

**EVALUATION OF THE STATUS OF CHILD & WOMEN
DEVELOPMENT IN INDIA: WITH SPECIAL REFERENCE TO
JHARKHAND STATE**

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ABSTRACT

The indices of child and women development play a significant role in assessing the economic success of a country. The state of a country may be accurately assessed by examining the condition of its women and children. The nation or state government that has prioritized Child and Women Development has achieved a greater level of development compared to others. This research seeks to examine the condition of Child and Women Development in two underperforming states in India. It tries to provide a comparative framework for assessing the status of Child and Women Development based on certain indicators. The effective execution of central and state government programs and schemes at the grassroots level, as well as the promotion of awareness among beneficiaries at both the national and state levels, particularly in underperforming states such as Bihar and Jharkhand, necessitate robust commitments from state governments.

Keywords: Child & Women Development

INTRODUCTION

The active participation of women plays a crucial part in the socioeconomic advancement of any given country. Women have a crucial role in our societies. The well-being of families, communities, and countries heavily relies on the presence of healthy women. The comprehensive advancement of women, particularly the enhanced health condition of women, results in societal transformation, which serves as the foundation for attaining the objectives of sustainable development.¹Based on the Census 2011 statistics, the combined population of women and children accounts for around 67.7% of the country's population. The Ministry of Women & Child Development, Government of India, has a comprehensive vision. The primary goals of the Indian government and state governments are to enhance the socio-economic empowerment of

women through significant policies and programs, integrate gender considerations into economic growth strategies, raise awareness about their rights and legislative backing, and ensure the proper development, care, and protection of children through various policies and programs. Due to the significant significance of women and child development, the Indian government has established a distinct ministry known as the Ministry of Women & Child Development, effective from January 30th, 2006. Prior to this, the ministry operated as a department inside the Ministry of Human Resources Development since 1985.²

An analysis of the demographic and household characteristics of Bihar and Jharkhand, compared to the national average. The state of Jharkhand has a higher percentage of females who have attended school, at 64.5%, compared to Bihar. However, it still falls below the national average of 71.8%, according to the statistics from NFSH 5. The sex ratio in both states has shown improvement from 2015-16 to 2019-20. In Bihar, the ratio of girls to males is 1090, which is higher than the norm for Jharkhand and the national average. The literacy rate among women aged 15 to 49 is much lower in Jharkhand and Bihar, with rates of 61.7% and 55.0% respectively, compared to the national average of 71.5%.³

To promote the child and Women development in India the central government of India is continuously undertaking many new programmes and also focusing on the old programmes. At the national level, the Indian government is implementing many initiatives aimed at promoting the development of women and children. These initiatives are categorized into four groups, namely Mission POSHAN 2.0, Mission SHAKTI, Mission Vatsalya, and Other Schemes. Under Mission POSHAN 2.0, Anganwadi Services, Schemes for Adolescent Girls, Poshan Abhiyan are included; under Mission Shakti, Beti Bacho Beti Padho, One Stop Centre, Women Helpline, UJJAWALA, SWADHAR Greh, Working Women Hostel, National Creche Scheme, Pradhan Mantri Matru Vandana Yojana, NIRBHAYA, NARI SHAKTI PURASKAR, Mahila Police Volunteers, Mhila Shakti Kendra are included and under Mission Vatslyya- Child Protection Scheme is included. Under the other classification of the schemes-Internship Scheme, Rashtriya Bal Kosh, CENEUS, Gender Budgeting, Kishori Shakti Yojana, General Grant-in-aid (GIA) Scheme for Assistance to Voluntary Organisations in the field of Child and Women Development, General Grant-in-Aid Scheme for innovative projects Family Counseling Centre Scheme General Grant-in-Aid Scheme in the field of Child and Women Development are included.⁴

REVIEW OF LITERATURE

Morla (2021) examined sector-level analysis and assessment of Child and Women Development initiatives in India and suggested that ministries protecting children and women should coordinate. He advised rationalizing initiatives to strategically harness the Child and Women

Development (WCD) sector's development potential based on the sectoral review.⁵ Nayak & Saxena (2006) discovered that states' inefficient use of government funds denies the ICDS system to many children, mothers, and teenage females. They further claimed that Bihar and Jharkhand state administrations are uninterested in plan execution.⁶

UNICEF (2021) Political instability, a volatile socio-political context, and structural concerns make social, human, and economic growth in Jharkhand difficult. Nearly every second kid in Jharkhand is stunted, and three out of ten are wasted. Next to Bihar, the State has the most stunted children in India, two million under five.⁷ According to the Centre for Budget and Governance Accountability (CBGA) (2021), Jharkhand has improved in all nutrition indicators from 2006 to 2016, and then in 2018, except for wasting, where the state remains below the national average in all indicators except exclusive breastfeeding. According to NFHS-4 (2015-16), Jharkhand has the third-highest stunting rate in India and the highest wasting and underweight rates. Anaemia is common in youngsters and reproductive-age women, and decrease is slow.⁸ Banerjee, C. (2017), Nutrition in Jharkhand - A new beginning; UNICEF India (2015), Jharkhand Nutrition Mission; Agnihotri Satish & Aparajita Patra (2019), An analysis of district-level malnutrition data for Jharkhand; and Sengupta K. 2016, Determinants of Health Status in India, have also examined child and women development nationally and in Bihar and Jharkhand.⁹

In 2011, Singh Umendra used 20 factors to assess health and well-being in Jharkhand and nationally. Women's indicators show worse performance than average. In Jharkhand, 63.2% of girls marry before 18. The national average for TFR and teenage pregnancy is exceeded. NFSH-3 data shows that the state's U5MR and IMR are high. 53.6% of children under 5 are underweight, and stunted development, weight loss, and underweight are common. BMI differs between men and women in Jharkhand. A BMI below normal is reported by 45% of Jharkhand women. 69.5% of 15-49-year-old women have anemia. The state's institutional birth rate is low, with 18.3% of women getting complete prenatal care throughout the study. Child immunization and nursing are state and national concerns.¹⁰

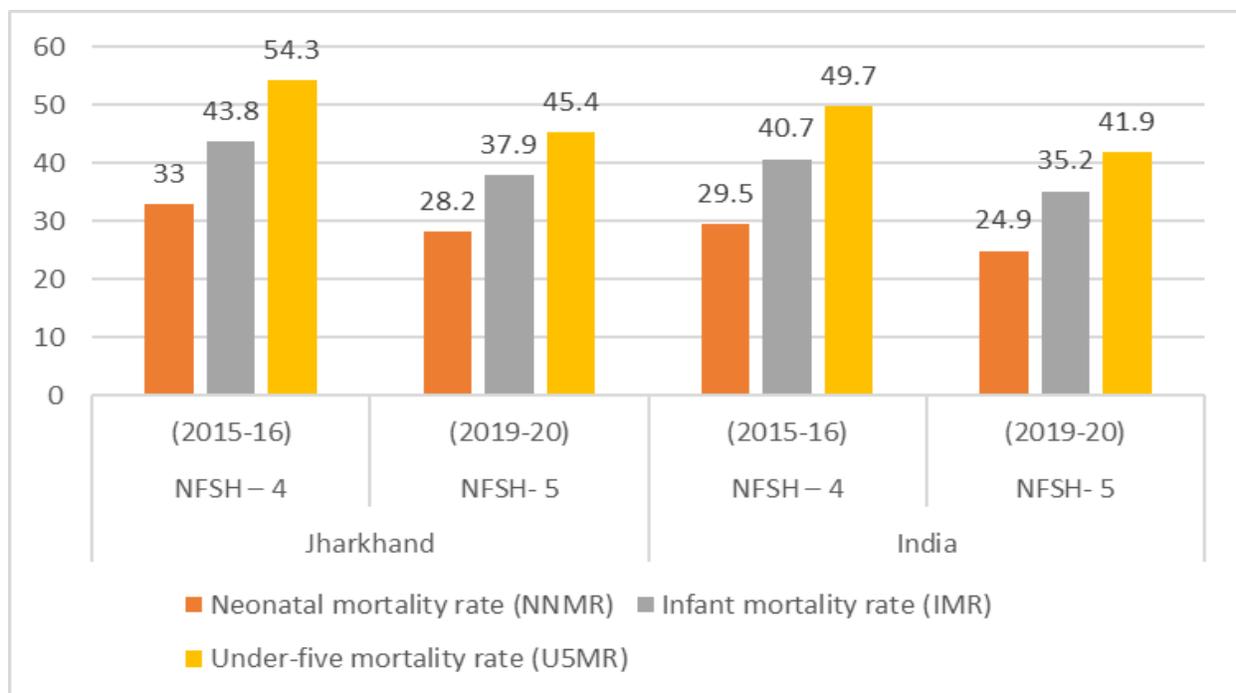
METHOD

This research relies on secondary data sources. The data utilized in this study were obtained from the National Family Health Survey 4 & 5 report. The indicators chosen for analysis include Infant and Child Mortality Rates, Nutritional Status of Children, Marriage and Fertility, Nutritional Status of Women, and Anaemia among Children and Women. The data was analyzed using basic statistical methods.

STATUS OF CHILD MORTALITY

Global development agenda was established in 2015 with the aim of attaining the 17 Sustainable Development Goals (SDGs) by the year 2030. The objective of the proposed Sustainable Development Goal (SDG) target for child mortality is to eliminate avoidable deaths among newborns and children under the age of 5 by the year 2030. It is expected that all nations will strive to decrease neonatal mortality to a minimum of 12 deaths per 1,000 live births and under-5 mortality to a minimum of 25 deaths per 1,000 live births.¹¹

Figure: 1 Infant and Child Mortality Rates (per 1,000 live births)



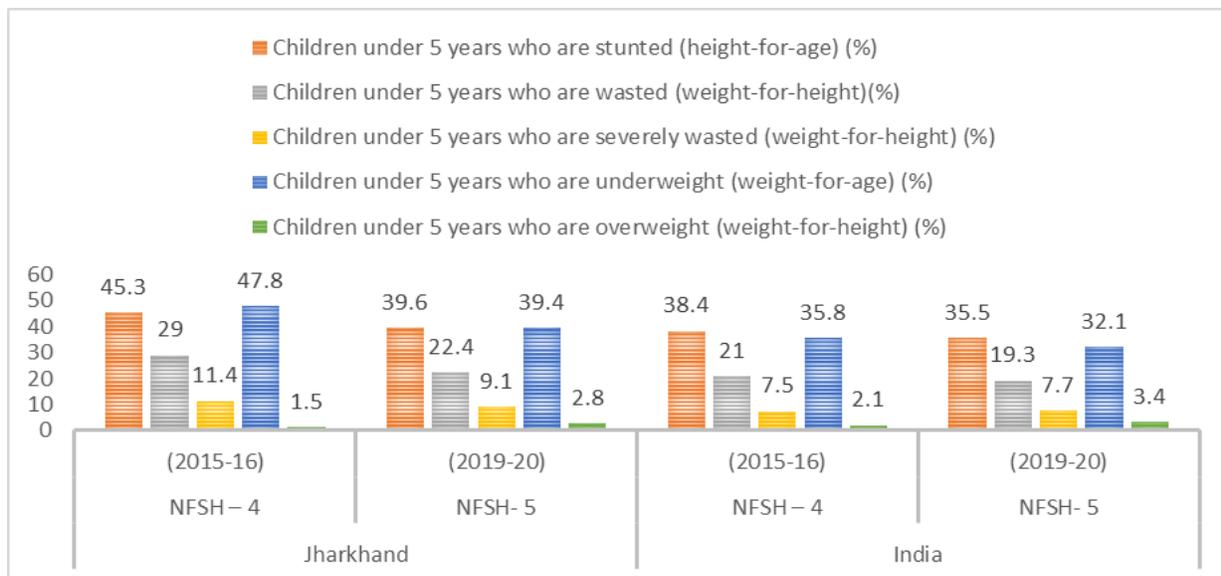
Source: NFSH 4 & 5

Figure -1 clearly demonstrates the improvement of demographic indicators in India, namely the NNMR, IMR, and U5MR. Notably, the Infant Mortality Rate (IMR) per 1000 live birth has decreased from 40.7 to 35.2 between 2015-16 and 2019-2021. It is projected to further decrease to 24 by 2031-35. In a like vein, there has been a decrease in the Under-5 mortality rate (U5MR) per 1000 live births, down from 49.7 to 41.9. The data also indicates that there have been advancements in all three chosen indices of child mortality in Jharkhand when compared to the national average. However, in terms of Sustainable Development Goals (SDGs), attaining the objectives pertaining to child mortality by 2030 is expected to pose significant challenges.

STATUS OF NUTRITIO AMONG CHILDREN

According to NFSH statistics, stunting, wasting, underweight, and overweight are indications of child malnutrition. The Jharkhand Economic Survey (2020-21) found that 10.9 % of 0-5-year-olds are stunted, wasted, and underweight, 22.4 % are, and 11.1% are. These statistics are above average nationally. Jharkhand (10.9%) has the highest rate of multiple malnutrition (under five stunted, wasted, and underweight children), followed by Madhya Pradesh (8.5%) and Bihar (8.1%).¹²

Figure: 2 Nutritional Status of Children



Source: NFSH 4 & 5

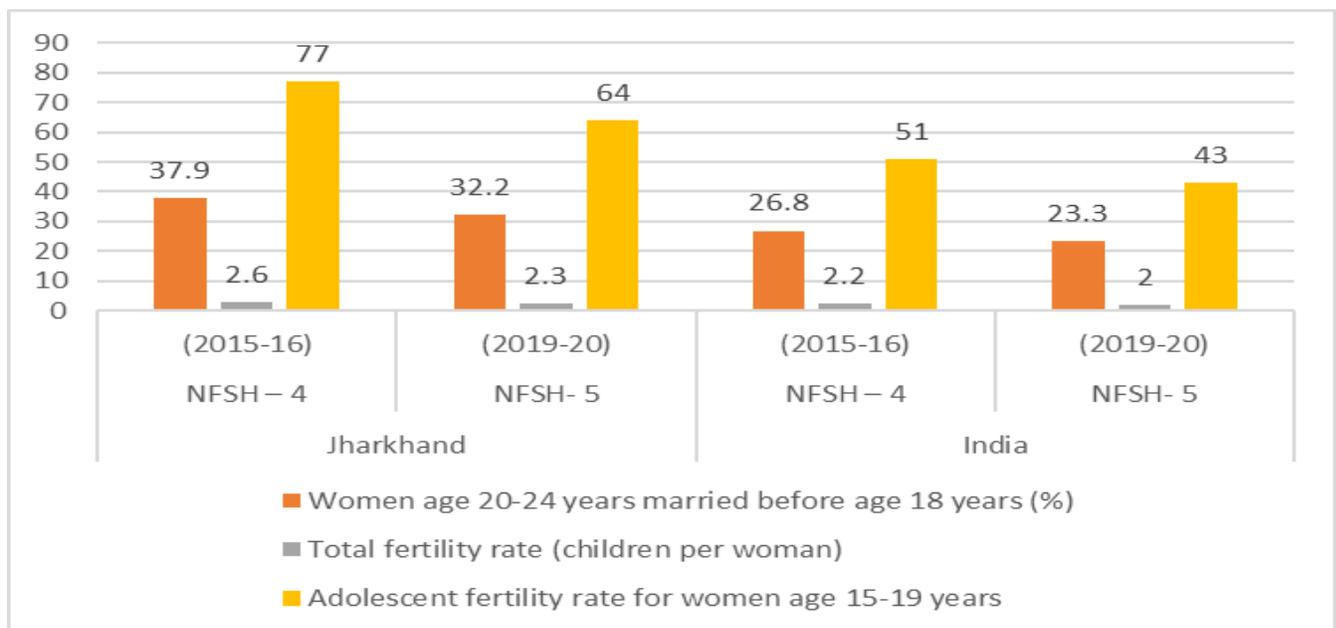
The nutritional condition of children under five groups is shown in Figure 2. According to statistics from the Ministry of Health and Family Welfare, 39.6% of children under the age of 5 in the state of Jharkhand were recorded as stunted. In the year 2019-20, Jharkhand's standing is falling below the national average of 35.5%. The percentage of children who are wasted in the chosen states is 22.4% in Jharkhand, which is equivalent to the national average of 19.3%. The prevalence of severe wasting among children under the age of 5 in Jharkhand is greater, with reported rates of 11.4% and 9.1% for NFSH-4 and 5, respectively, compared to the national average of 7.0%. The prevalence of underweight children in the nation remains a significant concern, despite the many initiatives implemented by both the central and state governments. Specifically, 32.1% of children under the age of five continue to be underweight, with the state

of Jharkhand accounting for 39.4% of this population. Overweight children make up a small percentage of the population among children under the age of 5.

STATUS OF MARRIAGE AND FERTILITY

The primary indicators of women's development are marriage and reproduction, with high fertility serving as the primary catalyst for population expansion. Following the implementation of significant policies and programs by both the national and state governments, there has been a documented decrease in fertility rates. The socio-economic and labor force involvement have been enhanced by the date of weddings and the evolving reproductive behavior of both women and men. The following indicators are included under this section -

Figure: 3 Status of Marriages and Fertility



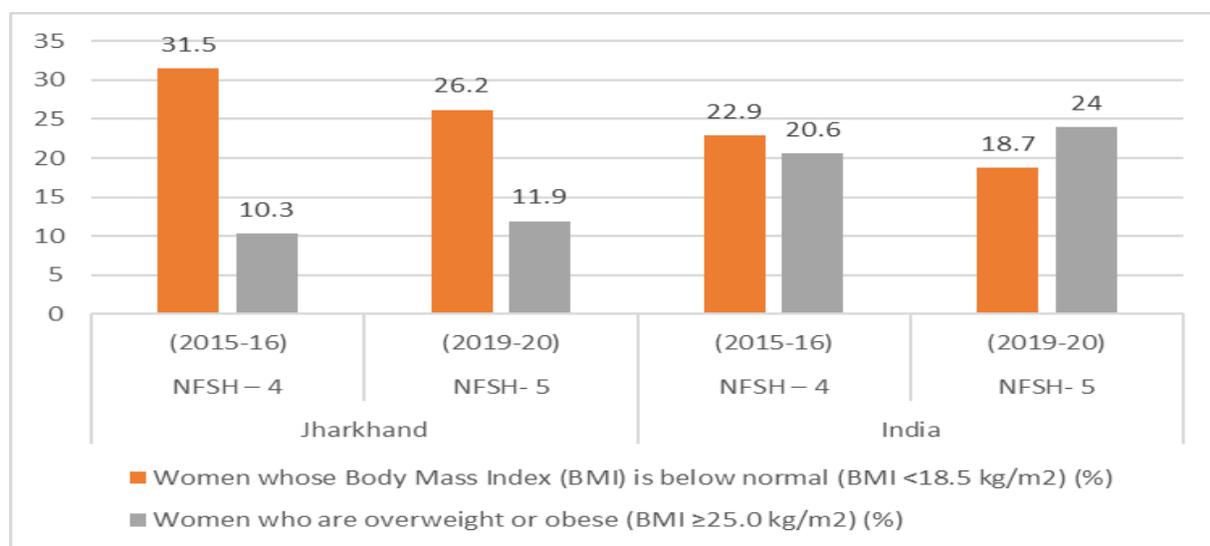
Source: NFSH 4 & 5

The data shown in figure 3 clearly indicates an improvement in the proportion of women who were married before reaching the age of 18. Specifically, the reported number of 37.9% in 2015-16 has decreased to 32.2% (NFSH-5) in the state of Jharkhand. The state of Jharkhand is now falling below the national average of 23.3%. Jharkhand's TFR performance in the year 2019-20 was 2.3, above the national average of 2.0%. The data illustrates that the teenage fertility rate in Jharkhand remains higher than the national average, indicating a gradual improvement in the state's fertility rate.

NUTRITIONAL STATUS OF WOMEN

In the context of malnutrition, both underweight and overweight conditions pose significant challenges to both physical and mental development. In this portion of the study, two indicators have been selected to assess the present status of Body Mass Index (BMI) in the respective states and the national average. These indicators include Women with a BMI below normal (BMI <18.5 kg/m²) and Women who are overweight or obese (BMI ≥25.0 kg/m²).

Figure: 4 Nutritional Status of Women (BMI)



Source: NFSH-4 & 5

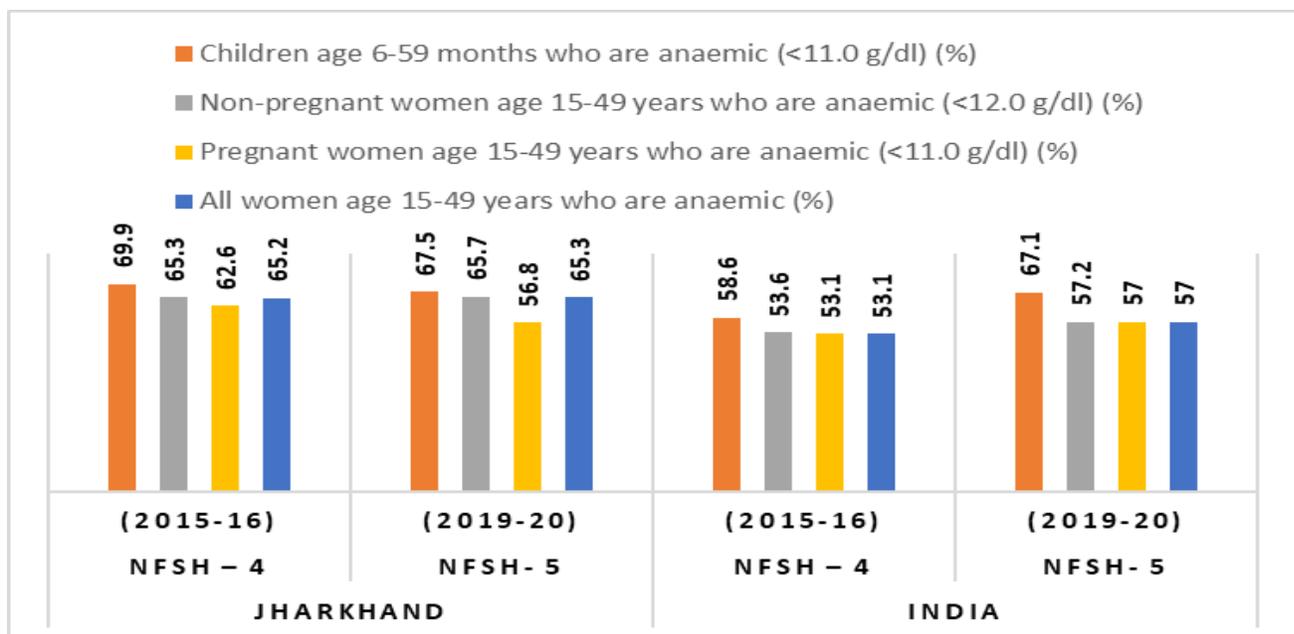
The data shown in Figure 4 demonstrates that favorable outcomes have been attained at all levels in relation to weights below the normal range. The states of Jharkhand and the national average have recorded a decrease of 16.80% and 18.34% respectively, according to the NFSH-4 and NFSH-5 statistics. An issue of worry for the nation is the noticeable increase in the trend line of overweight women at all levels in Jharkhand, as well as the overall average in India, as shown in Figure 4.

STATUS OF THE PREVALENCE OF ANAEMIA AMONG CHILDREN AND WOMEN

The NFHS-5 indicates that the occurrence of anemia in children and women remains prevalent in the majority of states and Union territories. The chart below illustrates the current prevalence of anemia in Jharkhand, compared to the national average. The incidence of anemia remains elevated, with an average of 60% of women and children being affected by this condition. In Jharkhand, 67.5% of children are classified as being at high risk, while 69.4% of children

between the ages of 6 and 59 months are in severe circumstances. When compared to the national average, 67.1% of children in the same age range are anemic. The prevalence of anemia among pregnant and non-pregnant women aged 15-49 years in Jharkhand is 65.7%. Based on the findings of Figure-5, it is evident that the state of Jharkhand is experiencing an improvement in the condition of children aged 6-59 months, with a drop of 3.43%. Additionally, there has been a decrease of 9.26% among pregnant women aged 15-49 years. According to the NFSH-5 statistics, the prevalence of anemia among children at the national level is 67.1%, which represents a 14.5% increase compared to the NFSH-4 data.

Figure: 5 Anaemia among Children and Women



Source: NFSH-4 & 5

CONCLUSION

In accordance to the examination and evaluation of the data of NFSH-4 & 5, it has been concluded that the implementation of various policies and programs has led to an improvement in the condition of women and children in some specific indicators. Jharkhand's performance has been enhanced. The state is now falling behind in terms of the national average and the ranking of the top performing states according to the SDG India – Index and Dashboard 2020-21. There exists a need for enhanced execution of governmental programs and schemes, as well as the cultivation of awareness among beneficiaries, particularly at the national level, with a particular emphasis on the state of Jharkhand.

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