

(c) and (d) During 2011, total of 21 complaints have been received from Orissa (1), MP (1), Rajasthan (2), Uttarakhand (1), Haryana (1), Delhi (1) and UP (13) and Bihar (1). These contain allegations regarding irregularities in management of Supplementary Nutrition Programme. All these have been forwarded to the State Governments for suitable action at their end and report.

Supplementary nutrition is one of the six services under the Integrated Child Development Services [ICDS] Scheme. Under the Scheme, children below six years of age and pregnant and lactating mothers are required to be provided Supplementary Nutrition, in accordance with Guidelines issued by Government of India on 24.02.2009 and endorsed by the Hon'ble Supreme Court vide its Order dated 22.04.2009. The provision of Supplementary Nutrition prescribed for various categories of beneficiaries is as follows:

[i] Children in the age group of 6 months to 3 years: Food supplement of 500 calories of energy and 12-15 gms. of protein per child per day as Take Home Ration [THR] in the form of Micronutrient Fortified Food and/or energy-dense Food marked as 'ICDS Food Supplement'.

[ii] Children in the age group of 3-6 years: Food supplement of 500 calories of energy and 12-15 gms. of protein per child per day. Since a child of this age group is not capable of consuming a meal of 500 calories in one sitting, the guidelines prescribe provision of morning snack in the form of milk/banana/seasonal fruits/Micronutrient Fortified Food etc. and a Hot Cooked Meal.

[iii] Severely under weight children: Food supplement of 800 calories of energy and 20-25 gms. of protein child per day in the form of Micro-nutrient fortified food and/or energy dense food as Take Home Ration.

[iv] Pregnant Women and Lactating Mothers: Food supplement of 600 calories of energy and 18-20 gms. of protein per beneficiary per day in the form of micronutrient Fortified Food and/or energy dense food as Take Home Ration.

The financial norms of Supplementary Nutrition Programme [SNP] for children [6 months to 72 months], severely underweight children [6 months to 72 months] and pregnant women and lactating mothers are Rs. 4.00, Rs.6.00 and Rs.5.00 per beneficiary per day, respectively.

Female foeticide and human trafficking

605. SHRI MOINUL HASSAN: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) whether it is a fact that India is the fourth most dangerous country for women;
- (b) if so, the measures that Government is taking to remedy this;
- (c) whether female foeticide and human trafficking are the main reasons why India figures on the list; and
- (d) if so, the steps being taken by Government to curb these practices and their impact so far?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI KRISHNA TIRATH): (a) to (c) A global perceptions survey based on a sample of 213 gender experts across five continents, has been conducted by Trust Law, the legal news service of Thomson Reuters Foundation. India has been referred to as the fourth most dangerous country of the world for women, female foeticide and human trafficking are cited as the major reasons. The Government of India is not aware of the content and methodology adopted and can, therefore, not comment on the credibility of the conclusions it has drawn.

(d) Both female foeticide and trafficking reflect the status of women in society. Government is implementing short term and long term interventions, in the form of schemes and legislations to tackle these problems.

To curb female foeticide, Government has adopted a multi-pronged strategy which includes legislative measures, advocacy, awareness generation and programmes for socio-economic empowerment of women. Legislative measures comprise of the implementation of the Pre-Conception and Pre-Natal Diagnostic Technique (Prohibition of Sex Selection) Act, 1994 under which sex selective abortions are punishable. The Government in the Ministry of Health and Family Welfare is responsible for implementation of this Act and enforcement lies with the State governments.

To ensure stricter implementation of the PCPNDT Act, Ministry of Health and Family Welfare is taking a number of steps including: asking the Chief Secretaries in the States/UTs to take effective measures and regularly monitor implementation of the PNDT Act, regular appraisal of effective implementation of the Act through zonal and state specific reviews, empowering the National Inspection and Monitoring Committees to oversee follow-up action after inspections and take recourse under the PC & PNDT Act etc. State Inspection and Monitoring Committees would be

similarly empowered. In accordance with the provisions of the PC & PNDT Act etc, MCI would consider suspension/cancellation of registration of doctors found prima facie guilty of violations.

The issue of human trafficking is extremely complex as it involves intersection of factors such as migration, labour exploitation, sexuality and human rights. Its dimensions are often not fully understood, as a result.

Being a clandestine activity, it is difficult to estimate the number of girls/women involved. The primary push factor for these girls and women is poverty and economic deprivation. The social factors such as low status of women, illiteracy, patriarchal mindsets, and objectification of women and continuation of traditions/cultural practices are some of the other factors that exacerbate women's vulnerability to trafficking. This is further enhanced by the migration process. To break this cycle, would necessitate managing both demand and supply.

The Government in the Ministry of Women and Child is taking measures to combat trafficking for commercial sexual exploitation in the country. The Immoral Traffic (Prevention) Act, 1956 supplemented by the Indian Penal Code prohibits trafficking in human beings, including children, for purpose of commercial sexual exploitation and lays down penalties for trafficking. A Comprehensive Advisory on Preventing and combating human trafficking in India has been issued on 09.09.2009 by the Government of India to all States/Union Territories. Further, the Ministry has been implementing "Ujjawala" Scheme under which, financial assistance is provided for prevention of trafficking and for rescue, rehabilitation, re-integration and repatriation of victims of commercial sexual exploitation.

Further, socio economic empowerment of women through the poverty alleviation and developmental schemes of the Government such as STEP, Mahatma Gandhi NREGA, NRLM, loans through the Rashtriya Mahila Kosh and the Right to Education all help in decreasing the vulnerability of women to trafficking and at the same time, enable them to make decisions about the birth of children as well as retaining of the girl child.

However, along with effective implementation of existing policies and legislations and measures adopted for empowerment of women, there is need for change of traditional and patriarchal mindsets. This is the key element required for fostering a change in status of women. It is a gradual process in itself and requires continuous and sustained efforts by both Government and civil society organisations.