

CHAPTER - 23

EMPOWERMENT OF WOMEN & DEVELOPMENT OF CHILD

23.1 In the last three decades there has been rapid reduction in poverty and substantial increase in HDI of Rajasthan. The number of people below poverty line has declined by 3.1 million between 1993-94 to 1999-2000. Literacy rate particularly among women has shown a remarkable progress. In rural areas women literacy has gone up from 9.2 (1991) to 37.74% (2001). Although, the improvement is marginal but the sex ratio as indicated in the Census 2001 has been the best in the last 100 years. NFHS-3 data shows a considerable reduction in IMR and Malnutrition among children below 3 year over NFHS-2.

23.2 IMR, MMR, malnutrition among children, high rates of anemia among children and women, high incidence of childhood diseases, child marriages, declining sex ratio of girls under 6, socio economic status of women etc. are still some of the areas which need focused attention and concerted efforts for improvement. Focus on the issues concerning women & children make it possible to bring any meaningful development in society.

23.3 ICDS programme has expanded in the State during the last five years. The number of ICDS projects, which was 191 in 1998-99, has gone up to 304. Similarly population coverage under ICDS has also increased from 56% to about 95%. This was possible because of the interventions like World Bank Assisted ICDS-III Project and new approvals given by the Government of India. As a consequence the percentage of malnutrition has gone down, safe motherhood practices have increased and most importantly infant mortality rate (IMR) has gone down. A lot is still required to be done for the health, nutrition, education, protection and development of children.

Challenges:

- **Infant Mortality Rate (IMR)** - It is true that IMR has reduced by 17 points in Rajasthan from 80 (SRS-2001) to 63 per 1000 in (SRS-2008), it is still higher in comparison to the national average of 53 (SRS-2008). However, the goal is to reduce it at least up to 32 per 1000 live births by 2011.
- **Maternal Mortality Ratio (MMR)** was 670 per lac live births in 1998-99. It has been decline up to 338 (SRS 2004-06) as per recent assessment. However, the goal is to reduce it at least up to 148 per lac live births by 2011.
- **Anemia-** As per NFHS-3, 53% women in the State are found to be suffering from anemia of which 2% are severely anemic. On the other hand prevalence of anemia among children accounts for 80% of whom

10% are severely anemic. The goal is to reduce it at least upto 24.3 % of 2011.

- Anemia among women & children is one of the major causes of high IMR & MMR. It has detrimental effects on the health of women and children and also results in an increased risk of premature delivery and low birth weight. In children it can result in impaired cognitive performance and may adversely affect behavioral and motor development, coordination and language development etc.
- **Malnutrition** is also high in Rajasthan. Though it has shown some improvement, malnutrition has reportedly come down to 44% among children 0-3 years of age (NFHS-3) from 51% (NFHS-2), it is still very high from the desired level. However, the goal is to reduce it at least up to 25.3 % by 2011.
- The status of exclusive breast-feeding up to 6 months is not satisfactory as per ICDS base line survey 2000 it was 10.01% which has risen to 45.01% (ICDS end line survey 2005).
- Early initiation of breast-feeding including colostrums feeding is very low. This has to be improved upon for saving children from vicious circle of malnutrition-morbidity-severe malnutrition-mortality and so on and so forth.
- Prevention of child marriages and strict enforcement of Child Marriages (Restraint) Act.
- Strict enforcement of PNDT Act for prevention of feticide.
- Facilitating access to health services, whenever required particularly in emergencies.

Barriers:

23.4 A variety of socio economic barriers prevent the access of benefits by the targeted groups:-

- The current practices and mindset does not allow easy adoption of new initiatives meant for benefiting women, children and the society at large. Though the situation has changed old customs and practices not only persist but also guide daily lives of the people.
- Gender bias and disparity on account of sex and caste play a dominant role in the society.
- Low literacy rate particularly among women, social customs forces them to play a secondary role in the family with no independent decision making.
- Adverse geographic and climatic conditions-such as persistent drought, lack of water resources- force a section of population to be on perpetual migration from one place to another.

- Scattered habitations particularly in desert and tribal hilly areas.
- Lack of regular employment, poverty creates conditions where children and women do not get adequate care and support.
- Ignorance about nutritional and health needs of women and children and all available services.
- Difficulties in access to the available services or disinterest in taking advantage of the available services or aversion towards services due to socio-cultural reasons.

Suggested Objectives for the Annual Plan 2011-12:

23.5 In consonance with the goals and objectives laid down therewith following steps/ strategies have been evolved during Annual Plan:-

- Combat malnutrition by ensuring adoption of new WHO standards in all the districts and weighing of all the children.
- Integrated Management of Neonatal & Childhood Illness (IMNCI) system should be strengthened and expanded to generate awareness regarding prevention from and treatment of diseases such as ARI, diarrhea and measles etc.
- Infant and Young Child Feeding (IYCF) practices to be promoted. ICDS and health functionaries will be trained for better counseling and support to families specially mothers.
- Monthly Maternal Child Health & Nutrition Day (MCHN) system to be strengthened with quality. The assembly could further be used for dissemination of information on other important matters like HIV/AIDS, IDD and use of Iodized salt.
- Management of severely malnourished children- establishment and strengthening of surveillance centers-early identification of malnourished children- and rehabilitation.
- Local cereals, vegetables and fruits may be promoted for improving nutrition.
- Food availability and nutritional adequacy through utilization of available food resources, application of effective local food technology and strengthening of the public distribution system specially in the case of natural or man made disaster such as drought, famine etc.
- Prevention and treatment of malnutrition is to be taken as first step for preventing morbidity and mortality among children. Malnutrition Treatment Centers (MTCs) have been established at district/block level hospital in all districts. Strengthening the referral system and linkages to the ICDS program.
- Strengthening monitoring of ASHA-Sahyogini programme to improve the health indicators.

- Provision of infrastructure to Anganwaris in convergence with other departments.
- Emphasis of hygienic conditions and environmental sanitation through awareness generation programmes.
- Efforts will be made to achieve inter sectoral coordination and convergence especially with Medical & Health Department, Education, PHED and Panchayati Raj.
- IFA tablets and TT immunization to be provided to at least 90% pregnant women.
- Antenatal services to cover all the pregnant women.
- Coverage of pregnant women and children particularly belonging to socio- economically weaker sections of the society under supplementary nutrition programme at AWC.
- Educating families for taking care of pregnant women.
- All pregnant women and children to be registered at the Anganwari center.
- Infant and maternal mortality auditing to be developed with the Medical and Health dept to assess the causes of death within risk period of delivery. This will help in devising programme/ strategies for preventing such incidence.
- Pre school education component to be strengthened. Community participation and involvement to be promoted for PSE and for providing equipment specially play material etc.
- Shifting of rented Anganwaris in the Primary/ Upper Primary schools to provided adequate space and conducive atmosphere for better and joyful learning.
- Community to be made aware of the ICDS services and increase their involvement for proper functioning of the Anganwari centres.
- New programme i.e. Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (SABLA) etc will be introduced to reduce IMR and MMR.

23.6 Financial Progress of Annual Plan 2009-10 & 2010-11

(₹ in lac)

Item	Actual Expenditure in 2009-10	Anticipated Expenditure in 2010-11
1 Supplementary Nutrition	15232.42	18630.33
2 Honorariums to Sahayoginies	1941.46	2260.00
3 Honorariums to AWW	1560.93	2300.00
4 Construction of AWC & others	1442.34	1199.53

Item	Actual Expenditure in 2009-10	Anticipated Expenditure in 2010-11
5 Supply of Utensils at AWCs	25.06	51.00
6 Anganwari Kalyan Kosh	119.40	146.00
7 Rajiv Gandhi Kishori Balika Poshar Yojana SABLA	0.00	2365.34
8 Adm. charges for ICDS(10% Share)	2271.45	3047.82
9 NPAG	173.08	0.00
Total (A)	22766.14	30000.02
(B) CSS		
1 ICDS General	20445.47	27430.40
2 Supplementary Nutrition	15232.42	32382.57
Total (B)	35677.89	59812.97
Grant Total (A+B)	58444.03	89812.99

23.7 Physical Progress of 2010-11 (upto Nov.,10)

Items	Unit	Target	Ach.	Percent
1 Functioning of ICDS Project	Nos.	304	304	100.00
2 Functioning of AWC	Nos.	61119	57142	93.49
3 Selection of AWW	Nos.	61119	54468	89.11
4 Selection of AWH	Nos.	54915	50159	91.34
5 Selection of Sahyoginies	Nos.	54915	37955	69.12
6 SNP Beneficiaries	in lac	48.91	35.32	72.21
7 PSE Beneficiaries	in lac	16.88	11.20	66.35
8 Observance of MCHN Day	Nos.	54915	43616	79.42

Financial requirement of Annual Plan 2011-12

23.8 The strategy of the Eleventh Five Year Plan is based on reaching unreached children and mothers through ICDS programme. Emphasis is laid on the strengthening of the on going scheme and also provision of additional inputs in the service. 10066 additional anganwaris have been sanctioned during financial year 2009-10. All these anganwaris will be operational by 2011-12. The proposed outlay for the Eleventh Plan is of the tune of ₹ 91075.01 lac, out of which ₹ 32500.01 lac will be proposed for annual plan 2011-12. The activity wise details are as under:-

A-Continuing Schemes

Supplementary Nutrition

23.9 Supplementary Nutrition to the malnourished children of the age group of 6 months to 6 years and pregnant and lactating women will be provided at the Anganwadi Centers for 300 days in a year.

Financial implications on SNP

23.10 Now the nutritional scenario of the state has been changed. Only one district namely Banswara remains under WFP. Remaining 32 districts have been brought under supply from State Govt. Hot cooked nutrition is being provided to 3-6 year children at AWCs through SHGs/ Mothers Committees/Women cooperatives. Nutrition is being provided through Mothers Committees and SHGs respectively. Pregnant and lactating mothers are being served with hot cooked nutrition under "Janani Kalewa" in 10 urban projects with financial support of respective Local bodies. Nutrition provided to 0-3 year age children is prepared by local SHG in 185 projects during the current financial year.

23.11 GoI has revised the funding norm of nutrition in 2009-10. Now minimum unit cost is ₹ 4/- per day per beneficiary for supplementary nutrition to malnourished children. For severely malnourished children this rate is ₹ 6.00 and ₹ 5.00 for P&L mothers. It is estimated that around 61.11 lac children and mothers will be enrolled for supplementary nutrition in the state during the 2011-12 year. Keeping in view the plan ceiling, ₹ 22473.65 lac is proposed presently under state plan.

Administrative charges for ICDS (10% State Share)

23.12 As GOI has revised in funding pattern of ICDS services (General) form 100% CSS to 90:10 ratio. In the year 2011-12 Adm. Charges for ICDS (10% Share) an amount of ₹ 3129.12 lac is required.

General ICDS Trainings (10% state share)

23.13 In the year 2011-12 jobs training has to be given to 200 L.S. and refresher Training has to be given 200 L.S. similarly job training will be given to 7000 AWW and refreshers training will be given to 3000 AWW. The orientation training will be provide to 10000 AWH

23.14 In Addition to above renew monthly growth chart leadership training and MLTC/ AWTC will be provided. For this purpose ₹ 74.22 Lac is required for the year 2011-12.

Appointment of Sahyoginies

23.15 To strengthen the ICDS services at grass root level and regularly counsel the families of ICDS beneficiaries, an additional honorary Worker named "Sahyogini" has been sanctioned at the 54915 anganwari centres of the state. In first phase, 26521 sahyoginies were sanctioned during 2004-05, 9300 during the 2005-06 and remaining 11041 has been provided during last year of tenth five year plan and 1510 has been sanctioned in 2008-09 year. A lump sum honorarium of ₹ 500.00 per month is paid for her services. The task of ASHA under NRHM is also entrusted to Sahyoginies. In year 2009-10 6543 have been sanctioned. For this purpose ₹ 14579.07 lac is proposed in XIth Plan out of which ₹ 2500 lac is proposed for 2011-12.

Honorarium to AWW and AWH

23.16 To strengthen the ICDS services and looking to work rendered by the AWW and AWH the GoR has increased the honorarium of AWW by ₹ 200 and ₹ 100 for AWH during the budget announcement of 2009-2010. The Budget provision has been accordingly substantially increased to pay the honorarium. For this purpose ₹ 3077.00 lac will be required for the next financial year 2011-12.

Anganwari Welfare Fund

23.17 A scheme regarding welfare of Anganwari personnel has been implemented in the state since 2005-06. According to provisions of the scheme 25% amount will be contributed by state govt. against the annual deposits of these women. For this purpose a benevolent fund has been established under administrative control of this department in association with LIC. In all, 1.71 lac women employed on an honorarium basis under ICDS will be benefited by providing membership and matching annual contribution. Monthly contribution of ₹ 50/- for Anganwari worker and 25/- for Sahyogini, Mini AWW and Helper has been decided. Thus, a sum of ₹150/- for Worker and ₹ 75/- for each Sahyogini, Mini AWW and Helper will be contributed annually by State. However, state share will be paid only after full receipt of annual contribution from each of registered member of the fund on one by one basis. Hence a sum of ₹ 702.93 lac is proposed for XIth plan out of which ₹ 146.00 lac have been earmarked for 2011-12 as state share.

B-New Schemes

Construction Works

23.18 ICDS programme is adversely affected due to lack of proper infrastructure for running anganwari especially in rural area. Only 33% AWCs are running in departmental buildings where proper space for play and other activities for children are available. To curb this problem a decision has been taken to shift anganwaries in rented premises to primary/ Upper Primary schools where separate room and adequate space is available to run anganwari. But still large number of anganwaries required proper infrastructure. Department formulated a proposal to construct anganwari buildings with the financial support of NABARD under RIDF. In the year 2010-11 380 AWC of an amount of ₹ 1199.53 lakh will be constructed. The proposal is under the consideration of NABARD.

23.19 For this purpose ₹ 10395.01 lac is required during 2007-12, out of which in the year 2011-12 ₹ 1000.00 lac for 380 AWC is proposed under State Plan.

Supply of Utensils at new Anganwaries

23.20 In the year 2011-12 an amount of ₹ 100.00 lac is required for new anganwari centre sanction in the year 2009-10.

Rajiv Gandhi Scheme for Empowerment of Adolescent girls- SABLA (RGSEAG)

23.21 Empowerment of adolescent girls is one of the top most priorities of the Government. Empowering adolescent girls leads to empowerment of future mothers and women of tomorrow this in turn will help in building an important resource for the country.

23.22 Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RSEAG) is an example of Government's commitment towards providing complete health cover for overall development of adolescent girls.

23.23 Adolescent girls of the age group 11-18 years will be able to obtain benefit from this scheme. The 50:50 percent partnerships of both Centre as well as State Government is a salient feature of this scheme. 10 Districts of Rajasthan- Gangnagar, Bikaner, Jhalawar, Udaipur, Jaipur, Jodhpur, Bhilwara, Dungarpur, Banswara and Barmer have been selected for the implementation of the scheme.

23.24 In this scheme out of school girls of 11-15 years and all girls school going as well as out of school girls of 15-18 years age group will be provided 600 kilocalories, 18-29 gram protein for 300 days. Besides this IFA tablets for controlling and reduction of Anemia among adolescent girls, Health Check ups, Referral Services, Health and Nutrition Education, Life Skill Education, Child Care Practices, Counseling/ Guidance for Family Welfare & Home Management and Vocational Training for girls of 16 years and above age National Skill Development Programme will be provided.

23.25 This scheme will replace Kishori Shakti Yojana. 802487 Adolescent Girls will benefit from this scheme.

Summary of Proposed Outlay for Annual Plan 2011-12

(₹ in lac)

S. No.	Item/ Activity	Outlay Proposed
A.	Continuing Schemes	
1.	Supplementary Nutrition to Beneficiaries	22473.65
2.	General Administration of ICDS(10% state share)	3129.12
3.	General ICDS Trainings(10% state share)	74.22
4.	Honorarium to Asha- Sahyoginies	2500.00
5.	Addl. Honorarium to AWWs and AWHs	3077.00
6.	Anganwari Kalyan Kosh	146.00
	Total Continuing Schemes	31399.99

S. No.	Item/ Activity	Outlay Proposed
B.	New Schemes	
1.	Anganwari Building Construction	1000.00
2.	Supply of Utensils at new anganwaries	100.00
3.	RGSEAG-SABLA	0.01
4.	Grant in aid to Zila Parishad	0.01
	Total New Schemes	1100.02
	Grand Total	32500.01

WOMEN EMPOWERMENT

23.26 Empowerment of women is the corner stone for the development of the society as a whole. Women constitute nearly half the population of the State and no development can be sustainable without the active and equal participation of women in all the activities of the society. The real empowerment of women, however, depends, upon the creation of an enabling environment-social and economic, that increases their participation in the decision making process. In the wake of this, various women development programmes have been initiated and are being implemented in Rajasthan.

23.27 The Government of Rajasthan has set up a Directorate for Women Empowerment in 2007.

Sathin Honorarium

23.28 The foremost issue in women development is to create awareness regarding the critical issues concerning their present social status.

23.29 Sathin is the prime animators working at the grassroot level to propagate women development programmes and to generate awareness among women. Sathin acts as a mentor to the rural women and create an enabling environment for them to realize their social economic and political rights and widens her knowledge base to access the benefits and entitlements of various schemes and programmes of the State. There are 9175 Sathins covering all Gram Panchayat of the State, Presently 8500 Sathins have been selected. During Annual Plan 2011-12 remaining 675 Sathins will be selected and trained to act as prime animators of the District Women's Development Agency.

23.30 During 2011-12 Annual Plan a provision of ₹ 1010.00 lac is proposed for the honorarium of the Sathins and Salary of other employees.

7 Point Programme for Empowerment of Women

CM's Seven Point Programme for Women Empowerment:-

23.31 Empowerment of women is possible only if this is based on a Life Cycle Approach. In the present scenario with negative mindset for the girl child, it is extremely important that the need for her dignity and security

is recognized by the society. This will be possible only when all these life barriers being faced by her, are addressed in a comprehensive and convergent manner. For this a cross sectional and multidimensional approach has been adopted as CM's 7 Point Programme and as announced by the Hon'ble CM in his budget speech 2009-10.

23.32 Following Seven issues need to be taken up on priority under this programme and the nodal departments and community suitably sensitized

- Safe Motherhood.
- Reduction in IMR.
- Population Stabilization.
- Prevention of Child Marriages.
- Retention of Girls at least upto class X.
- Providing Security and Safe Environment to Women.
- Economic Empowerment by providing Self Employment Opportunities through the Self Help Group Programme.

Prevention of Child Marriage

23.33 The female mean age at marriage is only 17.8 years and more than 50% girls are married before the age of 18 years. Presently the proportion of married girls aged 15-19 years who are mothers is 25.1%. Early marriage of girls results in early pregnancy and also affects their education and employment opportunities. Also, this results in their lack of decision making over their reproduction right, which often has an adverse effect on their health. Therefore, it is the endeavour of the department to completely eradicate child marriages by 2015.

Safe Motherhood & Kaleva Scheme

23.34 Maternal Mortality Ratio in the state of Rajasthan is third highest in the country after U.P and Assam and more than the average for the nation i.e. 388 per lac live births as compared to 301 per lac live birth in the country. In spite of development of huge health infrastructure in the state discernable reduction in MMR during the last one decade is still waiting. This has raised the serious question on the functionality and quality of care provided in these institutions especially in the rural areas.

23.35 Low social status of women, poor nutrition and care during pregnancy and after delivery are the major reasons for this high MMR. Although after introducing JSY there is a drastic reduction in MMR and increase in institutional deliveries in last three years, however post natal care still needs attention because post natal hemorrhage is one of the major reasons of maternal deaths. Women are generally taken away within 6-8 hours after delivery from the medical institution and this is

critical to the life of both mother and child. One of the reasons for this is non availability of suitable nutrition at medical institutions.

23.36 In view of the above the Department of Women & Child Development in collaboration with NRHM initiated Kalva Scheme. Three nutritious meals soon after delivery are being provided to women at the medical institution. The scheme has been implemented in 368 PHCs and has received positive response from the field functionaries and the beneficiaries.

Economic Empowerment by providing Self Employment Opportunities through the Self Help Group Programme

23.37 Some resource gaps have been identified by the department in propagating IEC, on the programme, implementation of reducing Child Marriages and creation of Employment Opportunities for Women and proposals for budgetary support have been prepared and submitted to the Chairperson of the Coordination Committee, for approval. Primary objective of these proposals is to provide some hand holding support to women so that they may be given opportunities for self employment and also rigorous campaign against Child Marriage for behavioral change of community.

23.38 During the next financial year i.e. 2011-12 a provision of atleast ₹ 25 lac may be made to propagate and coordinate activities under the programme.

Self Help Groups-(SHG)

23.39 Formation of SHGs has been recognized as one of the major initiatives for empowerment of women. So far more than 2.05 lac Women Self Help Groups have been formed. Credit linkages of groups have been institutionalized and more than ₹ 413.26 crore have been provided as loan-assistance to these groups through various financial institutions. Around 20 lac women have been associated with these groups. Under 2011-12 action constitution of 20000 new SHG have been proposed whereas 30000 Groups are the target for credit linkage through financial institutions.

Amrita-Promotional Activities

23.40 For the marketing of WSHGs products in the State, a Society named Amrita has been registered under Rajasthan Registration Society Act through which WSHGs products would be sold under Amrita Brand. Apart from this Amrita Society would also play a major role in promotion of marketing linkages, skill upgradation, value addition, design diversification and packaging of WSHG's products.

- **Priyadarshini Model Women Self Help Group Scheme:-**This is the scheme to strengthen 10 SHGs in each district of the State as model WSHG which would be called Priyadarshini WSHG's. Transforming

WSHG into model SHG will be done by selected NGOs working in the field of microfinance, entrepreneurship development, and production and marketing related activities.

- **Amrita Women Self Help Group Award Scheme:-**Amrita Women Self Help Group Award Scheme has been initiated to encourage WSHGs and NGOs showing outstanding performance in SHG programme and supporting the department in strengthening this programme. The best performing WSHG and NGO would be awarded with ₹ 50000/- and ₹ 20000/- respectively.

23.41 A provision of ₹ 272.77 lac has been proposed for Annual Plan 2011-12 for SHG.

SHG Haat Bazar

23.42 To promote the marketing of SHG products one State level SHG Haat is proposed by covering SHGs from all over the State. For this event, a sum of ₹18 lac is required.

Regional Training Hub/ Regional WSHG

23.43 To strengthen the SHG Programme all over the State, Seven Regional WSHG training cum resource centres has been set up with a view. These RRCs would act as the training hubs for the area specific trainings. Through these training hubs the women would be provided different type skill upgradation, capacity building, trainings etc. Along with this department would facilitate in marketing of WSHG products by connecting with different agencies/ local markets/ haat bazaars. Total amount required for this purpose is ₹14 lac.

Interest Rate reimbursement to WSHGs

23.44 The essence of WSHG programme is empowerment hence the focus of various activities is capacity building. However, there is a need to incentivise the entrepreneurship abilities and enhance the risk taking capacity of these poor WSHG members.

23.45 WSHGs who have made timely re-payments of their loan would get 50% rate of interest subsidized against the loans so as to reduce the interest burden. For this a target of 30000 SHGs was approved in 2009-10. There shall be a requirement of ₹ 750 lac for covering the second year of loan repayment and ₹ 250 lac will be required to extend this benefit for 10000 new groups.

Grant-in-aid for Community Marriages-

23.46 Community marriages are meant to discourage dowry and reduce the expenditure on individual marriages. The grant in aid @ ₹ 6000 per couple is to be given under this scheme. A provision of ₹ 100 lac has been proposed for Annual Plan 2011-12.

Implementation of Protection of Women from Domestic Violence Act, 2005

23.47 During 2010-11 five posts of Additional Protection Officers and 8 posts of Data Entry Operators and one post of Statistical Assistant (SA) have been sanctioned. Two more posts of additional POs are proposed so that atleast one additional PO could be at the divisional headquarter. Besides, some funds will need to be earmarked for assistance to the aggrieved women as per requirement under various provisions of the PWDV Act. Therefore, ₹ 10.00 lac is proposed for the year 2011-12.

Mahila Surksha Evam Salah Kendra

23.48 In pursuance to the Hon'ble CM's budget announcement for the year 2010-11 one Mahila Surksha evam Salah Kendra was to be set up in each district where there is a Mahila Thana. Later on it was decided to provide one MSSK in each district there are 38 Police districts in the State. Therefore, 38 MSSKs are to run @ 1 MSSK in each district. These MSSKs are to run through selected NGOs for which the Government shall be paying ₹ 3.00 lac as grant-in-aid to each such organization.

Gender Cell

23.49 In pursuance to the budget announcements by the Hon'ble CM during 2009-10 a Gender Cell has been set up in the Directorate of Women Empowerment. The Objectives of the Gender Cell are two fold. The Gender Cell is responsible for promoting mainstreaming the concept of gender in the budgetary system of the Government and also to function as a Secretariat to the High Level Committee (HLC) constituted under the Chairmanship of the CS for the review of the budgets of various departments with gender perspective. The Gender Cell is also to oversee the programmes relating to promotion and protection of rights of women. Already the budget of 5 departments has been reviewed by the HLC. ₹ 20.60 lac is proposed for the Gender Cell for the financial year 2011-12.

Swavlamban

23.50 Realizing the importance of training and self employment for purpose of facilitating women to participate in income generating activities, various NGOs are given financial assistance under Swavlamban for undertaking training programmes for various vocations. A provision of ₹ 33 lac has been proposed for 2011-12.