increased significantly from 3.18 per cent in 2012-13 to 6.01 per cent in 2016-17 (Figure 3), a whopping increase by 64.16 per cent in five years. This is very commendable.

The watershed year was 2015-16 when there was increase by 2.15

percentage points in the share of BfC. The sudden spurt in increase of funds allocated for children since that year is a clear indication of the commitment of the Government of Assam to improve the lot of children (Figure 3 and Table 3).

On an average, children in Assam received

₹4.25<sub>paise</sub>/₹100

in the budget

Figure 2: Average Share of BfC (BE) in Assam Budget (2012-13 to 2016-17) (In per cent)

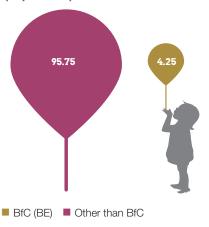


Figure 3: Share of BfC in Assam Budget (In per cent)

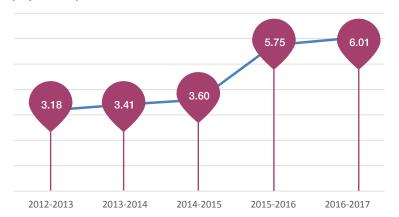


Table 3: State Budget and Budget for Children (In ₹ Crore)

Budget		State Budget	Budget for Children (BfC)			
Year	BE	RE	AE	BE	RE	AE
2012-13	285267.63	274804.52	178808.02	9081.88	9086.39	7322.34
2013-14	300649.45	341727.90	186270.16	10245.30	10793.91	10085.77
2014-15	388113.10	225125.92	191818.6	13954.59	14369.29	10985.98
2015-16	248682.47	248141.86	NA	14288.79	14982.90	NA
2016-17	247974.51	NA	NA	14909.41	NA	NA

#### Rate of Change in BfC and State Budget

Table 4 and Figure 4 shows the rate of change (increase or decrease) in allocation and spending of the budget for children in the BfC and the State budget by BE, RE and AE.

It is a fact that priorities of the governments change according to its electoral manifesto and the ground realities of a specific state. A government may positively respond to requirements of children and may come out with specific schemes and programmes that address their particular need. If a government has its ears close to the ground, it rolls out schemes that are relevant, being alert to the time-specific and place-specific needs of children.

Figure 4: Rate of Change in BfC (In per cent)

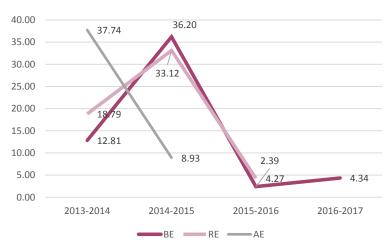


Table 4: Rate of Change in BfC and State Budget (In per cent)

Budget	A:	ssam State Budg	et	Budget for Children (BfC)		
Year	BE	RE	AE	BE	RE	AE
2013-14	5.39	24.35	4.17	12.81	18.79	37.74
2014-15	29.09	-34.12	2.98	36.20	33.12	8.93
2015-16	-35.93	10.22	NA	2.39	4.27	NA
2016-17	-0.28	NA	NA	4.34	NA	NA

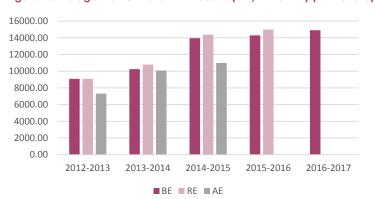
Despite the overall share of BfC being low in the State budget, the rate of change in allocations and expenditure has been higher than that of the State budget as a whole. What is notable is that while the rate of change in 2015-16 in the State budget has shown a negative growth, the share of children has been positive.

#### Allocation and Expenditure in BfC

The budget allocations (BE) have increased by 64 per cent in the last five years. But it is equally important to study the mid-year revisions (Revised Estimates or RE) as well as the actual expenditure (AE) – because that is what is linked to the final outcomes in terms of what has been achieved for children. Herein lies the gap.

According budget-making traditions, the RE phase provides an opportunity to do a midterm appraisal of BE and introduce increase or decrease in it.

Figure: 5: Budget for Children in Assam (BE, RE & AE) (In ₹ Crore)



The allocation (both BE and RE) as well as expenditure (AE) has increased over the five years. The mid-year revised allocations in three out of the four years has been more than the BE. However, it is the actual expenditure that is a matter of concern.

In all the three years for which actual expenditure information is available, it has been less than the allocations both at the BE as well as the RE stage.

The expenditure data is released a year later. Hence for a study of a five-year budget cycle, actual expenditure (AE) is available for only three years.

Table 5: Allocation and Expenditure in Budget for Children (BfC) (In ₹ crore)

Budget		BfC (₹ Crore)	₹ Crore) Expenditure (In per cent)					
Year	BE	RE	AE	AE-BE	AE-BE (%)	AE-RE	AE-RE (%)	
2012-13	9081.88	9086.39	7322.34	-1759.54	-19.37	-1764.05	-19.41	
2013-14	10245.30	10793.91	10085.77	-159.52	-1.56	-708.14	-6.56	
2014-15	13954.59	14369.29	10985.98	-2968.61	-21.27	-3383.30	-23.55	
2015-16	14288.79	14982.90	NA	NA	NA	NA	NA	
2016-17	14909.41	NA	NA	NA	NA	NA	NA	
Average (2012-13 to 2014-15)	11093.92	11416.53	9464.70	-1629.22	-14.69	-1951.83	-17.10	

The maximum underutilisation of funds has been in health sector (75.80 per cent) followed by protection sector (68.61 per cent). How can this be explained against the statistics for health that shows huge under 5 years mortality rates, high incidence of anaemia and stunting as also a over 600 per cent increase in crimes against children in the last five years?

Table 6: Sectoral Spending (AE-BE) (In per cent)

Year	Health	Development	Education	Protection
2012-13	-77.76	-25.52	-16.98	-70.21
2013-14	-75.69	21.37	-3.46	-73.99
2014-15	-73.39	-34.49	-18.27	-57.53
Average	-75.80	-13.73	-13.44	-68.61

The Appropriation Accounts provide an insight into the reasons for the under spending or overspending. Under spending is often referred to as 'saving'. But often there are no plausible reasons for the variance in allocation and expenditure to be found.

#### A few examples of explanations in the Appropriation Accounts of Assam (2014-15)

- Repair of Anganwadi Center Reasons for saving of ₹ 50 lakhs and non-utilisation of the entire budget have not been intimated.
- Implementation of Integrated Child Development Service Schemes (ICDS) Sixth Schedule (Pt.I) Areas Reasons for non-utilisation of provision of ₹ 10,57.14 lakhs and saving of ₹10,26.56 lakhs have not been intimated.
- Implementation of Integrated Child Development Service Schemes (ICDS) Sixth Schedule (Pt.I) Areas under centrally sponsored scheme Reasons for incurring excess expenditure of ₹7,26.25 lakhs over the budget provision of ₹15,00.00 lakhs have not been intimated.
- Training of Nurses including Auxiliary Nurses and Midwives, etc Reasons for saving of ₹72.86 lakhs over the budget provision of ₹1,27.51 have not been intimated.
- School Health Scheme Reasons for saving of ₹1,02.72 lakh over the budget provision of ₹5,07.72 lakhs have not been intimated.
- Training of ANMs (CSS) Augmentation of provision by ₹2,00.00 lakhs by way of re-appropriation in this case was reportedly to meet the shortfall of budgetary provision. Reasons for final saving of ₹1,91.46 lakhs have not been intimated.
- Sarva Shiksha Abhiyan (Central Share) Reasons for saving of ₹5,72,13.34 lakhs out of ₹14,07,20.00 lakhs budget provision have not been intimated.
- Pre-Matric Scholarship for those Engaged in Unclean Occupation (Add amount transferred from III- C.S.S.) Non-utilisation of the entire budget provision of ₹ 60.00 lakhs was due to non-receipt of sanction from the Government as reported by the Department.
- Construction of Boys' Hostel (SC) (Add amount transferred from III- C.S.S.) Non-utilisation of the entire budget provision of ₹75.00 lakhs was due to non-receipt of sanction from the Government as reported by the education department.
- RMSA for CM's Innovative Scheme Reasons for saving of ₹19, 94.99 lakh out of ₹20,00.00 lakhs of budget provision have not been intimated.

#### Sectoral Share in the State Budget and BfC

The disaggregation of BfC by sectors – education, development, health and protection – provides a picture of the distribution of funds across sectors and helps understand whether adequate funds and thus proper attention has been given to each sector. Figure 6 shows average sectoral share in the State budget and Figure 7 shows average sectoral share within BfC.

Figure 6: Average Sectoral Share in Assam Budget (2012-13 to 2016-17) (In per cent)

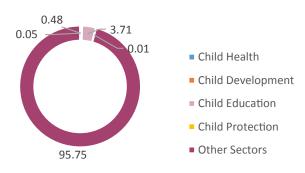
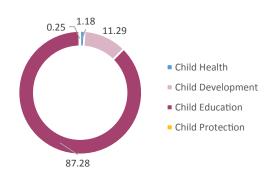


Figure 7: Average Sectoral Share within BfC (2012-13 to 2016-17) (In per cent)



The budget for children suffers from uneven allocation of funds across sectors. As usual, education sector has been given the maximum preference both in the State budget and in BfC with the highest average share of 3.71 per cent in the Assam State budget and 87.28 per cent in the BfC.

Development sector received an average share of 11.29 per cent in the BfC and a very minimum average share of 0.48 per cent in the total Assam Budget from 2012-13 to 2016-17. The maximum contribution comes from allocations and spending in the Integrated Child Development Scheme. Any rise or fall in allocations in this scheme affects the share of the sector as a whole.

Education received better attention and higher allocation with an average share of 3.71 per cent while the other sectors were allocated negligible share of less than one per cent each.

Despite high level of malnutrition and growing child protection concerns, the Assam State budget has not provided sufficient attention to health and protection issues. They have been given the low priority in terms of financial allocations and spending. While child health received an average share of 0.05 per cent, child protection received only 0.01 per cent share in the State budget. Within the BfC too, the share of these sectors was low. Child health received an average share of 1.18 per cent and child protection 0.25 per cent.

Table 7: Sectoral Share in the State Budget and within BfC (In per cent)

Year State Budget						Budget for Children (BfC)				
rear	Health	Development	Education	Protection	Health	Development	Education	Protection		
2012-13	0.07	0.33	2.77	0.01	2.15	10.39	87.08	0.38		
2013-14	0.07	0.50	2.82	0.02	1.94	14.69	82.88	0.49		
2014-15	0.04	0.52	3.03	0.01	1.07	14.41	84.32	0.21		
2015-16	0.05	0.59	5.10	0.01	0.85	10.24	88.79	0.12		
2016-17	0.03	0.46	5.52	0.01	0.48	7.60	91.76	0.16		
Average	0.05	0.48	3.71	0.01	1.18	11.69	87.28	0.25		

#### **Child Health**

As per UN data, more than six million children still die before their fifth birthday each year in the world. The same source notes that children born into poverty are almost twice as likely to die before the age of five as those from wealthier families. To respond to such a dismal child health scenario on a war footing, the third Sustainable Development Goal strives to ensure healthy lives and promote well-being for all at all ages. Four major groups that need special attention in child health are: (a) pregnant and lactating mothers, (b) newborn babies, (c) children, and (d) adolescent girls and boys.

Governments in India, both union and state, have responded to the disturbing health scenario in India through a slew of health schemes. There are very few programmes and schemes within the larger health budget that are child-specific. For the present study, only child-specific health schemes are identified for analysis. Most of these schemes are part of the reproductive and child health scheme of the Government of India, hence centrally

67.8%

Adolescent girls aged 15-19 years are anaemic

<18.5%

Adolescent girls aged 15-19 years are severely anaemic

Source: India Health Report 2016, Page 114°

sponsored. There are other state initiatives that do include some child-focused interventions and could be identified in the budget documents like Majoni, Sneha Sparsha and Mamata under Assam Vikas Yojna.

Unfortunately, most of these health initiatives cater to the infants and young children and not those in the adolescent category. This is because not only are there limited health related initiatives for older children, the others are part of the overall health initiatives for all persons.

Table 8: Immunization and Child Nutritional Status of Assam according to NHFS-4

Indicators	Urban	Rural	Total
Children aged 12-23 months fully immunized (BCG, measles, 3 drop of each Polio & DPT (%)	70.9	44.4	47.1
Children aged 12-23 months received BCG vaccine	94.3	81.0	82.3
Children aged 12-23 months received 3 doses of polio vaccine	76.4	53.7	56.0
Children aged 12-23 months received 3 doses of DPT vaccine	82.8	64.6	66.5
Children aged 12-23 months received measles vaccine	86.1	69.7	71.4
Children aged 12-23 months received Hepatitis B vaccine	70.0	50.0	52.0
Children aged 5-59 months received a vitamin A dose in last 6 months	58.5	50.5	51.3
Children aged 12-23 months received most of the vaccines in public health facilities	77.3	95.3	93.3
Children aged 12-23 months received most of the vaccine in private health facilities.	21.8	3.3	5.3

Source: http://rchiips.org/nfhs/pdf/NFHS4/AS\_FactSheet.pdf (accessed on 24th November, 2016)

The status of child health in Assam has remained disturbing. As per NFHS-4, the infant and child mortality rates in Assam is 48 per 1000 children. The under-five mortality rate (U5MR) is also high at 56 as per NFHS- 4. 10 Table 8 displays data on the poor state of routine immunization and child nutrition in Assam. The rate of unimmunized children is quite high. In this context the low as well as fluctuating share of allocation for child health is very disturbing to see.



Source: India Health Report 2015. Page 10911

In the period of study (2012-13 to 2016-17), child health sector has received a very low average share of 0.05 per cent in the State budget and 1.18 per cent within the BfC. The allocations for child health in the State budget have seen a decline during these years. In fact the steep decline that is noticed in the BfC as a whole during 2014-15 can be traced in part to the decrease in the share of child health in State budget, which fell from 0.07 per cent in 2013-14 to 0.03 per cent in 2016-17 (Figure 8).

<sup>8</sup> http://www.un.org/sustainabledevelopment/health/

<sup>9</sup> Rayker. N Majumdar, M., Lakshminarayan R., Menon P. 2015. India Health Report-Nutrition. New Delhi. India: Public Health Foundation of India.

<sup>10</sup> http://rchiips.org/nfhs/pdf/NFHS4/AS\_FactSheet.pdf

<sup>11</sup> Rayker. N Majumdar, M., Lakshminarayan R., Menon P. 2015. India Health Report-Nutrition. New Delhi. India: Public Health Foundation of India.

From 2013-14, when there was an increase in allocation for child health, to 2016-17 when the allocations fell by ₹ 126.33 crores. This decrease is reflected in the allocations meant for the immunization of infants and vaccines to tackle diphtheria, polio and typhoid (although the same for Karbi Anglong has seen an increase), programme related to Special Care Homes for HIV/AIDS affected children. At the same time the budget allocations received under various schemes have gone up from ₹13.26 crore in 2014-15 to ₹ 15.57 crore in 2015-16. There was an increase of ₹2.31 crore from 2014-15 to 2015-16.12

There was no increase of allocation of fund in postpartum centres from 2014-15 to 2015-16. It remained the same 13 and a decrease of ₹2.19 crore in the allocation in the scheme of training of ANMs (CSS).14

What is the status of RE in child health during the study period? The trend is rather erratic. While RE remained almost the same as BE in 2012-13, was actually a little more than the BE, the RE in 2013-14 was less than the BE by ₹ 40 crores, it remained the same as BE in 2014-15, and shot up higher than BE in 2015-16. (Table 9). Actual expenditures have been much lower than both BE and RE in

Figure: 8 Share of Child Health (BE) (In per cent)

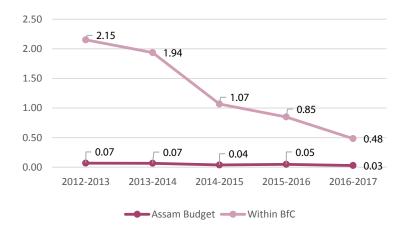


Figure: 9: Child Health (BE, RE & AE) (In ₹ Crore)



2012-13 to 2014-15. Despite the low health status of children in Assam, it is unacceptable that even insufficient allocations could not be spent and an average of 75.80 per cent remained unspent in the years from 2012-13 to 2014-15 (Table 9).

Table 9: Child Health - Allocation and Expenditure (In ₹ Crore)

	Child Health					Expenditure			
Year	BE	RE	AE	AE-BE	AE-BE (%)	AE-RE	AE-RE (%)		
2012-13	195.35	195.56	43.44	-151.91	-77.76	-152.11	-77.79		
2013-14	198.31	158.31	48.21	-150.09	-75.69	-110.09	-69.55		
2014-15	148.92	148.92	39.62	-109.30	-73.39	-109.30	-73.39		
2015-16	121.29	147.38	NA	NA	NA	NA	NA		
2016-17	71.98	NA	NA	NA	NA	NA	NA		
Average (2012-13 to 2014-15)	180.86	167.59	43.76	-137.10	-75.80	-123.84	-73.89		

http://www.cag.gov.in/sites/default/files/account report pdf/ASM Appropriation Accounts 2013 14.pdf

<sup>13</sup> ibid

ibid

It is the Appropriation Accounts that help identity under spending and the reasons for it. What we refer to under spending is euphemistically called saving in the government parlance. Here are a few examples of schemes that have seen rise or fall in allocations:

Table 10: Increase and Decrease in Allocations (BE) in Child Health – Some Examples (In ₹ Crore)

Schemes	2012-13 BE	2016-17 BE	Percentage In- crease(+)/Decrease(-)
Special Care Home for HIV Affected Children [GIA-General (Non-Salary)]	40.00	0.00	-100.00
Corpus of ₹ 50 Crore over next five years for Medical Support for Children below 14 Years	5.00	1.00	-80.00
Operation Smile [GIA-General to NHM (Non-Salary)]	0.95	0.40	-57.89
Postpartum Centres	9.98	11.13	11.51
Immunisation of Infant and children against Diphtheria, Polio & Typhoid etc	24.23	15.54	-35.87
Immunisation of information & Child against Diphtheria, Polio & Typhoid (Karbi Anglong)	0.15	0.55	255.16

#### **Child Development**

Child development sector primarily includes programmes and schemes for early childhood care and education. It also includes schemes for adolescent girls and boys, sports, and other general schemes and programmes that do not fit within any particular sectoral category, but are aimed at the overall development of children. However, it is the flagship scheme – the Integrated Child Development Scheme that is key to the allocation and spending in this sector.

Table 11: Availability of Anganwadi Centres and Workers (AWCs and AWWs)

Pending or vacant Anganwadi workers to sanctioned number of workers	6.5%
AWWs living in the AWC village/ward	85.9%
AWWs having 10 or more years of schooling	92.2%
Median age of AWWs	35 years
AWCs serving to population more than the stipulated norm	17.6%

Source: India Health Report 2015. Page 11815

**Table 12: Growth Monitoring** 

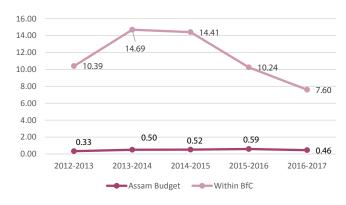
AWCs having functional baby weighing scale	68.7%
AWCs having functional adult weighing scale	6.3%
Available WHO growth chart at AWCs	88.3%

Source: India Health Report 2015. Page 11816

Development sector received an average share of 0.48 per cent in State budget and 11.29 per cent in the BfC.

At the beginning of the study period (2012-13), the share of development sector was over 10 per cent within BfC and 0.33 per cent in the State budget which showed an increase of 4.3 percentage points as share of BfC and 0.17 percentage points in the State budget. However, even though there was increase in the actual budget by ₹ 189.22 crores in the five year period, there has been a fall in the share.

Figure: 10: Share of Child Development (BE) (In per Cent)



Rayker. N Majumdar, M., Lakshminarayan R., Menon P. 2015. India Health Report-Nutrition. New Delhi. India: Public Health Foundation of India.

<sup>16</sup> Rayker. N Majumdar, M., Lakshminarayan R., Menon P. 2015. India Health Report-Nutrition. New Delhi. India: Public Health Foundation of India.

There has been a rise and fall in RE in relation to BE. While it has remained the same in 2012-13, it has been more than the BE in two out of the five years.

But the allocations have remained unutilised. An average of almost 14 per cent of the allocations (BE) and almost 9 per cent of the RE has remained unspent (Table 13). It is only in one year of the three that there was no under spending (2013-14). That is perhaps because the thrust areas for the year 2013-14 were: to implement ICDS scheme in Mission mode, universalization of ICDS in the state to cover all habitations, reduction in malnutrition and improvement in child sex ratio.<sup>17</sup>

Figure 11: Child Development (BE, RE & AE) (In ₹ Crore)



Table 13: Child Development - Allocation and Expenditure (In ₹ Crore)

Child Development				Expenditure			
Year	BE	RE	AE	AE-BE	AE-BE (%)	AE-RE	AE-RE (%)
2012-13	943.84	943.84	702.95	-240.88	-25.52	-240.88	-25.52
2013-14	1505.39	1546.82	1827.13	321.74	21.37	280.31	18.12
2014-15	2010.27	1728.15	1316.92	-693.35	-34.49	-411.23	-23.80
2015-16	1463.84	1807.72	NA	NA	NA	NA	NA
2016-17	1133.06	NA	NA	NA	NA	NA	NA
Average (2012-13 to 2014-15)	1486.50	1406.27	1282.34	-204.16	-13.73	-123.94	-8.81

Despite the highest allocation, the maximum under spending was in 2014-15 (over 34 per cent) raising questions about the state government's capacities to implement the schemes despite the need being there. Surely the situation of children could not have improved drastically in one year to warrant this non-utilisation of allocated resources.

Table: 14 Increase and Decrease in Allocations (BE) in Child Development – Some Examples (In ₹ Crore)

• •			
Schemes	2012-13 BE	2016-17 BE	Percentage Increase(+)/ Decrease(-)
Integrated Child Development Scheme	805.88	647.97	-19.59
Implementation of Rajiv Gandhi Scheme for Adolescent Girls (SABLA) (CSS)	22.36	10.00	-55.28
Nutrition (Pre-school/School feeding)	48.95	39.82	-18.65

The highest share of allocation and spending (almost 90 per cent) within the development sector is for the Integrated Child Development Services (ICDS) and any change in this affects the sectoral spending as a whole. ICDS is a flagship scheme for children in the six months to six years of age group, pregnant, nursing mothers and adolescent girls (11-19) year. Services provided under this scheme are non-formal pre-school education, supplementary nutrition programme, immunisation, health check-up, nutrition and health education and referral service. This scheme is specially meant for the poor and the disadvantaged.

There is an almost 20 per cent decrease in ICDS allocation over the five year period, affecting the sectoral share as a whole.

Table 12 details out the allocation and spending in ICDS over the last five years. What is clearly visible is the non-utilisation of allocations in all the three years for which AE data is available. Besides, there has been an average of over 25 per cent under spending in ICDS over the three years for which AE is available, the highest being in 2014-15 when more that 50 percent budget allocations remained unspent.

Explaining the under spending (or 'saving') in 2013-14, the Appropriation of Accounts of Assam Government for 2014-2015 reveals that there were major under spending under in ICDS under training component, nutrition component and pre-school component.<sup>18</sup>

<sup>17</sup> http://planningcommission.nic.in/plans/stateplan/Presentations13\_14/assam\_2013\_14.pdf

 $<sup>18 \</sup>qquad http://www.cag.gov.in/sites/default/files/account\_report\_pdf/ASM\_Appropriation\_Accounts\_\%202014\_15.pdf$ 

Table 15: Integrated Child Development Scheme (ICDS) (In ₹ Crore)

Year	BE	RE	AE
2012-13	805.88	805.88	645.42
2013-14	1371.72	1406.72	1316.70
2014-15	1545.38	939.55	753.37
2015-16	864.63	988.51	NA
2016-17	647.97	NA	NA

Given the existing situation of Anganwadi Centres (AWCs) wherein not even the basic facilities are available, the non-utilisation of funds of ₹ 50 lakhs that were set aside for the repair of AWCs is absolutely shocking! Reasons for the non-utilisation and non-surrendering of this fund have not been intimated.<sup>19</sup>

Similarly, ₹ 105,37 lakhs were set aside for the enhancement of AWWs/AWHs of which only ₹ 60,34.07 lakhs were spent and a balance of ₹ 45,02.93 lakhs remained unspent. Nearly 42.74 per cent of the allocated money remained unspent. Reasons for saving or not spending the budget provision in this case have not been intimated.<sup>20</sup> Similar is the fate of funds allocated for nutrition and pre-school in Anganwadi Centres. The extent of unspent funds of this flagship programme of Government of India is particularly disturbing.

Assam has 62,153 AWCs (including 5,425 mini AWCs) and majority of the AWC buildings are constructed by the Department. Only 29 per cent AWCS have drinking water and toilet facilities.

(http://www.kcci.org.in/Document%20 Repository/01%20ICDS%20Accreditation%20in%20 Assam.pdf)

#### ₹ 2,250 crore scam in Social Welfare Department

The Chief Minister of Assam was apprised that nine lakh entries of 'ghost children' were detected in AWCs in Assam, which has brought to light an exaggerated amount of ₹ 150 crore per year for nine lakh non-existent children. The total figure of ₹ 44 lakh beneficiary children is reduced to ₹ 35 lakh after these exposures.

Similarly 390 fake Anganwadi Centres have been detected. These centres were fraudulently entered for siphoning off money. As a result of these detections, the monthly expenditure required for Supplementary Nutrition Programme meant for mothers and children has dropped drastically.

http://www.assamtribune.com/scripts/detailsnew.asp?id=nov0316/at050

Analysis of five years of child development budget does not show any pattern to achieve the priorities. On the contrary, one sees inconsistent trend of allocation and expenditure. Of great disappointment is the abuse of funds earmarked for malnourished and starving children by those who are supposed to give leadership to these schemes.

#### **Child Education**

The status of education in Assam is far from satisfactory. Despite the implementation of SSA and RMSA, the Gross Enrolment Ratio (GER) for primary schools is 81.5 per cent, for upper primary schools is 65.7, for secondary school is 56.7 and for senior secondary schools is 13.1. The dropout rate is 32.2 per cent for primary schools, 50.2 per cent for upper primary schools and 72.2 per cent for secondary schools. The teacher pupil ratio is 28 for primary schools, 17 for upper primary schools, 20 for secondary schools and 14 for senior secondary schools. According to the recently released Assam Human Development Report, only 11 of 100 persons are reported to have reached the senior secondary level, while only seven are reported to have completed the graduation level and above.<sup>21</sup>

 $<sup>19 \</sup>qquad http://www.cag.gov.in/sites/default/files/account\_report\_pdf/ASM\_Appropriation\_Accounts\_\%202014\_15.pdf/ASM\_Appropriation\_Accounts\_A$ 

<sup>20</sup> Ibio

 $<sup>21 \</sup>qquad \text{http://www.in.undp.org/content/india/en/home/library/hdr/human-development-reports/State\_Human\_Development\_Reports/Assam.html} \\$ 

"The gross enrolment ratio for classes I to V is only 94.3 as against the all India average of 116, while for classes I to VIII, it is even less, that is 84 – as against the national average of 104.

All this requires massive, sustained investment. While we shall leave no stone unturned to bring these parameters at par with or even surpass those for the rest of India, now we are not clear who would support us in bridging this gap."

Shri Tarun Gogoi, Budget Speech 2015-16

The Chief Minister's vision document for women and children 2016 has set out numerous goals towards the betterment of children. Rastriya Madhyamik Shiksha Abhiyan (RMSA) bears a heavy load of targets to be achieved in the coming years. Assam has resolved to achieve 100 % GER by year 2016-17 in class IX and X.

During the past five years, of all four sectors, education has received the largest share with an average of 3.71 per cent of the total State budget, and a whopping 87.28 per cent of the BfC. It has received almost 92 per cent of the BfC in 2015-16, leaving very little for the other sectors. The 73 per cent increase of budget allocation (BE) in 2016-17 from 2012-13 for the education sector is very welcome.

Education has received the largest share with an average of 3.71 per cent of the total State Budget, and a whopping 87.28 per cent of the BfC

In all the four years for which RE data is available, the RE has been more than the BE in the education sector. Despite the high allocations, which shows the priority that the state government gives to education, there has been an average under spending of 13.44 per cent of the BE and over 17.15 per cent of the RE.

Figure 12: Share of Child Education (BE) (In per cent)

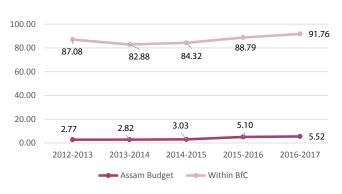


Figure 13: Child Education (BE, RE & AE) (In ₹ Crore)

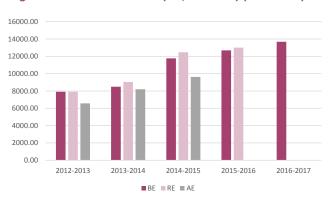


Table 16: Child Education – Allocation and Expenditure (In ₹ Crore)

Child Education				Expenditure			
Year	BE	RE	AE	AE-BE	AE-BE (%)	AE-RE	AE-RE (%)
2012-13	7908.13	7912.43	6565.65	-1342.48	-16.98	-1346.78	-17.02
2013-14	8491.39	9038.57	8197.37	-294.02	-3.46	-841.20	-9.31
2014-15	11766.07	12474.68	9616.98	-2149.09	-18.27	-2857.70	-22.91
2015-16	12686.86	13000.94	NA	NA	NA	NA	NA
2016-17	13680.95	NA	NA	NA	NA	NA	NA
Average (2012-13 to 2014-15)	9388.53	9808.56	8126.67	-1261.86	-13.44	-1681.90	-17.15

Both elementary and secondary education have seen phenomenal increase in allocations. There is a 63 per cent increase in the allocation for elementary education and 80 per cent increase in allocation for secondary education in the five years of study. However, in most years, the revised allocation has been more than the BE and the actual expenditure has been lower than both.

Table 17 and 18 show the allocation and expenditure on elementary and secondary education in Assam. Because of the right to education up to age of 14 years, the allocation and expenditure for elementary education is higher than in secondary education.

Table 17: Elementary Education (In ₹ Crore)

rabio 171 Elomontary Education (in Corore)					
Year	BE	RE	AE		
2012-13	5229.53	5230.64	4173.54		
2013-14	5579.12	5695.86	4978.52		
2014-15	7582.28	7777.60	6128.18		
2015-16	7829.61	7853.56	NA		
2016-17	8540.33	NA	NA		
Average	6952 17	6639 41	5093 41		

Table 18: Secondary Education (In ₹ Crore)

Year	BE	RE	AE
2012-13	2413.05	2413.05	2217.67
2013-14	2530.34	2911.15	2806.15
2014-15	3601.26	3645.84	2986.91
2015-16	3863.20	4122.45	NA
2016-17	4333.91	NA	NA
Average	3348.35	3273.12	2670.24

Table 19 gives some examples of schemes with cut back and increase in allocation.

Table 19: Increase and Decrease in Allocations (BE) in Education – Some Examples (In ₹ Crore)

	tion come Examp	Como Exampleo (m ( Croro)		
Schemes	2012-13 BE	2016-17 BE	Percentage Increase(+)/ Decrease(-)	
Elementary Education	5229.53	8540.33	63.31	
Secondary Education	2413.05	4333.91	79.60	
Scholarship to Physically Handicapped Students (Schedule caste component plan)	0.13	0.00	-100.00	
Scholarship to Disabled Students (Schedule caste component plan)	0.15	0.00	-100.00	
Dist. Institution of Education & Training (DIET)	41.16	39.98	-2.87	

The greatest concern is when the fall in allocations is in programmes and schemes that are for the most marginalised, pushing them into greater vulnerability (the schemes for children with disability, the SC, ST and OBC). Despite the condition of children of tea garden tribes being well known, it is indeed a matter of concern that there is a fall in allocation in some schemes related to education, scholarship and hostel facility.

The Status of Implementation of the Right to Free and Compulsory Education Act, 2009 brought out by the RTE Forum has analysed the impact of conflict on the lives of children. In Assam they have noted: "Due to the burning of villages, families shift to relief camps and children fail to attend school, eventually dropping out of school. An ethnography study of ten schools in Udalguri reveals that

#### hindustantimes

### **Assam's Tea Gardens become Hunting Ground for Child Traffickers**

Anasuya S Basu, Hindustan Times, Baksa / Guwahati<br/>| Updated: Sep $01,\,2015\,\,18{:}12\,{\rm IST}$ 

.....children have gone missing from the gardens, feared to have been lured by traffickers active in an economicallybackward region. And the tea workers have turned out to be the most vulnerable to trafficking, according to activists and the government......

Source: http://www.hindustantimes.com/india-news/child-trafficking-men-ace-most-evident-in-assam-s-tea-gardens/article1-1386314.aspx

there is no mechanism of counting these children and of tracking their school education after a riot breaks out.....Children in the areas affected by conflict are often forced to stay back because of security reasons and non-functioning of schools..." <sup>22</sup>

In this context, it is heartening to see the increase in investment in education sector in the conflict affected Sixth Schedule districts, with the maximum increase in BTC (over 90 per cent) (Table 20).

Table 20: Allocation for Education Sector in Sixth Schedule Areas (In ₹ Crore)

Name	BE 2012-2013	BE 2016-2017	Percentage Increase(+)/De- crease(-)
North Cachar (NC) Hills Autonomous Council	95.07	151.29	59.14
Bodoland Territorial Council (BTC)	517.90	988.77	90.92
Karbi Anglong Autonomous Council	222.88	300.87	34.99

<sup>22</sup> Status of Implementation of the Right to Free and Compulsory Education Act, 2009: Year Five (2014-15). March 2015. Page 71

Most of the allocations for education are made for elementary, primary education and upper primary education through the flagship programmes the Sarva Shiksha Abhiyan (SSA) and the Rashtriya Madhyamik Shiksha Abhiyan (RMSA). The other important scheme is the Mid-day Meal scheme.

Tables 21 and 22 show the distribution of the state and central share in SSA. The fall in the state share in SSA in 2016-17 must be noted. What must also be noted is that the actual expenditure is less than the allocations (BE and RE).

Table 21: Sarva Shiksha Abhiyan (State Share) (In ₹ Crore)

Year	BE	RE	AE
2012-13	110.00	110.00	100.98
2013-14	115.00	155.00	151.03
2014-15	145.72	145.72	140.81
2015-16	165.12	165.12	NA
2016-17	123.14	NA	NA

Year	BE	RE	AE
2012-13	0.00	0.00	0.00
2013-14	0.00	0.00	0.00
2014-15	1407.20	1407.20	835.0666
2015-16	1405.16	1405.16	NA
2016-17	1630.398	NA	NA

There is a ₹ 77 crore reduction in the allocation for Mid-day meal (MDM) scheme. The allocation for MDM was the lowest in 2014-15, the year when fiscal devolution was announced. Is that the reason for the cut?

Table 23: Mid-Day Meal Scheme (In ₹ Crore)

Year	BE	RE	AE
2012-13	941.17	941.17	534.75
2013-14	629.8	629.8	427.4
2014-15	452.5	589.65	530.09
2015-16	596.83	596.83	NA
2016-17	863.86	NA	NA

#### **Child Protection**

The schemes/programmes under the child protection sector are the interventions that are aimed at creating a protective environment for all children and specifically address children in labour, in need of adoption, in prostitution, who are physically or mentally challenged, who are neglected or treated as juvenile offenders, are on the streets etc. This is the most vulnerable section of society and the state is obliged to provide adequate protection to them.

#### Assam emerges as India's hub of human trafficking

hindustantimes

Updated: Sep 06, 2016 01:08 IST

Saira Khatun (name changed) was rescued by the Delhi Police from a red light area. The 12-year-old girl from Assam had been taken by her grandmother to the national capital and got her involved in sex trade.

In 2005, another minor girl from Assam's Kokrajhar district was trafficked to Nepal and sent to Saudi Arabia with forged documents. After eight harrowing years, she was rescued in 2013 and sent back home.

Despite the ordeals, both girls were lucky to get reunited with their families. But thousands of other minors and adults from Assam, who are trafficked to all over India and even abroad, are not that lucky.

According to data for 2015, released by recently by National Crime Records Bureau (NCRB), Assam has emerged as the trafficking hub of the country.

With 1494 cases, the state accounts for 22% of the total

#### FLESH TRADE MENACE

- With 1,494 cases, Assam accounts for 22% of the total reported cases of human trafficking across India
- The state also recorded the most child trafficking cases— 1,317—which account for 38% of the national figures
- A helpline operated by the NGO Nedan Foundation in different parts of the state records 4-5 cases of missing children and adults every day
- Experts say the actual number of trafficking cases in Assam could easily be double of what is recorded by the National Crime Records Bureau (NCRB) as families of most victims don't approach police because they are afraid of getting caught in legal hassles
- A task force headed by the chief minister has been set up to end trafficking, but inadequate resources have hampered its functioning

reported cases of trafficking across India. Assam also has the highest number of child trafficking---1317 cases, which account for 38% of the national figure.

The figures present a disturbing picture. But the situation on the ground could be far worse as many cases of trafficking go unreported.

"The NCRB figures are only of those which have been reported to the police and FIRs registered. The actual number of trafficking cases in Assam would be much higher," said Digambar Narzary, chairperson of Nedan Foundation.

A helpline operated by the NGO, which is working in 8 districts of Lower Assam, records 4-5 cases of missing children and adults every day. "Most of the victims belong to poor tribal families who are lured away by traffickers with promise of good education, better job prospects or with promise of marriage," said Narzary.

Recurring floods, militancy, poverty, lack of employment avenues lead many victims and their families to succumb to the lure of traffickers who promise a better future away from the state.

The extent of 'unprotectedness' of the children of Assam is alarming. Violence against children seems to be on the rise. Given the volatile situation of political unrest due to ethnic conflict, the children are even more vulnerable to violence and exploitation in the state.

#### Status of Child Protection in Assam

Although the crime data put out by the National Crimes Records Bureau remains the main source of data, the numbers in them are very low - based only on reported cases. But they do throw a spotlight on the growing nature of the problem. It is important to highlight that the maximum cases of kidnapping and abduction of girls was for purposes of marriage and yet the number of child marriages reported is so low.

Table 24: Incidences of Crimes Against Children in Assam (2012-15)

S. No.	Crime Head	2012	2013	2014	2015
1	Murder	15	14	22	16
2	Infanticide	0	0	0	1
3	Attempt to Murder	NA	NA	216	66
4	Rape	156	230	125	43
5	Kidnapping and Abduction	68	80	152	383
6	Foeticide	0	0	0	0
7	Abetment of Suicide	0	0	0	0
8	Exposure and Abandonment	0	0	0	0
9	Procuration of Minor Girl	122	129	303	1303
10	Selling of Girls for Prostitution	0	0	0	0
11	Immoral Traffic (Prevention) Act, 1956	NA	NA	1	5
12	Protection of Children from Sexual Offences Act 2012	The law was enacted in December 2012		311	731
13	Other Crimes	31	64	181	131
14	Child Marriage	0	1	4	14
15	Child Labour	NA		0	4
16	Section 377	NA		0	1
17	Human Trafficking	NA			9
18	Outrage of modesty	NA		70	45
19	Under JJ Act	NA		0	83
	Total Crimes against Children	392	518	1385	2835

Source: Crime in India. National Crime Records Bureau

According to Crime in India 2015 report, there is a 104.62 per cent increase in crimes against children in Assam from 2014 to 2015. Against 1,385 cases of crimes registered with Assam police in 2014, there were 2,843 cases in 2015.

- The statistics of missing children in Assam is staggering. By official count, as many as 9,500 children went missing from different districts of Assam from 2007 and June 2014. Only 3,840 of them have been traced so far (The Hindustan Times, September 3, 2015).
- The State of Assam has been consistently ranking top in juvenile delinquency among the eight north eastern states. In 2011, Assam topped in the north eastern states with 405 cases, of which 402 were IPC (Indian Penal Code) and 3 SLL (Special Local Law).<sup>24</sup>
- Assam topped in the list of states in India in the study on Child Abuse in India 2007, carried out in 13 states by the Ministry of Women and Child Development.<sup>25</sup>
- According to NCRB data for 2015, Assam along with West Bengal, Bihar and Haryana, accounted for 85 per cent of child trafficking cases in the country.<sup>26</sup>
- Child committing offence is common amongst both literates and non-literates. 89 per cent of child committed crime is found to live within families. <sup>27</sup>
- Almost 76 per cent families of the apprehended juvenile have the annual income level below ₹ 25, 000.<sup>28</sup>
- According to Child Protection Bulletin of April, 2015 as many as 1935 cases were pending before JJBs across Assam as on March 2015.
- Out of 1600 apprehended juvenile in 2014, 553 were involved in various crimes, 163 were illiterate and 240 had education up to primary level. This category has accounted for 73 per cent of the total juvenile apprehended in 2014.<sup>30</sup>
- Asian Centre for Human Rights (ACHR) reported that there are a large number of pending cases in Juvenile Justice
  Boards in Assam including 100 per cent of them in Dhemaji, and Morigaon districts followed by 90.2 per cent in Goalpara
  and 79.3 per cent in Darrang.<sup>31</sup>

Child protection sector has been consistently receiving the least share of allocations with only an average share of 0.01 per cent in State budget and 0.25 per cent in the BfC (BE).

Unlike the other sectors, wherein despite falling share in allocations, the actual allocations have seen an increase, the protection sector has seen a fall in actual allocations (Figure 15 and Table 25). The poor budgetary allocation and the disproportionate allocation of funds as compared to the other sectors is shocking given the increasing dangers and threats posed to children in Assam.

How does the government justify this in the wake of the rising 'un-protectedness' of its children?

Figure 14: Share of Child Protection (BE) (In per cent)

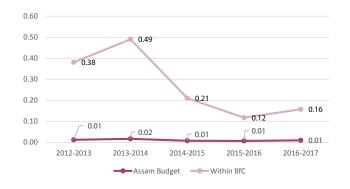
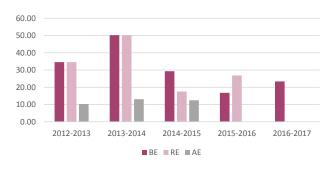


Figure 15: Child Protection (BE, RE & AE) (In ₹ Crore)



<sup>23</sup> http://www.telegraphindia.com/1160901/jsp/northeast/story\_105605.jsp#.WEJMQ6ISHIU

<sup>24</sup> http://www.achrweb.org/reports/india/JJ-Assam-2012.pdf

<sup>25</sup> ibid

 $<sup>26 \</sup>qquad http://indianexpress.com/article/explained/national-crime-records-bureau-data-2015-slight-dip-in-rape-crime-against-women-3004980/\\$ 

<sup>27</sup> http://ncrb.nic.in/StatPublications/CII/CII2014/Compendium%202014.pdf

<sup>28</sup> ibid

<sup>29</sup> https://www.facebook.com/State-Child-Protection-Society-Assam-1623712281282

<sup>30</sup> http://www.telegraphindia.com/1160508/jsp/northeast/story\_84432.jsp#.WCsOpfS6TIU

<sup>31</sup> http://www.theshillongtimes.com/2013/02/13/poor-state-of-juvenile-justice-in-assam-achr/

Table 25: Child Protection – Allocation and Expenditure (In ₹ Crore)

Child Protection (In crores)				Expenditure (In per cent)			
Year	BE	RE	AE	AE-BE	AE-BE (%)	AE-RE	AE-RE (%)
2012-13	34.57	34.57	10.30	-24.27	-70.21	-24.27	-70.21
2013-14	50.21	50.21	13.06	-37.15	-73.99	-37.15	-73.99
2014-15	29.33	17.53	12.46	-16.87	-57.53	-5.07	-28.94
2015-16	16.79	26.85	NA	NA	NA	NA	NA
2016-17	23.42	NA	NA	NA	NA	NA	NA
Average (2012-13 to 2014-15)	38.04	34.10	11.94	-26.10	-68.61	-22.16	-64.99

While the revised allocations remained the same in the first two years of the study period, it was lower than BE in 2014-15 and there was more than the BE the very next year.

What has however been a constant is the under-utilisation of the already sparse allocations. An average of 69 per cent of the BE remained unutilised (and almost 65 per cent of the RE). This under spending was as high as 74 per cent in 2013-14, the year that also saw a 45 per cent increase in allocations both at the BE and RE stages. ₹ 37.15 crore of the ₹ 50.21 crores that was allocated remained unutilised even as the children continued to suffer violence and exploitation.

Table 26: Increase and Decrease in Allocations (BE) in Child Protection – Some Examples (In ₹ Crore)

Schemes	2012-13 (BE)	2016-17 (BE)	Percentage Increase(+)/Decrease(-)
Integrated Child Protection Scheme (ICPS) STATE+CSS	30.50	17.76	-41.77
Implementation of JJ Act (STATE+CSS)	1.80	1.79	-0.56

A closer look at the allocation and spending on the scheme for implementation of Juvenile Justice in the state shows that the allocation has reduced over the years. Both allocation and expenditure was the lowest in 2014-15.

Table 27: Implementation of J.J. Act STATE+CSS (In ₹ Crore)

Year	BE	RE	AE
2012-13	1.80	1.80	1.32
2013-14	1.88	1.88	1.46
2014-15	0.95	0.95	0.87
2015-16	1.87	1.87	NA
2016-17	1.79	NA	NA

The Integrated Child Protection Scheme was launched in the Eleventh Five Year Plan in recognition of the need for much greater investment in child protection and the need to create protective mechanisms at different levels – right down to the villages. In this context, it is regrettable to note that the protection sector has been witnessing an uneven allocation of funds during the past five years. The drop in allocation to ₹7.51 crore in 2015-16 is shocking. Despite an increase of ₹ 10 crores, it has still not been able to match the allocation it began with in 2012-13.

Table 28: Integrated Child Protection Scheme (ICPS) STATE+CSS (In ₹ Crore)

Year	BE	RE	AE
2012-13	30.50	30.50	7.74
2013-14	46.25	46.25	10.13
2014-15	25.96	14.16	10.07
2015-16	7.51	16.98	NA
2016-17	17.76	NA	NA

#### **Emerging Concerns and Search for Solutions**

Assam is primarily a rural state with more than 98 per cent of its area falling under rural areas and a rural population of 86 per cent. The health indicators clearly show huge rural-urban differential. Secondly, no other state in the country is as affected by floods and conflicts as Assam, which has led to repeated internal displacement. Thirdly, over a fourth of Assam's population is involved in tea plantations whose human development indicators would be one of the lowest in the country. If today Assam has the maximum IMR and MMR, it is largely because of the poor health status of people living in tea gardens. Any intervention by the government has to factor in these three stark realities to have any significant impact. With these three in mind, the study raises following concerns and suggests ways of confronting them.

- Proportionate and even allocation of funds to various sectors: The allocation of funds to various sectors has been
  uneven and disproportionate. Education has received enormous share of funds at the cost of other sectors. One of the
  ways to tackle this uneven distribution of funds could be to undertake the exercise of child budgeting in line with gender
  budgeting.
- Address the malaise of under spending of sanctioned funds: In all sectors, a huge proportion of sanctioned funds
  remain unutilised. The reasons for non-utilisation of funds do not get mentioned in the Appropriation Account of the
  Government. One is left wondering, nay pained, at the under spending of funds meant for children and mothers who are
  malnourished. A monitoring mechanism could be put in place, first to study the spending pattern of various schemes and
  then to find ways to better utilise.
- Increase allocation of funds for Protection Sector: The protection sector is allocated far less financial resources than it deserves both in the State Budget and the BfC. It is recommended that more funds be set aside for this sector.
- Special funds to tackle child trafficking: Assam has become a much sought after 'market' for child trafficking as
  a source, transit and destination. This is largely because of poverty induced by floods, conflicts and a development
  paradigm that does not address the needs of poorer sections of society. Funds have to be allocated at two levels: at the
  level of prevention and at the level of cure. Funds are needed not only to nab the culprits and networks behind trafficking
  and the rehabilitation of rescued children, but also to address the causes that lead to disappearing of children into
  dangerous zones of human exploitation.
- Increase allocation of funds for health sector: Given the high prevalence of stunting, wasting and underweight
  children, it is important that the Government of Assam addresses the nutritional needs of children, especially in the tea
  plantations and in camps for internally displaced persons. Schemes and programmes that are need-specific and placespecific have to be introduced to engage with poor status of children and mothers in these areas. Secondly, a close
  monitoring of the Plantation Labour Act 1951 and its provisions relating to health of tea garden workers needs to be
  closely monitored.

This report coincides with the changes being witnessed in the context of the 14<sup>th</sup> Finance Commission recommendations. What is clear is that with the fiscal devolution taking place as per the recommendations, the greater burden of raising resources for children is shifting to the states, which has led to fall in allocations in most of the schemes in health and education sectors, especially under the central share.

It is critical to institutionalise a monitoring system and a watchful eye, to ensure that children do not fall through the cracks. Perhaps this is the time to take the example of Statement 22 of the national budget and introduce a separate statement for children in the state of Assam. This will enable the state government to keep the focus on children, bring all departments on board and track progress. The General Comment No. 19 (2016) on Public Budgeting for the Realization of Children's Rights (Art. 4) of the UN Committee on the Rights of the Child developed to guide the governments across the world, can be a very useful guideline.<sup>32</sup>

We have seen years in which there have been cut backs in allocations for different sectoral schemes, and there has been a fall in allocation for health and protection sectors over the years.

The key principle for budgeting for children is non-retrogression in budgeting - which means that whatever the circumstances, including economic crisis, the budget lines for children will be maintained and there will be no cut backs. After all the needs of the children need to be addressed today and they cannot wait.

 $<sup>32 \</sup>qquad \text{http://tbinternet.ohchr.org/\_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2fGC%2fGC%2f19\&Lang=encontroller.} \\$ 

#### **HAQ: Centre for Child Rights**

HAQ: Centre for Child Rights, formed in 1998, works towards the recognition, promotion and protection of rights of all children. It aims at contributing to the building of an environment where every child's rights are recognised and promoted without discrimination and in an integrated manner. HAQ believes that child rights and children's concerns have to be mainstreamed into all developmental planning and action and must also become a core development indicator.

To carry forward this mandate, HAQ undertakes research and documentation and is actively engaged in public education and advocacy. In India, HAQ pioneered the Budget for Children analysis in 2001. Over the years, it has developed skills for quick and incisive scanning of law and policy documents and commenting on them. It works with existing networks, builds alliances and partnerships with other actors/ stakeholders such as the bureaucrats, parliamentarians, judges and lawyers, police and media.

HAQ seeks to serve as a resource and support base for individuals and groups dealing with children at every level. It not only provides information and referral services but also undertakes training and capacity building for all those working with children or on issues concerning them, and for the children themselves.

HAQ works on children and governance, violence and abuse of children, child trafficking and juvenile justice. It provides legal support to children in need, particularly those who are victims of abuse and exploitation or are in conflict with the law. HAQ is the National Coordination Office of Campaign Against Child Trafficking (CACT).

#### North Eastern Social Research Centre

Founded in 2000, the mandate of North Eastern Social Research Centre (NESRC) is to be a centre that combines serious intellectual pursuits with involvement with persons and groups active in the field of social change in the region. In this pursuit, it networks with field activists and researchers in order to change official policies in favour of the poor and disadvantaged sections of society. The main areas of its involvement are tribal issues, gender issues and livelihood issues, land being central to all three categories.

In the context of ethnic and political conflict, NESRC would like to provide a platform for different groups in the Northeast to meet and search for solutions. In this search the effort of NESRC is to assist and encourage voluntary agencies and others in their intellectual and activist pursuits. Our main activities are around research, library, networking and publications.

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