

A REPORT

**BASELINE SURVEY:
Child Rights of Banaskantha district**

YEAR : 2005-06

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SITUATION OF RIGHTS OF CHILDREN: FINDINGS OF SURVEY IN BANASKANTHA DISTRICT, GUJARAT STATE

CHAPTER 1 INTRODUCTION: RIGHTS OF THE CHILD

Situation of child rights in India

Children rights are articulated in 'Convention on the Rights of the Child' (CRC) at international level and as a signatory to this convention Indian Government has ratified the Convention on the Rights of the Child on the 11th of December 1992. (see appendix 1 for details). In India, commitment to cause of children is perceived through constitutional provisions, policies, programmes and legislation.

The Constitution of India in Article 39 of the Directive Principles of State Policy pledges that "the State shall, in particular, direct its policy towards securing ... that the health and strength of workers, men and women, and the tender age of children are not abused, and that citizens are not forced by economic necessity to enter avocations unsuited to their age or strength, that children are given opportunities and facilities to develop in a healthy manner, and in conditions of freedom and dignity, and that childhood and youth are protected against exploitation, and against moral and material abandonment." As a follow-up of this commitment and being a party to the UN declaration on the Rights of the Child 1959, India adopted the National Policy on Children in 1974. The policy reaffirmed the constitutional provisions and stated that "it shall be the policy of the State to provide adequate services to children, both before and after birth and through the period of growth to ensure their full physical, mental and social development. The State shall progressively increase the scope of such services so that within a reasonable time all children in the country enjoy optimum conditions for their balanced growth."

Indian Constitution provides a comprehensive understanding of child rights along with fairly comprehensive legal regime exists for their implementation through laws for betterment of children in the country, such as Child Labour (Prohibition and Regulation) Act, 1986; Child Marriage Prevention Act, Juvenile Justice (Care and Protection) Act, 2000, etc.; national plans for human resource development and Five Year Plans have provided the wherewithal to deal with child related issues. The thrust in defining child rights is that each child is allowed to do activities that make her/his life happy, healthy and safe along with responsibilities towards other children and adults, to make sure they get their rights.

That means our government now has to make sure that every child has all the rights explained in the Convention. Moreover, Indian Constitution is law of the land; yet, despite constitutional guarantees of opportunity and civil rights, millions of children face wide-spread deprivation and discrimination on the basis of caste, religion, ethnicity and religion. A large part of this stems

from being seen through the lens of adults who make decisions for them, and who prefer to address their welfare rather than their rights. Even the basic need for birth registration that will assure them a nationality and identity remains un-addressed, affecting children's rights to basic services. We hear children are dying of starvation, female sex ratio dips, little children, barely able to stand, are married off flouting all laws, many children are locked, abused, sodomised - the list is endless.

The problem begins with the very definition of 'child' within the Indian legal and policy framework. The CRC defines children as persons below the age of 18 years, however different laws stipulate different cut-off ages to define a child in India. In the absence of a clear definition of a child, it is left to various laws and interpretations. Even if we articulate child rights in the framework of human rights, such as accessibility to basic rights, we need to consider some rights exclusively of children, as human rights framework is inadequate in matters like violence on children in different forms, which are aggravated with external forces and processes like liberalization, privatisation and globalisation as well as environmental degradation and pollution lead to a further deterioration in quality of life of citizens.

We need to consider the following points

- ✧ It is important that Indian government recognizes rights of children rather than mainly well-being through welfare approach. She needs to promote and protect rights as a positive social value. Therefore, the perspective of child rights requires to be child-centred, child friendly, not
- ✧ Any understanding of human rights of children cannot be confined to some children – 'poor children', 'working children' and 'marginalised children'. Violations of children's rights are not limited to the poor and downtrodden. They happen in middle class and elite homes too.
- ✧ A child born out of wedlock or of a void or illegal marriage is considered 'illegitimate'. Children pay for the decisions taken by the parents and are denied inheritance rights. Even worse, a child born of rape is stigmatised and treated as 'illegitimate', both by society and law.

Accessibility to basic rights

This includes – health care, primary education, water, sanitation and environment inadequate living conditions, protection from violence, trafficking and social stigmatization.

- ✧ In India, children suffer from malnutrition or die of starvation and preventable diseases. According to UNAIDS, there are 170,000 children infected by HIV/AIDS in India. Children affected by the virus-whether children of victims or those who are infected themselves-- live on the fringes of society, ostracised by people they call their own, unloved and uncared for, even as our government continues to squabble over numbers of affected people. Even juvenile diabetes is reported to be taking on pandemic proportions.
- ✧ Our public health systems are inadequate and not efficient to take up such challenges, besides resolving existing health problems faced by children for survival. There is no law

addressing the issue of public health. It needs to be dealt under the Reproductive and Child Health Programme of the Ministry of Health and Family Welfare, with a focus on reproductive health and safe motherhood and child survival.

- ✧ India is a home to one of the largest illiterate citizenries in the world. Despite the promise of free and compulsory education, enrolment and dropout of children remains a key issue where beatings, abuse, physical and mental torture faced by the students in schools is one of the reasons for the high dropout rate.
- ✧ Thousands of children are homeless or living in inadequate living conditions. Thousands of others are displaced in the name of development and progress. Yet others are de-housed as a result of natural calamities - the floods, cyclones, earthquakes that have come to become almost a regular feature in our country. In all of these, while whole communities are affected, children are affected even more. An estimated 3.3 million children were affected by the super-cyclone that hit the coastal districts of Orissa on October 29, 1999. How many children were actually displaced, how many died in the earthquake that hit Gujarat on 26 January 2000? No one has exact numbers. This is true of all such situations of disaster or displacement. This is to ensure that there are no long-term psychological implications. In the absence of a holistic disaster mitigation policy, which is also designed to be child friendly, this will not be possible. The same is true for rehabilitation policies for development- related displacement.
- ✧ The Child Labour (Prohibition and Regulation Act) was enacted in 1986, to specifically address the situation of children in labour. However, this law distinguishes between hazardous and non-hazardous forms of labour, and identifies certain processes and occupations from which children are prohibited from working. It leaves out a large range of activities that children are engaged in and are exploited and abused. The large-scale exploitation and abuse of children employed in domestic work and hotels are cases in point.
- ✧ Child trafficking is one of the most heinous manifestations of violence against children and taking on alarming proportions - nationally and internationally. Although, very little reliable data or documentation is available, meetings and consultations across the country have revealed the gravity and the extent of this crime. It is high time we understood and realized that children are trafficked for a number of reasons and this cannot be treated synonymously with prostitution. The absence of this comprehensive understanding and a comprehensive law that addresses all forms of trafficking to back it makes this issue even more critical.
- ✧ Adoption of children continues to be determined by religion of the adoptive parents or the child when religion is known, as it is decided as per personal laws. Only Hindus, Jains, Buddhists and Sikhs can adopt children legally while Muslims, Parsis, and Jews personal laws do not allow adoption. Moreover, the law has serious flaws discriminating against married women; it allows only married men to adopt and only allows for adoption of children of opposite genders if a couple has one before. The Juvenile Justice (Care and Protection of Children) Act, 2000 also provides for adoption making no exception on the basis of religion. So more complications may arise. Greater checks and balances are required to ensure that

adoption is legal and proper, and that it is not being used as a means of trafficking of children.

- ☆ Armed conflicts across the country, based on religion, ethnicity, and caste have affected the lives of children everywhere - children continue to suffer from the conflict in Gujarat, Punjab, Kashmir and in many of the North Eastern States. The ongoing situation in has led to many child casualties. Children are both victims and perpetrators, brainwashed and incited into following adults in spreading violence. Even as they are seen as perpetrators of violence, they are victims of an adult worldview imposed on young minds.

Child participation: Many miles to go

Various individuals, groups and non-government organizations (NGOs) working with and for children feel that it is only with the ratifying of the Child Rights Convention that children's rights to participation began gaining formal recognition, although several had initiated processes to enlist participation of children and young adults long before the CRC. There is, however, no universal or accepted definition of child participation and each one has defined it according to their own understanding. There is still a fairly long journey before this 'inclusion' of children's participation is internalised and accepted widely.

Is the situation confronting the lives of our children bleak, or is there reason for hope? Can we promise them an India that truly shines? What do elections hold for these non-voters? Lest we forget, they are the adults of tomorrow, and they will hold the adults of today accountable someday.

CHAPTER 2 RESEARCH METHODOLOGY

Objectives of creating baseline data (BLD)

In the context of situation of rights of children, this study was initiated with the following objectives:

- a. To identify child related issues at regional level through baseline data (BLD);
- b. To plan future interventions based on BLD; and
- c. To continue working as CRY partners for child rights at regional level.

CRY in Gujarat works with various NGOs for intervention related to child rights, Behavioral Science Centre (BSC) is one of them. BSC works with 2 people's organizations (POs) in Banaskantha district, which is located in north Gujarat. The two POs are – (i) Adivasi Sarvangin Vikas Sangh (ASVS), and (ii) Banaskantha Dalit Sangathan (BDS). ASVS is active with adivasis (tribals) in one of the talukas, namely Danta and covers total 90 villages with 6 fellows (15 villages to be covered by a fellow - *parivartak*). BDS works in 5 taluka and 5 fellows in each taluka and thus covers 75 villages. In all 360 villages of 6 taluka are covered with by 26 fellows.

Maps – Gujarat and Banaskantha

The words highlighted in red signify villages covered in each taluka as shown in the map. The list of villages and taluka is presented here as reference.

Research methodology for BLD

In order to know existing situation of child rights and to articulate child rights based on existing situation, we decided to collect primary data from two units – village and households (HHs), in addition to existing secondary data.

We have adopted 'purposive sampling' for selection of the villages in 6 taluka of Banaskantha district while a census is carried out in the selected villages, that is, all the households in the selected villages are covered under the survey. The 'purposive sampling' is drawn based on available resources, time and requirements for the future planning. (see appendix 3 for details) The criteria for selection of the villages are as follow:

- a. To select villages with total population <1,500.
- b. Each village should have population of scheduled castes (SCs) and scheduled tribes (STs).
- c. In all 2 villages from each taluka – one village should be developed while the other is under-developed.

The rationale behind this sampling is - if the average family size is of 5-6 members, each village would not have more than 300 families (population < 1,500). Thus the team of 5 community organizers (called *parivartak*) in each taluka could cover 10 villages in all and about 3,000 households in each taluka. Thus we would have fairly representative data to represent taluka and the baseline data (BLD) could be generated in 6 months with available human resources.

In the first stage, intensive discussion took place between CRY programme officers, BSC staff, BDS officials and ASVS representatives on child rights to evolve a framework for common understanding on child rights. Later this framework was modified and adopted for the BLD. This framework is also an exhaustive list of suggestive indicators for child rights (see appendix 2 for further details).

Framework and suggestive list of indicators for child rights developed by

This framework is employed for the following objectives:

- Preparing tools for collecting baseline data from selected villages and households for articulating child rights, and
- Articulating constituents of child development and rights, by and large rural children.

The following are the major components of the child rights:

The child rights aim at better quality of life of children in India, especially in Gujarat state. Better quality of life includes –

1. Good health

- a. Birth – not premature
- b. Death – infants (0-3 years), children (4-10 years), youngsters (11-14 years)
- c. Immunization
- d. Nutrition level / Malnourishment
- e. Growth chart
- f. Safe drinking water – availability and accessibility
- g. Food intake, its quality
- h. Midday meal – availability and accessibility
- i. Availability and accessibility to anganwadi and its activities regarding child development and pre-primary education
- j. Facilities for health care

2. Good education

- a. Availability and accessibility of facilities for primary education, especially to primary school in the village / close vicinity
- b. Enrolment and drop out in primary school
- c. Language & logic development
- d. Exposure through text books and interaction with teachers
- e. Participation in co-curricular / extra-curricular activities

- f. No discrimination based on gender, caste, class
 - g. Active participation of parents, teachers and elected village leaders
 - h. Skills for economic activities
 - i. Literacy that encourages other skills and perspective building through exposure
3. **Gender discrimination** and its manifestations at various levels, various spheres
 4. **Good exposure through socialization** or participation of children in social, religious and cultural, community activities
 - a. Participating in fairs
 - b. Participating in festivals
 - c. Participating in extra-curricular activities like sports, various competitions (elocution, essay writing), learning languages, music, dance, etc.
 - d. Accessibility to all public spaces without discrimination based on gender, caste, class (e.g. temple entry, community water sources, tea stalls or food joints, services like hair cutting, etc.)
 5. **Acquiring qualities that make them a responsible citizen of India**
 - a. Awareness of laws and legal provisions
 - b. Awareness of ecology and environment and issues related
 - c. Awareness about political structure and its functioning – its availability and accessibility to their parent / families
 6. **Availability and accessibility to**
 - a. Basic amenities like Drinking water, Electricity, Educational facilities, Health care facilities, Transportation, Telecommunication, Roads
 - b. Civic amenities like ration card and fair price food grains and household goods, voting rights
 - c. Common properties or natural resources shared by the community / village
 - d. Private properties like shelter (house), land, vehicle, livestock, workplace
 - e. Social security
 - f. Various institutions
 - g. Financial assistance
 7. **Political participation of their parents to influence democratic institutions –**
 - a. Able to vote at various levels – village, taluka, district, state and national level
 - b. Able to contest election at any level
 - c. Able to be a member of any political party
 - d. Able to carry out any political activity – through political party or as an individual
 - e. Able to enjoy civic rights like following religion of choice, carrying out economic activities at any place in India, etc.
 8. **Awareness about sexual and reproductive activities – rights and duties**
 - a. Legal provisions regarding sexual or physical abuse, rape, molestation
 - b. Sexually transmitted diseases like AIDS, herpes, syphilis, etc.
 9. **Stay away from addictions** like

- a. Tobacco,
 - b. Drugs,
 - c. Alcohol
- 10. Skills to be acquired for vocation or for economic activities, other than formal or informal education**
- a. To prevent unskilled labour
 - b. To get protection from bonded labour, seasonal migration, economic exploitation
 - c. To be into service sector or tertiary sector or informal sector
- 11. Awareness and sensitivity towards special groups like**
- a. Orphans
 - b. Delinquents
 - c. Children with disability – mentally challenged, physically challenged
 - d. Street children
 - e. Children living with step parent, etc.
- 12. Awareness about laws and legal provisions and its implementation for protection**
- a. Laws on labour – preventing child labour
 - b. Laws on education – free and compulsory primary education
 - c. Laws on Juvenile justice
 - d. Laws on child marriage
 - e. Other relevant laws like trafficking, child selling, engagement as commercial sexual worker, gender discrimination

Based on this framework, we developed tools, namely scheduled questionnaire for village survey and household survey. The same framework was adopted for training *parivartak* (fellows) and pre-testing of the schedules.

The schedules were pre-tested after 2 days training of the fellows at village and household levels in August 2005. The primary data has been collected during August and December 2005. Simultaneously data entry was started and got over by December 2005. The data cleaning took more than a month, as the collected data required cross-checking and classification for missing data and ‘not applicable data’. Data analysis was undertaken in January 2006. The report writing was started and completed in February 2006, soon after data cleaning and analysis.

The survey was carried out at two levels – village and households. The number of household in a village and taluka mentioned here:

Table 1: Details about number of households, persons in each taluka

No.	Name of taluka	Social composition	No. of villages	No. of households
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1	Danta	Tribal dominated	10	1,052
2	Dhanera	OBCs and Dalits	08	991
3	Palanpur	OBCs, dalits and Muslims	06	1,371
4	Tharad	OBCs, dalits and Muslims	08	1362
5	Vadgam	OBCs, Dalits and Muslims	08	1,074
6	Vav	OBCs and Dalits	08	1594
	Total		48	7,444

The village level survey has clarified major issues and therefore many of the issues are described based on village level data while some issues like economic status, sources of livelihood, level of awareness about child rights among parents, etc. are presented based on household data. These statistics therefore should be considered as guidelines.

Structure of the report

The report consists of mainly four chapters; of them the first chapter is introductory and overviews the existing literature to depict present scenario of child rights in India. The second chapter is on research methodology and related details. The third chapter covers findings of baseline data (BLD) and divided into mainly two parts – the first section presents and macro level view of Gujarat state and Banaskantha district with secondary data and identifies various issues related to child rights at state and district level. The second section shared findings of the BLD in a given framework with triangulation of primary data (village level survey and household level survey) and secondary data. In the end, the third chapter articulates the concerns regarding child rights and areas of intervention in future. The fourth chapter concludes the report with major trends observed on scenario of children and child rights in India, link child rights with human rights and identifies important issues related to child rights and potential future actions based on primary data.

CHAPTER 3

SITUATION OF CHILD RIGHTS: FINDINGS OF BASELINE DATA

Situation of children in Banaskantha district in Gujarat state

The situation of children in Banaskantha district is presented through situation analysis of Gujarat state and Banaskantha district with Census 2001 data. The regional level issues are then identified with the framework created for BLD and thus the findings of BLD are presented as per the framework which is all-inclusive indicators for child rights and that clarifies linkages with human rights.

SECTION I: MACRO LEVEL ISSUES

Situation analysis - Gujarat state

Gujarat state was formed in 1960 and since then it competes with Maharashtra state for industrial development and higher GDP in the country. It is known for its mercantile ethos and of late with gory communal violence in the year 2002. It consists of 25 districts and 225 taluka with reformation of districts and taluka in the year 1997. For simple description, it is mainly divided in 4 regions – (i) Saurashtra (western Gujarat) with 7 districts, (ii) Kachchh in north – western Gujarat – also a provincial state like Saurashtra prior to independence, (iii) central Gujarat as plains with 5 districts, well known for its cash crops like tobacco, cumin and medicinal crops, and (iv) tribal belt in north-eastern Gujarat consisting 11 districts of which Banaskantha in north. With industrial development, south Gujarat to central Gujarat is known as ‘golden corridor’ and coastline of Saurashtra is called ‘silver corridor’.

Demographic data – Gujarat state (Census 2001)

- **Population:** Total population is 5 crores, of which 52% are males and 48% are females. The proportion of children aged between 0-6 years is 15% to the total population.
 - **Social composition:** In all scheduled castes (SC) population is 7% and scheduled tribes (ST) population is about 15% to the total population. The other backward classes (OBC) consist almost 52% including a few Muslim communities, the rest belong to ‘general category’ also known as upper castes.
 - **Religious composition:** Muslims are the largest religious minority with about 13% to the total population, Christians are about 2% and Sikh and Parsi are about 1% of the total population.

No	Meters	Gujarat		
		Male	Female	Total
1.	Total Population	2,63,85,577 (52%)	2,42,85,440 (48%)	5,06,71,017
2.	Population (0-6years)	40,00,148	35,32,256	75,32,404 (15%)
3.	SC Population (%)	18,66,283 (7 %)	17,26,432 (7%)	75,32,404 (7%)
4.	ST Population (%)	37,90,117 (14 %)	36,91,043 (15.2 %)	74,81,160 (15 %)

5.	Number of Literates (%)	1,78,33,273 (80%)	1,19,94,477 (58 %)	2,98,27,750 (69%)
6.	Number of Illiterates (6+ years)	85,52,304 (38.2%)	1,22,90,963 (59.2%)	2,08,43,267 (48.3%)
7.	Sex Ratio	920		
8.	Sex Ratio (0-6)	883		
9.	Sex Ratio (SC)	925		
10.	Sex Ratio (ST)	974		

- **Literacy rate:** In all about 69% are literates, of which almost 80% are males are literate and 69% females are literate.
- **Sex ratio:** With 1,000 males, female population is 920 and thus the state ranks low in compare to other states in India. Over the years, the ratio is declining, as it was 932 in 1991 census.
 - The ratio is alarming in the age group of 0-6 years, as there are 883 girl-children in comparison to 1,000 male children.
 - Among STs, the ratio is somewhat balanced with 974 females with 1000 males but among SCs, the ratio is almost parallel to state's figures.

Banaskantha district is known for its geographic and cultural variety, such as desert in the west and north, adjoining Rajasthan state; hills in the east, inhabited by tribals but quarrying and mining by dominant sections of the society and adjoining Rajasthan state; and plains in south, adjoining Patan and Mahesana districts, known for cash crops and over-exploitation of underground water.

Demographic data – Banaskantha district (Census 2001)

- **Population:** Total population is 25 lakhs, of which 52% are males and 48% are females. The proportion of children aged between 0-6 years is 18.7% to the total population, which is higher than state's average.
 - **Social composition:** In all scheduled castes (SC) population is about 11%, which is higher than state's average, and scheduled tribes (ST) population is 8%, which is much lower to state's average. There is no scheduled area in Banaskantha, which means that no taluka has reported tribal population above 50% to the total population. However Danta and Amirgadh are two taluka with more than 45% tribal population. The other backward classes (OBC) population varies between 47 and 52 % including a few Muslim communities, the rest belong to 'general category' also known as upper castes.
 - **Religious composition:** Muslims are the largest religious minority with about 13% to the total population and Christians are very few.

No	Meters	Banaskantha district		
		Male	Female	Total
1.	Total Population	12,97,404 (55.8%)	12,06,840 (48.2%)	25,04,244

2.	Population (0-6 years)	2,45,654	2,22,740	4,68,394 (18.7%)
3.	SC Population	1,40,999	1,30,485	2,71,484 (10.8%)
4.	ST Population	1,05,818	1,00,086	2,05,904 (8.2%)
5.	Number of Literates (%)	6,99,080 (66.5%)	3,38,539 (34.4%)	10,37,619 (51%)
6.	Number of Illiterates (%)	5,98,324 (56.9 %)	8,68,301 (88.2%)	14,66,625 (72%)
7.	Sex Ratio	930		
8.	Sex Ratio (0-6)	907		
9.	Sex Ratio (SC)	925		
10.	Sex Ratio (ST)	946		

- Literacy rate: In all about 51% are literates, of which 66% are males are literate and 34% females are literate. Banaskantha ranks 23rd in literacy rate, the second lowest district in the state.
- Sex ratio: With 1,000 males, female population is 930, which is slightly higher than state's average but still lower for equal ratio of male & female.
 - The ratio is alarming in the age group of 0-6 years, as there are 907 girl-children in comparison to 1,000 male children.
 - Among SCs & STs, the ratio is slower than state's average.
- Geographic – In development paradigm, it is important to talk about geographic backwardness with the following considerations –
 - Agriculture – quality of land, scanty rainfall and irrigation facilities: The poor quality of land and lack of irrigation facilities do not provide much scope to groom agriculture on large scale. The western part of Banaskantha is adjoining small Rann of Kachchh and desert-like climate and land restricts economic growth.
 - Industrialization based on natural resources available like minerals, forest based and water sources: Mainly eastern belt of Banaskantha has hills with forest and minerals that support quarrying and mining.
- Caste structure – It is necessary to describe caste structure and nature of inequality, injustice and discrimination observed as primary premise, as almost all transactions take place under shadow of *varna vyavastha* (caste system). In order to describe discrimination and injustice observed due to hierarchy established under caste system, both types of transactions are important – (i) dalit and non-dalit interactions, and (ii) intra-dalit interactions.
 - Dalit and non-dalit interactions - The non-dalits, mainly Patels, Darbar and Rajput (landholding castes) and other castes in the region are completely coloured (their thoughts and actions) by caste system. These are reflected in every interface and dealings, at every place and time, and self-sustaining due to lack of new avenues to encounter, such as, education, vocational skills and sources of livelihood for dalits; and thus hegemony of the non-dalits is maintained through such dealings.
 - Intra-dalit interactions - Within dalits (9 castes), the Bhangi or Valmiki caste is at the bottom of the pyramid and mainly engaged in scavenging and cleaning activities. There are seven castes (Vankar, Meghval, Chamar / Rohit, Garo / Pandya, Senva, Turi, Valmiki) that belong to scheduled castes (dalits) and among them, mainly three castes

behave like upper castes among dalits and thus consider Valmiki and sometime Senva and Turi castes as untouchable and discriminate them. Thus, Valmiki or Bhangi face hostility from other scheduled castes. The unity among dalits is not established and therefore it practices ills of caste system in a very similar manner as non-dalits act with dalits.

➤ Gender inequalities and discrimination – The discrimination is observed between male and female in every sphere of life.

- The sex ratio and literacy level are the major indicators for gender discrimination. (See demographic data)
- Average age of marriage for girls is 15 years, which hinders their development.
- Higher level of malnourishment among women, early marriage age contribute to higher maternal mortality rate (MMR) in Gujarat with 5,000 mothers die at childbirth, out of 12 lakh women delivering babies each year. The current maternal mortality rate (MMR) is 3.89 in a thousand successful deliveries in Gujarat. According to a survey (2001) of dalit women, average pregnancy (5 per women).
- The local NGOs have observed high rate of violence on women in different forms like battering, rape and forms of domestic violence. According to police, in all 339 offences are recorded in the year 2003 Banaskantha district. According to local NGO, in all 19 cases of violence on women are taken up for legal action in the year 2004. Among various forms of violence, physical and mental torture by family members tops the list with 121 (police), followed by the rape and sexual assault 68 (police) and 11 (NGO) and 25 suicides. Over and above these, unnatural death of women including 81 accidental deaths, 8 homicides and 12 kidnapping were reported during the year 2003. Attempted suicide, humiliation in public and severe mental tortures etc. was also reported as different forms of violence on women.
- Engagement of women as labour workforce and lower wages paid (for example, Rs. 60/- paid to male worker but about Rs. 30-40/- paid to female worker) to them is another major concern regarding gender inequalities.

Overall the scenario is alarming with statistics as well as women's agonies.

➤ **Development related – Human development indicators include social sector index, (availability and accessibility to basic amenities like water, education or literacy, health care, common property resources (CPRs) and food security - production and civil supply through fair price shops), economic opportunities (agriculture, industrialization and skills of workforce), political will, stability and governance. Overall ranking of Banaskantha is among last 4 districts in Gujarat out of total 25 districts.**

- Social sector index – The values of caste system is a major factor contributing to social inequalities, may that accessibility to basic amenities or economic development.

- **For dalits, among basic amenities, issues of graveyard, house-plots and roads are major problems.**
- For adivasis, access to primary education, health care and availability of food through fair price shop is a distant dream.
- **In context of control over natural resources, especially land, forest and water, land reforms has limited success (of total 599 families, only 198 - 33% have access to land allotted) while forest laws have deprived adivasis from their traditional rights of forest produce, cultivating forest land and entry to forest.**
- **Economic issues and class inequalities – The main source of income generation is through land-based activities, as industrialization and service sector has limited penetration in the region.**
 - **In context of land based income generation, the contrast is wide, as non-dalits, mainly landholding castes have irrigation facilities and able to take crops twice a year, which may be cash crops and thus they are economically well-off while dalits with small landholding, depend on rain-fed agriculture. The difference is as wide as 80% non-dalit landholders have irrigation facility and landholding is more than 25 acres per family while the dalit families have about 5 or less than 5 acres and among them, not more than 20% have irrigation facilities.**
 - **Extent of industrialization and existence of service sector is still on small scale in Banaskantha, which restricts employment opportunities in present development paradigm.**
 - **Land reforms have limited success. Not many avenues are explored in the region for employment generation by the state. Moreover, indebtedness aggravates economic dependence and exploitation.**
 - **People with vocational skills are very few, which is also a restricting factor in economic stability.**
 - Due to lack of economic opportunities and sources of livelihood, people migrate in search of livelihood and various adverse effects of migration are observed such as illiteracy, economic exploitation, reducing bargain power of labour / workforce and bonded labour.
- Political deprivation of SCs and STs – In Panchayati Raj system, reservation for SCs and STs has not borne fruits as expected in the district. In various village panchayats, there are in all 63 dalits sarpanch but actually, a very small proportion of them are able to enjoy their rights and power as head of the village and contribute to decision-making and betterment of the deprived sections of the society. Most of them are unaware of their rights and how to exercise powers in order to achieve social justice; those who are aware of their rights and powers, not able to achieve at village level due to casteist approach and adverse community dynamics as well as lack of coordination between village and taluka and district Panchayats.

SECTION II: STATUS OF CHILD RIGHTS THROUGH PRIMARY DATA

The issues related to child rights in the district are not much different than the state level issues. The issues related to children are identified and articulated with the survey data, which was carried out during August and December 2005. The focus is on presenting status of child rights with the background of regional and state level development issues. The findings of BLD are presented as per the framework and the indicators mentioned below with triangulation of secondary data and primary data generated at village level and household level to describe present scenario and views of the respondents.

BLD details: Name of taluka, Social composition, number of household and village

No.	Name of taluka	Social composition	No. of villages	No. of households / respondents
1	Danta	Tribal dominated	10	1,052
2	Dhanera	OBCs and Dalits	08	991
3	Palanpur	OBCs, dalits and Muslims	08	1,371
4	Tharad	OBCs, dalits and Muslims	08	1,362
5	Vadgam	OBCs, Dalits and Muslims	08	1,074
6	Vav	OBCs and Dalits	08	1,594
	Total		50	7,444

The village level survey has clarified major issues and therefore many of the issues are described based on village level data while some issues like economic status, sources of livelihood, level of awareness about child rights among parents, etc. are presented based on household data. These statistics therefore should be considered as guidelines.

To know proportion of children below 14 years, we have used 3 sources of information, namely, households, village and census 2001 data. There is a discrepancy in all three sources and to present reliable data through cross-checking and comparing the data collected, i.e. census 2001 data and HHs and village level data.

Comparing census data with HHs and village level data for proportion of children below 14 years

Unit for data	Total population	Male (%)	Female (%)	Children below 14 years (%)	
				Boys	Girls
Census	49,141	25283 (51.4)	23858 (48.5)	12,068 (24.5)	13,032 (26.5)
HH	42,796	22,260 (52.0)	20,536 (48.0)	8,662 (20.2)	7,613 (17.8)
Village	51,834	26,693 (51.5)	25,141 (48.5)	9,408 (18.1)	8,639 (16.6)

As shown in the table, the proportion of children below 14 years varies between 35% and 40% to the total population in Banaskantha district.

- The census 2001 provides data on children aged between 0 and 6 years but our need is to get data for children below 14 years and thus there is a gap for getting data on children between 7 and 14 years. To calculate number of boys and girls of age 7-14 by subtracting, we assumed that they would be registered as ‘workers’ under census category. Therefore, we subtracted number of workers from the total population and achieved number of children below 18 years, which is slightly higher than the proportion observed based on HH and village level data. Roughly therefore we could take it as about 40% children to the total population.
- Of total 7,444 HHs, total 42,796 persons are covered; of them, 16,275 (38%) are children below 14 years. This is much lower than the census figures.
- The village data is based on year 2005, which would be slightly higher than census 2001. Based on this, proportion of children below 14 years is 34.7%, which is lower than census and HH level data.

Despite discrepancy, it is clear that the proportion of children below 14 years is at least one-third of the total population.

While crosschecking about population below 14 years, a striking point emerged that Dahod (20.4%), Dangs (19.6%) and Banaskantha (18.7%) ranks highest with the population of children aged between 0 and 6 years and these are the districts with the least literacy. (see appendix 4 for details)

Table 1: Profile of respondents

No.	Details	Name of taluka					Total no. of respondents (n=7,444)	
		Danta (n=1,052)	Dhanera (n=991)	Palanpur (n=1,371)	Tharad (n=1,362)	Vadgam (n=1,074)		Vav (n=1,594)
1	Sex							
	a. Male	822	906	1220	1149	773	1537	6407 (86%)
	b. Female	230	85	151	213	301	57	1037 (14%)
2	Age (in years)							
	18 – 60	978	914	1277	1284	997	1494	6944 (93.3%)
	>61	21	68	94	50	64	85	378 (5.1%)

	Missing	53	09	-	28	11	17	101
3	Social category							
	SC	04	205	312	237	245	416	1419 (19.1%)
	ST	1041	133	121	52	21	20	1388 (18.6%)
	OBC – Hindu	03	569	614	1045	599	975	3805 (51.1%)
	OBC – Muslim	-	04	181	04	181	03	373 (5.0%)
	General	-	79	143	24	28	180	454 (6.0%)
	Other	04	01	-	-	-		05 (0.7%)
4	Education							
	Never gone to school	283	504	240	300	82	588	2043 (27.4%)
	Primary education	150	231	593	355	324	316	1997 (26%)
	Secondary education	117	26	268	119	187	143	1969 (26.4%)
	Higher secondary education	48	05	73	34	54	25	860 (11.5%)
	Graduation	09	02	46	08	14	06	239 (3.2%)
	Post graduation	06	01	07	-	07	-	82 (1.1%)
	Other	04	01	05	06	06	05	21 (0.3%)
	Missing	36	32	02	90	14	17	27(0.3%)
4	Occupation							
	Cultivator	947	647	691	874	484	1073	4726 (63.5%)
	Share cropper	33	179	44	234	78	44	612 (8.2%)
	Labour	10	56	471	166	394	421	1518 (20.4%)
	Self employed	01	19	24	31	29	05	109 (1.5%)
	Beggar	01	14	39	24	17	08	103 (1.5%)
	Service – government	01	-	07	02	20	-	30 (0.4%)
	Service – private	04	08	66	14	27	12	131 (1.8%)
	Other	-	02	19	02	07	01	31 (0.4%)
	Missing	55	56	10	15	18	30	184 (2.5%)

5 Asset holding							
Own house	636	719	1316	1332	1016	1551	6570 (88.3%)
Cultivable land	405	245	09	26	25	42	752 (10.1%)
Non-cultivable land	10	15	03	01	01	-	30 (0.4%)
Vehicle	01	01	02	01	02	-	07 (0.09%)
Livestock	-	02	05	-	10	01	18
No asset	-	-	24	-	08	-	32
Other asset	-	-	06	-	-	-	06
Missing	-	09	06	02	12	-	29

Looking at profile of the respondents, mainly the following details are observed:

- **Sex:** Of total 7444, very large number of respondents are male (86%), the rest are female (14%). Among them, Vav showed least number of female respondents.
- **Age:** Most of the respondents (93%) are between age of 18 and 60 years, very small proportion (5%) is above 61 years old, where the eldest of the house has been covered under the survey. In fact, a few senior citizens appreciated the survey schedule saying that the child rights are seen in comprehensive manner rather than in isolation.
- **Social category:** Of total 7444, 19% belong to scheduled castes (SC), 18% belong to scheduled tribes (ST), 56% belong to OBC and of them 51% follow Hindu and the rest follow Islam and 6% belong to general category which means that they do not belong to either of the above four categories.
 - Among them, Danta being tribal dominated taluka, highest number of respondents belongs to ST and the least number of other categories.
 - Danta with least proportion of OBCs, Tharad leads with 76% OBC population followed by 61% in Vav and least in Palanpur with 44%.
- **Education:** Broadly speaking, about a fourth (27%) has never gone to school for formal education, about a fourth (26%) have primary education and another a fourth of them (26%) have studied up to secondary. The graduates and postgraduates consist only 4% of the total respondents.
 - Among proportion of respondents who had never gone to school for formal education, Thanera reported shockingly highest number (51%) followed by Vav (37%), Danta (27%) and least with Vadgam (7.5%).
- **Occupation:** Majority of the respondents are engaged in cultivation (64%) followed by working as labourers (20%) and 8% are engaged as share croppers. Of the rest, are engaged as self employed (1.5%), job in private sector (1.8%), begging (1.5%) and a very small proportion (0.4%) have job in government run offices. There is no information about 2.5% of the total respondents.

- Among different talukas, proportion of cultivators varies from 45 to 90% - highest in Danta followed by Dhanera, Vav and Tharad (about 65%) and least with 45% in Vadgam.
- In case of labourers, the scenario is different - highest number of labourers are reported in Vadgam and Palanpur (about 35%), followed by Vav and Tharad and least with Danta taluka.

Based on this profile, the primary data is analysed and presented with the framework mentioned in the following box.

Status of child rights – Survival, Development and Governance, Socialization and Protection	
Survival	<ul style="list-style-type: none"> a. Maternal Mortality Rate and Infant Mortality Rate b. ICDS – anganwadis and their activities c. Health care centre (government and/or private) d. For disabled children e. Access to Public Distribution System / Fair Price Shops
Development and Governance	<ul style="list-style-type: none"> a. Literacy level (enrolment and drop out rate) b. Primary Education and related facilities and support from the government (primary school, scholarship) c. Condition of disabled children
Socialization	<ul style="list-style-type: none"> a. Leadership b. Awareness of parents and children about various issues avenues
Protection	<ul style="list-style-type: none"> a. Gender discrimination (superstition, engagement in work) b. Legal provisions and its status in curbing child related issues (child labour, child abuse, addiction, child trafficking)

A. SURVIVAL OF CHILDREN

- MMR, IMR - As per health secretary of Gujarat, 5,000 mothers die at childbirth, out of 12 lakh women delivering babies each year. Moreover, nearly 72,000 infants die every year and 60% of the deaths take place within a month of the birth. The current maternal mortality rate (MMR) is 3.89 in a thousand successful deliveries, while infant mortality rate (IMR) 57 per thousand, which are higher than national and international standards. **Of them, Kachchh, Banaskantha, Sabarkantha, Panchmahal and Dahod have reported highest MMR and IMR among other districts.** Separate statistics are not available on IMR and MMR of Banaskantha.
- ICDS - Anganwadi and activities –
 - Availability of anganwadi - Of total 50 villages,
 - In all 5 villages (4 villages - Umbera, Chori, Zumfali and Kodravi of Danta taluka and one - Gopalpura of Palanpur taluka) reported no anganwadi.

- 44 villages reported one anganwadi, and
- One village reported 2 anganwadis.
- Activities carried out for growth of children – Mainly three activities are carried out in all Anganwadis. They are - providing food to pregnant women and children, health care and immunization. Status of other activities is mentioned in detail here.
 - Birth registration - Of total 45 anganwadi, 43 register birth and death of children while 2 villages (Karesnpura and Pandava from Vadgam taluka) reported that no such registration is done in the respective anganwadi.
 - Death registration – Death registration is lower than birth registration, as many anganwadi do not perform this duty. Of total 45, 40 Anganwadi reported performing this duty and of them 25 anganwadi registers death of boys and girls while of 2 villages of Dhanera taluka (Santrwada and Lelava) registers only boys' deaths.
 - Activities with children
 - Making children play, dance and sing songs: Only 5 anganwadis (Samaiya of Danta, Bhankhod, Lodrani, Arajanpura of Vav and Kumbhardi of Vav) do not carry out these activities.
 - Sports: Only 7 anganwadis (Samaiya & Zamaru of Danta, Bhankhod, Savpura, Lodrani, Arajanpura & Kumbhardi of Vav) do not carry out these activities.
 - Exposure tour: Tour is organized by all villages of Tharad taluka and not arranged by 28 anganwadis. None of the anaganwadi of Vadgam taluka organizes exposure tour. Moreover, 8 villages (Santarwada, Virol, Khaprol, Jivana, Nanmaeda, Janali, Rampur Chhota and Lelava) of Dhanera, 4 villages (Zumar, Nani Tundia, Samaiya and Ganapimpali) of Danta taluka, 4 villages (Bhankhod, Savpura, Lodrani and Kumbhardi) of Vav, 3 villages (Angola, Ambaliyal and Manpur) of Palanpur taluka.
 - Other activities: No information is available about 3 villages in this regard. Thus out of 47, 17 anganwadis do not carry out activities that include one village (Rampur Chhota) of Dhanera, 2 villages (Kamalpur and Badarpur) of Palanpur taluka, 4 villages (Zumar, Nani Tundia, Samaiya and Ganapimpali) of Danta taluka, 5 villages (Kodrli, Bhalgam, Bhangrodi, Bhukhla and Pandava) of Vadgam and 6 villages (Bhankhod, Savpura, Lodrani, Kumbhardi, Radosan and Arjanpura) of Vav.
 - Pre-primary education is not undertaken by 7 anganwadis of total 50 villages, which include 2 villages (Samaiya & Zamaru) of Danta and 5 villages (Bhankhod, Savpura, Lodrani, Arajanpura & Kumbhardi) of Vav taluka.
 - Maintaining growth charts, measuring weight and height, etc. activities are not carried out in 17 anganwadis.

The village level data on anganwadi shows that the responsibilities of the anganwadi worker has been mechanically been implemented and therefore the minimum needs to be done are

performed, such, providing food to pregnant women and children, health care and immunization; but growth charts, measuring weight and height, preprimary education to children, socializing activities like dancing and singing songs as well as exposure trips, etc. are not efficiently carried out. **Our focus should be therefore has to be to make them functional effectively and responsibly.**

Household level data on level of awareness and opinion on role and functioning of anganwadi among 6 taluka is as follow:

- Nutrition provided to pregnant women – Awareness varies from 22 to 88% among different talukas – highest in Tharad followed by Vav and Dhanera (about 68-70%) and least in Danta. The proportion of the benefited varies from 11 to 58% and Danta reported the lowest while Vav reported the highest number of beneficiaries and surprisingly Palanpur being the least benefitted.
- Vaccination to pregnant women – Awareness varies from 60 to 90% among different talukas – highest in Danta and Vadgam Tharad followed by Vav and Dhanera (about 68-70%) and lowest in Tharad taluka (57%). As against the awareness, the proportion of benefit is amazingly low, ranging between 0.8% and 7% and surprisingly Palanpur being the least benefitted.

**Table 2:
Awareness about anganwadi related activities and its functioning and benefits availed**

N o.	Awareness about the following matters	Taluka											
		Danta (%)		Dhanera (%)		Palanpur (%)		Tharad (%)		Vadgam (%)		Vav (%)	
		Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit
1	Nutrition provided to pregnant women	236 (22)	114 (11)	677 (68)	469 (47)	790 (57)	194 (14)	1195 (88)	435 (31)	582 (54)	107 (10)	1108 (70)	927 (58)
2	Vaccinations of pregnant women	953 (90)	47 (05)	724 (73)	09 (0.9)	818 (60)	08 (0.6)	785 (58)	26 (02)	961 (90)	09 (0.8)	1023 (64)	103 (07)
3	Child-birth	689 (65)	15 (1.4)	705 (71)	11 (01)	481 (35)	08 (0.6)	771 (56)	31 (02)	372 (35)	08 (0.7)	749 (47)	103 (07)
4	Birth registrations	73 (91)	918 (87)	76 (91)	794 (80)	169 (87)	1071 (82)	114 (90)	998 (87)	75 (92)	855 (86)	209 (80)	1028 (76)
5	Enrollment at primary school	963 (91)	875 (83)	903 (94)	805 (81)	1292 (95)	671 (49)	1295 (95)	896 (66)	1032 (96)	645 (60)	1265 (79)	1002 (63)
6	Mid-day Meal	948 (90)	232 (22)	909 (92)	463 (47)	1267 (92)	439 (32)	1282 (94)	799 (59)	1026 (95)	351 (33)	1255 (79)	848 (53)
7	Nutritious food provided	362 (34)	362 (34)	788 (80)	788 (80)	878 (64)	878 (64)	1002 (74)	1002 (74)	777 (72)	777 (72)	1018 (64)	1018 (64)
8	Children	329	207	775	457	846	434	986	821	737	360	1015	788

	health check-up	(31)	(20)	(78)	(46)	(62)	(32)	(72)	(60)	(69)	(33)	(64)	(49)
9	Vaccinations to children	453 (43)	76 (07)	784 (79)	439 (44)	1064 (78)	424 (31)	1199 (88)	794 (58)	901 (84)	342 (32)	1104 (69)	750 (47)
10	Making children play	152 (14)	58 (06)	788 (80)	307 (31)	1013 (74)	418 (31)	1127 (83)	587 (43)	805 (75)	126 (12)	999 (63)	586 (37)
11	Teach children to sing and dance	132 (12)	80 (08)	754 (76)	412 (42)	986 (72)	394 (29)	1149 (84)	613 (45)	772 (72)	325 (30)	953 (60)	459 (31)
12	Exposure tour for children	103 (10)	77 (07)	596 (60)	375 (38)	1010 (74)	394 (29)	1123 (82)	612 (45)	431 (40)	319 (30)	868 (54)	488 (31)
13	Pre-primary education to children	133 (12)	65 (06)	699 (70)	323 (33)	984 (72)	03 (0.2)	1128 (82)	44 (03)	771 (72)	09 (0.8)	797 (50)	48 (03)
14	Other activities with children	135 (13)	75 (07)	667 (67)	324 (33)	977 (71)	03 (0.2)	1124 (82)	26 (02)	642 (60)	28 (03)	796 (50)	43 (03)

- Birth registration of newborn, Enrollment at school and Mid-day meal - Awareness is comparatively higher among all taluka (80-90%), Vav taluka with the lowest proportion (80%) and similarly proportion of the beneficiaries is high except in case of mid-day meal where Palanpu, Vadgam and Danta reported very low proportion of availing benefits.
- Children health check-up - Awareness varies from 31 to 78% among different talukas – highest in Dhanera followed by Vadgam and Palanpur and lowest in Danta taluka (31%). As against the awareness, the proportion of benefit is comparatively low, ranging between 20% and 60% and Danta being the least benefited.
- Vaccination to children – Awareness varies from 43 to 88% among different talukas – highest in Tharad followed by Vadgam, Dhanera and Palanpur (about 80%) and lowest in Danta taluka (43%). As against the awareness, the proportion of benefit is comparatively low, ranging between 7% and 58% and Danta being the least benefited.
- Various activities with children for their development
 - Making children play - Awareness varies from 14 to 83% among different talukas – highest in Tharad followed by Vadgam, Dhanera and Palanpur (about 75-80%) and lowest in Danta taluka (14%). As against the awareness, the proportion of benefit is comparatively low, ranging between 6% and 37% and Danta being the least benefited.
 - Teach children to sing and dance - Awareness varies from 12 to 84% among different talukas – highest in Tharad followed by Vadgam, Dhanera and Palanpur (about 75%) and lowest in Danta taluka (12%). As against the awareness, the proportion of benefit is comparatively low, ranging between 8% and 45% and Danta being the least benefited.
 - Exposure tour for children - Awareness varies from 10 to 82% among different talukas – highest in Tharad followed by Vadgam, Dhanera and Palanpur (about 70%) and lowest

in Danta taluka (10%). As against the awareness, the proportion of benefit is comparatively low, ranging between 7% and 45% and Danta being the least benefited.

- Pre-primary education to children - Awareness varies from 12 to 82% among different talukas – highest in Tharad followed by Vadgam, Dhanera and Palanpur (about 70%) and lowest in Danta taluka (12%). As against the awareness, the proportion of benefit is amazingly low, ranging between 0.2% and 7%, except Dhanera with the highest (33%) and surprisingly Palanpur being the least benefited.
- Other activities with children - Awareness varies from 13 to 83% among different talukas – highest in Tharad followed by Vadgam, Dhanera and Palanpur (about 60%) and lowest in Danta taluka (13%). As against the awareness, the proportion of benefit is amazingly low, ranging between 0.2% and 7%, except Dhanera with the highest (33%) and surprisingly Palanpur being the least benefited.

This shows that awareness regarding anganwadi and its functioning, Danta and Vav taluka reported very low level of awareness regarding most of the activities (except vaccination of pregnant women, birth registration, enrolment in primary school and mid-day meal). Tharad comparatively scores higher in almost all activities and there is narrow difference between Vadgam, Dhanera and Palanpur, where average level of awareness is more than 70%. However, the proportion of beneficiaries varies from as low as 0.2% to the highest of about 35-40% (except vaccination of pregnant women, birth registration and enrolment in primary school).

- Health care centre (government and/or private) – Of total 50 village, only 3 villages (2 villages of Danta and one of Palanpur taluka) reported availability of government run dispensary and 6 villages have private dispensary; the condition of the dispensary is satisfactory. Of the rest (39) villages, no health care unit available in the village or close vicinity. None of them reported any special facility available for children.
 - PHC – In all 2 villages (Samiya of Danta and Antrol of Tharad) reported PHC in the village or access to PHC. The doctor, nurse and the staff are also available in the respective PHC.
 - Malaria worker – In all 40 villages reported that he visits the village regularly; the rest (11) villages are – Nanitundia & Zamaru of Danta, Dhanana, Bhachali, Kumbhardi and Arajanpura of Vav, Padader, Zeta & Lodhnor of Tharad, Thur of Vadgam and Angola of Palanpur.
 - ANM – In all 44 villages reported that she visits the village once a month; the rest (6) villages are – Umbera of Danta. Chhota Rampura, Khaparol & Lelava of Dhanera, Zeta & Lodhnor of Tharad.
 - Dai – There is no dai available in 3 villages. Of total 43 villages, 35 villages have trained *dai* while the rest (7) have *dai* who has never undergone any training or certification from the government for her work. There are 19 villages which have both trained & untrained dai across all the taluka.
 - Mobile health care unit -

- Veterinary unit / health care of cattle – None of the villages informed to have a veterinary unit.

This also means that the children with severe health problems would not be attended immediately, which contributes to higher deaths of newborn babies, infants and children between 4 and 10 years.

Table 3: Awareness about the Health related matters

No.	Awareness about the following matters	Taluka											
		Danta (%)		Dhanera (%)		Palanpur (%)		Tharad (%)		Vadgam (%)		Vav (%)	
		Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit
1	Health check-up for TB	188 (18)	65 (06)	707 (71)	323 (33)	724 (53)	03 (0.2)	938 (88)	44 (82)	742 (03)	09 (10)	461 (0.8)	48 (03)
2	Health check-up for pneumonia	150 (14)	75 (07)	624 (93)	324 (33)	592 (43)	03 (0.6)	855 (63)	26 (02)	632 (59)	28 (03)	434 (27)	43 (03)
3	Health check-up for diphtheria	73 (14)	73 (07)	590 (60)	284 (29)	500 (37)	01 (0.1)	865 (64)	32 (02)	632 (59)	27 (03)	435 (27)	49 (03)
4	Health check-up for polio	860 (82)	782 (74)	709 (72)	346 (35)	700 (51)	92 (07)	911 (67)	85 (06)	783 (73)	88 (08)	882 (55)	432 (27)
5	Health check-up for contagious diseases	147 (74)	74 (07)	593 (60)	283 (29)	640 (47)	- (00)	867 (64)	16 (01)	587 (55)	28 (03)	441 (28)	55 (04)
6	Health check-up for Sickle Cell Anemia	124 (12)	60 (06)	578 (58)	278 (28)	525 (38)	01 (0.1)	865 (64)	19 (01)	478 (45)	29 (02)	428 (27)	46 (03)
7	Vaccination for BCG	564 (54)	478 (45)	818 (83)	491 (50)	979 (71)	532 (39)	1066 (78)	716 (53)	879 (82)	582 (54)	1267 (80)	939 (59)
8	Vaccination for typhoid	293 (28)	190 (18)	613 (62)	323 (33)	1008 (74)	499 (36)	1042 (77)	639 (47)	590 (55)	126 (12)	1150 (72)	862 (54)
9	Vaccination for other diseases	135 (13)	88 (08)	700 (71)	503 (51)	882 (64)	375 (27)	907 (67)	675 (50)	381 (36)	47 (04)	1117 (70)	644 (40)

This data shows that there are considerable variations – among taluka and among various activities / vaccination for health care.

- Danta is the lowest with regards to awareness and availing benefits for TB, pneumonia, diphtheria, sickle cell anemia and typhoid (about 12-15%) and about 70% with regard to polio and contagious diseases. In availing benefits, it is still worse, as other than polio and BCG, other vaccinations are as poor as 5-7%.
- Palanpur and Vadgam (despite being economically better off than other talukas) reported average (about 50%) awareness about various disease and vaccination however the benefits availed are surprisingly very low, especially with regard to TB, pneumonia, diphtheria, sickle cell and typhoid.

→ Vav is almost similar to Danta taluka while Dhanera and Tharad have reasonably fared well with regard to both, awareness and availing benefits related to ICDS and health care.

One cannot therefore draw any general conclusions regarding the level of knowledge of all schemes related to pregnancy and childbirth. Different schemes are more or less known and the respondents in appear to have been beneficiaries of these schemes in different talukas in different proportions.

➤ Disabled children – Looking at proportion of disabled persons, the village and HH level data show some discrepancy, mainly due to concept of ‘disability’. In the HH schedule, many have reported having tuberculosis and paralysis as ‘disability’ to work.

The household form deals with five issues related to handicapped children. Regarding each of these sub-issues the level of awareness varies between talukas. As per HH data, total number of disabled / physically challenged persons is 409 (5.5%) of the total sample. In all 17 reported polio and 17 faces other types of disability such as damage of eyes, deaf & dumb, loss of hand or a foot.

Table 4: Details about disabled persons

No.	Details	Name of taluka						Total no. of respondents (n=7,444)
		Danta (n=1,052)	Dhanera (n=991)	Palanpur (n=1,371)	Tharad (n=1,362)	Vadgam (n=1,074)	Vav (n=1,594)	
1	Physical disability	58	33	63	118	71	66	409 (5.5%)
2	Polio	03	-	04	04	02	01	17 (0.2%)
3	Other	-	05	06	03	02	01	17 (0.2%)
Village data		22	25	16	42	24	24	153 ()

As per village data (50 villages of 6 taluka), in all 153 children below 14 years reported disability. Among them,

➤ Rate of disability – Among total number of children (3838), rate of children with disability is 9.4.

➤ Taluka – The highest number of disabled children has been reported from Tharad taluka, followed by Dhanera, Vadgam, Vav and Danta; the least number is from Dhanera taluka. However, it should be noted that of total 50 villages, 36 villages reported children with disability while there is not a single disabled children in 14 villages. Regarding awareness, HH data shows that Danta reported the lowest level of awareness (26%) who know of a special certificate to handicapped children and 14% know about a scholarship available for handicapped children. In Tharad and Vadgam taluka, more than 50% respondents are aware

of special schemes; in Vadgam about 65% are aware of special certificates and mobility aids for handicapped children.

➤ Social category – As per social category, of total 153 children, 81 (53%) belong to OBC (Hindu), 30 (19.6%) to SC, 26 (17%) to ST, 12 (7.8%) to general category and 4 follow Islam. While comparing proportion of various social category to total population and number of disable children from each category, the children belong to OBC (Hindu) is slightly higher than its proportion to total population. Among OBC (Hindu), the rate of disability is 11.9, which is slightly higher than average rate of disability; thus there are 12 disabled children in every 1,000 children. Of children in Tharad taluka, the rate is as high as 14, which means there are 14 disabled children in every 1,000 children.

➤ Access to Public Distribution System (PDS) / Fair Price Shops (FPS) –

One would have expected that the knowledge of the PDS is almost universal in the rural areas. However there are a surprisingly large proportion of people unaware that household material is available through ration shops. The proportion of respondents who are not aware about FPS ranges from 8% in Vadgam to 27% in Danta taluka.

As the village data shows, only 12 villages (a fourth of total villages) out of the 50 villages have facility of FPS in the village and the rest (38 village residents) have to travel 2 to 5 kms away from the village and the accessibility is a problem; most of them are from Tharad and Dhanera taluka. Thus almost half the respondents do face difficulties in getting food grain at subsidized rate from FPS.

- Of total 10, 8 villages (Umbera, Zumfali, Nanitundia, Samaiya, Ruppura, Dhagadia, Kodravi, Ganapimpali) of Danta taluka have no FPS.
- Of total 8 villages, 5 (Janadi, Zeta, Abhepura, Dolatpura, Antrol) of Tharad have no FPS.
- Of total 8 villages, 7 (Sangla, Manpur, Ambaliyal, Angola, Bhadarpura, Kamalpura, Virpur) of Palanpur have no FPS.
- Of total 8 villages, 7 (Kodralli, Bhangrodiya, Samsherpura, Bhalgam, Bhukhala, Karsanpura, Pandava) of Vadgam have no FPS.
- Of total 8 villages, 6 (Dhanana, Bhachali, Bhankhod, Savpura, Radoson, Arajanpura) of Vav and 5 (Santarwada, Khaparol, Nanameda, Chotta Rampura, lelava) of Dhanera have no FPS.

Table 5: Awareness about public distribution system and fair price shops

No.	Awareness about the following matters	Taluka											
		Danta (%)		Dhanera (%)		Palanpur (%)		Tharad (%)		Vadgam (%)		Vav (%)	
		Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit
1	Food grains at subsidized rate from fair Price	766 (73)	491 (47)	905 (91)	758 (77)	1239 (90)	460 (34)	1253 (92)	317 (23)	986 (92)	479 (45)	1325 (83)	984 (62)

Shop										
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Compare to awareness, actual availability of household material (especially food grains) at subsidized rate is much lower, as reported by the respondents. Availability of household material varies from 23% to 77%; among them, the least is in Tharad and the highest in Dhanera. Surprisingly Vav (62%) and Danta (47%) where level of awareness and availability is lower about ICDS and health care, ranks higher in this matter and Palanpur (34%) being a headquarter of the Banaskantha district is far behind the other talukas.

In case of food availability and accessibility through PDS and FPS, we checked ration card holding talukawaise, as shown in the following table.

Table 6: Ration card holder

No	Type of ration card	Name of taluka					
		Danta (%)	Dhanera (%)	Palanpur (%)	Tharad (%)	Vadgam (%)	Vav (%)
1	APL	491 (46.7)	322 (32.5)	731 (53.3)	972 (71.4)	535 (49.8)	965 (60.5)
2	BPL	343 (32.6)	598 (60.3)	533 (38.9)	266 (19.5)	468 (43.6)	552 (34.6)
3	No card	214 (20.3)	64 (6.5)	105 (7.7)	116 (8.5)	65 (6.1)	75 (4.7)
4	Missing	04 (0.4)	07 (0.7)	02 (0.1)	08 (0.6)	02 (0.2)	02 (0.1)

This shows that of total 7,444 respondents, no information is available about 29 (0.4%) in this regard. In all 6776 (91.4%) reported to have ration card while 639 (8.6%) do not have ration card and therefore not able to avail household material from FPS. Of total 6,776 card holder, there are 4,016 (59.3%) that hold APL (above poverty line) and 2,760 (37.1%) hold BPL (below poverty line) card. This means that little more than a third (37%) of the respondents live below poverty line.

→

In this situation, we need to find out whether this shows a greater level of need in this taluka, that people are ready to buy from the FPS even when they have to travel long distances for that purpose or does it show the absence of an alternative source of food security, especially for 37% who live below poverty line.

B. DEVELOPMENT AND GOVERNANCE

In this sub-section, the focus is on literacy, primary education and related facilities and support from the government primary school, such as, scholarship and mid-day meal. The data here also are combined of HH and village level.

- Literacy level – If we take 41% literacy at district level, of total 50 villages, there are 14 (about a fourth of total villages) villages reported lower literacy level than district average. Palanpur, and Vadgam taluka have reported highest literacy level while Dhanera, Tharad and Vav have reported middle level literacy and Danta has reported the poorest literacy level among all talukas in the district.
 - Of total 14 villages that reported lower literacy level than district average, 3 villages (Zumaru, Zumphali and Dhagadia) belong to Danta, 4 (Santarwada, Nanameda, Janali and Lelava) of Dhanera 3 (Dhanala, Bhankhod and Lodrani) of Vav taluka and 3 (Janadi, Kamali and Zeta) of Tharad taluka.
 - All the villages of Vadgam and Palanpur have greater average than the district level of literacy. In fact, Kodrali of Vadgam taluka has 100% literacy and 3 villages (Kamalpura, Virpur and Bhadarpura - khod) of Palanpura taluka have highest literacy level rate ($\geq 71\%$) among all 50 villages.

Literacy level of the village	Number of villages
25%	2
26-40%	12
41-50%	17
51-60%	8
61-70%	9
$\geq 71\%$	2
Total	50

- Among other castes, there are few castes which have reported lowest level of literacy in the district. They are – Chamar and Valmiki (belong to SC), Bhil (belong to ST), Rabari, Vagharai, Koli and Patel (belong to OBC - Hindu).
- Primary education –
 - Availability and present condition of primary schools - All the villages have primary school but none of them have secondary or higher secondary school in the village. Of them, 38 villages have primary schools in a good condition, poor in 4 villages and OK in 8 villages.
 - All schools reported providing mid-day meal.
 - Children in school – During the present year (2005-06), in all 8,442 children are registered in the primary schools of 50 villages, of them, 3,989 (47%) are girls and 4,453 (53%) are boys.
 - Enrolment – Of total 50 villages, total number of children enrolled for primary education is 1,602 of which 778 (48%) are boys and 824 (52%) are girls.
 - Drop out – Total number of children dropped out is 733, of which 281 (38%) are boys and 352 (48%) in 33 villages. This shows that enrolment of girls is higher than boys as well as the retention in the schools is higher among girls. We do not have data of 11 villages in this regard.

- Scholarship – Among different taluka, 20% respondents of Dhanera taluka feel that the role of the state in regard to scholarships for SC and ST students is not satisfactory. In addition, 30% respondents in Danta and 21% in Dhanera feel that a scholarship for poor students should be started.
- For disabled children - The HH data shows that majority of respondents are aware of the school registration and mid-day meal schemes and majority have also availed of these facilities.

Table 7: Awareness and availing benefits for disabled children

No.	Awareness about the following matters	Taluka											
		Danta (%)		Dhanera (%)		Palanpur (%)		Tharad (%)		Vadgam (%)		Vav (%)	
		Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit	Aware	Benefit
1	Certificate of disability	278 (26)	(06)	346 (34)	323 (33)	551 (40)	03 (0.2)	742 (55)	44 (82)	713 (66)	09 (10)	632 (40)	48 (03)
2	Assistance to buy crèche, tricycle, etc	252 (24)	75 (07)	309 (31)	324 (33)	538 (39)	03 (0.6)	715 (53)	26 (02)	690 (64)	28 (03)	634 (40)	43 (03)
3	For health care	271 (25)	73 (07)	319 (32)	284 (29)	511 (37)	01 (0.1)	754 (55)	32 (02)	605 (64)	27 (03)	700 (44)	49 (03)
4	Reservation for employment	188 (18)	782 (74)	313 (32)	346 (35)	509 (37)	92 (07)	712 (52)	85 (06)	621 (58)	88 (08)	663 (42)	432 (27)
5	Scholarship	148 (14)		319 (32)		504 (37)		711 (52)		599 (56)		674 (42)	

- Vav is the only taluka where around 20-25% respondents are not aware of these aspects of schooling and therefore the lowest proportion (64.5%) have have got the benefits of registration of children in school.
- The Danta and Dhanera are the two talukas where respondents have taken the maximum advantage of the mid-day meal scheme as well, with 80-85% respondents stating that they have got this benefit.
- Children in Palanpur seem to have chosen not to eat the meal available in the school with lower proportion (60%) in Palanpur, along with Tharad and Vadgam than in Danta and Dhanera. in Vav taluka.
- The residents of Palanpur, Vadgam, Tharad and Vav (between 13 and 19%) seem to have taken no steps to improve the situation, especially regarding mid-day meal.

More than 90% respondents feel that the role of the state in primary education is necessary; however 15% in Danta feel that 'the role of the state needs improvement', which shows that they are not satisfied with the role played by the state at present in the education system.

➤ Role and functioning of government officials / executive

Table 8: Awareness about various government officials

No.	Awareness about various government officials	Name of taluka					
		Danta (%)	Dhanera (%)	Palanpur (%)	Tharad (%)	Vadgam (%)	Vav (%)
1	Talati	291 (28)	744 (75)	343 (25)	816 (60)	341 (32)	860 (54)
2	Gramsevak	265 (25)	704 (71)	59 (04)	381 (28)	209 (20)	246 (15)
3	Auxiliary Nurse & Midwife (ANM)	840 (80)	625 (63)	158 (12)	395 (29)	751 (70)	909 (57)
4	Malaria worker	397 (38)	718 (73)	68 (05)	402 (30)	400 (37)	788 (49)
5	From Land Revenue Office	127 (12)	596 (60)	177 (13)	273 (20)	33 (03)	60 (04)
6	School teachers	787 (75)	718 (73)	570 (42)	905 (66)	747 (70)	845 (53)
7	Agriculture expert	131 (13)	454 (46)	62 (05)	79 (06)	18 (02)	21 (01)
8	From Social Welfare Department	97 (09)	423 (43)	08 (0.6)	69 (05)	10 (09)	08 (0.5)

This data shows that –

- In Danta taluka, the respondents know mainly ANM (80%) and school teachers (75%), followed by malaria worker (38%), Talati (28%) and Gramsevak (25%). Any official from Social Welfare Department is the least known among various government officials, which indicates minimal interaction of this department with the people in this taluka. The level of awareness of the respondents also indicates that rule of law regarding child labour or child marriage to be maintained through this department is very minimal.
- In Dhanera taluka, the level of awareness in this regard is little more than of Danta taluka. Although awareness about any official from Social Welfare Department is the least known among various government officials, at least 43% know about them and their role and functioning.
- In Palanpur taluka, level of awareness in this regard is lower than Danta taluka, despite this being the taluka headquarter and economically developed taluka among others. Other

than school teachers (42%) and Talati (25%), level of awareness about other officials is as low as 0.6% and 13%.

- In Vadgam taluka, situation is very similar to Danta taluka, as mainly ANM and school teachers (70%), followed by malaria worker (37%) and Talati (32%) and Gramsevak (25%).
- In Vav taluka, level of awareness is at par with Dhanera taluka, wherein officials from Land Revenue, Social Welfare and Agriculture department are little known (0.5 to 4%) and Gramsevak (15%). At least half of the respondents know other government officials like Talati, ANM, malaria worker and school teachers, who fulfils their basic needs of health care and schooling.

Based on this data, it is very clear that the respondents of Palanpur, Tharad, Vav and Danta need to be awakened about their rights and role of executive in providing them basic amenities and support related to asset like land and prevention from social ills, such as, child marriage and child labour.

C. SOCIALIZATION

This sub-section deals with acquiring qualities that make them better citizens of India, namely, awareness about various avenues to be explores, role of the state and the society in providing these avenues for better exposure and acquiring knowledge as well as creating leadership that would articulate rights of children.

- Primary education: In relation to the steps required from society and the state in relation to children's primary education, almost all the respondents find it necessary for the state to make primary education compulsory. In case of society, the large majority (between 75 and 83%) feels that society should become aware of its role; while in Vadgam, Palanpur and Vav a sizeable proportion (20-33%) also feels that members of society should be more helpful.
- Financial assistance to students for education: In Palanpur, Vadgam and Vav almost all the respondents feel that the government's intervention in providing scholarships for SC/ST students is necessary, as they feel that welfare policies of the state are not adequately implemented. About the role of society the majority opinion is that society should be more aware regarding this, but 20-33% respondents also feel that society should be helpful in this matter and/ or that society should encourage it.
- Health care: Nearly half (42%) of respondents in Danta feel that the government should start primary health facilities in every village and the role of the state in this matter is essential. Compared to the involvement of civil society in primary education, respondents see a much more active role of society in healthcare. In many of the talukas, except for Danta, between 30 and 40% respondents see society as being helpful in the area of healthcare (perhaps by way of setting up private trust clinics/ hospitals). The stress is on health equipments along with the building and infrastructure facilities for knowledge and treatment of child diseases.

→ Various educational and co-curricular programmes: Large proportion of respondents stressed on such activities and should be started/ implemented, much more responsibilities on the society that the state in this regard is suggested. Many have suggested that some groups or parents should play an active role for value-building programs and activities to build a better life for future generations.

In general the broad trend seems to be that respondents see a much more essential role of the state in the area of education and healthcare while the role is perceived as marginally less important in the areas of educational and value building activities and activities for a better future. In both the types of activities the role of society is envisaged as much more proactive and involving direct intervention. Perhaps the feeling may even be that the role of society is to make the state more active.

D. PROTECTION

This sub-section focuses on social ills, which are in fact obstacles in achieving equality, and social justice, including gender discrimination (superstition, engagement in work), legal provisions and its status in curbing child related issues (child labour, child abuse, addiction, child kidnapping).

➤ Gender discrimination

At the outset it is important to make it clear that when a in a taluka larger proportions of respondents say that they are aware that there is gender discrimination it does not necessarily mean that this is the situation, nor does it mean that when a lower proportion sees the existence of gender discrimination it is in fact lower. It may be that gender discrimination has so deeply become a part of people’s psyche that they do not recognize it even when it exists.

Therefore other objective indicators (though indirect) like evidences of child labour of girls and discrimination in their education have been used to cross check.

The data indicates gender discrimination is observed and expressed by the respondents to large extent, for example, respondents of Tharad and Vadgam taluka have accepted it as more than 80% while Dhanera and Vav have accepted it as 64-65%; only Danta and Palanpur have accepted it as low as 27-28%. Danta being a tribal dominated taluka, may be equality between sons and daughters may not be prevalent.

Table 9: Awareness and extent of child related issues

No.	Awareness and extent of child related issues	Taluka											
		Danta (%)		Dhanera (%)		Palanpur (%)		Tharad (%)		Vadgam (%)		Vav (%)	
		Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years
1	Gender discrimination	288 (27)	NA	644 (65)	NA	383 (28)	NA	1350 (99)	NA	874 (81)	NA	1011 (64)	NA

2	Addiction												
	a. Tobacco	665	272	959	824	1105	349	1361	1255	651	540	1585	396
	b. Smoking	612	201	953	727	1098	194	1336	1139	651	178	1585	528
	c. Alcohol	638	153	952	344	1098	273	1247	535	596	74	1585	196
	d. Drug	547	57	954	312	1012	65	1238	123	596	57	1523	34
3	Engaging children in economic activities by the family	656 (62)	280 (27)	962 (97)	761 (77)	1085 (79)	51 (04)	1361 (100)	1338 (98)	599 (56)	86 (08)	1580 (100)	602 (38)
4	Illiteracy	618 (59)	322 (31)	873 (88)	150 (15)	1101 (80)	378 (28)	1362 (100)	1304 (96)	728 (68)	425 (40)	1588 (100)	819 (51)
5	Drop out from school	679 (65)	360 (34)	960 (97)	794 (80)	1110 (81)	370 (27)	1361 (100)	1331 (98)	861 (80)	770 (72)	1591 (100)	956 (60)
6	Child sacrificed (religious belief)	477 (45)	02	867 (88)	09	1082 (79)	01	1302 (96)	08	861 (80)	05	1591 (100)	07
7	Discrimination with SC children	501 (48)	02	954 (96)	709 (72)	1107 (81)	201 (15)	1361 (100)	1324 (97)	528 (49)	228 (21)	1577 (99)	1042 (65)

- Addiction among children – The respondents have responded about mainly four types of addictions, namely, tobacco chewing, smoking, drinking liquor and consuming drugs like brown sugar, opium.
 - Tobacco chewing and smoking – The large number (almost 90%) of respondents are aware of these addiction and have informed that it is prevalent in large extent (30 to 100%) across all taluka.
 - Drinking liquor and consuming drugs – Compared to tobacco chewing and smoking the consumption of liquor and drugs are almost half but it is as high as 10 – 30%.
- Engaging children in economic activities by the family – Awareness and prevalence of this practice cuts across all talukas to great extent (38 to 100%), wherein the Tharad and Vav taluka reported the highest and Danta (62) as well as Vadgam (56) reported the lowest among all.
- Illiteracy and drop out from school - Awareness and prevalence of this practice cuts across all talukas to great extent (31 to 100%), wherein Tharad and Vav taluka reported the highest and Danta (45) reported the lowest drop out in comparison to other talukas.
- Child sacrifice (due to religious belief) – The level of awareness and prevalence of this problem is more crucial than looking at it with numbers or percentage. All the talukas have reported its occurrence in last 10 years, which varies from one to nine times.
- Discrimination with SC children – This issue has remained controversial and in some surveys, it has not been reflected as a practice or problems in past. Fortunately, in this survey, it has been shared by most of the respondents across all talukas; the highest by Dhanera, Tharad and Vav (97 to 100%) and little less in Palanpur (81%). Danta being

tribal dominated taluka, proportion of SC children is too low and therefore the reporting is too low in numbers.

The responses regarding level of awareness do vary among talukas, such as, respondents in Danta are by and large less aware of such issues followed by Vadgam taluka. However, a larger proportion (42%) does believe that females are discriminated against on grounds of customs, not accepting discrimination in bringing up of sons and daughters.

Almost all respondents in Vav, Dhanera and Tharad are aware of the issue of child labour. However a large proportion (22%) of respondents in Vav are of the opinion that this problem does not exist in their villages. The data for Vav also shows that only 28% children in the villages work, however the proportion working for income is as high as 81% of those working as family members. This indicates that while the proportion of children working is much smaller, the majority of those who do work do so out of economic compulsion.

The largest proportion of child addicts is in Danta. In every village at least some children are addicted both to liquor and tobacco. This is clearly attributable to drinking being part of tribal custom. This is actually supported by the fact that very few respondents in this taluka see it as a problem. In fact respondents of Dhanera are more sensitive to the existence of this problem in their villages, e.g. almost 47% of them feel that tobacco-chewing is a problem for 20-50% children. In Palanpur and Vav the issues does not seem to be a very major one, as data regarding actual addiction match with those of people's perception regarding the issue.

Regarding the issue of illiteracy the responses in different talukas are different. Tharad, Vav and Dhanera as high as 65-97% (in Tharad) find the existence of discrimination against Dalit children. Regarding the question of dropouts, the proportion is relatively low in Danta and Palanpur. In these two talukas only 34 and 27% respondents have noted the existence of dropouts. In the other talukas the percentage is quite high varying from 60% in Vav to 98% in Tharad.

➤ **Legal provisions and its status in curbing child related issues (child marriage, rape or physical assault, child labour, child kidnapping and their engagement in anti-social activities)**

This issues do not only belong to legal arena, it directly affect social fabric and future of children of present generation. In this context, the following data is revealing.

Table 10: Legal provisions and its status in curbing child related issues

No.	Awareness and extent of child related issues	Taluka											
		Danta (%)		Dhanera (%)		Palanpur (%)		Tharad (%)		Vadgam (%)		Vav (%)	
		Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years	Aware	Occurred in 10 years
1	Child marriage	181 (17)	08 (0.8)	607 (61)	556 (56)	858 (63)	97 (07)	1347 (99)	1282 (94)	603 (56)	338 (32)	867 (54)	475 (30)

2	Physical assault / Rape	728 (69)	04 (0.4)	973 (98)	39 (04)	1331 (97)	27 (02)	1358 (100)	294 (22)	1021 (95)	26 (02)	1587 (100)	38 (02)
3	Child labour	589 (56)	299 (28)	955 (96)	791 (80)	1096 (80)	301 (22)	1354 (100)	1321 (97)	770 (72)	421 (39)	1572 (99)	1005 (63)
4	Child kidnapping	188 (18)	-	313 (32)	29 (03)	509 (37)	13 (01)	712 (52)	19 (01)	621 (58)	02 (0.2)	663 (42)	176 (11)
5	Criminal activities												
	a. Theft	477	14	871	25	1090	09	1360	357	554	05	1585	201
	b. Selling drugs	464 (44)	-	809 (82)	12 (01)	1082 (79)	02 (0.1)	1236 (91)	99 (7.3)	551 (51)	03 (0.3)	1580 (100)	195 (12)
	c. Anti-social activities	480 (46)	22 (02)	870 (88)	18 (02)	1089 (79)	09 (0.7)	1356 (100)	535 (39)	567 (53)	03 (0.3)	1583 (100)	357 (22)

- Child marriage – Level of awareness varies from 17 to 100% in this regard and therefore the reporting of occurrence also varies from as low as 0.8% to as high as 56%. The most important point is that the respondents have confirmed prevalence of this practice. In fact, very low awareness about inspector appointed by Social Welfare Department and its powers to curb this practice, confirms that despite its prevalence, people do not see as an issue and its adverse consequence of the young generation.
- Child abuse – rape or physical assault – The issue of rape can child molestation is a sensitive one. Since it is a source of social stigma it is likely that data may not entirely reveal the truth in these issues. However we present the observations of the respondents with this prior caution.
In most talukas the overwhelming majority of the respondents state that the issue is non-existent, however in Tharad 15% respondents state that rape occurs in ‘less than 5%’ frequency in their villages, and the proportion of people stating this about child harassment is the same. In Vav almost all respondents state that child harassment occurs ‘less’ or to a small extent. There are of course no village level data about these incidents and therefore it is not possible to crosscheck it with objective facts.
- Child labour - Respondents in Dhanera and Tharad are to a greater extent aware that child labour does exist in their villages. Tharad does have a fairly high proportion of children working (60%) but in the Dhanera villages this proportion is relatively small (32%).
- Child kidnapping - Regarding exchange of children from foreign countries, kidnapping, sale of children and flesh trade, and child sacrifice, the general opinion is that these activities do not happen. Apart from Danta and Vadgam where the proportion is comparatively low (around 50%), in the other talukas most of the respondents are aware of these issues. However the overwhelming majority of them state that there have been no cases of such incidents in the last 10 years in their villages. The one exception is in Vav where 11% of the respondents have reported

kidnapping incidents having taken place, and 9% respondents report the existence of flesh trade.

- Engagement of children in criminal activities - Majority of respondents are aware of these issues. However again very few give any evidence of such incidences occurring in their village in the last 10 years. The exceptions are Vav and Tharad, in which a sizeable proportion of respondents have noted such incidents happening. In Vav for example 12% note incidences of stealing and selling drugs by children; another 22% say that children have been involved in antisocial activities such as begging. In Tharad the figures reported are even higher – though only 7% find children involved in selling drugs, 26% find children involved in stealing and as high as 39% see children involved in begging and antisocial activities.

Knowledge of child related laws is relatively low in Danta (between 47 and 56%). On the other hand in Palanpur and Vadgam the proportion how knows about these laws is between 70 and 80% while in the other two talukas viz. Dhanera, Tharad and Vav, almost all the respondents (higher and 95%) know about the existence of these laws.

Chapter 4

Summary of findings and suggestions for future intervention

Based on the United Nations Declaration on the Rights of the Child in 1959, India has adopted the National Policy on Children in 1974, which has reaffirmed the constitutional provisions and stated that “it shall be the policy of the State to provide adequate services to children, both before and after birth and through the period of growth to ensure their full physical, mental and social development. The State shall progressively increase the scope of such services so that within a reasonable time all children in the country enjoy optimum conditions for their balanced growth”. The Government of India has ratified the ‘Convention on the Rights of the Child’ (CRC) on the 11th of December 1992 as a member country and as a signatory to this convention.

Indian Constitution provides a comprehensive understanding of child rights along with fairly comprehensive legal regime exists for their implementation through laws for betterment of children in the country, such as Child Labour (Prohibition and Regulation) Act, 1986; Child Marriage Prevention Act, Juvenile Justice (Care and Protection) Act, 2000, etc.; national plans for human resource development and Five Year Plans have provided the wherewithal to deal with child related issues. The thrust in defining child rights is that each child is allowed to do activities that make her/his life happy, healthy and safe along with responsibilities towards other children and adults, to make sure they get their rights.

Despite constitutional guarantees of opportunity and civil rights, millions of children face widespread deprivation and discrimination on the basis of caste, religion, ethnicity and religion. We hear children are dying of starvation, female sex ratio dips, little children, barely able to stand, are married off flouting all laws, many children are locked, abused, sodomised - the list is endless. Even the basic need for birth registration that will assure them a nationality and identity remains un-addressed, affecting children’s rights to basic services, such as, health care, primary education, availability and accessibility to water, sanitation and safe environment that affect living conditions, protection from violence, trafficking and social stigmatization. A large part of this stems from being seen through the lens of adults who make decisions for them, and who prefer to address their welfare rather than their rights.

Various individuals, groups and non-government organizations (NGOs) working with and for children feel that the process of ratifying CRC is gaining formal recognition, there is, however, no universal or accepted definition of child participation and each one has defined it according to their own understanding. There is still a fairly long journey before this ‘inclusion’ of children’s participation is internalised and accepted widely.

We need to consider the following points

- ☆ It is important that Indian government recognizes rights of children rather than mainly well-being through welfare approach. She needs to promote and protect rights as a positive social

value. Therefore, the perspective of child rights requires to be child-centred, child friendly, not

- ✧ Any understanding of human rights of children cannot be confined to some children – ‘poor children’, ‘working children’ and ‘marginalised children’. Violations of children’s rights are not limited to the poor and downtrodden. They happen in middle class and elite homes too.
 - ✧ A child born out of wedlock or of a void or illegal marriage is considered ‘illegitimate’. Children pay for the decisions taken by the parents and are denied inheritance rights. Even worse, a child born of rape is stigmatised and treated as ‘illegitimate’, both by society and law.
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Objectives of creating baseline data (BLD)

In the context of situation of rights of children, this study was initiated with the following objectives:

- d. To identify child related issues at regional level through baseline data (BLD);
- e. To plan future interventions based on BLD; and
- f. To continue working as CRY partners for child rights at regional level.

CRY in Gujarat works with various NGOs for intervention related to child rights, Behavioral Science Centre (BSC) is one of them. BSC works with 2 people’s organizations (POs) in Banaskantha (BK) district, which is located in north Gujarat. The two POs are – (i) Adivasi Sarvangin Vikas Sangh (ASVS), and (ii) Banaskantha Dalit Sangathan (BDS). ASVS is active with adivasis (tribals) in one of the talukas, namely Danta and covers total 90 villages with 6 fellows (15 villages to be covered by a fellow - *parivartak*). BDS works in 5 taluka and 5 fellows in each taluka and thus covers 75 villages. In all 360 villages of 6 taluka are covered with by 26 fellows.

Research methodology for BLD

In order to know existing situation of child rights and to articulate child rights based on existing situation, we decided to collect primary data from two units – village and households (HHs), in addition to existing secondary data.

We have adopted ‘purposive sampling’ for selection of the villages in 6 taluka of Banaskantha district. The criteria for selection of the villages are as follow:

- d. To select villages with total population <1,500.
- e. Each village should have population of scheduled castes (SCs) and scheduled tribes (STs).

In all 2 villages from each taluka – one village should be developed while the other is under-developed.

We decided to carry out a census in the selected villages, that is, all the households in the selected villages are covered under the survey. The ‘purposive sampling’ is drawn based on

available resources, time and requirements for the future planning. (see appendix 3 for details)

In the first stage, intensive discussion took place between CRY team, BSC staff, BDS officials and ASVS representatives on child rights to evolve a framework for common understanding on child rights. Later this framework was modified and adopted for the BLD. This framework is also an exhaustive list of suggestive indicators for child rights (see appendix 2 for further details). Briefly we put the framework as shown in the following box.

Status of child rights – Survival, Development and Governance, Socialization and Protection	
Survival	<ul style="list-style-type: none"> f. Maternal Mortality Rate and Infant Mortality Rate g. ICDS – anganwadis and their activities h. Health care centre (government and/or private) i. For disabled children j. Access to Public Distribution System / Fair Price Shops
Development and Governance	<ul style="list-style-type: none"> d. Literacy level (enrolment and drop out rate) e. Primary Education and related facilities and support from the government (primary school, scholarship) f. Condition of disabled children
Socialization	<ul style="list-style-type: none"> c. Leadership d. Awareness of parents and children about various issues avenues
Protection	<ul style="list-style-type: none"> c. Gender discrimination (superstition, engagement in work) d. Legal provisions and its status in curbing child related issues (child labour, child abuse, addiction, child trafficking)

Based on this framework, we developed tools, namely scheduled questionnaire for village survey and household survey. The same framework was adopted for orientation of child rights and training *parivartak* (fellows) as well as pre-testing of the schedules.

The primary data has been collected during August and December 2005. Simultaneously data entry was started and got over by December 2005. The data cleaning took more than a month, as the collected data required cross-checking and classification for missing data and ‘not applicable data’. Data analysis was undertaken in January 2006. The report writing was started and completed in February 2006, soon after data cleaning and analysis.

The survey was carried out at two levels – village and households. The number of household in a village and taluka mentioned here:

No.	Name of	Social composition	No. of villages	No. of
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	taluka			households
1	Danta	Tribal dominated	10	1,052
2	Dhanera	OBCs and Dalits	08	991
3	Palanpur	OBCs, dalits and Muslims	06	1,371
4	Tharad	OBCs, dalits and Muslims	08	1362
5	Vadgam	OBCs, Dalits and Muslims	08	1,074
6	Vav	OBCs and Dalits	08	1594
	Total		48	7,444

The village level survey has clarified major issues and therefore many of the issues are described based on village level data while some issues like economic status, sources of livelihood, level of awareness about child rights among parents, etc. are presented based on household data. These statistics therefore should be considered as guidelines.

Demographic data – Banaskantha district (Census 2001)

No	Meters	Banaskantha district		
		Male	Female	Total
11.	Total Population	12,97,404 (55.8%)	12,06,840 (48.2%)	25,04,244
12.	Population (0-6 years)	2,45,654	2,22,740	4,68,394 (18.7%)
13.	SC Population	1,40,999	1,30,485	2,71,484 (10.8%)
14.	ST Population	1,05,818	1,00,086	2,05,904 (8.2%)
15.	Number of Literates (%)	6,99,080 (66.5%)	3,38,539 (34.4%)	10,37,619 (51%)
16.	Number of Illiterates (%)	5,98,324 (56.9 %)	8,68,301 (88.2%)	14,66,625 (72%)
17.	Sex Ratio	930		
18.	Sex Ratio (0-6)	907		
19.	Sex Ratio (SC)	925		
20.	Sex Ratio (ST)	946		

Over and above census data, major regional issues are briefly mentioned here in the human rights perspective.

- Caste structure – In BK, discrimination and injustice observed due to hierarchy established under caste system, both types of transactions need to be considered – (i) dalit and non-dalit interactions, and (ii) intra-dalit interactions.
- Gender inequalities and discrimination – The discrimination is observed between male and female in every sphere of life, may that be sex ratio, literacy level (see demographic data), average age of marriage (15 years for girls), higher level of malnourishment, early marriage age that contributes to higher maternal mortality rate (MMR), violence on women in different forms like battering, rape and forms of domestic violence. BK is one of the districts with highest birth rate, MMR and IMR (57 per 1,000), lowest literacy rate (41%).
- Development related – Human development indicators include social sector index, (availability and accessibility to basic amenities like water, education or literacy, health care, common property resources (CPRs) and food security - production and civil supply through

fair price shops), economic opportunities (agriculture, industrialization and skills of workforce), political will, stability and governance.

- Social sector index – The values of caste system is a major factor contributing to social inequalities, may that accessibility to basic amenities or economic development. For dalits, among basic amenities, issues of graveyard, house-plots and roads are major problems. For adivasis, access to primary education, health care and availability of food through fair price shop is a distant dream.
- Engagement of women as labour workforce and lower wages paid (for example, Rs. 60/- paid to male worker but about Rs. 30-40/- paid to female worker) to them is another major concern regarding gender inequalities.
- **Economic issues and class inequalities – The main source of income generation is through land-based activities, as industrialization and service sector has limited penetration in the region. The inequality between dalits and non-dalits is wide, mainly in terms of land holding, irrigation facilities, productivity of land and capability of higher investment and risk taking. Land reforms have limited success in context of land holding. Limited scope for employment generation and small number of people with vocational skills are restricting factor in economic stability. Moreover, indebtedness aggravates economic dependence and exploitation of dalits. Due to lack of economic opportunities and sources of livelihood, people migrate in search of livelihood and various adverse effects of migration are observed such as illiteracy, economic exploitation, reducing bargain power of labour / workforce and bonded labour.**
- Political deprivation of SCs and STs – In Panchayati Raj system, reservation for SCs and STs has not borne fruits as expected in the district. In various village panchayats, there are in all 63 dalits sarpanch but actually, a very small proportion of them are able to enjoy their rights and power as head of the village and contribute to decision-making and betterment of the deprived sections of the society.

MAJOR FINDINGS OF BLD

Profile of the respondents

- Social composition: Of total 7444, 19% belong to scheduled castes (SC), 18% belong to scheduled tribes (ST), 56% belong to OBC and of them 51% follow Hindu and the rest follow Islam and 6% belong to general category which means that they do not belong to either of the above four categories. Among them, Danta with being tribal dominated taluka has the least proportion of OBCs while Tharad leads with 76% OBC population followed by 61% in Vav and the least in Palanpur with 44%.
- Education: Broadly speaking, about a fourth (27%) has never gone to school for formal education, about a fourth (26%) have primary education and another a fourth of them (26%) have studied up to secondary. The graduates and postgraduates consist only 4% of the total respondents. Among illiterate respondents, half (51%) belong to Thanera s followed by one-

third (37%) to Vav and about a fourth to (27%) Danta and the least in Vadgam (7.5%) taluka.

- **Occupation:** Majority of the respondents is engaged in cultivation (64%) followed by working as labourers (20%) and 8% are engaged as share croppers. Of the rest, are engaged as self employed (1.5%), job in private sector (1.8%), begging (1.5%) and a very small proportion (0.4%) have job in government run offices. There is no information about 2.5% of the total respondents.
 - Among different talukas, proportion of cultivators varies from 45 to 90% - highest in Danta followed by Dhanera, Vav and Tharad (about 65%) and least with 45% in Vadgam.
 - In case of labourers, the scenario is different - highest number of labourers are reported in Vadgam and Palanpur (about 35%), followed by Vav and Tharad and least with Danta taluka.

A. SURVIVAL OF CHILDREN

- **MMR, IMR** - The current maternal mortality rate (MMR) is 3.89 in a thousand successful deliveries, while infant mortality rate (IMR) 57 per thousand, which are higher than national and international standards. **Of them, Kachchh, Banaskantha, Sabarkantha, Panchmahal and Dahod have reported highest MMR and IMR among other districts.** Separate statistics are not available on IMR and MMR of Banaskantha.
- **ICDS - anganwadi and activities** –
 - Of total 50 villages, there is no anganwadi at 5 villages (4 villages of Danta and one of Palanpur taluka), 44 villages reported one anganwadi and one village reported 2 anganwadis. Looking at various tasks to be undertaken by the anganwadi workers, most of the tasks are carried out mechanically and thus the soul is missing, for example, birth registration of newborn babies are carried out but not death registration is done by many of them and similarly, primary education related activities are carried out but exposure tour or maintaining growth chart of the children are not carried out in at least one-third of the anganwadis.
 - There is no clear pattern among the household level data on level of awareness and opinion on role and functioning of anganwadi among 6 taluka. Danta and Vav taluka reported very low level of awareness regarding most of the activities (except vaccination of pregnant women, birth registration, enrolment in primary school and mid-day meal). Tharad comparatively scores higher in almost all activities and there is narrow difference between Vadgam, Dhanera and Palanpur, where average level of awareness is more than 70%. However, the proportion of beneficiaries varies from as low as 0.2% to the highest of about 35-40% (except vaccination of pregnant women, birth registration and enrolment in primary school).

In context of anagawadi, our should be initially on spreading awareness about role and functioning of anganwadi; to be to make them functional effectively and responsibly and to start anganwadi in Danta taluka where it is not allocated.

➤ Health care centre (government and/or private) –

- Of total 50 village, only 3 villages (2 villages of Danta and one of Palanpur taluka) reported availability of government run dispensary and 6 villages have private dispensary; the condition of the dispensary is satisfactory. Of the rest (39) villages, no health care unit available in the village or close vicinity. None of them reported any special facility available for children.
- The HH level data reveals no uniform pattern about awareness, availability and accessibility of health care. Most of the respondents are fairly aware of all schemes related to pregnancy and childbirth. However, availing benefits of various health care activities, Palanpur, Vav, Vadgam, Dhanera and Danta are far behind with not more than 10% of respondents while in Tharad reported about 30% respondents who have availed benefits.

This data indicates that the children with severe health problems would not be attended immediately, which contributes to higher deaths of newborn babies, infants and children between 4 and 10 years.

➤ Disabled children – Looking at proportion of disabled persons, the village and HH level data show some discrepancy, mainly due to concept of ‘disability’. In the HH schedule, many have reported having tuberculosis and paralysis as ‘disability’ to work. The household form deals with five issues related to handicapped children.

- As per village data (50 villages of 6 taluka), in all 153 children below 14 years reported disability. Among total number of children (3838), rate of children with disability is 9.4. The highest number of disable children has been reported from Tharad taluka, followed by Dhanera, Vadgam, Vav and Danta; the least number is from Dhanera taluka. However, it should be noted that of total 50 villages, 36 villages reported children with disability while there is not a single disabled children in 14 villages.
- As per HH data regarding disability, total number of disabled / physically challenged persons is 409 (5.5%) of the total sample. Regarding awareness, Danta reported the lowest level of awareness (26%) who know of a special certificate to handicapped children and 14% know about a scholarship available for handicapped children. In Tharad and Vadgam taluka, more than 50% respondents are aware of special schemes; in Vadgam about 65% are aware of special certificates and mobility aids for handicapped children. Of total 153 disabled children, 81 (53%) belong to OBC (Hindu), 30 (19.6%) to SC, 26 (17%) to ST, 12 (7.8%) to general category and 4 follow Islam.

Looking at data on disability, its awareness and measures taken by the government needs to be improved. Our intervention should consider this as one of the important issue for charting out policy measures and its effective implementation based on awareness and rights perspective rather than merely social welfare measure.

➤ Access to Public Distribution System (PDS) / Fair Price Shops (FPS) –

One would have expected that the knowledge of the PDS is almost universal but the proportion of respondents who are not aware about FPS ranges from 8% in Vadgam to 27% in Danta taluka.

- As the village data shows, only 12 villages (a fourth of total villages) out of the 50 villages have facility of FPS in the village and the rest (38 village residents) have to travel 2 to 5 kms away from the village and the accessibility is a problem; most of them are from Tharad and Dhanera taluka. Thus almost half the respondents do face difficulties in getting food grain at subsidized rate from FPS.
- The HH level data shows that compared to awareness, actual availability of household material (especially food grains) at subsidized rate is much lower, as reported by the respondents. Availability of household material varies from 23% to 77%; among them, the least is in Tharad and the highest in Dhanera. Surprisingly Vav (62%) and Danta (47%) where level of awareness and availability is lower about ICDS and health care, ranks higher in this matter and Palanpur (34%) being a headquarter of the Banaskantha district is far behind the other talukas.

If we consider PDS as a system that provides food security, especially to population living below poverty line, 37% in BK, the limitations of PDS should be overcome and our intervention should plan for future action for food security.

DEVELOPMENT AND GOVERNANCE

➤ Literacy level

- If we take 41% literacy at district level, of total 50 villages, there are 14 (about a fourth of total villages) villages reported lower literacy level than district average. Palanpur, and Vadgam taluka have reported highest literacy level while Dhanera, Tharad and Vav have reported middle level literacy and Danta has reported the poorest literacy level among all talukas in the district. Among various castes, there are few castes which have reported lowest level of literacy in the district. They are – Chamar and Valmiki (belong to SC), Bhil (belong to ST), Rabari, Vagharai, Koli and Patel (belong to OBC - Hindu).

Necessary activities should be started to increase literacy levels in selected (who have very low literacy level) castes and communities for raising literacy level, closed to the state average literacy level.

➤ Primary education –

- Village level data shows that all the villages have primary school but none of them have secondary or higher secondary school in the village. Of them, 38 villages have primary schools in a good condition, poor in 4 villages and OK in 8 villages. The enrolment of girls is higher than boys as well as the retention in the schools is higher among girls. We do not have data of 11 villages in this regard and therefore generalization is avoided.
- In case of awareness related to primary education, all the respondents are well aware of them. More than 90% respondents feel that the role of the state in primary education is necessary; however, 15% in Danta feel that 'the role of the state needs improvement',

which shows that they are not satisfied with the role played by the state at present in the education system.

➤ Role and functioning of government officials / executive

- The HH level data mainly focused on awareness and role of various government officials and it is very clear that most of the respondents know school teachers, talati, ANM and malaria workers and sometimes gramsevak, but do not have knowledge about officials like social welfare inspector who looks after protecting children from child marriage and child labour. the respondents also do not know about agriculture extension officer or any official from Land Revenue Office. The respondents of Palanpur, Tharad, Vav and Danta need to be awakened about their rights and role of executive in providing them basic amenities and support related to asset like land and prevention from social ills.

In the context of development and governance, the respondents are well aware of primary education and government functionaries regarding education and health care but over all awareness about ‘executive’ and its role in development of the village and the individual / family is not clear. Therefore our activities should incorporate such components for strengthening awareness and actions that finally make the executive functional.

SOCIALIZATION

In general, the respondents see a much more essential role of the state in the area of education and healthcare while the role is perceived as marginally less important in the areas of educational and value building activities and activities for a better future. In both the types of activities the role of society is envisaged as much more proactive and involving direct intervention, however, some respondents have stressed that it equally important to incorporate various development activities as educational and co-curricular programmes. Perhaps the feeling may even be that the role of society is to make the state more active.

If we see primary education as one of the benchmark processes for socialization, awareness regarding various activities that develops children’s brains and make them good citizens, the respondents feel that the state should initiate but role of the society is very crucial in sustaining such efforts. We need to identify activities that impart knowledge and skills, such as organizing science fairs, spreading awareness about important astronomical, geographic, social and political event and starting library at every village.

D. PROTECTION

- Gender discrimination - The HH data indicates gender discrimination is observed and expressed by the respondents to large extent, for example, respondents of Tharad and Vadgam taluka have accepted it as more than 80% while Dhanera and Vav have accepted it as 64-65%; only Danta and Palanpur have accepted it as low as 27-28%. Danta being a tribal dominated taluka, may be equality between sons and daughters may not be

prevalent. A larger proportion (42%) does believe that females are discriminated against on grounds of customs, not accepting discrimination in bringing up of sons and daughters.

- **Addiction among children** – The respondents of HH survey have responded about mainly four types of addictions, namely, tobacco chewing, smoking, drinking liquor and consuming drugs like brown sugar, opium. The large number (almost 90%) of respondents are aware of these addiction and have informed that it is prevalent in large extent (30 to 100%) across all taluka. Compared to tobacco chewing and smoking the consumption of liquor and drugs are almost half but it is as high as 10 – 30%. The largest proportion of child addicts is in Danta. In every village at least some children are addicted both to liquor and tobacco. This is clearly attributable to drinking being part of tribal custom. This is actually supported by the fact that very few respondents in this taluka see it as a problem. In fact respondents of Dhanera are more sensitive to the existence of this problem in their villages, e.g. almost 47% of them feel that tobacco-chewing is a problem for 20-50% children. In Palanpur and Vav the issues does not seem to be a very major one, as data regarding actual addiction match with those of people’s perception regarding the issue.
- **Engaging children in economic activities by the family** – Awareness and prevalence of this practice cuts across all talukas to great extent (38 to 100%), wherein the Tharad and Vav taluka reported the highest and Danta (62) as well as Vadgam (56) reported the lowest among all. However, we haven’t come across data that proves greater involvement or working of girl children than the boys, perhaps all children contribute to household work, amy be the work differs with their role in the family.
- **Illiteracy and drop out from school** - Awareness and prevalence of this practice cuts across all talukas to great extent (31 to 100%), wherein Tharad and Vav taluka reported the highest and Danta (45) reported the lowest drop out in comparison to other talukas.
- **Child sacrifice (due to religious belief)** – The level of awareness and prevalence of this problem is more crucial than looking at it with numbers or percentage. All the talukas have reported its occurrence in last 10 years, which varies from one to nine times.
- **Discrimination with SC children** – This issue has remained controversial and in some surveys, it has not been reflected as a practice or problems in past. Fortunately, in this survey, it has been shared by most of the respondents across all talukas; the highest by Dhanera, Tharad and Vav (97 to 100%) and little less in Palanpur (81%). Danta being tribal dominated taluka, proportion of SC children is too low and therefore the reporting is too low in numbers.
- **Legal provisions and its status in curbing child related issues (child marriage, rape or physical assault, child labour, child kidnapping and their engagement in anti-social activities)**

This issues do not only belong to legal arena, it directly affect social fabric and future of children of present generation. In this context, the following data is revealing.

- **Child marriage** – Level of awareness varies from 17 to 100% in this regard and therefore the reporting of occurrence also varies from as low as 0.8% to as high as 56%. The most important point is that the respondents have confirmed prevalence of this practice. In fact, very low awareness about inspector appointed by Social Welfare Department and its powers to curb this practice, confirms that despite its prevalence, people do not see as an issue and its adverse consequence of the young generation.
- **Child abuse – rape or physical assault** – The issue of rape can child molestation is a sensitive one. Since it is a source of social stigma it is likely that data may not entirely reveal the truth in these issues. However we present the observations of the respondents with this prior caution.

In most talukas the overwhelming majority of the respondents state that the issue is non-existent, however in Tharad 15% respondents state that rape occurs in 'less than 5%' frequency in their villages, and the proportion of people stating this about child harassment is the same. In Vav almost all respondents state that child harassment occurs 'less' or to a small extent. There are of course no village level data about these incidents and therefore it is not possible to crosscheck it with objective facts.

- **Child labour** - Respondents in Dhanera and Tharad are to a greater extent aware that child labour does exist in their villages. Tharad does have a fairly high proportion of children working (60%) but in the Dhanera villages this proportion is relatively small (32%).
- **Child kidnapping** - Regarding exchange of children from foreign countries, kidnapping, sale of children and flesh trade, and child sacrifice, the general opinion is that these activities do not happen. Apart from Danta and Vadgam where the proportion is comparatively low (around 50%), in the other talukas most of the respondents are aware of these issues. However the overwhelming majority of them state that there have been no cases of such incidents in the last 10 years in their villages. The one exception is in Vav where 11% of the respondents have reported kidnapping incidents having taken place, and 9% respondents report the existence of flesh trade.
- **Engagement of children in criminal activities** - Majority of respondents are aware of these issues. However again very few give any evidence of such incidences occurring in their village in the last 10 years. The exceptions are Vav and Tharad, in which a sizeable proportion of respondents have noted such incidents happening. In Vav for example 12% note incidences of stealing and selling drugs by children; another 22% say that children have been involved in antisocial activities such as begging. In Tharad the figures reported are even higher – though only 7% find children involved in selling drugs, 26% find

children involved in stealing and as high as 39% see children involved in begging and antisocial activities.

Knowledge of child related laws is relatively low in Danta (between 47 and 56%). On the other hand in Palanpur and Vadgam the proportion how knows about these laws is between 70 and 80% while in the other two talukas viz. Dhanera, Tharad and Vav, almost all the respondents (higher and 95%) know about the existence of these laws.

Suggestions

Based on BLD, the following activities could be undertaken as part of intervention and future planning.

Indicators	Planning intervention		
	Availing / Improving existing structures / facilities	New issues – have come up through BLD	Proposed strategies and activities
Survival A. MMR and IMR B. ICDS – anganwadis and their activities C. Health care centre (government and/or private) D. For disabled children E. Access to PDS / Fair Price Shops	Need to improve health care system and anganwadi to cater to needs of mother and children ➤ 5 villages have no anganwadi ➤ Total 153 disable children ➤ 12 villages have FPS in the village, no village in Danta taluka reported FPS.	Highest among other districts in the state ➤ Create awareness on MMR, IMR ➤ Find out reasons for higher MMR, IMR ➤ Create inter-link between lack of ICDS, health care and FPS to reduce MMR, IMR	➤ 262244 కుటుంబ సంరక్షణ కేంద్రాలను ఏర్పాటు చేయడం ద్వారా మరణాల నివారణను ప్రోత్సహించడం, అధిక మరణాల నివారణను ప్రోత్సహించడం కుటుంబ సంరక్షణ కేంద్రాలను ఏర్పాటు చేయడం ➤ ఆరోగ్య కేంద్రాలను ఏర్పాటు చేయడం ద్వారా మరణాల నివారణను ప్రోత్సహించడం ➤ ఖరీదైన వస్తువులను ఉచితంగా పంపిణీ చేయడం ద్వారా మరణాల నివారణను ప్రోత్సహించడం ➤ కుటుంబ సంరక్షణ కేంద్రాలను ఏర్పాటు చేయడం, కుటుంబ సంరక్షణ కేంద్రాలను ఏర్పాటు చేయడం ద్వారా మరణాల నివారణను ప్రోత్సహించడం
Development and Governance A. Literacy level (enrolment and drop out rate) B. Primary Education and related facilities and support from the government (primary school, scholarship) C. Condition of disabled children	Of 50, 14 villages have less than 40% literacy (below district average) ➤ Enrolment of boys higher than girls but drop out of boys (about 50%) is higher than girls ➤ Most of the primary schools are in good condition; focus on the schools in poor condition	➤ Need to collect separate data about situation of disable children and their status ➤ Find out reasons for higher drop out among boys and their engagement in household cores	➤ Activate alternative mechanism for functional literacy, which would assist children for vocational skill ➤ Efforts for increase in literacy through informal system
Socialization	➤ Very little	➤ Critical	➤ Start activities for

<p>A. Leadership B. Awareness of parents and children about various avenues</p>	<p>awareness on these issues</p>	<p>understanding on the present situation of children and their upcoming in various fields</p>	<p>imparting knowledge – inbuilt as co-curricular activities in the school ➤ Organize events - science fair, competitions, library and reading, etc.</p>
<p>Protection A. Gender discrimination B. Legal provisions and its status Child labour C. Child abuse D. Addiction E. Child trafficking</p>	<p>➤ Gender discrimination prevails ➤ No legal provisions provides protection against any social ills like child labour, child marriage</p>	<p>➤ Addiction of tobacco among children is as high as 30%; alcohol consumption is as high as 15-20% ➤ A few issues of child rape and physical abuse are reported ➤ No awareness on child trafficking</p>	<p>➤ Engage children in meaningful activities so that they enjoy childhood and keep them away from addiction ➤ Address issues of abuse and rape through opinion building at village level</p>

Appendix 1: Convention on the Rights of the Child

Article 1. Everyone under 18 years of age has all the rights in this Convention.

Article 2. You have these rights, whoever you are, whoever your parents are whatever colour, religion or caste you are, whatever sex or community you are, whatever language you speak, whether you have a disability, or if you are rich or poor.

Article 3. Whenever an adult has anything to do with you, he or she should do what is best for you.

Article 6. Everyone should recognize that you have the right to live.

Article 7. You have the right to have a name and when you are born your name your parents names and the date should be written down. You have the right to a nationality, and the right to know and be cared for by your parents.

Article 9. You should not be separated from your parents unless it is for your own good. For instance, your parents may be hurting you or not taking care of you. Also if your parents decide to live apart, you will have to live with one or the other of them, but you have the right to contact both parents easily.

Article 10. If you and your parents are living in separate countries, you have the right to get back together and live in the same place.

Article 11. You should not be kidnapped, and if you are, the government should try their hardest to get you back.

Article 12. Whenever adults make a decision that will affect you in any way, you have the right to give your opinion, and the adults have to take that seriously.

Article 13. You have the right to find out things and say what you think through speaking, writing making art etc, unless it breaks the rights of others.

Article 14. You have the right to think what you like and practice whatever religion you want. Your parents should help you learn what is right and wrong.

Article 15. You have the right to meet, make friends with and form clubs with other people unless it violates the rights of others.

Article 16. You have the right to a private life. For instance, you can keep a diary that other people are not allowed to see.

Article 17. You have the right to collect information from radio, newspapers, television, books etc from all around the world. Adults should make sure that you get information you can understand.

Article 18. Both of your parents should be involved in bringing you up and they should do what is best for you.

Article 19. No one should hurt you in any way. Adults should make sure that you are protected from abuse, violence and neglect. Even your parents have no right to hurt you.

Article 20. If you do not have any parents or if it is not safe for you to live with your parents, you have the right to special protection and help.

Article 21. If you have to be adopted, adults should make sure that everything is arranged in the way that is best for you.

Article 22. If you are a refugee (meaning you have to leave your own country because it is not safe for you to live there) you have the right to special protection and help.

Article 23. If you are disabled, either mentally or physically, you have the right to special care and education to help you grow up in the same way as other children.

Article 24. You have a right to good health. This means that you should have professional care and medicines when you are sick. Adults should try their hardest to make sure that children do not get sick in the first place by taking good care of them.

Article 25

Article 26

Article 27. You have the right to a good enough standard of living. This means that parents have the responsibility to make sure you have food, clothes, a place to live, etc. If parents cannot afford this, the government should help.

Article 28. You have a right to education. Primary education must be free and you must go to primary school. You should also be able to go to secondary school.

Article 29. The purpose of your education is to develop your personality, talents and mental and physical abilities to the fullest. Education should also prepare you to live responsibly and peacefully in a free society, understanding the rights of other people and respecting the environment.

Article 30. If you come from a minority group you have the right to enjoy your own culture, practise your own religion and use your own language.

Article 31. You have a right to play.

Article 32. You have the right to be protected from working in places or conditions that are likely to damage your health or get in the way of your education. If somebody is making money out of your work you should be paid fairly.

Article 33. You have the right to be protected from illegal drugs and from the business of making and selling drugs.

Article 34. You have the right to be protected from sexual abuse. This means that nobody can do anything to your body that you do not want them to do, such as touching you or taking pictures of you or making you say things that you don't want to say.

Article 35. No one is allowed to kidnap or sell you.

Article 37. Even if you do something wrong no one is allowed to punish you in a way that humiliates you or hurts you badly. You should never be put in prison except as a last resort and if you are put in prison you have the right to special care.

Article 38. You have a right to protection in times of war. If you are under fifteen you should never have to be in an army or take part in a battle.

Article 39. If you have been hurt or neglected in any way, for instance in a war, you have the right to special care and treatment.

Article 40. You have the right to defend yourself if you have been accused of committing a crime. The police and the lawyers and judges in court should treat you with respect and make sure you understand everything that is going on.

Article 42. All adults and all children should know about this Convention. You have a right to learn about your rights and adults should learn about them too. The Convention on the Rights of the Child has 54 articles in all but most of the rest are about how adults and government should work together to make sure all children get all their rights.

Appendix 2: Indicators (suggestive areas) and framework for child rights

SURVIVAL

1. Infant deaths
2. Child deaths
3. Immunization (f)
4. Malnutrition (g)
5. Availability of PHC/SC
6. Accessibility of PHC/SC
7. Availability of AWC (ICDS) programme midday meal (h)
8. Accessibility of AWC (i)
9. (i) Birth Registration
(9.a) Death Registration
10. Caste certificate
11. Ration Card
12. Access to Public Distribution System
13. Quality
14. Percentage of Children in AWCs – gender and caste
15. Pvt. Health Services
16. Out of pocket expenditure on health
17. Access to safe drinking water
18. Percentage of families with land (Criteria??)
19. Percentage of families migrating due to livelihood reasons
20. Panchayat having health committee
21. Children with disability (gender, caste, age wise)
22. No. of families – BPL, APL
23. Availability of trained dai /ANM
24. Midday meal – state govt.

ICDs Project

- a. RCH – Reproductive and Child Health
- b. Pregnant Women
- c. Development of -----
- d. Nutrition level
- e. Child birth
- f. Immunization
- g. Malnutrition
- h. Growth rate
- i. Enrolment in the school
- j. Death registration

DEVELOPMENT

1. Percentage of children in schools – Gender and caste wise
2. School infrastructure
3. Children facing discrimination in schools
4. Children covered through pre primary centers – male, female
5. Children covered through NFEs - Male, Female

6. Percentage of children from minorities and dalits get benefited through pre primary and NFE
7. No of pre primary and NFE supported through private bodies.
8. Private schools – NOS, fees, quality, access.
9. No. of formal government schools closed down due to private schools or SSAs
10. Percentage of children enrolled in formal schools – caste and gender wise.
11. Percentage of retention of children in formal schools – caste and gender wise.
12. Percentage of schools with active PTA / VECs
13. Percentage of drop out reasons for children dropping out of schools

PROTECTION

1. Percentage of child labours
2. No of child marriage (engagement cases recorded)
3. Cases of child abuse
4. No of community based groups in operational area.
5. Child insurance/saving
6. child trafficking
7. Benefits of government schemes
 - (i) Scholarship for study
 - (ii) Any incentive / project IPD
8. Industries where children (below 18 yrs) are working / earnings
9. Traditional occupations, skills acquired for income generation
10. Livelihood options – agriculture, traditional occupation, skills petty business
11. Labour practices – bonded labour, for agriculture, animal husbandry
12. Implementations of laws – PNDT, Sex determination, juvenile justice act (Crime prevention), Child Marriage act, Child Labour act.
13. Child delinquency – crime (remand home)
14. Acquiring language skills
15. Acquiring logic – mathematics
16. Hygiene –sanitation
17. Food habits, and intake (nutrition requirement)
18. Socialization
 - (i) Celebration of festival
 - (ii) Organizing events where children participation is encouraged e.g. Yatra
 - (iii) Fairs
 - (iv) Measures for child security
19. Equity share of each community to resources
20. Common properties – availability, accessibility
21. Schools participating in various events – (sports, elocution) at various levels (taluka, district, state)
22. For Adolescent children – girls / boys

GOVERNANCE

1. Gram Panchayat – VEC, VHC
2. Role of Sarpanch
3. Role of Talati / Patwari
4. Role of Gram Sevak

5. PTA
6. Traditional mechanism for governance, justice delivery mechanism,
7. Role of political party
8. Role of traditional, political leader – dalit, non dalit
9. Politicization among people – dalit, non-dalit
10. Government's provisions for children
 - (i) Social defense / department
 - (ii) Appointment of government official
 - (iii) Laws / Legislation
 - (iv) International charter signed.
 - (v) UNICEF
 - (vi) Government man hostels, schools for education etc.

Framework for child rights

This framework is employed for the following objectives:

- Preparing tools for collecting baseline data from selected villages and households for articulating child rights, and
- Articulating constituents of child development and rights, by and large rural children.

The following are the major components of the child rights:

The child rights aim at better quality of life of children in India, especially in Gujarat state. Better quality of life includes –

13. Good health

- a. Birth – not premature
- b. Death – infants (0-3 years), children (4-10 years), youngsters (11-14 years)
- c. Immunization
- d. Nutrition level / Malnourishment
- e. Growth chart
- f. Safe drinking water – availability and accessibility
- g. Food intake, its quality
- h. Midday meal – availability and accessibility
- i. Availability and accessibility to anganwadi and its activities regarding child development and pre-primary education
- j. Facilities for health care

14. Good education

- a. Availability and accessibility of facilities for primary education, especially to primary school in the village / close vicinity
- b. Enrolment and drop out in primary school
- c. Language & logic development
- d. Exposure through text books and interaction with teachers
- e. Participation in co-curricular / extra-curricular activities

- f. No discrimination based on gender, caste, class
 - g. Active participation of parents, teachers and elected village leaders
 - h. Skills for economic activities
 - i. Literacy that encourages other skills and perspective building through exposure
15. **Gender discrimination** and its manifestations at various levels, various spheres
16. **Good exposure through socialization** or participation of children in social, religious and cultural, community activities
- a. Participating in fairs
 - b. Participating in festivals
 - c. Participating in extra-curricular activities like sports, various competitions (elocution, essay writing), learning languages, music, dance, etc.
 - d. Accessibility to all public spaces without discrimination based on gender, caste, class (e.g. temple entry, community water sources, tea stalls or food joints, services like hair cutting, etc.)
17. **Acquiring qualities that make them a responsible citizen of India**
- a. Awareness of laws and legal provisions
 - b. Awareness of ecology and environment and issues related
 - c. Awareness about political structure and its functioning – its availability and accessibility to their parent / families
18. **Availability and accessibility to**
- a. Basic amenities like Drinking water, Electricity, Educational facilities, Health care facilities, Transportation, Telecommunication, Roads
 - b. Civic amenities like ration card and fair price food grains and household goods, voting rights
 - c. Common properties or natural resources shared by the community / village
 - d. Private properties like shelter (house), land, vehicle, livestock, workplace
 - e. Social security
 - f. Various institutions
 - g. Financial assistance
19. **Political participation of their parents to influence democratic institutions –**
- a. Able to vote at various levels – village, taluka, district, state and national level
 - b. Able to contest election at any level
 - c. Able to be a member of any political party
 - d. Able to carry out any political activity – through political party or as an individual
 - e. Able to enjoy civic rights like following religion of choice, carrying out economic activities at any place in India, etc.
20. **Awareness about sexual and reproductive activities – rights and duties**
- a. Legal provisions regarding sexual or physical abuse, rape, molestation
 - b. Sexually transmitted diseases like AIDS, herpes, syphilis, etc.
21. **Stay away from addictions** like

- a. Tobacco,
- b. Drugs,
- c. Alcohol

22. Skills to be acquired for vocation or for economic activities, other than formal or informal education

- a. To prevent unskilled labour
- b. To get protection from bonded labour, seasonal migration, economic exploitation
- c. To be into service sector or tertiary sector or informal sector

23. Awareness and sensitivity towards special groups like

- a. Orphans
- b. Delinquents
- c. Children with disability – mentally challenged, physically challenged
- d. Street children
- e. Children living with step parent, etc.

24. Awareness about laws and legal provisions and its implementation for protection

- a. Laws on labour – preventing child labour
- b. Laws on education – free and compulsory primary education
- c. Laws on Juvenile justice
- d. Laws on child marriage
- e. Other relevant laws like trafficking, child selling, engagement as commercial sexual worker, gender discrimination

Appendix 3: List of villages for the survey (of village and household)

No	Name of Taluka	Name of Village	Total Population	Total no. of families	Total population According to census		No. of families covered under survey			
					SC	ST	SC	ST	OBC	Others
1.	Danta	Zumaruru	1,929	301	0	1,929				
2.		Umbara	352	48	0	352				
3.		Zumfali	480	71	0	480				
4.		Chori	644	89	0	636				
5.		Nanitundia	759	104	0	707				
6.		Samaiya	796	127	0	796				
7.		Ruppura	659	107	0	659				
8.		Dhagadia	1,052	166	0	1,050				
9.		Ganapimpali	739	110	0	731				
10.		Kodravi	646	107	0	646				
11.	Dhanera	Satarwada	943	137	74	0				
12.		Virol	1,212	202	239	14				
13.		Khaparol	792	102	50	93				
14.			11,003	1671	363	8,093				

No	Name of Taluka	Name of Village	Total Population	Total no. of families	Total population According to census		No. of families covered under survey			
					SC	ST	SC	ST	OBC	Others
15.	Dhanera	Jivana	1,451	215	117	103				
16.		Nanameda	1,065	171	347	114				
17.		Janali	842	129	95	293				
18.		Rampura chhota	1,197	200	160	328				
19.		Lelava	361	54	25	0				
20.	Vav	Dhanana	870	161	204	1				
21.		Bhachali	1,603	267	440	47				
22.		Bhankhod	476	83	48	5				
23.		Savpura	660	110	225	0				
24.		Lodrani	1,064	171	305	0				
25.		Radosan	1,576	266	427	2				
26.		Arajanpura	872	145	121	0				
27.		Kumbhardi	2,439	212	485	0				
28.	Tharad	Padadar	759	117	57	0				
29.		Janadi	1,118	160	170	181				
30.		Kamali	1,710	207	137	0				
31.		Zeta	1,656	201	143	0				
32.		Abhepura	703	109	128	0				
33.		Dolatpura	780	130	183	99				

34.		Lodhnor	1,403	227	235	0				
35.		Antrol	1,667	255	134	0				
36.	Vadgam	Kodrali	810	152	185	112				
37.		Bhangrodia	1,313	279	163	6				
38.		Samsherpura	805	178	119	48				
39.		Thur	1,380	263	174	0				
40.		Bhalgam	1,005	198	286	0				
41.		Bhukhala	848	163	211	0				
42.		Karsanpura	970	186	127	5				
43.		Pandava	596	122	109	0				
44.	Palanpur	Virpur	856	176	221	0				
45.		Kamalपुरा	1,781	347	48	224				
46.		Bhadarpura (khod)	1,071	215	213	19				
47.		Angola	1,027	192	187	59				
48.		Ambaliyal	1,158	247	281	131				
49.		Gopalपुरा	261	51	77	43				
50.		Sangla	817	163	224	127				
51.		Manpur	549	120	103	78				
52.			39,519	6642	6914	2025				

Appendix 4
**Proportion of children aged between 0 and 6 years (districtwise) to total population in
 Gujarat state**

Name	Total Population	Total Population aged 0-6 Years	
Kachchh	1583225	254448	16.07
Banaskantha	2504244	468394	18.70
Patan*	1182709	190192	16.08
Mahesana	1837892	258139	14.05
Sabarkantha	2082531	324716	15.59
Gandhinagar	1334455	185696	13.92
Ahmedabad	5816519	769666	13.23
Surendranagar	1515148	247294	16.32
Rajkot	3169881	427184	13.48
Jamnagar	1904278	274268	14.40
Porbandar*	536835	76099	14.18
Junagadh	2448173	369691	15.10
Amreli	1393918	198657	14.25
Bhavnagar	2469630	401780	16.27
Anand *	1856872	255231	13.75
Kheda	2024216	296430	14.64
Panch Mahals	2025277	341284	16.85
Dohad *	1636433	333948	20.41
Vadodara	3641802	493196	13.54
Narmada *	514404	80968	15.74
Bharuch	1370656	194025	14.16
Surat	4995174	699672	14.01
The Dangs	186729	36547	19.57
Navsari *	1229463	149283	12.14
Valsad	1410553	205596	14.58
	50671017	7532404	14.87

