Committee on the Rights of the Child (CRC) 66th Session

Submitted by : Zo Indigenous Forum

State Commissions for Protection of Child Rights (SCPCR)

Only eight States (8) out of twenty nine (29) – Goa, Sikkim, Delhi, Maharashtra, Karnataka, Assam, Madhya Pradesh and Rajasthan – have set up State Commissions for Protection of Child Rights (SCPCR) till date; the other States are in the process of setting them up.

Racial Discrimination

In the India country submission CRC/C/IND/3-4 3B.1(16) They says that "India does not face the problem of racism, racial discrimination, xenophobia and related intolerance" but the Schedule Tribe and Schedule Caste not only Children but also the adult were the one who face severe racial discrimination.

Status of Infant Mortality in States of India

India is among the countries where child mortality rate is alarmingly high. The problem has caught attention of policy makers and researchers for several decades. The data collected and published by the Office of the Registrar General and Census Commissioner, India, show that although mortality rate among infant and under 5 children is declining over the years, there are some states where mortality rates are very high and like Mizoram have been increasing year by year from the last decade. This shows that despite progress in health sector in the recent decades in India, precious young lives continue to be lost due to early childhood diseases, inadequate newborn care and childbirth-related causes. The mortality status of children in India reflects the threats in child health.

Infant mortality rate: Status of achieving Millennium Development Goals in India

The Millennium Development Goals has goal 4: Reduce Child Mortality targeting to reduce the under five mortality rate by two thirds between 1990 and 2015. Infant Mortality rate is one of the indicators to measure the progress of achievement of this target. IMR for the country as a whole declined by 33 points in the last two decades at an annual average decline of 1.65 points, it declined by six points between 2008 and 2010 with IMR at national level being 47 in 2010.

In 2010, the States of Goa (10), Kerala (13), Manipur (14), Nagaland (23) have achieved the national MDG target for IMR. Only the State of Manipur is likely to achieve the State level MDG target by 2015. The States which are likely to miss their MDG target by huge margin are Meghalaya (short by 40 points), Assam (short by 32 points), Rajasthan (short by 26 points), Haryana (short by 24 points), Bihar (short by 23 points), Uttar Pradesh (short by 24 points), Andra Pradesh (short by 22 points), Madhya Pradesh (short by 20 points) and Gujarat (short by 20 points).

Immunisation status of the children

The Evaluation Survey 2009 (UNICEF & Government of India), reveals the immunization coverage rates for each type of vaccination, according to either immunization card or mother's

recall. The analysis of vaccine specific data indicates higher coverage of each type of vaccine in urban areas than in rural areas. According to the primary immunization schedule, the child should be fully vaccinated by the time he/ she is 12 months old. Full immunization includes one dose of BCG, three injections of DPT, three dozes of polio and one injection of measles.

Mother's education has a significant role in ensuring full immunization coverage to their children. The full immunization coverage of children age 12-23 months of mother's education with 12 or more years is 76.6% whereas for mothers who had no education only 45.3% of children got full immunization.

Prevalence of HIV/ AIDs in children

India's response to the HIV epidemic and the broad social mobilization of stakeholders has achieved significant results in controlling the HIV epidemic. The achievements warrant the need for further commitment and coordinated joint action that is guided by the best available scientific evidence and technical knowledge. Evident from the 2008/09 HIV estimates (latest Sentinel surveillance rounds), in 2009, the number of HIV infections has decreased from 24.42 lakhs in 2008 to 23.95 lakhs in 2009. However, the percent distribution of HIV infections for the age group 0- 15 years has increased from 4.20% in 2008 to 4.36% in 2009, indicating increased number of HIV infected children in 2009, which is a matter of concern.

Nutritional Status

India is one among the many countries where child malnutrition is severe and also malnutrition is a major underlying cause of child mortality in India. The problem has caught the attention of policy makers and researchers for several decades. Various studies and surveys have been conducted to find out the root causes of child malnutrition. All these studies including the three National Family Health Surveys (NFHS) reveal that malnutrition is not the result of a single cause; the problem is multifaceted, the causes acting singly or in combination with other complex factors like poverty, purchasing power, health care, ignorance on nutrition and health education, female illiteracy, social convention etc.

Birth weight is an important indicator which reveals the health condition of a child at birth. There is a close relationship between maternal and child health. Weak, undernourished anaemic women give birth to low birth —weight babies. The prevalence of low birth weight babies (less than 2.5 kg at birth) is 22.5% as estimated by NFHS 3, but In NFHS 3 birth weight was reported only in 34.1% of cases of live births (60% of urban and 25% of rural). Since in 75% cases in rural areas, birth weights was not recorded, and health conditions are poorer in rural areas, the actual percentage of low birth babies could be more than the reported figure.

Malnutrition

The NFHS 3 result also indicates that malnutrition is more prevalent among children is higher. The rural India is witnessing more malnutrition among children <5 years as higher percentage of stunted, wasted and underweight children were reported from rural areas. <u>The problem of underweight children was higher among Schedule tribes (54.5%)</u>, Schedule Castes (47.9%) and

Other backward classes (43.2%), while the category of 'others' and 'Caste not known' reported 33.7% and 35.1% underweight children respectively.

Underweight children below 5 years

The 2011 census estimates the population of children below 6 years at 158.8 million. <u>Nearly 40% of these children are undernourished that is more than 63 million children are suffering from malnutrition.</u> Nutritional problems are substantial in every State in India. The States with more than 50 percent children under five years of age underweight are Madhya Pradesh (60%), Jharkhand (56.5%) and Bihar (55.9%). Other states where more than 40 percent and upto 50% of children are underweight are Meghalaya, Chhattisgarh, Gujarat, Uttar Pradesh, and Orissa. Stunting was more prevalent in Uttar Pradesh (56.8%), Bihar (55.6%), and Meghalaya (55.1%). Wasting is most common in Madhya Pradesh (35%), Jharkhand (32%), and Meghalaya (31%). These results reveal that, the severity of child malnutrition varies across States.

Prevalence of anaemia

Anaemia, the condition of low level of haemoglobin in blood is a serious concern as it can result in impaired cognitive performance, behavioural and motor development, coordination, language development, and scholastic achievement, as well as increased morbidity from infectious diseases. Among male and female children (6-59 months) the percentage of children with any anaemia was reported as 69% and 69.9% respectively, severe anaemia was reported for 3.2 % male children and 2.7% female children. <u>Anaemia was more prevalent in Rural areas (71.5%)</u>, than Urban areas (63%). The data further shows significant gap between the prevalence of anaemia among children of mothers with no education (74.5%) and mother's with 12 or more years of education (55.4%) underlying the impact of mother's education in children's nutritional status.

Child nutrition: Status of achieving Millennium Development Goals

The Millennium Development Goal 1 is 'Eradicate extreme poverty and Hunger' Under Goal 1, target 2 states, 'halve, between 1990 and 2015, the proportion of people who suffer from hunger' with the indicator 'Prevalence of underweight children under three years of age'. India is committed to halving the prevalence of underweight children by 2015. All-India trend of the proportion of underweight (severe and moderate) children below 3 years of age shows India is going slow in eliminating the effect of malnutrition. From estimated 52% in 1990, the proportion of underweight children below 3 years is required to be reduced to 26% by 2015. The proportion of underweight children has declined by only 3 percentage points during 1998-99 to 2005-06, i.e. from about 43% to about 40% and at this historical rate of decline, the measure is expected to come down to about 33% only by 2015.

Child Labour

Although India has the largest number of child labourers under the age 14 in the world, child labour problem is not unique to India; worldwide, in many countries children are forced to work with disastrous consequences. <u>Children, under age 14 are often forced to work for as many as 18 hours a day.</u> They are subject to malnutrition, impaired vision, deformities from sitting long

hours in cramped over crowded work places, they become easy preys to deadly diseases like serious respiratory diseases, T.B., and Cancer.

They are often forced to lead solitary lives away from their families, deprived of meaningful education and training opportunities that could prepare them for a better future. Child labour not only lead to a perpetual cycles of poverty for a family, it depresses the economy also. The immense benefits of abolition of child labour cannot be measured in economic terms alone, its enoromous long term beneficial impact on the Society as a whole far outweighs the nominal economic hardship that some families would suffer only for a short span of time.

The trend on the magnitude of child labour is not uniform across the country. On one hand, there is considerable increase in the absolute number of child labour between 1991 and 2001 in the states of Uttar Pradesh, Rajasthan, Jharkhand, Chattisgarh, Bihar, West Bengal, Haryana, Uttaranchal, Himachal Pradesh, Punjab, Nagaland, Assam, Meghalaya and Delhi. On the other hand, Maharashtra, Andhra Pradesh, Madhya Pradesh, Tamil Nadu, Karnataka, Orissa, Gujarat and Kerala have shown significant decline in the number of child labour. *Child Labour is recognized as a serious and enormously complex social problem in India*. The Census found an increase in the number of child labourers from 11.28 million in 1991 to 12.66 million in 2001. In addition, nearly 85 per cent of child labourers in India are hard-to-reach, invisible and excluded, as they work largely in the unorganised sector, both rural and urban, within the family or in household-based units. The Child Labour (Prohibition & Regulation) Act 1986 aims to prohibit the entry of children into hazardous occupations and to regulate the services of children in non-hazardous occupations but still a significant portion of children in the country are engaged in such activities.

Status of Crimes against Children in the Country

It is alarming that, in 2011, crimes against children reported a 24% increase from the previous year with a total of 33,098 cases of crimes against Children reported in the country during 2011 as compared to 26,694 cases during 2010. The State of Uttar Pradesh accounted for 16.6% of total crimes against children at national level in 2011, followed by Madhya Pradesh (13.2%), Delhi (12.8%), Maharashtra (10.2%), Bihar (6.7%) and Andra Pradesh (6.7%).