



# DCWC Research Bulletin

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## DCWC Research Bulletin

### About the Document

Documentation Centre for Women and Children (DCWC), NIPCCD collects valuable research material in the area of women and children from different sources. Abstracts of these published and unpublished studies/ articles are compiled to present the vital information in a compact, encapsulated form to facilitate its users through its publication “DCWC Research Bulletin” brought out every quarter. The digital version is posted on NIPCCD website ([www.nipccd.nic.in](http://www.nipccd.nic.in)) on the slot dedicated for Documentation Centre on Women and Children for reference of readers.

Bibliographical details and sources of information given along with each abstract facilitate the users to gain access to the main document. Abstracts of unpublished reports are also covered, in case readers want to access full document, they may visit to DCWC.

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## A. Research Abstracts on Child Development

### EDUCATION

1. Chattopadhyay, Aparajita and Durdhawale, Vijaya. (2009). Primary schooling in a tribal district of rural Maharashtra : some policy relevance. *Journal of Educational Planning and Administration*, October, 23(4): 369-385.

Source: [www.nuepa.org](http://www.nuepa.org)

*Background:* Article 45 of the directive principles of the Constitution of India provides for free and compulsory education for all children up to the age of 14 years. To cover all the children, government decided to provide incentives, such as mid-day meal, free text books, stationary and uniforms, to disadvantaged pupils. In spite of substantial expansion of the elementary education system, large number of children, particularly girls continue to be out of school.

*Objectives:* To assess the situation of non-attendance of schools among children age 6-12 years as reported by their parents; to understand the reasons behind non-attendance and to know the quality of schools of the selected villages.

*Methods:* A total of 245 children in the age group of 6-12 years from Nandurbar district of Maharashtra were selected for the study. Both Qualitative and Quantitative tools were applied.

*Findings:* About 96 per cent parents were Hindus; 78 per cent belonged to scheduled tribe category; 51 per cent fathers and 85 per cent mothers were illiterate; 33 per cent households experienced seasonal migration; 87 per cent lived in Kuccha household; out of 245 children, 60 per cent were going to primary schools; 70 per cent boys were attending schools, against only half of the girls; among the students 44 per cent faced or were facing some problems in studying; majority of the students who either dropped out or were going to schools did not know how to read and write; 40 per cent parents complained that the teacher did not teach properly; majority parents said that until and unless their economic status improved, they will not be able to send their children to school as they could not afford both the school related cost and the opportunity cost. One fourth of the parents complained about constraints in transportation as a reason for non-attendance in schools; irrespective of the sex of the child; out of the dropped-out children, a large proportion of the parents of drop outs cited the burden of household work, poverty and inability of children to read and write as reasons for non-attendance; a large proportion of the parents of the non-attendees said that only when their economic condition improves or

the transportation facility was available, then only they will allow their children to go to school; increasing age, being a girl child, more than six members at household, being a scheduled tribe, location of schools beyond 1km, and 'non-favourable attitude' towards girls were the main factors of non-attendance of the children age 6-12 years as whole, and specifically girls; about 40 per cent population of the villages migrated to Gujarat during the months of October to march; children were absent from schools for 5-6 months for such migratory movement; schools remained closed for 5-10 days in a month as teachers visited Tehsil Office for collecting salary, attending teachers meet, Supplying school statistics to Block Research Offices and attending educational training; in some villages student-teacher ratio ranged from 24 to 30, based on recorded statistics, though in actual terms it was up to 65; fifth class was available only in two schools, three schools were having classes up to seventh grade; seven schools were having only one classroom where students from 1<sup>st</sup> to 4<sup>th</sup> standards sat together; various classes were held in verandahs and other open spaces; four schools were having single teacher, and two teachers ran another four schools; 70 per cent parents reported that free books, and free dresses were provided, though toilet facilities were lacking in most of the schools; about half of the schools did not had the provision for mid-day meals, in most cases uncooked rice was distributed to students for lack of space for cooking, fuel and also for low attendance of students; the average attendance ranged between 30-40 per cent, but the teacher records showed 100 per cent attendance; classes 1-4 were being imparted identical instructions without any difference with regard to syllabus or content.

*Recommendations:* To retain children in schools lucrative elements like adding extra classes, providing good quality mid-day meals, compulsory vocational training should be included in the course curriculum; policy makers should sort out and prioritise area specific problems; provision of transportation and basic amenities in schools needs to be guaranteed to attract and retain pupils; maintaining of registers and clerical jobs must be done by the para -teachers while teachers must be trained for elementary level teaching.

**Key Words:** 1.EDUCATION 2.PRIMARY EDUCATION 3.PRIMARY SCHOOLING 4.CHILD DEVELOPMENT 5.GROWTH AND DEVELOPMENT 6.TRIBAL DISTRICT 7.ENROLMENT 8.ILLITERACY 9.SARVA SHIKSHA ABHIYAN 10.SOCIO ECONOMIC FACTORS 11.RIGHT TO EDUCATION 12.SCHOOL GOING CHILDREN 13.NON-ATTENDANCE 14.DROPOUTS 15.PRIMARY SCHOOLS 16.NATIONAL POLICY ON EDUCATION 17.OPERATION BLACKBOARD 18.DISTRICT PRIMARY EDUCATION PROGRAMME 19.RURAL MAHARASHTRA.

2. Deb, Sibnath, Chatterjee, Pooja and Walsh, Kerryann. (2010). Anxiety among high school students in India: comparisons across gender, school type, social strata and perceptions of quality time with parents. *Australian Journal of Educational and Developmental Psychology*, 10: 18-31.

Source: [www.newcastle.edu.au/journal/ajedp](http://www.newcastle.edu.au/journal/ajedp)

*Background:* Anxiety is one of the most common psychological disorders in school aged children and adolescents worldwide. In India, the main cause of anxiety among school children and adolescents is parent's high educational expectations and pressure for academic achievement.

*Objectives:* To understand anxiety among, adolescents in Kolkata city; to study anxiety across gender, school type, socio-economic background and mother's employment status; to examine adolescent's perceptions of quality time with their parents.

*Methods:* A group of 460 adolescents comprising of 220 boys and 240 girls, aged 13-17 years were selected for the study. Adolescents were students of class IX to class XII standard. Tools used for the study included a Semi Structured Questionnaire and the State Trait Anxiety Inventory.

*Findings:* About 48.0 per cent were boys and 52.0 per cent were girls; age group of students was divided into four clusters: 13-14 years (25.0%), 14-15 years (26.0%), 15-16 years (25.0%) and 16-17 years (23.0%). In terms of their educational background, the adolescents were from class IX (N =117), class X (N =121), class XI ( N =115) and XII (N =107); 67.0 per cent adolescents were from nuclear families and 33.0 per cent were from joint families; 43.0 per cent parents were university graduates; 14.0 per cent fathers and 34.0 per cent mothers had no formal university qualifications; 62.0 per cent fathers worked in the non-government organisation and 33.0 per cent father worked in the government service sector; 73.0 per cent mothers did not work ; 30.0 per cent fathers were earning Rs 15,000 per month, 46.0 per cent were earning between Rs 6,000 to 15,000 per month; the mean anxiety score in the case of adolescent boys (24.0) was slightly higher than for adolescent girls (22.5); 20.1 per cent of boys and 17.9 per cent of girls were suffering from high anxiety as measured using the State Trait Anxiety Inventory (STAI) . Comparison of anxiety between the adolescents attending English and Bengali medium schools revealed that the mean values for the adolescents attending Bengali medium schools (24.6) was slightly higher than that for adolescents attending English medium schools (21.6). The mean anxiety scores were found to be the highest for the middle socio-economic group (30.0), followed by the low socio-economic group (28.6) and then the high (23.6)socio economic group; the standard deviations for the high, middle and low socio-economic groups were 5.5, 8.0, and 6.3 respectively; the mean anxiety score for adolescents having working mothers (26.2) was



slightly higher than that for adolescents having non-working mothers (23.4); the standard deviations were 6.0 and 5.4 respectively for the two categories; 79.8 per cent adolescents fathers and 93.4 per cent adolescents mothers found time to speak to them during week days; adolescents confirmed that 64.0 per cent of the fathers and 70.0 per cent of their mothers took them out during holidays; 67.9 per cent adolescents responded affirmatively that they received quality time from their fathers while 78.7 per cent of them received the same from their mothers; 40.0 per cent of the adolescent felt free to communicate their personal problems with their fathers while 60.0 per cent of them could do so with their mothers; adolescents were more comfortable in communicating with their mothers than with their fathers; females received higher quality interactions and more time from both parents compared to their male counterparts.

*Conclusion:* Parent's education is required to deal with the phenomenon of educational pressure and the comparison of the performance of one's own child with the best ranked students. Further research is required to understand the ways in which culture and anxiety interact and to unpack risk and protective factors for the development of anxiety in Indian adolescents.

**Key Words:** 1.EDUCATION 2.STRESS 3.ADOLESCENTS 4.ANXIETY 5.CHILD DEVELOPMENT 6.HIGH SCHOOL STUDENTS 7.SOCIAL STRATA 8.SCHOOL GOING CHILDREN 9.SOCIO ECONOMIC BACKGROUND 10.GENDERWISE PERCEPTION 11.MEDIUM OF INSTRUCTIONS 12.GENDER 13.QUALITY TIME 14.EMPLOYMENT STATUS 15.STATE-TRAIT ANXIETY INVENTORY 16.PSYCHOLOGICAL TEST 17.KOLKATA

3. Kaur, Satvinderpal. (2012).  
School dropouts at elementary stage: a study of selected districts of Punjab. *Man and Development*, September, 117-126.

*Background:* School education is the foundation on which the structure of higher education is built. Many children, who enter school, are unable to complete even elementary education as multiple factors are responsible for their dropping out of school. Many students drop out as a result of school factors such as absenteeism, attitude and behavior of teachers, failure and poor performances. Millennium Development Goal (MDG) speaks for universalisation of education and promising gender equality. The government sponsored Sarva Shiksha Abhiyan focuses on increasing enrolment rates and reducing dropout rates. Sarva Shiksha Abhiyan remains successful to enhance enrolment figures but only marginal dent has been made in reducing dropout rates.

*Objectives:* To find out the causes responsible for the dropping out of school.

*Methods:* The present study was carried out in Punjab region. A sample of 150 children, 65 boys and 85 girls were included in the study. The sample comprised rural, urban, male female students who dropped out from school. Data collection involved the use of interview schedule developed exclusively for the study .

*Findings:* About 83 per cent of the boys and 88 per cent of the girls expressed that they dropped out from school due to poverty in the family; 77 per cent of the girls respondents and 56 per cent of the boys dropped out due to illiteracy of their parents; 41 per cent of the boys and 61 per cent of the girl dropouts complained that their home atmosphere was not peaceful for their study; 27 per cent of boys and 37 per cent of girls respondents agreed that the family size was large and parents could not afford education for all the children; 77 per cent of the girls and 60 per cent of boy school dropouts mentioned that they had to take care of siblings as their parents went out for work; dropouts complained that they had to live in single rooms with poor lightening facility for the whole family; 70 per cent of girls and 60 per cent of boys complained that their parents did not motivate them to study; 35 per cent of girls and 15 per cent of boys viewed that they dropped out from school because their parents were planning for their early marriage; 81 per cent of the boys and 77 per cent of the girls said that their parents were engaged in labour work and they also had to go along with them; 78 per cent of the boys and 55 per cent of the girls expressed that their parents had monetary expectation from them; 38 per cent of dropouts boys and 57 per cent of girls reasoned that they did not like to go to school; 57 per cent of the boys and 53 per cent of the girl dropouts cited that they had crowded

classrooms and teachers did not pay attention to them; 38 per cent of boys and 58 per cent of girls expressed that they had no interest in studies; 37 per cent of boys and 39 per cent of girls said that they had to walk two-three kilometers daily for school; 35 per cent of the boys and 21 per cent of the girl children complained that they did not liked school because teachers gave them corporal punishment; 59 per cent of the boys and 46 per cent of the girls expressed their dislike of classroom teaching which was a serious criticism of the school system, and quality of education imparted in schools; 39 per cent of the boys and seven per cent of the girl dropouts admitted they left school because outside activities were more tempting for them; 16 per cent of boys and 25 per cent of girls left that it was not safe to go to school due to some family feud in the community; 46 per cent boys and 50 per cent girls dropped out because they frequently fell ill; 66 per cent of the boys and 37 per cent of the girls expressed that there was no employment after school education; 58 per cent of the girls admitted that their parents withdraw them from school on account of co-education in school.

*Conclusion:* Children were out of school and leave school for various reasons like poverty, illiteracy of the parents, engagement in labour work, need of children at home for domestic duties, unattractive school system, absence of neighbourhood schools, lack of employment opportunities after school education, etc. SSA has been able to enhance the enrolment figures but could not tackle the problem of dropouts and silent exclusion of children. Educational policies must reflect local socio-economic conditions of the country by considering regional and gender dimensions.

**Key Words:** 1.EDUCATION 2.SCHOOL DROPOUTS 3.CHILD DEVELOPMENT 4.GROWTH AND DEVELOPMENT 5.ENROLMENT 6.PRIMARY EDUCATION 7.ELEMENTARY EDUCATION 8.SOCIO-ECONOMIC STATUS 9.ILLITERACY 10.SCHOOL CHILDREN 11.MILLENNIUM DEVELOPMENT 12.GOAL 13.SARVA SHIKSHA ABHIYAN 14.EDUCATION PROGRAMMES 15.EARLY CHILDHOOD CARE 16.RURAL AREAS 17.DROPOUT RATIO 18.POVERTY 19.EDUCATION SYSTEM 20.SCHOOL SYSTEM 21.FAMILY FACTORS 22.PSYCHOLOGICAL FACTORS 23.PUNJAB.

4. Mondal, N.K., Paul, P.K. and Baskey, S.K. (2012).  
Impact of school infrastructure on academic achievement level of students: a micro study in West Bengal. *Indian Journal of Social Development, January- June, 12(1): 41-49.*

*Background:* Education is important not only for the full development of one's personality but also for the sustained growth of the nation. The climate of a school has an important effect on student learning. The study explores the potentiality of school's infrastructure in upgrading the academic performance of students in West Bengal.

*Objectives:* To examine the effectiveness of infrastructure in enhancing academic achievement level of students; to compare the impact of school's infrastructure and academic achievement of students in various surveyed schools.

*Methods:* The data was collected from 14 schools of Burdwan districts in West Bengal by using a structured questionnaire. A non – parametric chi – square test ( $\chi^2$ ) and binary logit regression was used for the purpose of analysis and interpretation. A sample size of 100 respondents was taken, out of which 50 were guardians and 50 were teachers and school authorities.

*Findings:* It was observed that out of the total surveyed schools aggregate number of students per school was ranging from 600 to 1500 except Burdwan Nehru Vidyamandir where the total member of students were significantly high as compared to other surveyed schools; teacher-student ratio per school was ranging from 1:23 to 1:59 except for Dwarhatta Rajeswari Girls School, Somnagar , R. K. Vidyamandir and Burdwan Nehru Vidyamandir where the teacher student ratio was 1:87, 1:69 and 1:98 respectively; in Somnagar R. K. Vidyamandir and Burdwan Nehru Vidyamandir the student per class room was 98 and 79 respectively; the general academic achievement of the students on the basis of secondary examination conducted by WBBSE varied significantly over the number of years; the percentage of 1<sup>st</sup> division acquired by the students over total candidates of last five years varied from 10.08 per cent to 31.63 per cent except for Dubrajdighi High School (6.9%), Somnagar R. K. Vidyamandir (7.57%) and T. N. High School (7.84%); the lower was the teacher-student ratio, the higher was the level of high academic achievement and vice versa.

*Conclusion:* Many parameters affect the achievement level of the students like home environment, academic level of parents, social environment, socio economic status and school infrastructure. Among these school infrastructure is one important parameter on which the overall achievement level of the students depends.

**Key Words:** 1.EDUCATION 2.ACADEMIC ACHIEVEMENT 3.CHILD DEVELOPMENT 4.GROWTH AND DEVELOPMENT 5.SCHOOL INFRASTRUCTURE 6.ACADEMIC PERFORMANCE 7.SECONDARY 8.HIGHER SECONDARY SCHOOL 9.URBAN 10.RURAL AREAS 11.CHI-SQUARE 12.SOCIO-ECONOMIC STATUS 13.HOME ENVIRONMENT 14.SOCIAL ENVIRONMENT 15.NON-PARAMETRIC TEST 16.STUDENTS PERCEPTION 17.NON PARAMETRIC 18.BURDWAN 19.WEST BENGAL.

## GROWTH AND DEVELOPMENT

5. Dambhare, Dharampal G. et al. (2012).  
Age at menarche and menstrual cycle pattern among school adolescent girls in Central India. *Global Journal of Health Science*, January, 4(1) : 105-111.

Source : [www.ccsenet.org](http://www.ccsenet.org)

*Background:* Adolescence in girls has been recognised as a special period which signifies the transition from girlhood to womanhood. Adolescent girls constitute a vulnerable group, where female child is neglected. Menarche is a part of the complex process of growing up. The age of onset of menstruation varies from 9 to 18 years. Problems like psychological adjustment with menstruation, premenstrual and menstrual symptoms and disorders of menstruation are common among adolescents.

*Objectives:* To determine the age at menarche and patterns of menstruation among school adolescent girls and explore its variation across socio-economic and demographic factors.

*Methods:* A cross sectional study was conducted among school adolescent girls of classes five to twelve in the district Wardha, Maharashtra. Random selection of six schools and 1100 girls from these schools were enrolled, three rural and three urban schools were selected for the study. Data was collected using a Pre – designed, pre – tested self administered questionnaire ; chi – square value for testing statistical significance .

*Findings:* Of the 1100 questionnaires distributed 1080 were filled correctly; 324 adolescent girls were of rural areas and 756 were from urban areas; 48.1 per cent girls had not yet experienced their first menstruation at the time of interview; the age of the school girls interviewed was between 10 to 19 with mean and standard deviation of  $15.45 \pm 1.75$  years; the mean age and standard deviation at menarche was  $13.67 \pm 0.8$  years; 8.38 per cent adolescents had a menstrual cycle length shorter than 21 days; 69.52 per cent had a cycle length between 21 and 35 days and 22.1 per cent had a cycle length of 35 days; there was no statistically significant difference on cycle length among the subjects living in urban or rural residence; the mean age at menarche was 0.16 years younger for urban girls compared to rural area, which was not statistically significant; the menstrual cycles were regular in 70 per cent of the urban and 68.42 per cent of the rural subjects; the overall prevalence of dysmenorrhoea was 56.15 per cent; 24.76 per cent girls remained absent from schools because of dysmenorrhoea; dysmenorrhoea was more frequently observed among

adolescents with irregular cycle (57.9%) as compared to those with regular cycle (42.1%); 7.13 per cent of the adolescents girls used analgesics to relieve the pain; premenstrual symptoms were present in 56.15 per cent girls; self-medication was practiced by 7.13 per cent of the adolescent girls; school girls from high socio-economic class had significantly lower mean menarcheal age compared to girls from low socio-economic class in both urban and rural area; in urban areas, school girls involved in vigorous sport activity had a significantly higher age of menarche as compared to girls in non-sport activity; 24.42 per cent of the adolescents had no information prior to the commencement of menstruation; 38.15 per cent subject had got information about menarche from their mothers.

*Conclusion:* A school health education on menstrual problems targeting female adolescents and their parents, and routine screening for menstrual problems by healthcare providers, can help to prevent the absenteeism in the school.

**Key Words:** 1.GROWTH AND DEVELOPMENT 2.ADOLESCENT GIRL 3.CHILD DEVELOPMENT 4.HEALTH 5.MENSTRUAL CYCLE PATTERN 6.SCHOOL ADOLESCENT GIRLS 7.MENARCHE 8.SCHOOL ADOLESCENT GIRLS 9.SOCIO-ECONOMIC FACTORS 10.SOCIO ECONOMIC FACTORS 11.MENSTRUAL ABNORMALITIES 12.WARDHA 13.MAHARASHTRA.

6. Nayak, Sanjay Kumar and Jahan, Masroor. (2010).  
Cross-sectional analysis of psychological aspects of adolescent underachievers. *Industrial Psychiatry Journal*, Jul-Dec., 19(2) : 105-110.  
Source: [www.industrialpsychiatry.org](http://www.industrialpsychiatry.org)

*Background:* Under achievement is most commonly defined as a discrepancy between potential or ability and performance or achievement. Factors commonly associated with under achievement include low academic self-concept, low self-efficacy, low self-motivation, low goal valuation, and negative attitude toward school and teachers. Under achievers have lower academic self-perceptions, lower self-motivation and self-regulation, less goal directed behavior, and more negative attitudes towards school than high achievers.

*Objectives:* To assess the feeling about reading of adolescent underachievers, including emotional difficulties, physical problem , mechanism of reading, self-concept, and interest in reading.

*Methods:* 88 students, studying from 6 to 10 standards, were selected from different schools of Bokaro Steel City. Tools used for the study consisted of socio- demographic data sheet and a self rating check list .

*Findings:* The mean age of achievers and underachievers was 14.97 years and 14.291 years, respectively; most of the subjects were boys 92.5 per cent in achievers group and 73.85 per cent in under achievers group; the average of obtained marks in last school examination for achievers was 82.87 per cent and for underachievers it was 50.69 per cent; under achievers had statistically significantly more emotional difficulties, physical problems, poor mechanism of reading, low self-concept and less interest in learning; item wise analysis showed that 60.4 per cent underachievers responded “somewhat true in Item 1, “I am a slow reader”, whereas only 25 per cent of achievers responded “somewhat true” in this item; in Item 5 ‘Reading makes me nervous’ 16.7 per cent of under achievers responded “very true” while five per cent achievers similarly responded in the same item; achievers group responded more difficulties in Item 6 ‘reading gives me a headache’ as compared to under achievers; in comparison to achievers group, under achievers faced more difficulties in Item 11 ‘It is hard for me to get the point of a story’ 45.8 per cent responded “somewhat true” and 16.7 per cent responded ‘very true’; in item number 16 ‘I don’t get many new ideas when I read’ 18.8 per cent responded “very true”; in item number 14 “when I read, I am usually thinking of something else” 20.8 per cent responded “very true”; in item number 17 “I only read when I



have to” 50 per cent responded “very true” and in item number 20 “when I read, I lose track of what I am reading” 25 per cent responded “very true”; in all items, lesser number of achievers responded “somewhat true” and “very true” than under achievers; there was no significant differences in age and in parents monthly income between achievers and under achievers.

*Conclusion:* There were significant differences between underachievers on all five domains. These results suggest that underachievers and achievers differed in their feeling about reading.

**Key Words:** 1.GROWTH AND DEVELOPMENT 2.ADOLESCENT PROBLEM 3.CHILD DEVELOPMENT 4.ADOLESCENTS 5.UNDER ACHIEVERS 6.EMOTIONAL DIFFICULTIES 7.PHYSICAL PROBLEM 8.MECHANISM OF READING 9.SELF CONCEPT 10.INTEREST IN READING 11.READING DIFFICULTY 12.ACADEMIC CURRICULUM 13.EVALUATIONS 14.EDUCATION 15.SCHOOL CHILDREN 16.PSYCHOLOGICAL PROBLEMS 17.BEHAVIORAL DISTURBANCE 18.SKILL DEVELOPMENT 19.SELF PERCEPTION 20.SOCIO-ECONOMIC FACTORS 21.BEHAVIOUR PROBLEM 22.BOKARO

7. Sarkhel, Sujit et al. (2006).  
Prevalence of conduct disorder in school children of Kanke. *Indian Journal of Psychiatry*, 48: 159-164.  
Source: [www.indianjpsychiatry.org](http://www.indianjpsychiatry.org)

*Background:* The term conduct disorder (CD) refers to a persistent pattern of anti-social behavior in which the individual repeatedly breaks social rules and carries out aggressive acts that upsets other people. The ratio of males to females with conduct disorders is lower for the adolescent onset type than for the childhood- onset type. Attention-deficit hyper activity disorder (ADHD) is a common comorbidity in children with conduct disorder.

*Objectives:* To find out the prevalence of CD, its DSM-IV sub types and comorbid ADHD among school children of Kanke.

*Methods:* The present study was conducted in various schools of Kanke, Ranchi District. A total of 240 students studying in classes V to X were included in the study using stratified random sampling technique. All the children were in the age group of 10-15 years of age.

*Findings:* Out of 240 students, 19 were identified by Schedule for Affective Disorders and Schizophrenia for School-Age Children-Present and Lifetime Version (K-SADS-PL). 11 students were diagnosed of conduct disorder out of which nine were boys and two were girls; the prevalence of CD in the present study was found to be 4.58 per cent; prevalence among boys was 6.81 per cent and among girls 1.85 per cent; the ration between boys and girls with conduct disorder was found to be 4.5:1; in childhood onset type, the ratio of boys to girls was found to be 7:1 while in adolescent onset type was reduced to 2:1; 72.72 per cent of CD was found to be more common in comparison to adolescent onset 27.27 per cent; CD of moderate severity was found in 63.63 per cent, mild severity in 36-36 per cent, while none had severe CD; among students with conduct disorder 36.36 per cent had comorbid ADHD diagnosis, 75 per cent were of predominantly hyperactive-impulsive type and 25 per cent were of combined type; none was found to have predominantly inattentive type of ADHD; difficult temperament was found in 72.7 per cent of the students with conduct disorder while none had difficult temperament in the other group; easy temperament was found in 37.5 per cent of those who did not had conduct disorder but was absent in children with CD; in the present study, lying, bullying and cruelty to animals were most commonly found symptoms whereas, aggressive stealing, forced sexual activity, fire setting and running away overnight were absent in students with CD. No significant difference was found in lying and truancy between the two groups.

*Conclusion:* The prevalence of conduct disorder was 4.58 per cent, more common in boys. Certain socio demographic and clinical variables such as peer adjustment, environment in neighbourhood, parenting style and intelligence were not probed, keeps room for future improvement and investigation.

**Key Words:** 1.GROWTH AND DEVELOPMENT 2.BEHAVIOUR PROBLEM 3.CHILD DEVELOPMENT 4.SCHOOL CHILDREN 5.EDUCATION 6.CONDUCT DISORDER 7.ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD) 8.EARLY INTERVENTION 9.ADOLESCENT 10.SOCIO DEMOGRAPHIC 11.DISORDER 12.MENTAL HEALTH 13.KANKE 14.RANCHI.

8. Savita, Duhan, Krishna and Balda, Shanti. (2012).  
Socio-economic variables: a contributing factor for adolescent's  
personality development. *Journal of Psychology*, 3(1): 47-50.  
Source: [www.krepublishers.com](http://www.krepublishers.com)

*Background:* Family is a key factor in the development of children and adolescents. It is a vital part of the system of childhood and adolescence, as well as a system in its own right. Family disorganization indicates detachment in those family ties, which should exist between family members to create a smooth functioning as a group. Predictions of specific form of deviant or damaged behavior depend upon the child's personality and behavior.

*Objectives:* To assess and compare the personality components of the adolescents from disorganized families.

*Methods:* A sample of 90 boys from both rural and urban areas in Hisar city of Haryana State was selected for the study. All the boys belonged to the age group of 13-18 years. Tools used for the study were questionnaires and Multi Dimensional Personality Assessment form.

*Findings:* Low caste respondents scored significantly high mean values in maturity ( $X= 6.66 \pm 1.81$ ) level than the middle and high caste respondents; low caste respondents were significantly lower in tension ( $X= 4.79 \pm 1.47$ ), self-control ( $X= 5.04b \pm 1.45$ ) and self-sufficiency ( $X= 4.75b \pm 1.93$ ) than middle and high caste respondents; high caste respondents were significantly higher on mental health ( $X= 6.20a \pm 1.74$ ) than low ( $X= 5.36 \pm 1.36$ ) and middle ( $X= 5.69b \pm 1.70$ ) caste respondents; mean scores differences revealed that high caste respondents were slightly better on academic achievement ( $X= 5.18 \pm 1.35$ ) and general ability ( $X= 3.51 \pm 1.46$ ) than middle and low caste respondents; respondents with graduated parents were significantly higher in maturity ( $X= 6.07 \pm 1.76$ ), self-control ( $X= 6.94 \pm 1.51$ ), self-sufficiency ( $X= 6.72 \pm 1.90$ ) and tension ( $X= 6.38 \pm 1.68$ ); adolescents of illiterate or primary level educated parents were significantly lower on creativity ( $X= 3.45 \pm 1.53$ ), maturity level ( $X= 5.00 \pm 1.23$ ) and higher on leadership ( $X= 6.00 \pm 1.64$ ) against to rest of the categories; adolescents of up to primary level educated parents were significantly lower ( $X= 4.94 \pm 2.10$ ) than adolescents of intermediated ( $X= 5.93 \pm 1.65$ ) and graduated ( $X= 6.32 \pm 1.63$ ) parents on the mean scores of mental health; respondents of low income groups differed significantly in their adaptability ( $X= 5.73 \pm 1.57$ ) and maturity level ( $X= 6.43 \pm 1.73$ ) from high income group respondents adaptability ( $X= 4.80 \pm 1.80$ ) and maturity level ( $X= 5.46 \pm 1.63$ ); children of low income group differ significantly in their general ability ( $X= 2.60 \pm 1.27$ ) from the adolescents of middle income group ( $X= 3.60$ )

$\pm 1.61$ ) and on individualism ( $X= 5.90 \pm 1.62$ ) from the adolescents of high income group ( $X= 6.73 \pm 1.33$ ) families respectively; on the basis of mean scores results showed slightly higher score of respondents from middle income group families in enthusiasm ( $X= 5.06 \pm 1.31$ ), creativity ( $X= 5.30 \pm 2.35$ ) and self-sufficiency ( $X= 6.12 \pm 2.17$ ) against to respondents of low and high income group families.

*Conclusion:* Caste, parental education level and family income are the contributing factors in personality of adolescents along with their family structure. Family and community must provide financial support to disorganised families and understand the individual differences in adolescents regarding these factors.

**Key Words:** 1.GROWTH AND DEVELOPMENT 2.PERSONALITY DEVELOPMENT 3.ADOLESCENT 4.CHILD DEVELOPMENT 5.PERSONALITY DEVELOPMENT 6.SOCIO-ECONOMIC VARIABLES 7.URBAN 8.RURAL DISORGANISED FAMILIES 9.PERSONALITY ASSESSMENT 10.PARENTAL EDUCATION 11.FAMILY INCOME 12.PARENT CHILD RELATIONSHIPS 13.CASTE 14.PSYCHOLOGICAL DIFFERENCE 15.HEALTH 16.MENTAL HEALTH 17.HISAR CITY 18.HARYANA.

## HEALTH

9. Brahmbhatt, Krutarth R. and Oza, Umesh N. (2012).  
Obesity among adolescents of Ahmedabad city, Gujarat, India : a community based cross-sectional study. *International Journal of Biological and Medical Research*, 3(2) : 1554-57.  
Source: [www.biomedscidirect.com](http://www.biomedscidirect.com)

*Background:* Adolescence is a period of transition from childhood to adulthood. In India, about one fifth of the total population consists of adolescents. Obesity is emerging as an important health problem in urban areas, paradoxically co-existing with under-nutrition imparting Double Burden of Disease Adolescent Obesity is increasingly being observed with the changing life style of families, with increased purchasing powers and increasing hours of inactivity and dietary and cultural transition.

*Objectives:* To determine the prevalence of overweight and obesity among adolescents in Ahmedabad.

*Methods:* The present study was carried out in Ahmedabad Municipal Corporation Area. A total of 900 adolescents of 10-19 years of age, from all six zones of AMC were included in the study; cross sectional study ; pre tested , semi – structured performa was used for the study

*Findings:* About 48.8 per cent were females and 51.2 per cent were males; among both sexes, females and males, the highest proportion of study subjects were from 14-15 year age group; the mean age of adolescents was  $14.85 \pm 2.57$  years , while the mean age for females and males was  $14.93 \pm 2.56$  and  $14.78 \pm 2.58$  years respectively; 13.3 per cent adolescents were found overweight, and 5.4 per cent were found obese; the prevalence of overweight obesity found in females was 6.2 per cent and 2.6 per cent respectively, while in males it was 7.1 per cent and 2.9 per cent; the prevalence of overweight and obesity was highest in the age group 16-17 years, the prevalence in this age group for overweight and obese was 3.7 per cent and 1.9 per cent respectively; the highest prevalence of overweight and obesity was found in socio economic status Class I and Class II, this difference was statistically highly significant; the mean birth order of overweight-obese adolescent was  $2.29 \pm 0.89$ , while of normal adolescent was  $2.13 \pm 1.11$ , the difference was found statistically not significant; meantime spent sitting idle by overweight, obese adolescents was  $1.79 \pm 0.93$  hrs, while for normal adolescents it was  $1.35 \pm 0.8$  hours; the mean time spent physically active by females was  $34.26 \pm 24.91$ , while for males it

was  $29.10 \pm 21.06$ ; the meantime spent, physically active by adolescents aged 10-14 years was  $33.45 \pm 23.37$ , while that of 15-19 years was  $30.10 \pm 22.88$ ; the mean time spent physically active by overweight-obese adolescent was  $18.93 \pm 14.38$ , while for normal adolescents it was  $34.55 \pm 23.80$ ; the mean time spent physically active by overweight-obese female was  $37.71 \pm 25.14$ , while for normal female it was  $18.54 \pm 16.41$ ; the mean time spent by overweight-obese male was  $19.28 \pm 12.42$ , while that of normal male was  $31.48 \pm 22.02$ ; the mean calorie intake by adolescents was  $1925.40 \pm 500.88$ , the mean calorie intake by females was  $1716.37 \pm 341.22$ , while that of males was  $2124.45 \pm 545.93$ ; the mean calorie intake by overweight-obese adolescents was  $2348.89 \pm 407.47$ , while that of normal adolescent was  $1827.49 \pm 468.65$ ; the mean calories taken from junk food by adolescents was  $315.20 \pm 239.47$ , the mean calories from junk food taken by females was  $286.89 \pm 143.00$ , while by males was  $342.17 \pm 301.84$ .

*Conclusion:* Higher socio-economic status, lack of physical activity, junk foods, inadequate sleep duration at night was strongly associated with overweight and obesity. Interventions should be done at adolescence period to prevent the obesity in adulthood.

**Key Words:** 1.HEALTH 2.OBESITY 3.OVERWEIGHT 4.ADOLESCENTS 5.BODY MASS INDEX 6.CHILD DEVELOPMENT 7.GROWTH AND DEVELOPMENT 8.SOCIO-ECONOMIC FACTORS 9.MAGNITUDE OF OBESITY AND OVERWEIGHT 10.URBAN AREA 11.CHILD HEALTH 12.NUTRITION 13.NUTRITIONAL STATUS 14.BIRTH ORDER 15.AHMEDABAD 16.GUJARAT.

10. Juyal, Ruchi. et al. (2012).  
Practices of menstrual hygiene among adolescent girls in a district of Uttarakhand. *Indian Journal of Community Health, April-June, 24(2) : 124-128.*

Source: [www.iapsmupuk.org](http://www.iapsmupuk.org)

*Background:* Menstrual hygiene is an issue that every girl and woman has to deal with in her life, but there is lack of awareness on the process of menstruation, the physical and psychological changes associated with puberty and proper requirements for managing menstruation. Issues associated with menstruation are never discussed openly and this burdens young girls by keeping them ignorant of this biological function. Although menstruation is a natural process, it is linked with several misconceptions and practices, which sometimes result's into adverse health outcomes.

*Objectives:* To elicit the knowledge and source of information regarding menstruation among the adolescent girl students; to find out the practices of menstrual hygiene among them.

*Methods:* A total of 485 girls students studying in classes 9<sup>th</sup> to 12<sup>th</sup> of one rural and one urban inter colleges of district Dehradun were selected for the study. The study was an observational cross sectional study .

*Findings:* About 53.6 per cent of the girls were in the age group of 15-16 years; 27.8 per cent were of 17-18 years age group; 92.1 per cent of the girls were Hindus; 85 per cent of the students were from nuclear families; 64.5 per cent of the girls were aware about menstruation prior to the attainment of menarche; awareness among rural girls was higher (71.1%) as compared to urban girls (57.0%). There were varied sources from which the girls derived information about the menstruation process; friends were the first informant in about 31.8 per cent of girls and 31.2 per cent of mothers were source of information; the mean age of menarche of the respondents was 12.9 years; 29.1 per cent girls were having knowledge about the reproductive system as the source of bleeding during menstruation; 21.9 per cent of the students thought the urinary system as its source; 70.9 per cent of the girls were either not aware or had wrong information; the girls with correct information were significantly higher in urban (34.1%) than rural area (24.7%); during menstruation, 38.4 per cent and 34.9 per cent girls were using sanitary napkins and cloth absorbents respectively; among the rural girls (66.1 per cent) as compared to the urban girls (33.9%); the uses of both sanitary napkins as well as cloth pads was more among urban girls; among the 279 girls who were using cloth pads during



menstruation, approximately half of them (51.3%) were reusing it after washing; out of 143 girls who were reusing the old cloth after washing 88.1 per cent were drying it in the sunshine; about 11.9 per cent girls accepted drying it in the shade or some hidden place; two out of every three girls were taking daily bath during their menstrual periods; the practice of daily bathing was significantly more in urban girls ( $P < 0.05$ ); majority of the girls were washing their genitalia with water daily.

*Recommendations:* Mothers and peers need to be equipped with the correct information as well as communication skills, so that adolescent girl is ready for this important physiological event in her life; special educational programmes in school curriculum, along with the involvement of parents, particularly mothers should be conducted to wipe out the age old misconceptions.

**Key Words:** 1.HEALTH 2.MENSTRUAL HYGIENE 3.ADOLESCENT GIRLS 4.CHILD DEVELOPMENT 5.SOCIO ECONOMIC STATUS 6.AWARENESS 7.HEALTH 8.RURAL AND URBAN AREAS 9.GROWTH AND DEVELOPMENT 10.CROSS SECTIONAL STUDY 11.HEALTH PRACTICES 12.UTTARAKHAND.

11. Mohapatra, Archisman et al. (2011).  
Situational analysis of ASHAs with respect to comprehensive child survival programme : a study from Chiraigaon block of district Varanasi. *Indian Journal of Community Health*, 22(2) & 23(1): 15-19.  
Source: [www.iapsmupuk.org](http://www.iapsmupuk.org)

*Background:* Uttar Pradesh has been reckoned as one of the states with the highest infant and maternal mortality rates in India. The state government of Uttar Pradesh has adopted the Integrated Management of Neonatal and Childhood Illnesses (IMNCI) strategy with additional customised MCH care provisions under the Comprehensive Children Survival Programme (CCSP).

*Objectives:* To analyse the ASHA's practice with respect to CCSP in related situations.

*Methods:* The present study was conducted in Chiraigaon Community Development Block of Varanasi. A total of 173 ASHA's working in Chiraigaon Block were selected for the study. A pre – designed and pre –tested semi – structured questionnaire pertinent to CCSP was used for the study .

*Findings:* All the 173 ASHAs interviewed claimed that the CCSP training had been useful to them and has helped them perform better in the community; 98.27 per cent of the ASHAs knew that a new born weighing 2.5 kilograms or more at birth is considered to be normal; 90.8 per cent ASHAs said that they pay at least three home visits to each normal birth-weight new born within the first week of its birth; 9.2 per cent ASHAs considered less than three home visits within the first week to be sufficient; 43 per cent ASHAs were scheduling their home visits for LBW babies according to the norm; one third of the ASHAs said that they visited LBW babies at least six times within a month of their birth; 45 per cent of the ASHAs mentioned that spent more than an hour with the new born's family during each home visit; 80 per cent of ASHAs estimated that their average home visit spans for at least 30 minutes; the average time as suggested by the ASHA was  $43.42 \pm 17.717$  mins; 2.3 per cent ASHAs advised the newborn's to be bathed within the 1<sup>st</sup> hour of its birth or as soon as possible; 7.5 per cent ASHAs were ignorant about how long bathing of the newborn should be avoided; one-third of the ASHAs said that they advised massaging for the new born only after the first week while 9.8 per cent had no idea about timing the first massage for the baby; using a thermometer to assess the baby's temperature was found to be uncommon among ASHAs with just about 28 per cent of them were doing so always or mostly; 56.1 per cent ASHAs were

confident about using a thermometer; 44 per cent did not know how to read a thermometer or even how to use it; 90 per cent of the ASHAs could explain about Kangaroo Mother Care (KMC); 91.9 per cent emphasized upon non-discontinuation of breast feeding for the baby suffering from diarrhoea; 81.5 per cent ASHAs said that baby should be given ORS while 64.7 per cent advised home available fluids in the form of porridge, dal, water etc. 44 per cent ASHAs revisited the baby's after two days those suffering from diarrhoea; 27.7 per cent ASHAs did not know whether a revisit was necessary or not; 23 per cent ASHAs never revisited such babies as they considered it unnecessary.

*Conclusion:* It was observed that ASHAs are functioning as per the training given. In most cases it was well evident that CCSP training has been taken up well by the ASHAs however better performance and procedural correction is just a matter of reinforcement.

**Key Words:** 1.HEALTH 2.CHILD SURVIVAL PROGRAMME 3.SITUATIONAL ANALYSIS OF ASHA 4.CHILD DEVELOPMENT 5.GROWTH AND DEVELOPMENT 6.ASHAs 7.COMPREHENSIVE CHILD SURVIVAL PROGRAMME (CCSP) 8.HEALTH 9.MATERNAL MORTALITY 10.INFANT MORTALITY 11.INTEGRATED MANAGEMENT OF NEONATAL AND CHILDHOOD ILLNESSES (IMNCI) 12.RURAL 13.LOW BIRTH WEIGHT 14.KANGAROO MOTHER CARE (KMC) 15.EDUCATION 16.EARLY INTERVENTION 17.EARLY CHILDHOOD CARE 18.CHILD SURVIVAL 19.CHIRAIGAON BLOCK 20.VARANASI 21.UTTAR PRADESH.

12. Padhyegurjar, Manasi and Padhyegurjar, Shekhar Bhikaji. (2012). Interventional study of immediate and long term changes in HIV/AIDS knowledge and attitude among school students in an urban slum in Mumbai. *Indian Journal of Community Health, Jan-Mar, 24(1): 9-14.*

*Background:* India has 1.7 million HIV affected young people. Education sector plays an important role in imparting vital information regarding HIV/ AIDS to large number of adolescents.

*Objectives:* To assess the level of baseline knowledge regarding HIV/ AIDS among ninth standard school students; to assess the impact of health education session on knowledge levels; to assess changes in their attitudes if any.

*Methods:* The present study is an interventional and follow up study ; about 265 ninth standard students of Government aided private school in the slums of Mumbai were selected for the study. The selected school had English and Marathi medium classes. A flip chart devised by unicef was used as the health education tool and to develop the course content of the sessions

*Findings:* The mean age of the students was 14.96 years; 69.43 per cent students were from nuclear families; education up to higher secondary standards was attained by 64.15 per cent fathers and 39.62 per cent mothers; average per capita income was Rs 324.77 per month; 83.40 per cent mothers were housewives; 44.15 per cent fathers were engaged into intermediate occupations; 83.02 per cent students were aware that AIDS was a life threatening disease; 35.47 per cent perceived it as a problem which affected the community; an individual can get infected by HIV without being aware of it was known to 51.32 per cent before intervention; viral origin of AIDS was known to 53.21 per cent of the students and more than 60 per cent baseline correct responses were observed regarding sexual and vertical mode of transmission and no spread by casual contact prior to intervention. Transmission of HIV by infected needles was known to 63.77 per cent students before intervention; role of condom in prevention of HIV/ AIDS showed significant rise in correct responses on immediate post intervention; majority of the students were of opinion that 'Early treatment cures AIDS' prior to intervention; proportion of correct responses significantly increased on first post test and also significantly dropped at six months and one year when compared with immediate post test ( $P < 0.01$ ); the number of correct responses significantly increased post intervention and remained so throughout the year for the statements; health education showed no positive tests, on the statement.

*Conclusion:* More research needs to be directed for understanding the motivation for high risk behavior, felt needs and perceptions of the adolescents before designing education programmes for them.

**Key Words:** 1.HEALTH 2.AIDS AWARENESS 3.HIV/AIDS 4.CHILD DEVELOPMENT  
5.SCHOOL STUDENTS 6.KNOWLEDGE 7.CHILD HEALTH 8.ATTITUDE 9.URBAN SLUM  
10.EDUCATION 11.ADOLESCENT HEALTH CARE 12.GROWTH AND DEVELOPMENT  
13.EARLY INTERVENTIONS 14.SOCIO-ECONOMIC FACTORS 15.MUMBAI.

## ICDS

13. Tripathy, Manoj Kumar. (2011).  
Barriers in accessing child development programme in Daringbadi block.  
Bhubaneswar: Kiiit School of Rural Management. 32 p.  
Source: [www.ksrmccs.ac.in](http://www.ksrmccs.ac.in)

*Background:* Early Childhood years is a special time and place in human life cycle. It is the foundation of human life to achieve optimal physical growth and psychological development. Early Childhood Care and Development (ECCD) are important for survival, growth and development of child. In Orissa, the population of pre-school children as recorded in census-2001, was 5.35 million, which constituted 14.5 per cent of the total population.

*Objective:* To understand the mechanism of implementation of the Child Development Programmes and how the beneficiaries access to it; to identify barriers confronted by the beneficiaries while accessing their entitlements; to assess the acceptability of Child Development Programmes by the beneficiaries.

*Methods:* Study was conducted in Daringbadi block of Kandhamal district. 200 parents of 0-6 years from four villages were selected for the study using the purposive sampling technique. Both Quantitative ( Coded Questionnaire) and Qualitative ( Focus Group Discussion) techniques have been used for the study.

*Findings:* About 14.5 per cent of the respondents were illiterate and 20 per cent of the respondents had studied up to class 10; 75.5 per cent of the families were of nuclear types; 92 per cent of the respondents were unskilled labourers; 92 per cent of the respondents lived in Kutchha houses; 92 per cent respondents earned below Rs 10,000 a year for their livelihood; 30 per cent of the respondents were Christians and 70 per cent were Hindus; 26.5 per cent of the respondents were of Scheduled Caste and 67 per cent were of Scheduled Tribes; the dropout was more in case of SC pre-schoolers (35.84%) in comparison to the ST Children (35.07%); nutritional and educational needs of children in large families were highly neglected; 96 per cent of the respondents were having the BPL card, due to poverty the respondents were unable to expend on health and nutrition of the adult members as well as children; 94 per cent of the respondents agreed that the AWCs opened and worked regularly; in certain areas AWCs opened regularly but the AWW remained absent for days and the centre was run by the AWC Helper; 65.5 per cent respondents agreed that their children were going to the AWC regularly; 34.5 per cent told that their children were not going to the AWC for pre-school; 55.5 per cent respondents told that, the distance of AWC from their home was walkable for their child but 44.5 per cent found the distance not walkable for their children; during the visit to the AWCs the food was not found of nutritional quality; 73.5 per cent parents said that food was acceptable to their children but 23.5 per cent parents did not

think that food was acceptable for their children; 88.5 per cent parents said that monitoring was done, whereas 11.5 per cent told that monitoring was not done regularly; 51 per cent parents told that their children were not showing interest in going to AWC regularly; children did not find the AWC activities interesting except the MDM time; 66 per cent parents told that there was no provision of safe drinking water in AWCs; except for Badabanga and Sranikeata other AWCs had no toilet facility available at the AWC campus; 95.5 per cent respondents said that did not found the infrastructure suitable for their children; 74.5 per cent parents said that the food was not prepared hygienically; 82 per cent parents said that AWWs supplied appropriate quantity of MDM and Take Home Ration (THR) as per government norms, but 15 per cent said that quantity was not appropriate; 55 per cent parents told us that AWWs facilitated play mode learning in pre-school, 27 per cent parents said, that despite lack of infrastructure and resources, the pre-school activity helped in the psychological growth of their children while 67 per cent parents did not thought so; 87.5 per cent parents felt that the services provided in the AWC were not adequate and appropriate for child's development ,the reasons were lack of proper materials and at times the quality of MDM being served in the AWCs; 86 per cent respondents said that they did not called the helpline numbers and 14 per cent said they did not know about any such kind of provision by the government; 32 per cent respondents said that they were not visiting the AWCs ever, whereas 68 per cent visited the AWCs to know the manner of its functioning; 94 per cent parents said that there was no monitoring committee for observing and assessing the activities of AWC; almost all the participants knew about Janani Suraksha Yojana and MDM programmes as they were getting benefited in cash and kind from these government programmes; none of the respondents knew anything about Pustikar Diwas and Mamta Diwas initiatives aimed at preventive and curative reduction in malnutrition of child and mother; lack of awareness and lack of communication was the main cause for ignorance about such important government interventions.

*Recommendations:* Interpersonal Communication with the help of service providers like ASHA, ANM and school teachers should be encouraged and abundant IEC activities should be conducted among people to generate awareness and concern related to Child Development among people; Monitoring and Evaluation should be regular and frequency should be enhanced; frequency and quality of training for AWWs should be improved and proper implementation of skills should be ensured.

**Key Words :** 1.ICDS 2.EVALUATION OF ICDS 3.ICDS BENEFICIARIES 4.CHILD DEVELOPMENT 5.MID DAY MEAL SCHEME 6.EARLY CHILDHOOD CARE AND DEVELOPMENT 7.PRESCHOOL EDUCATION 8.SERVICE PROVIDERS 9.CHILD DEVELOPMENT PROGRAMMES 10.INFANT MORTALITY RATE 11.NEO NATAL MORTALITY RATE 12.IDENTIFYING BARRIERS 13.HEALTH 14.EDUCATION 15.DROPOUT 16.MALNOURISHMENT 17.SOCIO ECONOMIC FACTORS 18.DEMOGRAPHIC PROFILE 19.ANGANWADI CENTRE 20.ANGANWADI WORKERS 21.NUTRITION 22.INFRASTRUCTURE 23.GROWTH AND DEVELOPMENT 24.MONITORING AND EVALUATION 25.POVERTY 26.DARINGBADI 27.ORISSA.

## NUTRITION

14. Radha, R. and Sasikala, A. (2012).  
Food safety, hygiene and sanitation in selected schools providing midday meal. *Indian Journal of Nutrition Dietetics*, 49: 78-85.

*Background:* School lunch program, was designed to reduce the prevalence of mal-nutrition. A healthy mid-day meal can help to protect children from hunger, provide supplementary nutrition and contribute towards right education by facilitating regular school attendance and enhancing children's learning abilities. Mid-day meals have become an integral part of the school routine in Tamil Nadu. Food safety, hygiene and sanitation plays a vital role in promoting and protecting the health and well-being of children in large numbers.

*Objectives:* To determine the quality of infrastructure facilities of mid-day meal centers and assess the food safety, hygiene and sanitation prevailing in the selected mid-day meal providing schools.

*Methods:* About 50 schools providing mid-day meal from Coimbatore city were selected for the study. A well structured interview cum observation schedule was formulated to elicit data on food safety, hygiene and sanitation of the schools.

*Findings:* About 64 per cent of mid-day meal centers had adequate lighting and ventilation; 66 per cent of them had dry and clean storage area; 60 per cent of work surfaces and walls were not free from cracks and cobwebs; thirty seven schools had adequate hand washing facilities; 14 schools had water purifiers; about 38 among the 50 workers were washing hands clean before the start of the day; 42 workers hair were not covered while cooking; ten per cent of workers were suffering from respiratory tract ailments; 37 of them were free from body odour; 90 per cent of them were wearing ornaments like bangles and wrist watches; 58 per cent workers were using clean handkerchiefs; 18 per cent of workers had the habit of coughing or sneezing on food; 90 per cent of workers were chewing tobacco, beetle leaves etc. 72 per cent of them were not washing their hands with soap after blowing the nose or coughing; 12 per cent of the mid-day workers washed their hands with soap after using the toilet; 90 per cent of workers were washing the vessels before preparation and six per cent of workers were not washing vegetables grains etc. before preparation; 74 per cent of workers were washing vegetables after cutting, which lead to loss of water soluble vitamins; 36 per cent of food handlers washed their hands before



preparation with soap; 20 per cent of workers were not washing the plates before and after serving with clean water; 80 per cent of members used the same water for cooking, hand washing and for toilet; 46 per cent of mid-day meal centers used chopping boards in good condition; in 34 per cent of the centers, the water glasses, plates and utensils were free from pits and crevices; in 70 per cent of mid-day meal centers, the floor as well as cooking and serving utensils were clean and dry; in 48 out of 50 centers, food items were kept covered after preparation; out of 50 schools, only 14 schools were using gas cylinders and all of them were handling cylinders in a safe manner; most of the schools purchased items from licensed standard suppliers only and inspected the supplies for damage, spoilage and infestation; 88 per cent of workers kept raw and cooked foods separately and were handling the service utensils hygienically; in 98 per cent schools, cleaning items like detergent powder and other poisonous substances were stored away from food; 65 per cent schools stored the supplies items in a neat and tidy manner; 96 per cent were using unadulterated ingredients; 30 per cent of workers did not used adequate water for cooking; 88 per cent of workers hands and serving utensils were clean during serving; less than 25 per cent of schools had food spillage near the garbage container and stagnant water around the compound; dirty dusters were seen in food preparation and service area in 16 out of the 50 schools; in 68 per cent of the schools, clean cloth was used for wiping food contact surfaces; 38 per cent of workers were found sweeping and dusting during preparation and service; in 86 per cent of mid-day meal centers, sharp equipments and storage bins were cleaned periodically; 16 workers were found disposing waste products within the premises.

*Conclusion:* Food safety hygiene and sanitation of mid-day meal schools were not satisfactory. More efforts needs to be undertaken to improve these criteria in mid-day meal centers to enhance the child's nutrition and health.

**Key Words:** 1.NUTRITION 2.MID DAY MEAL 3.FOOD SAFETY 4.CHILD DEVELOPMENT 5.GROWTH AND DEVELOPMENT 6.HEALTH 7.HYGIENE 8.SANITATION 9.SCHOOL CHILDREN 10.EDUCATION 11.MALNUTRITION 12.INFRASTRUCTURE FACILITIES 13.MEAL WORKERS 14.WASHING PRACTICES 15.CARE AND MAINTENANCE OF EQUIPMENTS 16.FOOD HANDLERS 17.FOOD SAFETY MEASURES 18.CHILD HEALTH 19.COIMBATORE.

15. Shekhara Naik, R. and Jamuna Prakash. (2012). Association between nutritional status of selected urban and rural school children and their mothers from Mysore. *Indian Journal of Nutrition Dietetics*, 49: 11-17.

*Background:* Nutrition is the most important contributor of health during the growing years of human beings. Nutritional status of children is influenced by several factors, such as the living conditions comprising of sanitary environmental, social and economic situation of family, the literacy level of parents, food intake of children etc. Nutritional problems during school age is shown to affect adversely on attendance, performance and learning ability of the children. Nutritional status of children from rural areas has been shown to be associated with the mothers dietary intake.

*Objectives:* To examine whether the nutritional status of children is influenced by their mother's nutritional status in a select group of school children from urban and rural area of Mysore taluk in Karnataka.

*Methods:* The study was conducted in urban and rural schools of Mysore taluk to study the nutritional status of school children aged between 6 to 12 years. The total sample size was 850, out of which 434 belonged to urban and 416 belonged to rural population. About 459 were males and 391 were female children respectively. Statistical analysis was carried out with the help of SPSS software package .

*Findings:* The mean weight for children in urban and rural areas was 19.45 kg and 19.67 kg respectively; gender wise a significant difference was observed where male children had significantly higher weight (mean 19.86 kg) than female children (mean 19.21 kg); children from rural area were significantly taller than children from urban areas; male children were found to be significantly ( $F= 12.855$ ;  $P= 0.000$ ) taller than female children (mean heights 119.56 cm and 117.40 cm respectively); 2.0 per cent of children were obese, the number was higher in urban than rural population; 30 per cent were under nourished and number from rural and urban areas was almost similar; when BMI was used as criteria, more children were classified as normal, though 30 per cent were still malnourished; better food intake of children due to mid-day school meal programs in operation in all schools under study, as children from all socio-economic strata were assured of at least one proper meal a day, which helped them to overcome marginal deficiencies. A significant difference was observed for mean weight of mothers of selected children from urban and rural areas, where mothers of children from urban area had significantly higher weight (54.50 kg) than mothers of children from rural area (49.77 kg); gender wise a non-significant difference was observed for mean weight of mothers of

selected children in urban and rural areas; the interaction between area and gender of children was found to be statistically significant, where in urban area mothers of male children and in rural area mothers of female children were heavier; 52 per cent of women had normal BMI, whereas 21.7 per cent suffered with CED; the percentage of normal children ranged between 58.2 to 76.1 per cent indicating a high prevalence of under and over nutrition; 60 per cent had normal BMI and 30 per cent were undernourished; women with normal BMI had a small number of overweight obese children; however the number of undernourished children was high in urban area; obese mothers also had obese children in both urban and rural area, but children with normal BMI were higher; mothers belonging to all grades of BMI had undernourished children, the order from highest to lowest being CED, overweight, normal and obese (39, 30.8, 28 and 14.9 per cent) respectively; height of children was correlated significantly with mother's height ( $P \leq 0.01$ ) and weight ( $P \leq 0.05$ ) however, children's BMI was independent of mother's height.

*Conclusion:* It was seen that both in rural and urban areas of Mysore taluk, majority of children had normal BMI and followed by a sizable number who were undernourished. Significant association were found in children's and mother's weight and BMI, though height of mother's was not associated with children's BMI.

**Key Words:** 1.NUTRITION 2.NUTRITIONAL STATUS CHILDREN 3.CHILD DEVELOPMENT 4.GROWTH AND DEVELOPMENT 5.URBAN 6.RURAL 7.SCHOOL CHILDREN 8.MOTHERS 9.HEALTH 10.SOCIO-ECONOMIC CONDITIONS 11.MALNUTRITION 12.BMI 13.STUNTING 14.WASTING 15.UNDER NUTRITION 16.OVER NUTRITION 17.EDUCATION 18.HEIGHT 19.WEIGHT 20.MID DAY MEAL PROGRAMME 21.MYSORE 22.KARNATAKA.

## B. Research Abstracts on Child Protection

### CHILD LABOUR

16. Bhat, B.A. and Rather, T.A. (2009).  
Child labour in the handicrafts home industry in Kashmir : a sociological study. *International NGO Journal, September, 4(9) : 391-400.*  
Source: [www.academicjournals.org](http://www.academicjournals.org)

*Background:* Child labour includes children prematurely leading adult lives, working long hours for low wages under conditions damaging to their health and to their physical and mental development, sometimes separated from their families, frequently deprived of education and training apprentices that could provide them a better future. Child labour is a global phenomenon and a harsh reality. Child labour is both an economic and a social evil. There are 55 million children in labour force at present. 91 per cent of child labour in India is in rural areas, while nine per cent is in urban areas. In India every third child is working child and every fourth child in the age group 5-15 is employed.

*Objectives:* To make a detailed study of child labour in the handicraft sector with special reference to their life conditions and to access the nature of exploitation faced by the children involved in labour activities; to explore the causes of child labour in the handicrafts home industry in Kashmir and to examine the social implications of labour activities of child labourers in the handicrafts sector.

*Methods:* The present study was conducted in Kashmir valley in areas like Anantnag, Baramulla, Budgam, Pulwama, Kupwara, Srinagar. A total of 65 child labourers were interviewed for the study. About 17 parents, nine employers, six government officials and three social workers were also interviewed for the present study. Interview schedule, observation collateral contacts and interview techniques were the tools used for the present study.

*Findings:* About 58.46 per cent child labourers were Muslims and 41.53 per cent were Non-Muslims, thus children of both religious communities were engaged with handicrafts work; most of the female child labourers belonged to illiterate or very less educated families; all the children working in the handicraft sector interviewed had been to school at one point or the other; the reasons for dropout and not completing the studies were varied and vexed; the primary reasons were less interest in studies or failing to cross a particular class or

treating education as fruitless because of parental illiteracy and ignorance, poverty of the family, gender discrimination and the influence of peers etc; out of 65 child labourers interviewed, only 13 were still attending school and the majority 52 had left the school for good at primary and upper primary levels; 81.53 per cent of children belonged to families with 6 to 10 members family strength; children who belonged to the small family category, worked either because there was no earning member in the family or just to enjoy with friends at the handicraft centre and at the same time learn some skills; lack of quality education, poverty, skill acquisition, inaccessibility of schools and tradition were the main forces which made them to send their children into work market inspite of schools; 61.53 per cent parents were illiterate and illiteracy of parents acted as a cultural constraint on the progress of education among children; a good number of child labourers were in the handicraft sector because of the availability of handicraft centres in their locality; 36.92 percent child labourers were in the handicrafts work since last one month to one year; 80.00 per cent of working children were having interest in handicrafts work for social and economic reasons; 66.15 per cent child labourers were working for six to eight hours every day; some of the child labourers informed that their working hours were flexible whenever they wanted to earn more money, they use to work for longer time; 56.92 per cent earned between rupees hundred to five hundred per month and 41.53 per cent earned between rupees five hundred to one thousand per month; problems due to long working hours, hard and hazardous jobs, poor diet etc puts stress on child labourers due to which the children complained of backache, headache, eye irritation, and joints pain; employers were not concerned about the health problems and safety measures from injuries and accidents that children suffered; majority of the child labourers said that it was mostly the employer of the centre and people of their relations who were always in search of opportunity for sexual harassment/ exploitation; 90 per cent of child labourers and their parents were not aware of any laws which prohibit and regulate the employment and working conditions of the child labourers; majority of the employers knew about Minimum Age Act to employment then also they were employing children for low wages; there was no awareness amongst the masses about child labour laws although both parents and employers favoured the abolition of child labour for various reasons including the effect of work on child's future; 25 per cent employers favoured the implementation of legislations strictly with same code of conduct everywhere and compulsory schooling up to fourteen years of age for the elimination of child labour; 90 per cent employers supported to provide some training to the child labourers so that they can earn partly to meet their personal as well as family requirements

*Recommendations:* Governmental and non-governmental organisations should organize awareness programmes regarding the consequences of child labour and motivate common people, village heads, teachers and other employers and seek their cooperation in respective areas to serve the purpose; attractive and free pre and primary school education system is necessary to attract children toward education instead of work and income

**Key Words:** 1.CHILD LABOUR 2.HANDICRAFTS INDUSTRY 3.CHILD PROTECTION 4.CHILDREN IN NEED OF CARE AND PROTECTION 5.EDUCATION 6.HEALTH 7.SOCIO ECONOMIC FACTOR 8.ILLITERACY 9.POVERTY 10.GENDER DISCRIMINATION 11.WAGES 12.WORKING HOURS 13.WORKING CONDITIONS 14.HEALTH PROBLEMS 15.FEMALE CHILD LABOUR 16.EXPLOITATION 17.SEXUAL EXPLOITATION 18.CHILD LABOUR LAWS 19.GOVERNMENTAL ORGANISATIONS 20.NON-GOVERNMENTAL ORGANISATIONS 21.RESEARCH DESIGN 22.SOCIOLOGICAL STUDY 23.KASHMIR.

17. Chandra, Anjuli. (2009).  
Child labour : a study from anthropological perspective with special reference to glass industry, Firozabad. *Anthropologist*, 11(1): 15-20.

*Background:* Child labour population in the country ranges between 44 million to 110 million. These children work in various agricultural operations, work as potters, artisans, handloom weavers etc. In urban areas child labourers are concentrated in the formal sectors and in small and cottage industries, tea stalls, workshops etc.

*Objectives:* To find out how and why children got engaged in the vicious cycle of bangle making and ultimately became a child labour; to explore the structural roots of the phenomenon and the problems faced by the child labour and their families

*Methods:* The area of the study was the Firozabad district, situated in North-Central India in Western Uttar Pradesh. The tools used in the study were questionnaires, interview schedules, formal and informal meetings and interviews

*Findings:* About 24.4 per cent of child labourers were up to 16 years of age at the beginning of (IASD) Integrated Area Specific Project; 79.2 per cent of the children age 5-7 years were regularly attending the schools; 7.7 per cent were dropouts and 13.7 per cent were attending schools rarely; 78.4 per cent of SHGs mothers were found illiterate; 45.2 per cent were engaged in bangle and glasswork with their earning levels mostly varying between Rs 11-30 per day; children were engaged into various process of glass works as early as from the age of five to six years; maximum number of child labour was found in the age group of 8-12 followed by 13-16 years; socio cultural background was the main factor for the cause of this social evil as people were deprived of basic education; many child labourers were motivated to work because of monetary inducement; school children were attracted initially on part basis and gradually joined the stream permanently; 93.5 per cent of the bangle and glass workers households had taken loans during past 15 years out of which 50.2 per cent had taken loans with exorbitantly high rate of annual interest varying between 40-120 per cent; 62.4 per cent took loans simply for consumption purposes; 87.9 per cent households said that they wanted to supplement their low income level with earnings of the children followed by 15.9 per cent saying due to the compulsion of big family size and 11.2 per cent engaged children due to non-availability of agricultural land; 96.8 per cent respondents felt that engaging children in work was bad; 87.9 per cent reported that children were forced to

work due to compulsions of supplementing household income for bare survival; due to working as child labour children could not attend their schools regularly as several times they had to quit their schools because of heavy workload on the family which deprived them of their basic education; children use to work for more than 12 hours in factory sheds or in the households was highly injurious for their health resulting in a number of health hazards such as severe burn, cuts, stomach ache, headache, dizziness, loss in hearing power, weak eye sight etc. Due to working and living in similar conditions since childhood the mental set up and thinking of the child labourers remained traditional and orthodox.

*Recommendations:* Provision for good quality primary education and skill activities should be implemented to retain children in schools and prevent them from turning back to work in hazardous occupations; awareness program must be implemented and it should be totally based on motivation, free from any kind of monetary inducement.

**Key Words:** 1.CHILD LABOUR 2.GLASS INDUSTRY 3.CHILD PROTECTION 4.BANGLE INDUSTRY 5.FEROZABAD 6.CHILD LABOUR UTTAR PRADESH 7.POVERTY 8.UTTAR PRADESH.



18. Prasad, B.N. (2012).  
Child labour in Uttar Pradesh : an empirical study of Gonda district. *The Eastern Anthropologist, April-June, 65(2) : 125-139.*

*Background:* Child Labour has been an integral part of Indian Social System from the very beginning. The Indian Factory Act was enacted in 1891 under which the lower age was extended from seven to nine year. However exploitation of children increased due to inadequate enforcing machinery. According to the census of 2001, there are 12 million child labourers in India. Uttar Pradesh accounts for a larger share of about 15.2 per cent of child work force in India. National Child Labour Project (NCLP) scheme was started in the year 1988, so far 400,200 working children and 3.08 lakh children have been mainstreamed into formal education. This scheme is running in 250 districts in 14 states.

*Objectives:* To identify those households which supply child labour; to analyse educational, health and working status of child labour; to investigate socio-economic background of the households and working conditions of child labour.

*Methods:* The study was conducted in the district of Gonda Uttar Pradesh. About 900 child labourers were selected on random basis from three Nagar Palika areas, three Panchayats and 16 blocks, covering the entire district. Tools used for the study were structured questionnaire schedules.

*Findings:* In the surveyed households the percentage of males was higher than the females which was 53.96 per cent and 46.04 per cent respectively. The family size of 5-7 members was highest, followed by 3-5 persons and 7-9 people; family size of 5-9 members was highest in rural areas and lowest in Nagar Palikas; majority of the members above 14 years of surveyed households were illiterate; family environment of the surveyed households did not provide a congenial atmosphere and economic support for educational pursuit for their children; majority of the surveyed households had their own houses and very few of them were living in rented houses; most of the houses were without basic amenities like safe drinking water, electricity, toilet, sanitation and this was one of the major reasons for their children entering into labour market; majority of working members of surveyed households were engaged in domestic works, followed by non-agricultural and agricultural labour which together constituted more than 90 per cent of their occupational activities; almost half of them were engaged in domestic works in rural areas, where percentage of women and children was highest; most of them were unpaid or under paid; children in the age group of 7-10 year were highest, followed by 10-13 years; 83 per cent children were not enrolled in any school; among those who were enrolled, drop-

out rate was extremely high; drop-out cases from primary to upper primary was highest in Nagar Palika areas followed by block level and Nagar Panchayats; majority of the child labour were engaged in domestic work, followed by agricultural labour and non-agricultural labour; variation in nature or works of child labour was largely due to availability of kind of work in the specific areas; substantial number of child labourers were engaged as agricultural labourers in rural areas; majority of the child labour were engaged in domestic works which was largely under paid or unpaid; work span of the majority of the surveyed child labourers was 1-6 months, followed by one year and above two years; shorter span of working 1-12 months was higher in Nagar Palika areas, followed by Nagar Panchayats and rural areas; longer span of working above two years was higher in rural areas, followed by Nagar Panchayats and Nagar Palikas; economic condition of surveyed households was extremely pathetic in rural areas; which forces their children to enter into labour market at a very tender age; 61 per cent surveyed child labourers worked for a shorter duration that was 1-3 hours a day, followed by 3-6 hours and 6-9 hours; very few children were working for 9-12 hours a day mostly in the Nagar Palika areas; majority of the child labourers were working for just 1-3 hours daily and mostly were engaged in domestic works and were unpaid or very little paid; more than two-third surveyed child labourers earned Rs 50-200 per month, followed by Rs 200-500 and Rs 500-1000; child labours of urban areas were better paid as compared to their counterparts in rural areas; majority of the parents of child labourers were willing to send their children to schools the percentage was highest in Nagar Panchayat areas, followed by rural areas and nagar palikas; 80 per cent parents were willing to send their children to schools and 61.36 per cent preferred morning time; 97 per cent children did not had any health problems.

*Conclusion:* A planned approach with little incentives and persuasions can bring substantial number of children to schools and arrest the rising trend of child labour in the State of Uttar Pradesh.

**Key Words :** 1.CHILD LABOUR 2.CHILD LABOUR-CAUSE 3.CHILD PROTECTION 4.CHILDREN IN NEED CARE AND PROTECTION 5.CHILDREN IN DIFFICULT CIRCUMSTANCE 6.MAGNITUDE OF CHILD LABOUR 7.EXPLOITATION 8.SOCIO ECONOMIC STATUS 9.HAZARDOUS OCCUPATION 10.HEALTH 11.EDUCATION 12.NATIONAL CHILD LABOUR PROJECT(NCLP) 13.GURUPAD SWAMY COMMITTEE 14.WORKING STATUS OF CHILD LABOUR LAWS 15.WORKING CONDITIONS 16.FAMILY SIZE 17.OCCUPATIONAL DETAILS 18.SPAN OF WORKING 19.RURAL AREAS 20.URBAN AREAS 21.WORKPLACE 22.WAGES 23.WORKING HOURS 24.ILO 25.INDIAN LABOUR COMMISSION 26.EMPIRICAL STUDY 27.GONDA DISTRICT 28.UTTAR PRADESH.

19. Sen, Vinod and Kunjappan, Sony. (2012).  
Crime towards a generation : a study on child labour in the beedi-rolling industry of Madhya Pradesh and Chhattisgarh. *The Indian Police Journal*, April-June: 80-91.

*Background:* Child labour is a curse to our society and a crime against humanity. Children work when they are supposed to play or go to school. About two million children are employed in India's deadly Tobacco Industry. They spend over 14 hours every day at a stretch in contact with tobacco and work for seven days in poor-ventilated rooms without taking any rest.

*Objectives:* To highlight the condition of child labour in India particularly in beedi industry; to unveil the social and economic realities, which force the children to start beedi-rolling at early age.

*Methods:* The study was carried out at Sagar District in Madhya Pradesh and Rajnandgoan District of Chhattisgarh. 200 beedi workers were selected for the study. Leaders of trade unions, members of SHGs and NGOs were also interviewed in connection with child labour problems in order to know their views. A close and open ended questionnaire was prepared for collecting primary information.

*Findings:* Three piece-rated child workers were working as piece rate labellers/packers on industrial premises in Madhya Pradesh for whom the average daily earnings were reported as 32.09 rupees minimum and 76.32 rupees maximum; poor quality of primary education in the region contributes pushing many children out of school and they had to work; about seven to eight lakh children in the state were engaged in beedi-making in Madhya Pradesh and Chhattisgarh; out of 200 families, 27.5 per cent beedi rolling families were taking assistance from their children in which 20.5 per cent families belonged to Sagar District of Madhya Pradesh and seven per cent families belonged to Rajnandgaon District of Chhattisgarh; 69.5 per cent beedi-rollers were not taking assistance from their children and three per cent families did not had children less than 14 years; more incidences of child labour were found in the Sagar District than Rajnandgaon District; children were participating in the beedi-rolling process in the beginning stage of their childhood; 74 children were found engaged in the beedi rolling occupation in the 55 beedi-roller families, wherein 19 boys and 55 girls were assisting; 35 children between eight years to 14 years were found engaged in beedi rolling; due to home based nature of the industry and work, more girls were found in beedi industry; 54.3 per cent beedi-

rollers said that they were taking children's assistance, because their family income was not sufficient for the livelihood of the whole family so, they were using children as supplement of family income; 14.9 per cent beedi-rollers reported that they could not afford school fees, so it was better that their children should be engaged in productive activities; 10.6 per cent beedi rollers said that they were involving children to teach skill; 10.6 per cent said that the education was not appropriate; 7.4 per cent beedi-rollers said that after schooling children don't have much work so it was better if they help them; about 55 families were taking assistance from the children; 36 families were sending their children to school and 19 families were taking fulltime assistance from the children, since many children were not capable to go to school; in Rajnandgaon district, most of children were attending school as well as working in the beedi sector; 9.5 per cent families had taken out their children from the school; 21.6 per cent beedi-rollers reported that their family did not allowed schooling for girls; 13.5 per cent beedi-rollers reported that they need children at home to help in beedi-rolling and other household chores; 8.1 per cent respondents said that school was not valuable for their children; the average number of beedies a child labourer rolled in a day was 1,500 at an average wage of Rs nine per day; the long hours spent hunched over the basket of tobacco caused growth deformities, and the constant proximity to tobacco dust caused lung diseases.

*Conclusion:* Beedi industry is an agro-based and labour-intensive industry, which employs workers mainly from weaker sections of the society. Government of India has implemented the Child Labour Act in 1986 that out laws child labour in certain areas and set the minimum age of employment at 14. This act falls short of making all child labour illegal and fails to meet the ILO guidelines concerning the minimum age of employment set at 15 years of age.

**Key Words :** 1.CHILD LABOUR 2.BEEDI INDUSTRY 3.CHILD PROTECTION 4.BEEDI ROLLING INDUSTRY 5.DROPOUT 6.EDUCATION 7.MAGNITUDE OF CHILD LABOUR 8.CRIME 9.HAZARDOUS CONDITIONS 10.CHILDREN IN NEED OF CARE AND PROTECTION 11.CHILDREN IN DIFFICULT SITUATION 12.EXPLOITATION 13.WORKING HOURS 14.WAGES 15.WORKING CONDITIONS 16.INTERNATIONAL LABOUR ORGANISATION (ILO) 17.SOCIO-ECONOMIC FACTORS 18.SCHOOL GOING CHILDREN 19.CHILDREN'S PARTICIPATION ON CHILD LABOUR RIGHT 20.POVERTY 21.UNEMPLOYMENT ILLITERACY 22.ECONOMIC ROLE OF CHILDREN 23.FAMILY INCOME 24.MADHYA PRADESH 25.CHHATTISGARH.

## CHILD WELFARE

20. Panicker, Rita and Jayaraj, K.P. (2011).  
Child rights and children: an exploration of situation in Andaman and Nicobar Islands. New Delhi: Butterflies. *My Name is Today: Children in News*, 19: 5-21.

*Background:* In Andaman and Nicobar Islands no active civil society movement was seen as compared to mainland that could raise the voices and advocate for the children and adolescents of these islands. School education and health care was free in the Islands. The study has covered all administrative districts in the Andaman and Nicobar Islands. The coverage has ensured representation of children and other stake holders from different Islands and administrative units but also from different socio-economic backgrounds.

*Objectives:* To understand the socio-economic background of children; to understand the major issues of protection faced by children in their lives; to examine initiatives of ICDS with reference to early childhood care and development; to understand the awareness regarding child rights; to document the situations and implementation of JJA, 2006.

*Methods:* The study has proportionately selected children between the age of seven to 18 years in accordance with the total study population in each district. A sample size of 1819 were selected from the geographical area for collecting data from primary respondents. A sample size of 300 was fixed for acquiring data from secondary respondents like stakeholders, parents, teachers, government officials and representatives of voluntary organisations. Tools used for the study were closed and open ended questionnaire , interviews , pre-tested questionnaires and focused group discussions.

*Findings:* About 91.6 per cent of children were dependent on public institutions for education irrespective of their regions; out of the total 44.69 per cent of children were studying in English medium and 33.69 per cent in Hindi medium; 59.44 per cent of parents occasionally enquired about their children, while 9.50 per cent of parents regularly went to school; 6.88 per cent of children had faced humiliation in schools with reference to their religious or cultural backgrounds; the drop-out rate was increasing in the issues irrespective of gender and stages from 2006 to 2007 to 2008-09; 1.72 per cent of children were excluded from formal educational institutions; 44.44 per cent had dropped out of secondary

stage and 37.4 per cent dropped from middle stage 53.57 per cent children had not thought about their future; apart from a section of girls, Kishori Shakti Yojana (KSY) a programme for drop-out adolescent girls, had not benefited all; nobody had attended vocational skill training programmes as part of the scheme; 82.13 per cent children shared their early childhood experience with Anganwadis; a declining trend on the Coverage of Supplementary Nutritional Programme (SNP) beneficiaries children (0-6 years) was from 75.45 per cent in 2006-07 to 67.84 per cent in 2009-10; an increasing trend of the rate of severely malnourished children was 0.49 in 2008-09 to 2.75 per cent in 2009-10; 19.64 per cent of Anganwadis were functioning in pucca building while 39.88 per cent of Anganwadis were using AWWs or AWHs home as the space; 44.61 per cent Anganwadi did not had the facility of drinking water and sanitation; 75 per cent of differently able children were ignored and 25 per cent were teased by peers of the community; 1.8 per cent at present Inclusive Education for Disabled Cells were running with 1:31 teacher-pupil ratio; ramp facility was available only in 7.22 per cent schools; 35.28 per cent of children indicated that alcoholism and conflicts in home affected their everyday life and study; incidence of emotional and physical abuse was found in 71.81 per cent, while 9.67 per cent of children had been injured due to physical abuse; experience of bad touch or dimension of sexual abuse was reported by 9.15 per cent of the children; 6.82 per cent of children were dependent on any kinds of substance; 71.17 per cent of children were taking paan; 63.97 per cent of children shared that peers influenced them in initiating the habit; overall health services available in ANI was satisfactory as indicated by relatively low MMR of 102.3 at birth and IMR of 16.04 at birth; 78.10 per cent of children reported cases of common cold, 3.95 per cent malaria, 3.64 per cent gastritis and 3.00 per cent of jaundice; 84.26 per cent of children had been treated under PHC; community participation was marginal in the isles; attempts like Village Health Sanitation Committee and Rogi Kalyan Samiti did not made much difference; 32.56 per cent of children were getting one to two hours as leisure time; followed by 30.10 per cent of children getting two to three hours; 57.68 per cent children were staying at home; 28.38 per cent were watching TV and 27.88 per cent children were spending their leisure time in playing; 19.10 per cent of children demanded for playground and 14.62 per cent wanted sports equipment; 69.16 per cent children shared that they were getting opportunity in decision making; 31.39 per cent of children had information on child rights; 75.93 per cent of Non-governmental organisations had stood as one of the main sources for the information which evinced 53.55 per cent of children's knowledge on child rights among the controlled group.

*Recommendations:* A data bank of children should be prepared and maintained in each and every government departments, which are dealing the lives of children; sensitisation and training programmes or workshops on child rights and various legislations and laws related to children should be conducted for police and government officials; education supportive mechanism in backward areas should be introduced under community ownership and supervision; vocational training and life skill education should be integrated as a vital part of formal education; rigorous sensitisation programmes and workshops for PRI members should be conducted on topics like child rights, law and legislations related to children; mobile medical units should be introduced in remote areas to overcome the accessibility to public health care in the islands.

**Key Words:** 1.CHILD WELFARE 2.RIGHTS OF THE CHILD 3.CHILD PROTECTION 4.STATUS OF CHILDREN 5.ICDS 6.SOCIO-ECONOMIC STATUS 7.EDUCATION 8.HEALTH STATUS 9.CHILD RIGHTS 10.JUVENILE JUSTICE ACT, 2006 11.ANDAMAN AND NICOBAR ISLANDS.

## HEALTH

21. Madan Kumar, PD, Poorni, S. and Ramachandran, S. (2006). Tobacco use among school children in Chennai city, India. *Indian Journal of Cancer, July-September, 43(3) 127-131.*  
Source: [www.indiancancer.com](http://www.indiancancer.com).

*Background:* Tobacco is a major public health problem. According to WHO estimates, 194 million men and 45 million women use tobacco in smoked or smokeless forms in India. India has one of the highest rates of oral cancer in the world partly attributed to high prevalence of tobacco chewing.

*Objectives:* The present study was done to build a database on prevalence of tobacco on prevalence of tobacco use among students of grade eight to ten in Chennai city, for the purpose of advocacy of tobacco control and planning tobacco control interventions and evaluation.

*Methods:* The present study was designed to find out the prevalence of tobacco use among 13 to 15 years old students studying in grades eight to ten in Chennai city. Data was collected by a pre tested , close – ended self – administered questionnaire . Data analysis was performed by using Chi-square test .

*Findings:* A total of six sampled schools participated in this study and the schools response was 100 per cent; the students response was 94.3 per cent based on 1331 sampled students; a total of 1255 students participated in this survey among them 64.4 per cent were boys and 35.6 per cent were girls; ever tobacco use was reported by 37.6 per cent of the students; though there was no significant difference in ever smokers based on the zone of the school, there existed a highly significant difference between ever and never users of tobacco in the private school students; current users of tobacco were reported by 41.1 per cent of the students; prevalence was more among boy students (46.3%) when compared to that of girls students (31.6%); tobacco users prevalence was found more in corporation schools when compared to that of private schools; use of smoking and smokeless tobacco was more prevalent among the boys than the girl students, use of smokeless tobacco was common among the girls when compared to smoking tobacco use; among the smoking tobacco, cigarette was commonly used by both boy and girl students; almost all cigarette smokers 94.1 per cent, half of smokeless tobacco users among boys 60.4 per cent and 26.4 per cent of girls reported needing tobacco the first thing in the morning;



parental tobacco use was reported two to three times more often by tobacco users compared to never users; purchasing tobacco products in a store was reported by 82.5 per cent and almost no one was refused because of age; among the tobacco users, 34.4 per cent wanted to stop using tobacco, though 58.3 per cent were undecided; classroom teaching during the past year on various aspects of tobacco use, like dangers of smoking and chewing tobacco, reasons why people of their age smoke or chew and the effects of tobacco was reported by 19.4 and 34.6 per cent of students from corporation and private schools respectively; almost everyone reported watching a lot of cigarette advertisements on T.V, whereas about half reported watching advertisements on other medias like outdoor hoardings 45.7 per cent, newspapers 65.3 per cent and social events 67.4 per cent.

*Conclusion:* The findings of the study will help to design, implement and evaluate tobacco control and prevention programs in standard format.

**Key Words:** 1.HEALTH 2.TOBACCO 3.CHILD PROTECTION 4.HEALTH HAZARDS 5.SCHOOL GOING CHILDREN 6.PREVALENCE 7.HEALTH 8.HEALTH PROBLEMS 9.PEER PRESSURE 10.ADOLESCENTS 11.SOCIO-ECONOMIC STATUS 12.CHILDREN IN NEED OF CARE AND PROTECTION 13.CHILDREN IN DIFFICULT CIRCUMSTANCES 14.HEALTH EDUCATION 15.CHENNAI.

22. Muttappallymyalil, J., Sreedharan, J. and Divakaran, B. (2010).  
Smokeless tobacco consumption among school children. *Indian Journal of Cancer*, 47: S19-S23.

Source: [www.indianjcancer.co](http://www.indianjcancer.co)

*Background:* In India smokeless tobacco use is very common among both male and females. The major factors that persist to encourage people to use smokeless form of tobacco are its low price, ease of purchase or production, and widely held misconception that it has medicinal value for improvement in toothache, headache and stomachache. Tobacco use is the leading preventable cause of death globally.

*Objectives:* To determine the prevalence and pattern of smokeless tobacco use among school children.

*Methods:* The study was conducted in Kannur district of Kerala. A total of 1200 students studying in grade 8-12 participated in the study. A self – administered questionnaire was used for data collection. PASW 17 software was used for data analysis.

*Findings:* In the present study 52.5 per cent were males and the remaining were females; 31.1 per cent children were of 14 years, 28.7 per cent had attained 13 years of age, 23.4 per cent of them were 15 years of age, 9.8 per cent were of 16 years and 7.1 per cent were of 17 years of age; 52.8 per cent were Hindus; the mean age of the students was 14.4 years with an SD of 1.2 years; age ranged from 13 to 17 years; 91.5 per cent were not tobacco users and were either smoking or using smokeless tobacco; 84.1 per cent of male students were not tobacco users, whereas 15.9 per cent were tobacco users; among the male students 1.6 per cent were smokers; smokeless tobacco was used by two per cent of the male students and 12.3 per cent of them were smoking as well as using smokeless tobacco; none of the female students were using tobacco products; the mean age at the start of any tobacco use was 12.8 years with an socio demographic of 1.1 years; the minimum age of initiation was 11 years and the maximum age was 15 years; 52.0 per cent of the users started tobacco consumption by 12 years; the minimum age of tobacco consumption was 12 years and the maximum was 14 years; 50 per cent of the smokeless tobacco users started the habit at the age of 12 years; 38.5 per cent of them started at the age of 13 years and the remaining at the age of 14 years; of the total 92 smokeless tobacco users, 84.6 per cent were using it 2-3 times a week; the remaining were using it once a week; 39 per cent revealed that the tobacco products were purchased from shops located near the schools; most of them were using smokeless tobacco products because of their novelty and the misconception that they are safe form of tobacco.

*Recommendations:* The study suggests that Students Advising and Guiding Units should be started in schools to offer counselling services to the needy children and those who are addicted to this habit.

**Key Words:** 1.HEALTH 2.TOBACCO 3.CHILD PROTECTION 4.HEALTH HAZARDS 5.SMOKELESS TOBACCO 6.SUBSTANCE ABUSE 7.AGE AT INITIATION 8.TOBACCO PRODUCTS 9.CHILDREN IN NEED OF CARE AND PROTECTION 10.ADOLESCENTS 11.TRIBAL AREAS 12.HEALTH PROBLEMS 13.TOBACCO USERS 14.PREVALENCE 15.SOCIO DEMOGRAPHIC CHARACTERISTICS 16.CROSS-SECTORAL STUDY 17.EDUCATION 18.SCHOOL GOING CHILDREN 19.SOCIO ECONOMIC STATUS 20.KANNUR DISTRICT 21.KERALA.

23. Narayan, Dhekale Dilip, Dhondibarao, Gadekar Rambhau and Ghanshyam, Kolhe Charulata. (2011).

Prevalence of tobacco consumption among the adolescents of the tribals areas in Maharashtra. *Journal of Clinical and Diagnostic Research*, October, 5(5): 1060-1063.

Source: [www.jcdr.net](http://www.jcdr.net).

*Background:* Tobacco smoking and chewing are the main causes of lung cancer and oral cancer. The most susceptible period for tobacco use in India is during adolescence and early adulthood (15.24 years). About 12.9 per cent adolescents in 13-15 years age group are currently consuming some tobacco products.

*Objectives:* To know the prevalence and the pattern of tobacco consumption among the adolescents of tribal areas.

*Methods:* The present study was conducted in five tribal villages under the Primary Health Centre, Waradha in Yavatnal District, Maharashtra. A total of 502 adolescents were included in the study. The data was collected on a pre-designed proforma. The statistical analysis was carried out by using percentage and the chi-square test.

*Findings:* About 51.20 per cent were females and 48.80 per cent were male adolescents; majority of the adolescents were educated up to middle school; 6.18 per cent adolescents were illiterate; 80.87 per cent adolescents belonged to nuclear families and 19.13 per cent belonged to joint families; more than half of the adolescents were from the class V socio economic status and 40.04 per cent were from class IV; 65.31 per cent male and 26.46 per cent female adolescents were found to consume tobacco products; 85.63 per cent consumed smokeless form of tobacco; 14.38 per cent had the habit of smoking beedi/ cigarettes; all female adolescents consumed a smokeless form of tobacco and no one had the habit of smoking; the minimum age of initiation of the tobacco chewing in the male adolescents of the tribal community was three years of age; 47.50 per cent male adolescents initiated tobacco chewing at 11-15 years of age; 40.63 per cent initiated at 5-10 years of age and 1.87 per cent initiated at less than five years of age; among the 68 female adolescents tobacco chewing was initiated at less than five years of age in 60.50 per cent it was initiated at 5-10 years of age and in 30.88 per cent it was initiated at 11-15 years of age; social customs were the major factors which influenced the tobacco intake in both the male and female adolescents; peer pressure was the factor which was next to social customs in both the sexes; 26.47 per cent

female adolescents assumed that tobacco intake would give them relief from abdominal pain, especially during the menstrual periods; consumption of tobacco in the family members significantly ( $P < 0.001$ ) increased the tobacco use among the adolescents.

*Recommendations:* Strengthening of the IEC activities is necessary to minimise the influence of social customs, peer pressure and the tobacco consumption by the family members; Behaviour Change Communication (BCC) should be established between the health workers and the adolescents to break down the habit of the consumption of tobacco/ gutka.

**Key Words:** 1.HEALTH 2.TOBACCO 3.CHILD PROTECTION 4.HEALTH HAZARDS 5.TOBACCO CONSUMPTION 6.SUBSTANCE ABUSE 7.CHILDREN IN NEED OF CARE AND PROTECTION 8.ADOLESCENTS 9.TRIBAL AREAS 10.HEALTH 11.CHISQUARE TEST 12.RURAL AREAS 13.EDUCATION 14.SCHOOL GOING CHILDREN 15.SOCIO ECONOMIC STATUS 16.ILLITERACY 17.MAHARASHTRA.

24. Raval, S., Maudgal, S. and More, N. (2010).  
Study on tobacco use and awareness among marginalized children.  
*Indian Journal of Cancer, 47: S14-S18.*

Source: [www.indianjcancer.com](http://www.indianjcancer.com)

*Background:* India faces the greatest challenge with the highest rates of oral cancer in the world due to easy availability of variant smoking and smokeless tobacco products. There is an increasing concern regarding the usage of tobacco among youth who succumb to the habit due to peer pressure and lack of awareness. About 17.5 per cent of adolescents in India aged 13-15 years are using tobacco in some form or the other form.

*Objectives:* To determine and report on all the variant factors related to the usage of tobacco among the under privileged children population.

*Methods:* The study was conducted in lower socio economic strata of rural and urban regions of the states of Maharashtra and Assam who were vulnerable to tobacco usage. Clinical check up was carried out to detect and treat pre cancerous lesions in the tobacco using children at an early stage .

*Findings:* Of the total 1004 Children surveyed, 65.6 per cent of the children were male; tobacco use among girls was found to be much less than tobacco use by boys; the earliest age at which tobacco was experimented with was three years; the average age at initiation was 8.80 years for both boys and girls across all the camps; tobacco use was rampant among the marginalised communities; of the total children surveyed, 25 per cent of the children were found to use tobacco in some form; Assam stood out as having quite a high number of children using tobacco at 68 per cent; the prevalence was the highest among male students in the Northeast (34%) and the lowest was (4.9%) among female students of the western states in India; children who were going through some form of schooling had a higher level of awareness and did not experiment with tobacco; in Assam, the most popular form of tobacco used was areca nut; in rural Assam, teenage boys were also addicted to sniffing glue; in Mumbai, the frequently used products were raw tobacco, pan masala / gutkha , areca nut and cigarettes; parents of many of the non-tobacco users were reported to be tobacco users; most children tried tobacco due to curiosity or a form of emulation of their role models; peer pressure was the most prevalent cause of experimentation inspite of being aware of the hazards of doing so; many associated tobacco use as a form of transcending into adulthood; children spent sums ranging from 0.50 to 200 rupees per day; the glue tubes cost Rs 22 each and as many as ten were sniffed per day; parents were the common source of money being acquired; 74.60 per cent of the children were aware that tobacco

use was dangerous and harmful for health; children who attended school were more aware about tobacco hazards and even knew about the addictive ingredient; 84.9 per cent wanted to quit tobacco; 53.4 per cent had tried to stop the habit of quitting tobacco; overall, the interest to quit was found to be quite low in the population and awareness of the disease risks was also the same; children said that they did not had enough incentive to stop and even if they did, they did not know how to stop.

*Conclusion:* Findings restate the importance of addressing the disadvantaged children population and their tobacco habits. Effective interventions are required to reduce the burden of tobacco related diseases, especially cancer for these children.

**Key Words :** 1.HEALTH 2.TOBACCO 3.CHILD PROTECTION 4.SUBSTANCE ABUSE 5.MARGINALISED CHILDREN 6.ADOLESCENTS 7.ORAL CANCER 8.URBAN AREA 9.RURAL AREA 10.LOWER SOCIO ECONOMIC STRATA 11.PRE CANCEROUS LESIONS 12.CANCER 13.JUVENILE DELINQUENTS 14.STREET CHILDREN 15.ORPHANS 16.REMAND HOMES 17.SHELTER HOMES 18.NGO'S 19.AWARENESS 20.EDUCATION 21.HEALTH SCHOOL GOING CHILDREN 22.EARLY INTERVENTIONS 23.CHILDREN IN NEED OF CARE AND PROTECTION 24.CHILDREN IN DIFFICULT CIRCUMSTANCES 25.CHILD ABUSE 26.ASSAM 27.MAHARASHTRA.

## SOCIAL DEFENCE

25. Kamble, Sanjeev D., Sangalad, P.N. and Huddar, M.G. (2012). Occupation and family conditions of juveniles in conflict with law of Dharwad district under the juvenile justice act 2000. *Indian Journal of Social Development, January-June, 12(1) : 187-191.*

*Background:* According to Juvenile Justice (Care and Protection of Children) Act, 2000, "a juvenile or child means a person who has not completed 18 years of age. In India before the enactment of the JJ Act every state had its own Children Act. From adoption to abuse and neglect to children in conflict with the law, the act is far reaching in its scope and intent. The provisions with the JJ Act, like its international predecessors, are intended to preserve the dignity and best interests of the child.

*Objectives:* To study the juveniles family conditions in relation to occupation of their parents in Dharwad District.

*Methods:* A total of 41 samples were collected from observation homes from Dharwad District. Structured questionnaires were used to get the information from the respondents . Data collected were analysed and interpreted by using the statistical tools

*Findings:* About 43.9 per cent of juveniles belonged to the families pursuing service as main source of earning; the financial position of the parents engaged in the service sector was fairly better than those engaged in other occupations; the pocket money paid by the parents to the children was often misused by these children; majority of the children were found to involved in the economic offences; 24.4 per cent of the children were belonging to agriculture labour category; parents were engaged in the agriculture work for the whole day, they fed the members of the family after getting the wages from the employer; many were unable to take care of their children; some of the children revealed that they were engaged in theft due to hunger; 14 per cent juveniles were belonging to the families of self-employed category; many families were engaged in petty business like vegetable selling, cycle repair ship, artisan work etc; many delinquent children were engaged in farming; children belonging to the self-employed and farming categories were engaged in work along with their parents.



*Conclusion:* Free education and food is supplied to all school going children to attract them to the school. Parents should make use of the facilities provided by the government and see that the children should attend the school regularly so that the children do not take the path of deviance.

**Key Words:** 1.SOCIAL DEFENCE 2.JUVENILE JUSTICE 3.CHILD PROTECTION 4.OCCUPATION 5.FAMILY CONDITIONS 6.CHILDREN IN CONFLICT WITH LAW 7.JUVENILES 8.JUVENILE JUSTICE ACT 2000 9.OBSERVATION HOMES 10.CHILD NEGLECT 11.CHILD WELFARE COMMITTEES 12.CHILDREN IN NEED OF CARE AND PROTECTION 13.CHILDREN IN DIFFICULT CIRCUMSTANCES 14.HEALTH 15.EDUCATION 16.DHARWAD 17.KARNATAKA.

## C. Research Abstracts on Women and Gender Issues

### LABOUR

26. Thomas, Jayan Jose. (2012)  
India's labour market during the 2000s : surveying the changes.  
*Economic and Political Weekly, December, 47(51) : 39-51.*

Source: [www.epw.in](http://www.epw.in)

*Background:* The growth of gross domestic product in every sub-sector of the Indian economy accelerated during the second half of the 2000s, compared to the first half of the decade. However, employment growth in most sectors except construction decelerated. The slow progress in the diversification of India's employment structure has led to a large-scale withdrawal of women from the labour force, with the number of women thus "missing" being as large as the population of Brazil.

*Objective:* To examine the changes in India's Labour market during the last three decades and in the 2000s in particular, to address the issue of low levels of female labour participation in India.

*Methods:* Analysis is based on the NSSO reports on employment and unemployment in India.

*Findings:* The survey of 2009-10 provide evidence that the movement of the labour force away from Agriculture has clearly begun in India; there has been a noticeable improvement in the education level of the country's workforce; the size of manufacturing workforce declined between 2004-05 and 2009-10; the large scale withdrawal of women from the labour workforce is a continuing challenge for India's progressive transformation; employment growth slowed down sharply during the 1990s, specially in rural areas; the overwhelming proportion of all persons who joined the agricultural labour force in India between 1999-2000 and 2004-05 (16.9 million of 18.5 million) were self-employed females; between 2004-05 and 2009-10, close to 22 million women left agricultural work, of which 19 million were in the self-employed category; just as the steep rise in female agricultural, employment during the first half of the 2000s was linked to rural distress, its equally steep decline during the second half of the 2000s was likely to be associated with some improvement in India's rural economy; the real wages of female casual workers in rural areas grew at an average annual rate of 5.5 per cent between 2004-05 and 2009-10, compared to 1.6 per cent only between 1999-2000 and 2004-05; between 1999-2000 and 2004-05, rural women who reported their economic status as "attending to domestic duties only" declined in number, while self-employed rural females grew in strength; this was reversed between 2004-05 and 2009-10; there was a sharp rise in the number of rural females who were attending to

domestic duties only and a fall in the number of rural females who were self-employed in agriculture; fall in female agricultural employment during the second half of the 2000s is possibly due to an improvement and not a worsening in the economic conditions in rural India; the ratio of students to population among rural females in the age groups of 5-9 and 10-14 years rose by 14 and 13 percentage points respectively; among rural females in the age group of 15-19 years, 47 per cent were students in 2009-10, up from 31.5% only in 2004-05; average rate of illiteracy among female workers was 52.5 per cent, while in the case of female casual workers in rural areas, the illiteracy rate climbed up even further to 65 per cent; a low female LPR is indeed the factor that pushes India's overall LPR to the bottom ranks; out of 184 countries for which data were available in 2008, India was ranked 42<sup>nd</sup> in male Labour Participation Rate (LPR) in descending order of LPR, but 165<sup>th</sup> and 143<sup>rd</sup> in female LPR and overall LPR respectively; in India the other side of a low female LPR is a substantially high proportion of females reporting their activity status as attending to domestic duties, also the factor that restricts female LPR the most was the sheer absence of suitable employment opportunities; females accounted for only as a small share of relatively high quality jobs generalized in India in recent years; in 2009-10, an important reason for the reportedly low LPRs of women was the system of statistical reporting itself; 34.7 per cent of all rural females and 46.5 per cent of all urban females in India were attending to domestic duties; in 2009-10, among urban females with graduate degrees, those who were reported to be attending to domestic duties was close to 60 per cent, which was almost twice the corresponding proportion of rural females with primary or middle school education; only 20 per cent of the new jobs created in financing, real estate and business services in India during the 2000s went to females (9,00,000) out of a total of (5.2 million), in case of computer and related activities the female share of new jobs created during the second half of the 2000s was only 10% (only 1,00,000 of the total 9,80,000); women with graduate degrees or above and attending to domestic duties numbered 12.7 million in India in 2009-10, which was more than twice the population of Singapore (all population figures in 2010).

*Recommendation:* Recent changes in labour market highlight the important role that government interventions (such as MGNREGA) can play in improving the living conditions of India's rural poor; India's services- led economic growth is facing severe challenges on the employment front; the goal of decent work and living especially for females can be achieved only with a significant revival in manufacturing growth especially in rural areas.

**Key Words :** 1.LABOUR 2.LABOUR MARKET 3.WOMEN GROSS DOMESTIC PRODUCT 4.NREGA 5.LABOUR FORCE 6.WORKERS 7.RURAL ECONOMY 8.MISSING WOMEN 9.FEMALE LABOUR PARTICIPATION RATE (LPR) 10.EMPLOYMENT OPPORTUNITIES 11.LABOUR ABSORPTION 12.INDIAN ECONOMY.

## NUTRITION

27. Rao, K.Mallikharjuna et al. (2010).  
Diet and nutritional status of rural and tribal women in India. *Nutrition News, April, 31(2): 1-4.*

*Background:* Government of India has been making several efforts in developing health and nutrition policies for well-being of the human capital. But there is a paucity of information on diet and nutritional status of women including non-pregnant non-lactating (NPNL), pregnant and lactating women.

*Objective:* To assess the diet and nutritional profile of women in rural and tribal areas in India.

*Methodology:* The data base collected by National Nutrition Monitoring Bureau (NNMB) during 1998-99 and 2005-06 on diet and nutritional status of tribal and rural population respectively in nine states, viz., Andhra Pradesh, Gujarat, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Orissa, Tamil Nadu and West Bengal was utilised. In each state, 120 villages were selected randomly from the list of Integrated Tribal Development Agency (ITDA) villages. From each selected village, a total of 40 households (HHs) were covered, by adopting probability proportion to size of different tribes. Each village was divided into five natural groups of houses and a total of 20 HHs were covered at four HHs per group. Oral informed consent was obtained for carrying out the survey from the head of the household. A total of 30,390 households from tribal and 14,256 households from rural area were included in the analysis. Of these households, a sub sample of 8,036 and 7,078 HHs were covered for diet surveys from tribal and rural areas respectively. Anthropometric data includes 29,709 tribal and 18,603 rural women of NPNL, pregnant and lactating women.

*Findings:* The intake of cereals and millets was 402 gram and 365 gram respectively in tribal and rural NPNL women; except for other vegetable and roots and tubers, the intake of all the other foods was lower than the suggested level in both the areas. The intake of income elastic foods such as milk, oils and fats was higher in rural than in tribal NPNL pregnant as well as lactating women; however, the intake of cereals and millets was higher among tribal women deficit in protein and energy intake was more among pregnant and lactating women, when compared to NPNL women in both tribal and rural areas; the deficit in energy intake ranged from 19-24% among pregnant and lactating women in both areas; with regard to protein calorie adequacy status, in general about 80 per cent of NPNL women and 58-60% of the pregnant and lactating women consumed adequate amount of both protein and energy (P+C+). The inadequacy for both the nutrients (P-C-) was more in pregnant and lactating

women than NPNL women in both areas; distribution of women according to intake of nutrients was less than 50 per cent of RDA revealed that more than 70 per cent of women were not meeting ever 50 per cent of the requirement for iron and vitamin A in both areas; similar observation was also made with respect to free folic acid which ranged from 54 per cent to 100 per cent among tribal and rural women; prevalence of chronic energy deficiency (CED) was significantly higher ( $P < 0.001$ ) among tribal women than the rural women; prevalence of CED was 56 per cent among tribal NPNL women against 36 per cent in rural, similarly prevalence of CED was high with 58 per cent among tribal lactating women against 40 per cent among rural lactating women; prevalence of micronutrient deficiencies- a study by NNMB (2003) revealed that overall prevalence of anaemia was observed to be highest among lactating women (78%) followed by pregnant women (75%) and adolescent girls (75%).

*Recommendation:* There is a need to take necessary steps for more community participation in various developmental programmes for removal of poverty and improving literacy rate among women; health and nutrition education has to be strengthened through department of health and ICDS to bring awareness and behavioural change for better health and nutrition practices to improve the nutritional status of mother and child.

**Key Words :** 1.NUTRITION 2.RESEARCH NUTRITION 3.DIET 4.NUTRITIONAL STATUS 5.RURAL WOMEN 6.TRIBAL WOMEN 7.UNDERNUTRITION 8.PREVALENCE 9.NUTRIENT INTAKE 10.COMMUNITY PARTICIPATION 11.LACTATING WOMEN 12.PREGNANT WOMEN.

## RURAL DEVELOPMENT

28. Viswanathan, P.K. and Mandal, Amit. (2012).  
NREGS as instrument of gender mainstreaming : an exploratory analysis  
*Man and Development, September : 17-36.*

Source: <http://www.crrid.res.in>

*Background:* The Agenda 21 of the UN Declaration considers gender mainstreaming as one of the crucial pathways to achieve the gender related Millennium Development Goals (MDGs). Gender based development goals as set forth by many of the countries have been promoting women's full participation in decision-making at all levels, mainstreaming gender perspectives in all policies and strategies, eliminating all forms of violence and discrimination against women and improving status, health and economic welfare of women. The need for gender mainstreaming has become extremely important in a context when much of the macro economic policies and development interventions pursued by many countries have tended to be gender insensitive (Elson, 2002) and failed to recognise women's contribution to the productive sectors and the national wealth.

*Objective:* To examine the emerging trends in the implementation of NREGS across states in India; its outcome with respect to increase in women participation in the labour market created under the scheme; resultant implications on women empowerment and sustainable livelihoods.

*Methods:* Based on aggregate level data, this paper examines the case of NREGS implementation with respect to its gender dynamisms.

*Findings:* There were seven states led by Kerala that report extremely high levels of women participation with an increase in the rate of participation over the five year period from 67 in 2006-07 per cent to 76 per cent in 2010-11. The other states in this category include Tamil Nadu, Rajasthan, Andhra Pradesh, Dadra Nagar Haveli and Goa; states where women work participation rates slightly improved from 42 per cent in 2006-07 to 44 per cent during 2010-11 with significant inter-state variations; overall average rates of women work participation ranged between 37 and 50 per cent during the five year period, highest levels of women work participation in this group of states was reported from Tripura (50%), followed by Karnataka (47%), Gujarat (46%), Chhattisgarh (45%), Madhya Pradesh (43%), Maharashtra (42%) etc; majority of the states (40%) falls into the category where women work participation was far below the

national average during most years; the rate of participation in this group of states has improved from 26 per cent to 32 per cent during the five year period with highest levels reported from Orissa (37%), followed by Himachal Pradesh (35%), Nagaland (34%), Mizoram and Jharkhand (33% each), etc. while gender work participation was abysmally low (ranging from 5 to 29%) in Punjab, West Bengal, Bihar, Uttar Pradesh, Assam, Arunachal Pradesh and Jammu and Kashmir; a major chunk of the NREGS works have been undertaken for improving the rural connectivity (40%) as against the other two categories of states; work related to water conservation/ water harvesting (15.21%), followed by land development (12.5%), provision of irrigation facility to land development (8%) etc; women autonomy expressed in times of decision making power was found relatively low in this category of states (41%), higher proportion of women reported access to money (59%) in comparison to state with moderate levels of women participation (57%), states with lower level of NREGS work participation (57%) and states with lower level of NREGS work participation (54%); for the status of implementation of NREGS across districts of Kerala and West Bengal it shows that women participation in the NREGs has been 32 per cent in the 19 districts of West Bengal as against 92 per cent in the 14 district of Kerala during 2010-11; women participation in West Bengal has shown significant variation across district (ranging from 15-56% with a cv of 33%) as against high participation rates (88-96%) with low variability (cv of 7%) in Kerala districts, wage differences have been found to be very high among states with highest (-17%) and lowest rate (-9.8%) of women participation in NREGS respectively.

*Recommendation:* It may be important to consider bringing in new avenues/ sources of employment generation as well as new modes of functioning in the ambit of the NREGS.

**Key Words** : 1.RURAL DEVELOPMENT 2.NREGS 3.RURAL EMPLOYMENT 4.EMPLOYMENT GUARANTEE 5.IMPLEMENTATION 6.EVALUATION NREGS 7.WOMEN WORK PARTICIPATION 8.GENDER MAINSTREAMING.

## SOCIAL WELFARE

29. Batra, Vikas. (2012).  
Swaranjayanti Gram Swarozgar Yojana : a study of rural women beneficiaries in Haryana state. *Man and Development*, p1-16, September 2012

Source: <http://www.crrid.res.in>

*Background:* Most of the poverty alleviation programmes could not reduce the incidence of poverty substantially for a variety of reasons. Self-employment programmes along with wage employment programme were reviewed by the Hashim Commission in Feb 1997. According from April 1, 1999, the various schemes were amalgamated by the Government of India and merged into a single new scheme called 'Swaranjayanti Gram Swarozgar Yojana (SGSY) w.e.f. April 1, 1999. The basic objective of the SGSY was to bring the assisted poor (swarozgaries ) above the poverty line by providing them income-generating assets through a mix of bank credit and government subsidy.

*Objectives:* To study the impact of SGSY on income level of the micro-finance beneficiaries; to assess the impact of SGSY on accumulation of household assets; to appraise the impact of SGSY on the expenditure of food, health and education and to understand the role of SGSY on the expenditure of food, health and education.

*Methodology:* The study is empirical in nature mainly based on primary data collected through field surveys. A total of 48 SHGs were selected from all the three districts of Haryana state. A purposive and random sampling technique was used to select SHGs. For this, a separate list of SHGs under SGSY, were prepared and out of these lists, those SHGs which had existed for two or more years as on 1.1.2009 were separated out to form the lists of SHGs eligible to be selected for this study. From these two lists, 48 SHGs were randomly selected for the study. A total of 192 became the final sample frame.

*Findings:* In SGSY, 82.8 per cent of women were housewives with no work, followed by Anganwadi work (6.3%), seasonal agricultural labour (5.7%), sewing (2.1%), handicrafts (1.6%), and services (1.0%); only 106 members were involved in IGAs out of which 51 per cent of members purchased buffalo; in 20.7 per cent of cases, women gave loan to their husband and son for investment in their own business followed by opening of bangle shop for self-employment (10.3%), 7.5 per cent of women were involved in wooden bead making followed by ration making at the Anganwadi (7.5%); 69.4 per cent of the



members acquired assets from income, 21.1 per cent from loans and 9.4 per cent from both sources; 70.8 per cent of the members claimed an improved expenditure on food items and the remaining 29.2 per cent experienced no improvement; 64.7 per cent claimed the improved expenditure was because of increased income; 33.1 per cent from loan amount and 2.2 per cent from both the sources; 53.6 per cent of members claimed that they were in a better position to afford the expenditure on education; 67 per cent claimed improved expenditure had occurred with the help of income earned; 29.1 per cent with loans and 3.8 per cent with both earned income and loans; 79.6 per cent of members said that they can put more expenditure into health services but with major assistance from loan amount and not from earned income as claimed by 64.7 per cent of members; only 32.1 per cent members submitted the increased expenditure through income and 3.2 per cent claimed from both loan and income; 89.2 per cent of the respondents stated price hikes as a major risk, followed by general illness (79.7%), lack of resources (70%), indebtedness (52.9%), use of alcohol by husband (2.2%), natural calamity (20.8%), death of animal (14.2%), accident (13.6%), death of bread earner (12.5%), major operation (10.7%), business loss (9.5%) and crop failure (4.7%); 83.2 per cent claimed that microfinance helped to reduce vulnerability, 91.4 per cent respondents stated that microfinance reduced the vulnerability through providing money in tough situations, followed by increased household income (51.7%), consumption smoothening (41.8%), money management (39%) and increasing the asset base (27.6%)

*Recommendation:* Experiments should be conducted with new livelihood opportunities; the future emphasis of the implementation agencies should be on group based income generation activities, this will enhance the capacities of the group members as well as social solidarity; those who are not keen to start economic activities should be provided some different and innovative financial products such as consumption of loans, house loans, insurance, etc. which will help them to suffice their requirements; in order to identify appropriate livelihood opportunities a task force should be set up at the local level by including all concerned agencies such as District Rural Development Agencies, gram Panchayat, line departments, NGOs, and the private sector; village potential mapping with a sub-sectoral analysis would play a substantial role in the development of income generation activities.

**Key Words :** 1.SOCIAL WELFARE 2.SWARN JAYANTI SHAHRI ROZGAR YOJANA 3.RURAL WOMEN BENEFICIARIES 4.EMPLOYMENT SCHEMES 5.SELF EMPLOYMENT PROGRAMME 6.LITERATURE REVIEW 7.SHG 8.MICROFINANCE 9.SOCIO ECONOMIC STATUS 10.HARYANA.

## WOMEN WELFARE

30. Babu, Bontha V. and Kar, Shantanu K. (2012). Abuse against women in pregnancy : a population-based study from Eastern India. *WHO South-East Asia Journal of Public Health*, 1(2) : 133-143.

Source: [www.searo.who.int](http://www.searo.who.int)

*Background:* Violence against women is widely recognised as an important public health problem. However, the magnitude of the problem among pregnant women is not well known in several parts of India. Hence, the prevalence and characteristics associated with various forms of domestic violence against women in pregnancy were studied in Eastern India.

*Methodology:* A population based study was undertaken in three eastern states of India. Population of the selected states i.e. Orissa, West Bengal and Jharkhand was 31.7 million, 80.2 million and 26.9 million, respectively in the year 2001. Married women up to the age of 50 yrs. were sampled from each selected household. Initially, 1753 women were contacted; however 35 women refused to participate, yielding a refusal rate of 2 per cent. Of 1718 women, 1525 women who were chosen for the study had at least one full-term pregnancy. Only women with full-term pregnancy were included in the study to examine the association between domestic violence and pregnancy outcome. Complete data were available on all 1525 women included in the analysis. Structured questionnaire was used as a method for data collection.

*Findings:* Prevalence of physical, psychological and sexual domestic violence during the recent pregnancy was found to be 7.1 per cent (the 95 per cent confidence interval (CI) was 5.9 per cent-8.4 per cent, 28.3 per cent- 32.9 per cent and 8.9 per cent-12 per cent respectively); 30.6 per cent (95% CI: 28.3%-32.9%) and 10.4 per cent (95% CI: 8.9%-12.0%); lifetime prevalence of physical domestic violence during pregnancy was 8.3 per cent (95% CI: 7.5%-9.2%), psychological domestic violence was 33.4 (95% CI: 31.9%-34.9%) and sexual domestic violence was 12.6% (95% CI: 11.5%-13.6%); there was decreased demand for sex by the husband when his wife was pregnant; about 85 per cent (95% CI: 83.1%-87.5%) women have not experienced any sort of domestic violence and they reported that the frequency of sexual activity decreased during pregnancy, whereas only 52 per cent (95% CI: 47.7%-56.5%) women had experienced domestic violence and reported decreased frequency of sexual activity in pregnancy. Those who were exposed to sexual abuse had low level of sexual activity in pregnancy (23.3%; 95% CI:16.7%-29.9%); overall 67.2 per cent women reported that frequency of sexual activity decreased during

pregnancy; about 25 per cent women said that there was no change and 7.4 per cent said that there was no sexual intercourse during pregnancy; about 19 per cent women reported that diet and rest increased during pregnancy and the same proportion (19%) of women reported that diet and rest decreased, while 62.6 per cent women said that there was no change in the provision of diet and rest; overall 20 per cent women did not receive any ante natal care; about 18 per cent women expressed that they faced pressure from family for having a male child and the pressure for having a male child was higher among those women (25%); 95% CI: 21.1%-28.7%) who had experienced domestic violence compared with those who had not experienced domestic violence (15%; 95% CI: 12.8%-17.2%).

*Recommendation:* Considerable proportions of women experience some type of domestic violence during pregnancy. Health-care providers should be able to recognise and respond to pregnant women's victimisation and refer them for appropriate support and care.

**Key Words :** 1.WOMEN WELFARE 2.ABUSE AGAINST WOMEN 3.PREGNANCY 4.HEALTH 5.PREVALENCE OF DOMESTIC VIOLENCE 6.RETROSPECTIVE 7.CROSS-SECTIONAL 8.SURVEY 9.EASTERN INDIA.

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Microfinance and women empowerment : an empirical study with special reference to West Bengal. Hooghly, West Bengal: Raja Peary Mohan College. 29 p.

Source: <http://www.igidr.ac.in>

*Background:* The emergence of women entrepreneurs and their contribution to the national economy is quite visible in India. Number of women entrepreneurs has grown over a period of time, especially in the 1990s. Microfinance programs have significant potential for contributing to women's economic, social and political empowerment. Throughout the developing countries, innovative lending programs have emerged that specializes in supplying small capital loans to low-income entrepreneurs. In many of these programs it is common to find that a large percentage of borrowers were women.

*Objective:* To examine the two basic research questions: first, to attempt to study about women's tendency to invest in safer investment projects to raise her bargaining position in the households and to control savings, income, loans and control over purchasing capacity and family planning in some sample households in Hooghly district of West Bengal.

*Methodology:* The study was conducted in Hooghly district of West Bengal in 2006. 100 SHGs in Tarakiswar block of Hooghly district, West Bengal were selected purposively. This district was selected on the basis of highest number of SHGs formation. Two members from each group were selected. Thus, 200 members constituted the number of sample.

*Findings:* More than 63 per cent of SHG members belonged to the SC and ST; education level of SHG members was satisfactory, more than 80 per cent SHG members have got primary and high school level of education. Sample SHG members took loan up to four times. The average present loan per SHG member was Rs 5024; average saving per SHG member was Rs 2055; among women who had taken loans for income generating activities only five per cent reported having total autonomous control over the money, 56 per cent reported that they shared control over the loan money with their husbands and 38 per cent reported that their husbands have sole control over the proceeds of the loan; regarding family planning: 91 per cent of the women reported that they had never been able to make their husbands use a male birth control method, of these women 68 per cent explained that the responsibility of birth control was usually given to them.

*Recommendation:* It is appropriate to place the strategy of financial inclusion in the wider context of economic growth and financial deepening.

**Key Words :** 1.WOMEN WELFARE 2.MICRO CREDIT 3.MICRO FINANCE 4.WOMEN EMPOWERMENT 5.SELF HELP GROUPS 6.ECONOMIC EMPOWERMENT 7.NASH BARGAINING GAME 8.INCOME GENERATION 9.HOOGHLY 10.GROUP LENDING 11.FINANCIAL INCLUSION 12.EMPIRICAL STUDY 13.WEST BENGAL.

32. Chatterjee, Tanmoyee Banerjee and Ghosh, Chandralekha. (2012).  
What factors play a role in empowering women ? a study of SHG  
members from India. *Gender, Technology and Development*, 16(3) :  
329-355.

Source: <http://gtd.sagepub.com>

*Background:* Women's Empowerment is considered to be an integral part of the overall economic development strategies of the least developed countries(LDCs) and developing countries across the globe. In line with the Millennium Development Goals, the Government of India adopted the National Policy for Empowerment of Women (2001) that sought to develop an environment for promoting the advancement, development and empowerment of women to enable them to realize their full potential through positive, economic and social policies, while access to financial services and make a vital contribution to economic productivity and social well-being of poor women, and their households, it does not automatically empower women, as with other interventions, such as education and political quotas, which seek to bring about a radical structural transformation that true empowerment entails.

*Methodology:* The present study is based on two rounds of primary surveys carried out in the district of North 24 Parganas, West Bengal. The first round of the survey was carried out from Oct 2005 to March 2006, and a resurvey of the same group members was undertaken from Oct 2009 to March 2010. Twenty seven groups with 300 members were selected from the round of the survey; final data included 268 married group members from 26 matured SHGs covering all the four sub divisions of North 24 Parganas.

*Findings:* Women were part of SHGs for more than six years and most of them answered in the affirmative to questions like free mobility, freedom to spend own income, or purchase of households necessities; around 35 per cent did not feel that they were self-reliant; around 42 per cent said they could not take birth control decision by themselves; members belonging to bigger groups (SHGs with higher member of members) were more likely to be employed; group members who were self-employed in 2005 were more likely to be employed in 2009 as compared to the reference category of labour in 2005; survey demonstrated that 53 of the 64 self-employed groups members in 2009 were self-employed from 2005; this indicated that self-employed women, working mostly from their homes, have a higher probability of being continuously employed than wage earners who step outside for work; group members who were in animal husbandry in 2005 were more likely to be employed in 2009 as

compared to those who were working as labourers in 2005; around 84 per cent of the borrowers had taken loans from the group in 2009; whereas among the borrowers, only 28 per cent had used loans for their business; around 68 per cent of the group members who were not empowered had no control over their loans and used the sum for meeting family consumption needs or the working capital needs of their husband or other family business; 42.1 per cent empowered group members had used their loans for propagating their own business as against 13.3 per cent group members who were not empowered. Thus empowered women had better control over their loans; trained group members were more likely to be employed in the long run and thus become empowered.

*Recommendation:* SHG members should be encouraged to take up self-employment projects and provided with monetary as well as non-monetary benefits like “training” to help them sustain these ventures; formation of SHGs and supply of subsidized credit to rural poor women through some micro-credit programs, such as SGSY and train these women to use credit for their own enterprise; government could take the help of NGOs to nurture SHGs; it is also important to complement micro-credit programmes with meaningful training to ensure that all members of SHGs become more aware, independent and financially self-reliant.

**Key Words** : 1.WOMEN WELFARE 2.WOMEN EMPOWERMENT 3.SELF HELP GROUPS 4.EMPLOYMENT STATUS 5.DECISION-MAKING AGENCY 6.SOCIOECONOMIC STATUS 7.ECONOMIC EMPOWERMENT 8.WOMEN DEVELOPMENT 9.NORTH 24 PARGANAS 10.WEST BENGAL.

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A Study of issues and challenges in empowerment of women through their participation in the panchayat raj institution : a case study of Allahabad district of Uttar Pradesh. Allahabad : Allahabad University, Department of Economics. 14p.

Source : [www.isical.ac.in](http://www.isical.ac.in)

*Background:* Empowerment of women is essentially the process of upliftment of economic, social and political status of women, the traditionally underprivileged ones, in the society. It involves the building up of a society wherein women can breathe without the fear of oppression, exploitation, apprehension, discrimination etc. which goes with being a woman in a traditionally male dominated structure.

*Objectives:* To examine the fact as to whether inadequate representation and participation of women in the Panchayati Raj Institution is one of the major factors that has contributed to the low status of women in the rural areas; to examine as to how far the participation of women has been successful in integrating the issues concerned with women community; to substantiate the existence of disparity and disadvantages faced by women in their participation in the Panchayati Raj Institutions; to identify the causes and obstacles that infringe the participation of women in the Panchayati Raj Institutions; to examine the complementarity of the legislative measures and developmental measures in raising the status of women and to examine as to how far the participation of women in political process has made a dent in the grim issues and challenges before women.

*Methodology:* Two development blocks namely Shankargarh and Handia of Allahabad district were collected from the district planning office; the study is essentially based on primary evidences collected from female gram pradhans of the two blocks; structured questionnaire; case study.

*Findings:* Nearly all Scheduled Caste women gram pradhans and about 85 per cent other women gram pradhans were illiterate; almost all the SC gram pradhans and nearly 30 per cent of those hailing from other backward classes (OBC), were dummy gram pradhans; only those women gram pradhans who belong to the general category and a very small percentage from backward classes actively participated in the meetings of gram sabha and were involved in the decision making process; political participation of women in the local rural bodies had hardly made noticeable dent in terms of raising social and economic status, improving literacy ratio, providing health, maternity and sanitation benefits to women etc.; a high degree of positive correlation of 0.89 was



observed between education and awareness of the issues related with women in both the blocks; almost all women gram pradhans agreed that granting reservation and thus paving way for political participation in the rural local bodies is a praiseworthy step towards women empowerment; 80 per cent held the view that employment and asset generation for women will prove to be a better and more effective delivery vehicle for empowerment.

*Recommendation:* Adoption of legislative approach to women empowerment through the reservation of seats in Panchayati Raj Institution; increasing the role of local self governments in the implementation of plans, is definitely a desirable and welcome move and should ideally prove to be effective; provision of reservation of seats in PRI's, although seems apparently temporarily without evincing any desirable signs of their active participation in decision making in the interests of the women; need to equip women with capacity and the confidence to empower and motivate them to enter the political domain, to facilitate horizontal and vertical interaction of women elected at different levels of governance to enable the sharing of experiences and building solidarity and networking.

**Key Words** : 1.WOMEN WELFARE 2.WOMEN EMPOWERMENT 3.WOMEN EDUCATION DEVELOPMENT 4.WOMEN'S DEVELOPMENT 5.WOMEN'S ECONOMIC DEVELOPMENT 6.EMPOWERING WOMEN 7.PANCHAYATI RAJ 8.GRAMPRADHAN 9.POLITICAL PARTICIPATION OF WOMEN 10.CASE STUDY 11.ALLAHABAD 12.UTTAR PRADESH.

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Deforestation and women's work burden in the eastern Himalayas, India :  
insights from a field survey. *Gender Technology and Development*, 16(3)  
: 299-328.

Source: <http://gtd.sagepub.com>

*Background:* Environmental degradation affects everyone, although its nature, extent and implications vary across regions, communities, households and gender. Gender implications of environmental degradation were not only related to the intrahousehold distribution of work, income and authority, but also to the larger dynamics of patriarchal control over the society and economy (Agarwal, 1992; Kelkar and Nathan, 1991, 2001) with differential levels of access across countries. This article attempts to assess the impact of deforestation on women's work burden in the relatively under researched state of Arunachal Pradesh and its situation in the extreme north-east of India.

*Objective:* To compare villages with different quality of forests but as such no information was available on forest quality at the village level.

*Methodology:* The study households were selected using random sampling after excluding single-member households. In all 166 households and 332 individuals were surveyed using a structured questionnaire, and the study was conducted in three villages: Wangho, Khoina and Chug, located in West Kameng district of Arunachal Pradesh.

*Findings:* On average, the share of forest income in the total household income varied from 16.18 per cent to 67 per cent; all the households combined, the forest dependency was found to be 24 per cent of the total villages; Village III (Chug) was found to have the highest proportion of forest income to the total income followed by Village II (Khoina) and Village I (Wangho); the cultivators and agricultural labourers derived around 20 per cent to 27 per cent of their income from forest resource; the share of forest income was relatively smaller in households engaged in service and business; the problems of underestimation of women's work was particularly more severe in rural and nonmarket contexts, primarily because the boundaries of housework and economically gainful work was often blurred in economies with a preponderance of nonmarket activities (Kalpagam, 1999); the work share of women in the total labour days in the deforested villages was not only higher than that of men, but also than the women's labour days in villages with better quality forests, besides, factors such as intensive cultivation, off-farm employment of men, and migration of male family members to urban areas as well as the depletion of forest resources

increase women's work burden in the study villages; while wage labour was found to be absent in Village II (Khoina) and Village III (Chug), labourers from outside the village were hired in Village II for commercial extraction of forest products, thus resulting in the marginalization of women in the process of commercialisation of the community forest; women used to spend more time in primary SNA activities than men, while men spend more time in secondary and tertiary activities in all the study villages; on average, women typically spend more hours in animal husbandry, gathering fruits fetching water and other household chores, but the average time spent in crop farming does not show significant gender variations; women as active members of the household economy also participate in a number of forest-based activities, ranging from consumption and collection of NTFP for sale to collection of fruits, tubers and leafy vegetables for home.

*Recommendations:* There is a need to explicitly address the concerns of women as a distinct group, within both community and joint forest management; there is a need to formalise the rights of communities over forests, "owned" and managed by them and in doing so, the rights of women should be assumed to be the same as those of the community; forest management policy needs to recognise the differential impacts of commercialisation of forest products on different groups of users; there is a need for more proactive engagement by the state and civil society to ensure that such transitions do not result in disenfranchisement of the poor and marginalised.

**Key Words** : 1.WOMEN WELFARE 2.WOMEN'S WORK BURDEN  
3.LIVELIHOODS 4.DEFORESTATION 5.TIME-USER SURVEY 6.FOREST DEPENDENCY  
7.ENVIRONMENTAL DEGRADATION 8.ARUNACHAL PRADESH.

35. Rawat, Rukma. (2012).  
Development, displacement and its impact on rural women a case study  
of oustees of Tehri Dam. *The Eastern Anthropologist*, 65(2) : 141-155.

Source: [www.serialsjournals.com](http://www.serialsjournals.com)

*Background:* The word development is associated with progress, prosperity and happiness of people benefitted which also includes a rise in transport, health etc. On the contrary the word displacement is associated with the woes, sorrows, uprooting of the people from the ancestral homes where they have been living for generations and were forced to settle in areas which were geoculturally different. Women, who constitute half of the total population neither find a place in the rehabilitation and resettlement policies nor were ever consulted by their male counterparts in the matter of selection of the place of rehabilitation or money received by them as compensation.

*Objective:* To examine as to how the development induced displacement has changed the life of women in the new environmental setting.

*Methodology:* A sample of 48 women of the New Kandal (Bhanyala-Dehradun) was taken for in-depth study. Kandal village was one of the first 15 villages which got rehabilitated during 1980's by the Irrigation Department of Uttar Pradesh Government.

*Findings:* Data reveals that majority 28 (58.33 %) of the respondents either had agricultural produce sufficient for 9-12 months and more, followed by 16:67 per cent whose food requirement was met for 6 to 9 months; only 12.50 per cent of them grow produce for more than a year while equal per cent of them hardly produce that met their subsistence requirement for about 6 months; majority of the respondents have cowsheds and were found rearing milk giving animals; 72.92 per cent of them have cows whereas 14.18 per cent own buffaloes; 81.25 per cent grow fodder in their own fields; only 18.57 per cent of them collect grass occasionally from the nearby jungles; majority 54.16 per cent report that even though they have been living in the area for the past 20-30 years they still feel insecure; data reveals that 87.50 per cent of the respondents fell the separation from their close blood relatives particularly parents and siblings; similarly 83.33 per cent of them report that their relatives used to visit them quite frequently and always shared their sorrows and happiness, however shifting to plains had increased the distance that has broken their social fabric. In addition to this majority 54.16 per cent of the respondents report that in the old setting

there were occasional chances to meet their childhood friends during festivals etc however, now there were less chances to meet them again; data indicated that 6.67 per cent of the respondents find a change in their dressing pattern; 77.08 per cent of the respondents reported a change in their food habits to a considerable extent; a majority (62.50%) of the respondents reported that shifting to the new place was responsible for a change in the religious beliefs, rituals and practices while living in Tehri.

*Recommendation:* It may be concluded that though displacement of women was associated with better housing, better income, better health and comparatively more leisure time at their disposal. However, even they fell insecure, unhappy, dissatisfied and disempowered they still aspired for the colourful and culturally rich 'hill village' life full of freedom, security and warmth.

**Key Words :** 1.WOMEN WELFARE 2.DISPLACED WOMEN 3..REHABILITATION 4.DEVELOPMENT 5.RURAL WOMEN 6.CASE STUDY 7.SITUATION OF WOMEN 8.TEHRIDAM 9.UTTARANCHAL.

36. Samantroy, Ellina and Dhanya, M.B. (2012).  
Engendering gender statistics : an analysis of gender differentiated statistics in India. NOIDA, U.P. : V.V. Giri National Labour Institute, NOIDA. 100p.

Source: [www.indialabourarchives.org](http://www.indialabourarchives.org)  
[www.vvgnli.org](http://www.vvgnli.org)

*Background:* Gender statistics is a field of statistics which cuts across the traditional fields to identify, produce and disseminate statistics that reflect the realities of the lives of women and men and policy issues relating to gender equality (United National 2010). The issues of gender discrimination and deprivation have received considerable importance in recent years is well reflected in United Nations Development Programme (UNDP) gender related attributes of developments like Gender Development Index (GDI) as development indicators.

*Objectives:* To develop a conceptual understanding about gender and the importance of gender in statistics; to explore the various concepts in gender statistics related to labour; to identify the key areas in terms of employment and analysing their representation in statistics; to make comparative analysis of selected countries and explore the representation of gender in statistics and to identify the reasons for invisibility of gender in statistics with special reference to value added statistics in gender and its relevance in policy making.

*Methodology:* The study was based on secondary data collected from several governmental sources like periodicals, official records, published governmental sources. Conceptual and theoretical understanding was developed from extensive review of literature.

*Findings:* While in 1971 only 22 per cent of Indian women were literate, by 2011 the figure stood at 65 per cent; literacy rates for male and female show increasing trend over the years from 1951 to 2011 along with it the gap between them were also simultaneously increasing till 1981 and since then it has started declining but the progress has not been an much as was expected; the difference in the male and female primary enrollment has reduced to a great extent (115% for males and 108% for female in 2006-07) over the years but still there is a huge gap in the male and female literacy levels (women and men in India 2010); the enrollment figures in higher education were 4.6 million females compared to 7.1 million males and the relative enrollment of women in higher education has increased by 10 per cent between 1991 and 2001 as compared to a mere two per cent in the previous decade; despite a slight increase in

women employment till 2004-05, the average earning for rural women has declined between 1999-2000 and 2004-05; the decline was more pronounced among poorer women, i.e. illiterate women and women who have dropped out of primary, secondary or higher secondary; number of persons employed per thousand persons was referred to as the workforce participation rate (WFPR); the WFPR has increased slightly for women, the gender gap is much wider in urban areas in comparison with rural areas, in recent surveys 2004-05 and 2009-10 gender-wise analysis reveals that the number of females in the self-employed category declined by about 23 million of which only two million picked up jobs in the other two categories - 1.7 million in casual labour and 0.2 million in regular wage and salaried (Rangarajan et. al. 2011); among women in the prime age group, 15-59 years, 53 per cent in rural and 65 per cent in urban areas, were engaged in domestic duties by principal status in 2004-05; in contrast only 0.4 per cent of men were primarily engaged in domestic work.

*Recommendations:* There is a need to develop the gender information-gathering system that enables governments to keep abreast with the global commitments to achieve gender equality and women empowerment; a gender information gathering system would facilitate measuring changes and monitoring implementation for policy makers and statisticians; improving existing methodology and definitions to make them more relevant from the gender perspective, formulating a compendia of gender disaggregated statistics, developing and maintaining dialogue between users and producers of gender statistics, expanding the use of existing sources by including the collection of gender-relevant information and establishing necessary coherence with relevant departments which are entrusted with the responsibility of collecting data from a gender sensitive approach; a lot more needs to be done to standardize indicators; establish links between official statistics and policies; and to engender the production and dissemination of statistics particularly in those areas where there is no previous tradition of gendered analysis especially in areas pertaining to women's work in the informal economy in the context of India.

**Key Words :** 1.WOMEN WELFARE 2.GENDER STATISTICS AND SURVEYS 3.GENDER 4.GENDER STATISTICS 5.GENDER DIFFERENTIATED STATISTICS 6.GENDER EQUALITY 7.CROSS COUNTRY PERSPECTIVE 8.GENDER RELATED DEVELOPMENT INDEX 9.GENDER EMPOWERMENT MEASURE 10.GENDER STATISTICS AND LABOUR 11.WOMEN EDUCATION AND WORKFORCE PARTICIPATION 12.GENDER DIFFERENTIALS.

37. Social and Rural Research Institute, New Delhi. (2012).  
Sexual harassment at workplaces in India 2011-12. New Delhi: SRI.  
85 p.

Source: [www.oxfamindia.org](http://www.oxfamindia.org)

*Background:* Women's representation in the workforce has seen a gradual increase in India over the past few decades. Increased participation has a positive impact on women's role in economic decision making and society in varying degrees but has also made them vulnerable to instances of sexual harassment at workplace and related malpractices.

*Objectives:* To learn more about the incidences of sexual harassment from working women and the knowledge and attitude towards sexual harassment and related redressal mechanism from the general population and working women.

*Methodology:* For opinion poll on the issue; the poll included two components: interviews with working women in the age group of 18-45 years and with general population (male and female respondents in the age group of 18-50 years); overall four zones (North, East, West and South) were covered to ensure adequate spread and representation; within these four zones, 10 states were selected, in which a total of 21 districts were covered. Total sample size for the poll was 2000, which was divided among the two types of respondent groups- general population (1600) and working women (400). The entire sample size was equally divided across all the four zones. For the purpose of sampling, districts were selected by the method of systematic random sampling; whereas Primary Sampling Units (PSUs) were selected using Probability Proportional to Size (PPS). A total sample of 1613 respondents was covered from the general population of these 1613 respondents, 56 per cent were males and 44 per cent were females.

*Findings:* Of the 400 working women covered, 17 per cent reported to have ever faced any incident of sexual harassment at the workplace; majority of the respondents reported to have faced such incidents once, whereas 13 respondents faced two incidents and 15 respondents reported to have faced at least three similar incidents in their lives, in all 66 respondents reported to have faced cumulatively 121 incidents of sexual harassment at the workplace; of all the incidents which fall under the non-physical category, "ogling/ staring, in a sexually suggestive manner" was reportedly faced by maximum number of respondents, followed by "making derogatory comments of sexual nature" (15) and "telling sexual stories" (14); among the more proximal incidents which were faced, "gesture of sexual nature" was reportedly faced by 14 respondents whereas, "brushing up against a person, leaning over, invading personal space" was faced by 12 respondents; of all the 121 incidents reported, no initial reaction was shown in 56 cases, data showed that less than 10 per cent of the victims (5) discussed the incident with anyone; in 65 cases, some kind of initial



reaction was shown by the victim immediately after the incident and in most of the cases the victim directly confronted the perpetrator; 25 per cent of such respondent who did choose to confront the perpetrator also discussed the incident with family members, friends or colleagues, whereas in the remaining cases no one was informed about the incident; all the victims were aware of sexual harassment (41 nos.) reported to have faced a cumulative of 90 incidents (some have reported to have experienced more than 1 incident). Of these 90 incidents, no formal action was taken in case of 72 incidents, whereas the victims reported resorting to at least one formal action in the remaining 18 incidents; a total of 31 incidents of sexual harassment were reported by 25 respondents (some have reported to have experienced more than 1 incident) not aware of the issue. Of these 31 incidents, no formal action was taken in 24 cases; awareness of sexual harassment at the workplace is relatively higher among working women (93 per cent) as compared to general population; 14 per cent of the respondents were aware of the proposed bill, awareness was reported to be the highest in Metro towns (24%), followed by tier I/II towns (15%), no major variation was observed in the awareness levels of men (15%) and women (14%); no respondent possessed correct knowledge of the bill whereas only 4 per cent possessed basic knowledge of the bill, rest of the respondents (96%) possessed incorrect/ no knowledge about the bill; in case of general population, the top three industries unsafe for women were labourers (29%), domestic help (23%) and small scale manufacturing (16%), primary reasons for perceiving labourers at a higher risk of sexual harassment were given as “women employees were poor and needy” (75%) and “odd working hours” (38%); in 20 per cent of the cases respondents reported “isolation at workplace” as one of the major reasons for perceiving domestic help at greater risk of sexual harassment. Similarly among working women, top three as reported by the respondents were labourers in construction companies (24%), domestic help (21%) and small scale manufacturing (20%); working women also acknowledged service industry as unsafe for women (19%); among general population, more than 91 per cent reported the belief that there was in fact need for a separate law on this issue, however among working women, the proportion of respondents who were found to be in favour of a separate law (74%) was considerably lower than the general population.

*Recommendations:* The need of the hour is for a strong and effective law on the issue which facilitates speedy and hassle free trial and at the same time ensure protection of complainant and the witness, setting up of complaints committee for women working in the unorganised sector and ensuring free, fair and hassle free trial for such women were urgently required, there is also a need for greater awareness among the general population and more importantly among working women, for a possible recourse in case of victimization.

**Key Words :** 1.WOMEN WELFARE 2.SEXUAL HARASSMENT 3.SEXUAL HARASSMENT AT WORK PLACE 4.WORKING WOMEN 5.AWARENESS 6.QUESTIONNAIRE 7.WOMEN SAFETY 8.OPINION POLL.

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