



Adilabad
Nizamabad
Karimnagar
Medak
Warangal
Khammam
Rangareddy
Hyderabad
Nalgonda
Mahabubnagar
Guntur
West Godavari
East Godavari
Vishakhapatnam
Srikakulam
Vijayanagaram
Kamulu
Prakasam
Ananthapur
Kadapa
Nelluru
Chittoor

ANDHRA PRADESH & TELANGANA

A TREND SETTING INITIATIVE TO COMBAT
FEMALE FOETICIDE FAILED BY DIVERSION OF FUNDS



ASIAN CENTRE FOR HUMAN RIGHTS



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OF FUNDS**



ASIAN CENTRE FOR HUMAN RIGHTS



Andhra Pradesh & Telangana: A trend setting initiative to combat female foeticide failed by diversion of funds

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1. EXECUTIVE SUMMARY

India is infamous for female foeticide and female infanticide, the crudest forms of gender based violence. The Child Sex Ratio (CSR) defined as the number of females per 1000 males in the age group 0-6 years¹ had come down alarmingly to 939 as per 2011 census from 961 in 2001 in undivided Andhra Pradesh indicating the continuing preference for boys. Though it is better than the national average of 919, in rural areas all the 23 districts registered declining child sex ratio. The lowest child sex ratio was Hyderabad district (914).²

According to the National Crime Records Bureau in the last 15 years from 2001 to 2015, 30 cases of feticide were registered in Andhra Pradesh.³

The implementation of the Preconception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act of 1994 (PC&PNDT Act) remains in shambles. The Comptroller and Auditor General of India (CAG) in its 2015 report stated that “due to non-convening meetings at regular intervals, the Board/authority/advisory committee under the PC&PNDT Act could not review the implementation activities, enforce prescribed standards, investigate complaints and advise appropriate authorities with regard to the provisions of the Act”.⁴ Since the inception of the PC&PNDT Act in 1994, not a single conviction was secured in Andhra Pradesh. The 10th Report of the Common Review Mission of the of the National Health Mission (NHM) released in June 2017 with respect to implementation of the PC&PNDT Act

1. Skewed child sex ratio a cause of worry, The Times of India, 26 March 2013 (online), <http://timesofindia.indiatimes.com/city/allahabad/Skewed-child-sex-ratio-a-cause-of-worry/articleshow/19216826.cms>

2. Sharp decline in child sex ratio in Andhra Pradesh, Business Standard, 3 May 2013 available at http://www.business-standard.com/article/news-ians/sharp-decline-in-child-sex-ratio-in-andhra-pradesh-113050300550_1.html

3. See NCRB's Crime in India report series from 2001 to 2015

4. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

stated that “Various Committees required to be set up under PC-PNDT Act have been set up and provisions of the Act are being implemented. There are 19 ongoing court cases under the Act. Lack of evidence and out of court settlement has been the main reasons for dismissal of cases”.⁵

There is serious under-reporting under the Medical Termination of Pregnancy Act (MTP) of 1971. For example, Assam with a total population of 31 million as per 2011 census reported a total of 3,53,309 cases of termination of pregnancies under the MTP Act during 2008-2009 to 2012-13. Andhra Pradesh with over 84 million populations reported only 32,842 cases.⁶

The New Girl Child Protection Scheme (NGCPS) launched in April 2005 for eliminating gender discrimination, eradicating female infanticide, improving sex ratio to empower and protect the rights of girl children and women through direct investment from the Government has not been effective. The scheme provides for risk coverage for life insurance for the girl child commencing from the age of 3 years. A single girl child is entitled to receive Rs.1 lakh after completion of 20 years of age and in case of two girl children, both of them are entitled to receive Rs. 30,000 each after completion of 20 years of age. Project Director is the nodal officer of the scheme in the district.⁷

During the last one decade i.e. FY 2005-2006 to 2014-2015 the total number of beneficiaries were 6,65,320 under the NGCPS. The Comptroller and Auditor General of India (CAG) in its 2015 report stated that official records do not reveal break-up of category of beneficiaries with the prescribe a ratio of 15 per cent for Scheduled Castes (SCs), 6 per cent for Scheduled Tribes (STs) and remaining to others for extending the benefits.⁸ There were discrepancies in processing/disbursement of claims. For example, claims

5. 10th Common Review Mission, National Health Mission, <http://nhm.gov.in/monitoring/common-review-mission/10th-common-review-mission.html>

6. The population figures are taken from 2011 Population Census, Govt. of India <http://censusindia.gov.in/>

7. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015), available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

8. Ibid

amounting to Rs. 85.94 lakh settled by Life Insurance Corporation and paid to the Commissioner, Women Development and Child Welfare (WD&CW) for disbursement to the nominees of the insured parents were lying with the latter as of July 2014 without disbursement.⁹ Indeed, against 142 claims proposed by Project Directors (PDs), 106 claims were settled by LIC and 34 claims were returned to PDs for want of information. The remaining claims were not paid due to non-availability of bank details. The CAG also highlighted non-issuance of bonds by LIC due to lack of coordination between the Department of Women and Child Welfare and LIC. The CAG audit found that in the test checked districts, 1,01,700 applications were received during 2009-2014 of which, only 49,313 (48 per cent) bonds were issued leaving a balance of 52,387 bonds yet to be issued as of July 2014. Bonds were not issued at all during the years 2011-12 and 2012-13.¹⁰

The Andhra Pradesh Government enacted the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 providing financial incentives on achieving certain milestones in the life of girl children born in the State on or after 1st May 2013 till they attain their 21st year.¹¹ This is one of the most innovative legal initiatives for empowerment of the Girl Child in the country.

However, the CAG in its performance audit found that the Government of Andhra Pradesh allocated Rs. 80.30 crores through supplementary provision in the budget during FY 2013-2014. Out of this, an amount of Rs. 79.19 crore was drawn and adjusted to the Public Deposit (PD) accounts of both components of the Bangaru Talli Scheme - Society for Elimination of Rural Poverty (SERP) and Mission for Elimination of Poverty in Municipal Areas (MEPMA).¹² However, only an amount of Rs. 39.51 crore was utilised

9. Ibid

10. Ibid

11. "The Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act of 2013" available at: <http://bangarutalli.ap.gov.in/pdf/BT-ACT-2013.pdf>

12. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

covering 1,58,059 beneficiaries (57 per cent) as against 2,75,674 registered beneficiaries. The implementing agency, SERP, diverted an amount of Rs.1.42 crore towards administrative expenses (SPMU) which was not authorised as per the scheme guidelines.¹³

The audit further found that there was a balance of Rs. 41.30 crore (SERP: PD Account – Rs. 21.20 crore, Current Account Rs. 7.75 crore and MEPMA-PD Account Rs.12.35 crore) as of April 2014. It was found that utilization certificates (UCs) were not furnished by MEPMA till the time of the audit. The UC furnished by SERP for the period March 2014 for Rs. 42.17 crore as against the actual expenditure of Rs. 20.33 crore in respect of 81,309 beneficiaries was found to be incorrect. It was further found that the Commissioner, WD & CWD was furnishing the UCs for the entire amounts released to SERP and MEPMA instead of for the actual utilisation. In respect of the releases (Rs.14.53 crore) to MEPMA, the details of beneficiaries, district-wise registrations, expenditure, UCs, etc were not available with the Commissioner, WD & WCD.¹⁴

A trend setting initiative, Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act of 2013, to empower girl child has failed because of the diversion of the funds by the authorities who were not interested to implement the project.

In order to address the continuous decline in CSR and to address the scourge of female foeticide in Andhra Pradesh the Asian Centre for Human Rights recommends the following to the State Government of Andhra Pradesh:

- Implement the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act of 2013 in letter and spirit;
- Ensure that all the 2,75,674 registered beneficiaries are covered and adequate resources are allocated by the State Government considering the diversion of funds already sanctioned.

13. Ibid

14. Ibid

- Issue instructions to ensure that funds allocated under the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act of 2013 are not diverted;

PC&PNDT Act

- Establish PC&PNDT Bureau of Investigation staffed by the State Police under the Department of Health and Family Welfare to assist the appropriate authorities for effective implementation of the PC&PNDT Act;
- Launch a *Mukhbir Yojana* to reward those providing information with amount of rewards of at least Rs 200,000 to decoys and *Mukhbirs* along with (i) specific incentive in the form of bond/scheme for the unborn baby of the decoy customer¹⁵ apart from undertaking of not aborting the foetus under any circumstances; (ii) specific allowance to the decoys and Mukhbirs to attend each hearing during the trials; (iii) ensure anonymity of the complainants, informers etc to the extent possible;¹⁶ and (iv) sanction adequate financial resources for implementation of the scheme in all the States and UTs;
- Introduce Integrated Monitoring System and installing tracking devices in all sonography machines for implementation of the PC&PNDT Act;
- Ensure proper implementation of the PC&PNDT Act inter alia through: (a) ensuring efficient and effective system of registration of all ultrasound/ genetic clinics so as to ensure compliance with the provisions of the Act; (b) ensuring regular and effective inspection of the ultrasound/ genetic clinics for curbing the violation of Act &

15. The revised *Mukhbir Yojana* of Rajasthan provides that “provisions should be made to give an insurance policy to the yet-to-born baby of the pregnant woman participating in a decoy operation”. For details, please see ‘New guidelines define role of pregnant woman in decoy operation’, The Times of India, 7 September 2015 available at <http://timesofindia.indiatimes.com/city/jaipur/New-guidelines-define-role-of-pregnant-woman-in-decoy-operation/articleshow/48851311.cms>

16. Under *Mukhbir Yojana* of Rajasthan, anonymity of an informer is ensured. Further, under the decoy scheme of Madhya Pradesh when the informer conducts the sting operation alone without assistance of decoy, the informer gets the entire Rs 50,000 at the stage of certifying the operation to be true by the AA and Rs 50,000 after framing of charges before the Court. Therefore, the anonymity of the informers can be ensured.

Rule; and (c) ensuring proper enforcement mechanism and taking appropriate action for violations of the provisions of Act.

- Ensure proper implementation of the PC&PNDT Act, *inter alia*, by (i) reconstituting or appointing members of the statutory bodies of the PC&PNDT Act such as State Supervisory Board, State Advisory Committee and State Inspection and Monitoring Committee of the PC&PNDT Act on time; (ii) ensuring strict implementation of decisions adopted by these by the statutory bodies at the District level; (iii) ensuring review of implementation of previous resolutions or decisions in subsequent meetings by the statutory bodies at the state level;
- Ensure time bound trial of the cases under the PC&PNDT Act; and
- Make necessary budgetary allocations for implementation of all these measures.

2. STATE OF INFANTICIDE, FEMALE FOETICIDE AND CHILD SEX RATIO IN ANDHRA PRADESH

India is infamous for female foeticide and female infanticide, the crudest forms of gender based violence. The reasons for female foeticide are known: *“son preference and the belief that it is only the son who can perform the last rites, that lineage and inheritance runs through the male line, sons will look after parents in old age, men are the bread winners, exorbitant dowry demand is another reason for female foeticide/infanticide”*.¹⁷

2.1 The scale of female infanticide in Andhra Pradesh

Prior to the invention of technology, female infanticide was widespread in India. Section 315¹⁸ and Section 316¹⁹ of the Indian Penal Code criminalised female infanticide. However, with the invention of technology for sex selection, the number of cases of female infanticide appears to have reduced.

2.2 The scale of female foeticide in Andhra Pradesh

According to NCRB, 1,663 cases of foeticide were reported across India in the last 15 years from 2001 to 2015. These included 55 cases in 2001, 84 cases in 2002, 57 cases in 2003, 86 cases in 2004, 86 cases in 2005, 125 cases in 2006, 96 cases in 2007, 73 cases in 2008, 123 cases in 2009, 111 cases in 2010, 132 cases in 2011, 210 cases in 2012, 221 cases in 2013, 107 cases in 2014, and 97 cases in 2015.

17. Statement of Shri Ghulam Nabi Azad, Union Minister for Health and Family Welfare in Rajya Sabha on 11 February 2014, <http://pib.nic.in/newsite/PrintRelease.aspx?relid=103437>

18. Section 315: Act done with intent to prevent child being born alive or to cause it to die after birth, “Whoever before the birth of any child does any act with the intention of thereby preventing that child from being born alive or causing it to die after its birth, and does by such act prevent that child from being born alive, or causes it to die after its birth, shall, if such act be not caused in good faith for the purpose of saving the life of the mother, be punished with imprisonment of either description for a term which may extend to ten years, or with fine, or with both.

19. Section 316: Causing death of quick unborn child by act amounting to culpable homicide, “Whoever does any act under such circumstances, that if he thereby caused death he would be guilty of culpable homicide, and does by such act cause the death of a quick unborn child, shall be punished with imprisonment of either description for a term which may extend to ten years, and shall also be liable to fine.”

Among the States, Madhya Pradesh topped with 360 cases followed by Rajasthan (255), Punjab (239), Maharashtra (155), Chhattisgarh (135), Haryana (131), Uttar Pradesh (93), Delhi (69), Karnataka (60), Gujarat (52), **Andhra Pradesh (30)**, Himachal Pradesh (25), Bihar and Jharkhand (10 each), Odisha (6), Kerala, West Bengal and Andaman and Nicobar Islands (5 each), Jammu and Kashmir, Sikkim and Telangana (4 each), Assam (4), and Tamil Nadu, Uttarakhand, Chandigarh and Dadra and Nagar Haveli (1 each).²⁰

Table 1: No of foeticide cases recorded by NCRB

States	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	Total
Andhra Pradesh	0	0	0	0	1	5	0	2	6	1	7	1	7	0	0	30
Arunachal Pradesh	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Assam	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	2
Bihar	0	1	0	1	0	0	0	0	5	0	1	1	1	0	0	10
Chhattisgarh	5	0	6	6	21	5	10	9	7	9	21	5	15	5	11	135
Goa	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gujarat	4	9	4	0	4	6	1	1	3	10	0	7	2	0	1	52
Haryana	3	6	2	15	8	9	4	5	3	2	5	28	21	6	14	131
Himachal Pradesh	0	6	0	2	1	5	1	2	1	0	0	0	2	4	1	25
Jammu & Kashmir	0	2	0	0	0	0	0	0	0	1	1	0	0	0	0	4
Jharkhand	0	0	1	1	0	1	0	0	0	0	1	0	4	1	1	10
Karnataka	1	7	0	4	7	13	7	5	7	4	1	3	0	0	1	60
Kerala	0	2	0	0	1	0	0	0	0	0	0	1	1	0	0	5
Madhya Pradesh	7	4	11	9	12	14	10	8	39	18	38	64	79	30	17	360
Maharashtra	17	10	5	15	4	10	1	2	17	5	12	22	17	7	11	155
Manipur	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Meghalaya	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mizoram	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nagaland	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Odisha	0	0	0	0	0	0	5	0	0	0	0	0	1	0	0	6
Punjab	7	10	11	8	12	22	35	24	23	15	15	25	12	10	10	239

20. See NCRB's Crime in India report series from 2001 to 2015

Rajasthan	8	6	12	17	10	25	16	10	12	18	13	37	34	24	13	255
Sikkim	0	0	0	1	1	0	0	0	0	0	0	2	0	0	0	4
Tamil Nadu	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
Telangana														2	2	4
Tripura	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Uttar Pradesh	1	1	3	2	0	2	1	2	0	18	12	11	17	11	12	93
Uttarakhand	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
West Bengal	0	0	0	0	0	0	1	1	0	0	0	0	3	0	0	5
A&N Islands	0	0	0	0	0	0	0	0	0	3	0	1	1	0	0	5
Chandigarh	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
D&N Haveli	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Daman & Diu	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Delhi	2	20	2	4	3	7	4	2	0	7	5	2	3	5	3	69
Lakshadweep	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puducherry	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	55	84	57	86	86	125	96	73	123	111	132	210	221	107	97	1663

Although, the NCRB has been collecting data on foeticide over the years, it started collecting data on female foeticide only from 2014. It recorded 39 cases of female foeticide in 2015 and 50 cases in 2014. The State/UT-wise data relating to female foeticide is given in the table below:²¹

Table 2: No of female foeticide cases recorded by NCRB

Sl. No.	States/UTs	Cases registered		
		2014	2015	Total
1	Andhra Pradesh	0	0	0
2	Arunachal Pradesh	0	0	0
3	Assam	0	0	0
4	Bihar	0	0	0
5	Chhattisgarh	2	3	5
6	Goa	0	0	0

21. Statement of J P Nadda, Minister of Health and Family Welfare, Government of India in the Lok Sabha on 11.12. 2015, <http://164.100.47.192/Loksabha/Questions/QResult15.aspx?qref=26479&lsno=16>

7	Gujarat	0	0	0
8	Haryana	4	2	6
9	Himachal Pradesh	3	0	3
10	Jammu & Kashmir	0	0	0
11	Jharkhand	0	0	0
12	Karnataka	0	1	1
13	Kerala	0	0	0
14	Madhya Pradesh	15	8	23
15	Maharashtra	1	9	10
16	Manipur	0	0	0
17	Meghalaya	0	0	0
18	Mizoram	0	0	0
19	Nagaland	0	0	0
20	Odisha	0	0	0
21	Punjab	7	2	9
22	Rajasthan	11	1	12
23	Sikkim	0	0	0
24	Tamil Nadu	0	1	1
25	Telangana	2	6	8
26	Tripura	0	0	0
27	Uttar Pradesh	4	5	9
28	Uttarakhand	1	0	1
29	West Bengal	0	N/A	0
30	Andaman & Nicobar Islands	0	0	0
31	Chandigarh	0	0	0
32	Dadra Nagar Haveli	0	0	0
33	Daman & Diu	0	0	0
34	Delhi	0	1	1
35	Lakshadweep	0	0	0
36	Puducherry	0	0	0
	Total	50	39	89

In two years from 2014 to 2015, the NCRB recorded 89 cases of female foeticide across India. Madhya Pradesh topped in female foeticide with 23 cases, followed by Rajasthan (12), Maharashtra (10), Punjab and Uttar Pradesh (9 each), Telengana (8), Haryana (6), Chhattisgarh (5), Himachal Pradesh (3), Karnataka, Tamil Nadu, Uttarakhand and Delhi (1 each). As per Census 2011, three states with most adverse child sex ratios namely Punjab, Haryana and Jammu & Kashmir had reported 9, 6 and 0 cases respectively. Andhra Pradesh had no case of female foeticide.

2.3 Child sex ratio in Andhra Pradesh

Child Sex Ratio (CSR) is defined as the number of females per 1000 males in the age group 0-6 years.

The child sex ratio in Andhra Pradesh has come down alarmingly to 939 as per 2011 census, from 961 in 2001, indicating the continuing preference for boys. Though it is better than the national average of 919, in rural areas all the 23 districts registered declining child sex ratio. The child sex ratio was highest in East Godavari district (968) and lowest in Hyderabad district (914). The data also revealed that the proportion of the child population (0-6 years) to the total population of the state had declined from 13.35 in 2001 to 10.81 percent in 2011. All the districts have shown this decline.²²

Table 3: Child Sex Ratio (0-6 years) in 2001 and 2011, India

Source: Census of India 2001-2011

State/District	Sex ratio 2001	Sex ratio 2011	Absolute change 2001-2011	% change 2001-2011
Adilabad	964	941	-22	-2.3
Nizamabad	966	946	-19	-2.0

22. Sharp decline in child sex ratio in Andhra Pradesh, Business Standard, 3 May 2013 available at http://www.business-standard.com/article/news-ians/sharp-decline-in-child-sex-ratio-in-andhra-pradesh-113050300550_1.html

Karimnagar	977	937	-40	-4.1
Medak	964	954	-9	-1.0
Hyderabad	950	938	-12	-1.3
Rangareddy	970	947	-23	-2.4
Mahbubnagar	957	932	-26	-2.7
Nalgonda	962	921	-41	-4.3
Warangal	955	912	-43	-4.5
Khammam	968	958	-10	-1.1
Srikakulam	976	953	-23	-2.4
Vizianagaram	981	955	-26	-2.6
Visakhapatnam	973	961	-12	-1.3
East Godavari	978	969	-9	-0.9
West Godavari	977	970	-6	-0.7
Krishna	959	953	-6	-0.6
Guntur	955	948	-8	-0.8
Prakasam	966	932	-34	-3.5
Sri Potti Sriramulu Nellore	955	945	-10	-1.0
Y.S.R.	952	919	-33	-3.5
Kurnool	944	937	-7	-0.7
Anantapur	963	927	-36	-3.8
Chittoor	959	931	-28	-3.0

3. THE STATE OF THE PC&PNDT ACT

Amniocentesis was first introduced in India in 1975 by the All India Institute of Medical Sciences (AIIMS), Delhi for detecting congenital deformities in fetuses.²³ By mid 1980s, it started spreading and NGOs especially women rights groups and health activists and social activists launched a campaign for prohibition of sex selective abortion. The campaign resulted in the State Government of Maharashtra appointing a committee, followed up with formulation of an Act at the state level in 1988. Given the concern of the then Health Secretary of Maharashtra and other organisations this issue was taken up with the Government of India. Acting on the concerns and in order to control the deteriorating situation, the Government of India enacted the Pre-Natal Diagnostic Techniques Act, 1994 (PNDT Act).²⁴

3.1 The PC&PNDT Act

The Preamble of the PNDT Act, inter alia, provides that the object of the Act is to prevent the misuse of such techniques for the purpose of pre-natal sex determination leading to female foeticide and for matters connected therewith or incidental thereto. The Act came into force from 1 January 1996. The main purpose of the Act was to prohibit and regulate the use of diagnostics techniques before and or after conception for sex determinations leading to sex selective elimination of foetus. The provision of the Act encompassed creating institutional mechanisms and providing tools to monitor the use of diagnostic techniques for prohibiting sex selection. There was provision of punishment and penalty for those who violate provisions of PNDT Act. The Act has since been amended to make it more comprehensive and keeping in view the emerging technologies for selection of sex before and after conception and problems faced in the working of implementation of the Act and certain

23. Amniocentesis was first introduced in India in 1975 by the All- India Institute of Medical Sciences (AIIMS), Delhi for detecting congenital deformities in foetuses. Please see <http://wcd.nic.in/Schemes/research/savegirlchild/3.pdf>

24. See <http://www.cephat.org/pndt.html>

directions of Supreme Court in *CEHAT Vs Union of India*. The amended Act came into force with effect from 14 February 2003 and it was renamed as “Preconception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994” (PC&PNDT Act).²⁵

The Statement of Objects and Reasons to the PC&PNDT Act, inter alia, read as under:

“Amendment Act 14 of 2003 – Statement of Objects and Reasons. The Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 seeks to prohibit pre-natal diagnostic techniques for determination of sex of the foetus leading to female foeticide. During recent years, certain inadequacies and practical difficulties in the administration of the said Act have come to the notice of the Government, which has necessitated amendments in the said Act.

1. The pre-natal diagnostic techniques like amniocentesis and sonography are useful for the detection of genetic or chromosomal disorders or congenital malformations or sex linked disorders, etc. However, the amniocentesis and sonography are being used on a large scale to detect the sex of the foetus and to terminate the pregnancy of the unborn child, if found to be female.
2. Techniques are also being developed to select the sex or child before conception. These practices and techniques are considered discriminatory to the female sex and not conducive to the dignity of women.
3. The proliferation of the technologies mentioned above may, in future, precipitate a catastrophe in the form of severe imbalance in male female ratio. The State is also duty bound to intervene in such matters to uphold the welfare of the society, especially of the women and children. It is, therefore, necessary to enact and implement in letter and spirit a legislation to ban the pre

25. See Chapter 19 ‘Gender Issues’, Annual Report 2014-15, Ministry of Health and Family Welfare, Government of India, <http://www.mohfw.nic.in/WriteReadData/l892s/56321456698774563.pdf>

conception sex selection techniques and the misuse of pre-natal diagnostic techniques for sex selective abortions and to provide for the regulation of such abortions. Such a law is also needed to uphold medical ethics and initiate the process of regulation of medical technology in the larger interests of the society.

4. Accordingly, it is proposed to amend the aforesaid Act with a view to banning the use of both sex selection techniques prior to conception as well as the misuse of prenatal diagnostic techniques for sex selective abortions and to regulate such techniques with a view to ensuring their scientific use for which they are intended.”

The technique of Pre-Conception sex selection has been brought within the ambit of the amended Act. Use of ultrasound machines has also been brought within the purview of this Act more explicitly. The Central Supervisory Board (CSB) constituted under the Chairmanship of Minister of Health & Family Welfare has been further empowered for monitoring the implementation of the Act. State level Supervisory Boards in the line of the CSB constituted at the Centre, have been introduced for monitoring and reviewing the implementation of the Act in States/UTs. The State/UT level Appropriate Authority has been made a multi member body for better implementation and monitoring of the Act in the States. More stringent punishments are prescribed under the Act so as to serve as a deterrent against violations of the Act. Appropriate Authorities are empowered with the powers of Civil Court for search, seizure and sealing the machines, equipments and records of the violators of law including sealing of premises and commissioning of witnesses. It has been made mandatory to maintain proper records in respect of the use of ultrasound machines and other equipments capable of detection of sex of foetus and also in respect of tests and procedures that may lead to preconception selection of sex. The sale of ultrasound machines has been regulated through laying down the condition of sale only to the bodies registered under the Act.²⁶

26. Ibid

The relevant statutory provisions of the PC&PNDT Act, as amended in 2003, are given below:

Section 3	Provides for regulation of Genetic Counselling Centres, Genetic Laboratories and Genetic clinics through the requirement of registration under the Act, prohibition of sex selection and sale of ultrasound machines to persons, laboratories, clinics, etc. not registered under the Act.
Section 4	Provides that no such place shall be used for conducting pre-natal diagnostic techniques except for the purposes specified and requires a person conducting such techniques such as ultrasound sonography on pregnant women to keep a complete record in the manner prescribed in the Rules.
Section 5	Requires written consent of pregnant woman for conducting the pre-natal diagnostic procedures and prohibits communicating the sex of foetus.
Section 6	Provides that no pre-natal diagnostic techniques including sonography can be conducted for the purpose of determining the sex of a foetus and that no person shall conduct or cause to be conducted any pre-natal diagnostic techniques including ultra sonography for the purpose of determining the sex of a foetus.
Section 7 – 16	Provides for constitution of Central Supervisory Board and State/UT Supervisory Boards including its structure, term of office, meetings, functions, etc
Section 17	It deals with constitution of State Appropriate Authority and State Advisory Committee, its powers and functions
Section 18 to 21	Deals with registration of Genetic Counselling Centres, Genetic Laboratories or Genetic Clinics, certificate of registration by Appropriate Authority, cancellation and suspension of registration and appeal procedure
Section 22	Provides prohibition of advertisement relating to pre-natal determination of sex and punishment for contravention with imprisonment for a term which may extend to three years and with fine which may extend to ten thousand rupees.

Section 23	Provides for offences and penalties with imprisonment up to three years and fine up to Rs. 10,000. For any subsequent offences, imprisonment of up to five years and fine up to Rs. 50,000/1,00,000. The name of the Registered Medical Practitioner is reported by the Appropriate Authority to the State Medical Council concerned for taking necessary action including suspension of the registration if the charges are framed by the court and till the case is disposed of. On conviction, the name of Registered Medical Practitioner is removed for a period of 5 years for the first offence and permanently for the subsequent offence.
Section 24	Provides for punishment for abetment of offence as prescribed under sub-section (3) of section 23.
Section 25	Provides for penalty for ‘contravention of any provision of the Act or rules for which no specific punishment is provided’ with imprisonment for a term which may extend to three months or with fine, which may extend to one thousand rupees or with both and in the case of continuing contravention with an additional fine which may extend to five hundred rupees for every day during which such contravention continues after conviction for the first such contravention.
Section 26	Deals with offences by companies.
Section 27	This section provides that every offence under the Act shall be cognizable, non-bailable and non-compoundable
Section 28	It deals with cognizance of offences under the Act
Section 29	It deals with maintenance of records by Genetic Counselling Centres, Genetic Laboratories or Genetic Clinics.
Section 30	It provides for power of the Appropriate Authorities to search and seize records, etc.

3.2 The PC&PNDT Rules

The Government of India notified the PNDT Rules in 1996 and the Government further brought several important amendments in Rules under

the PC&PNDT Act as mentioned below:²⁷

- Rule 11(2) has been amended to provide for confiscation of unregistered machines and punishment against unregistered clinics/facilities. Earlier the guilty could escape by paying penalty equal to five times of the registration fee;
- Rule 3B has been inserted providing for the Regulation of portable ultrasound machines and Regulation of services to be offered by Mobile Genetic Clinic;
- Rule 3(3)(3) has been inserted restricting the registration of medical practitioners qualified under the Act to conduct ultrasonography in maximum of two ultrasound facilities within a district. Number of hours during which the Registered Medical Practitioner would be present in each clinic would be specified clearly;
- Rule 5(1) has been amended to enhance the Registration fee for bodies under Rule 5 of the PNDT Rules 1996 from the existing Rs. 3000/- to Rs. 25000/- for Genetic Counselling Centre, Genetic Laboratory, Genetic Clinic, Ultrasound Clinic or Imaging Centre, and from Rs. 4000/- to Rs. 35000/- for an institute, hospital, nursing home, or any place providing jointly the service of a Genetic Counselling Centre, Genetic Laboratory and Genetic Clinic, Ultrasound Clinic or Imaging Centre and
- Rule 13 has been amended mandating every Genetic Counselling Centre, Genetic Laboratory, Genetic Clinic, Ultrasound Clinic and Imaging Centre to intimate every change of employee, place, address and equipment installed, to the Appropriate Authority 30 days in advance of the expected date of such change and seek issuance of a new certificate with the changes duly incorporated.

27. Ibid

Further, in 2014 the Government of India has notified the following amendments to the PC&PNDT Rules, 1996:²⁸

- Six month training curriculum for sonologists notified on 10 January 2014;
- Revised version of Form-F notified on 4 February 2014; and
- Code of Conduct for Appropriate Authorities notified on 26 February 2014.

3.3 Implementation of the PCPNDT Act

The status of implementation of the PC&PNDT Act is deplorable in Andhra Pradesh.

The Office of the Comptroller and Auditor General of India (CAG) conducted performance audit of the State Government Departments and Autonomous Bodies under the General and Social Sectors during the period 2013-14 as well as those which came to notice in earlier years. The CAG in its report highlighted the status of the PC&PNDT Act as following:²⁹

“Government set up several agencies for monitoring the implementation of schemes for welfare and protection of girl children as detailed below:

(i) State Supervisory Board, State Level Multi Member Appropriate Authority and State Level Advisory Committee for monitoring the implementation of PC&PNDT Act. However, these Committees have not met at prescribed intervals to discuss and follow-up, as detailed below.

28. Ibid

29. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

Committee	Functions	Meetings to be held during 2009-14	Meetings held
State Supervisory Board	Review the activities of appropriate authorities in implementation of provisions of Act	15	1
State Level Multi Member Appropriate Authority	Enforce standards prescribed for genetic counselling centre, genetic laboratory/clinic, grant suspend or cancel registration and to investigate complaints	60	5
State Level Advisory Committee	Advise State Appropriate Authorities on the provisions of the Act in order to monitor and review the implementation	30	5

Due to non-convening meetings at regular intervals, the Board/authority/ advisory committee could not review the implementation activities, enforce prescribed standards, investigate complaints and advise appropriate authorities with regard to the provisions of the Act.”

The Minister of State in the Ministry of Health And Family Welfare Smt. Anupriya Patel while replying to the Lok Sabha Unstarred Question No.

1665 on 10 March 2017 stated the number of bodies registered under the PC&PNDT Act in Andhra Pradesh is 2,666 while the number of ongoing court cases is 12. About 13 machines have been seized but not a single conviction has ever been secured in Andhra Pradesh.

The 10th Report of the Common Review Mission of the of the National Health Mission (NHM) released in June 2017 with respect to implementation of the PC&PNDT Act stated that “Various Committees required to be set up under PC-PNDT Act have been set up and provisions of the Act are being implemented. There are 19 ongoing court cases under the Act. Lack of evidence and out of court settlement has been the main reasons for dismissal of cases.”³⁰

30. 10th Common Review Mission, National Health Mission, <http://nhm.gov.in/monitoring/common-review-mission/10th-common-review-mission.html>

4. THE STATE OF THE MTP ACT

India also enacted the Medical Termination of Pregnancy (MTP) Act in 1971 to regulate and ensure access to safe abortions. The MTP Act of 1971 (amended in 2002) allows abortion up to 20 weeks of pregnancy in cases where “the continuance of the pregnancy would involve a risk to the life of the pregnant woman or of grave injury to her physical or mental health”, or, “there is substantial risk that if the child were born, it would suffer from such physical or mental abnormalities to be seriously handicapped”.³¹ When the pregnancy is caused by rape or as a result of failure of family planning device or method used by any of the married couples, pregnancy can be terminated.³² Abortion is allowed only when it is conducted by registered medical practitioners at a hospital established or maintained by the Government or a facility certified by the Government or a District Level Committee constituted by the Government³³. However, in special circumstances, pregnancy can be terminated any time (i.e. beyond 20 weeks’ gestation) and without approval of a second doctor when “the termination of such pregnancy is immediately necessary to save the life of the pregnant woman.”³⁴ In this case, the registered medical practitioner need not have the requisite experience or training in gynecology and obstetrics as required under Section 2 (d) to perform the abortion.³⁵ Specific punishments were prescribed for any illegal abortion under the MTP (Amendment) Act of 2002, which shall not be less than 2 years rigorous imprisonment but which may extend to 7 years under the IPC.³⁶

While the government of India does not have any official data on illegal abortions, the Ministry of Health and Family Welfare has unambiguously

31. Section 3, sub section (2) of the Medical Termination of Pregnancy Act of 1971

32. Section 3, sub section (2) of the Medical Termination of Pregnancy Act of 1971

33. Section 4 of the Medical Termination of Pregnancy Amendment Act of 2002

34. Section 5, sub section (1) of the Medical Termination of Pregnancy Act of 1971

35. See Explanation 2 under Section 5 of the Medical Termination of Pregnancy Amendment Act of 2002

36. Section 5, sub-sections (2)-(4) of the MTP Amendment Act of 2002

acknowledged that “*Although abortions were made legal in 1971, actually illegal abortions still outnumber legal abortions by a large margin. It is estimated that 10-15 thousand women die every year due to complications resulting from unsafe abortions conducted at unapproved places by untrained providers.*”³⁷ The official number on abortions varies. According to the Ministry of Health and Family Welfare’s report “Health and Family Welfare Statistics in India 2013”, a total of 6,49,795 medical termination of pregnancies (or abortions) were performed during 2008-2009; 6,75,810 during 2009-2010; 6,48,469 during 2010-2011; 6,25,448 during 2011-2012 and 6,36,010 during 2012-2013.³⁸ Further on 6 August 2013, then Union Minister of Health and Family Welfare Mr Ghulam Nabi Azad told the Rajya Sabha that a total of 11.06 lakh abortions were recorded in the year 2008-2009 in India.³⁹

But unofficial estimates made by independent research study of 2004 “*Abortion Assessment Project - India (AAPI)*” coordinated by CEHAT, Mumbai and Health watch, Delhi estimated a staggering 6.4 million (64 lakhs) abortions taking place annually in India. Of these, 1.6 million (16 lakhs) abortions i.e. 25% were performed by informal (traditional and/or medically non-qualified) abortion providers.⁴⁰ The Population Research Institute, a non-profit research group, states that at least 12,771,043 sex selective abortions had taken place in India in the years between 2000 and 2014. The yearly average of sex selective abortion is 851,403 or daily average of 2,332.⁴¹

Underreporting under the MTP Act and female foeticide

The data relating to termination of pregnancy under the MTP Act indicates absolute underreporting and its link with female foeticide. According to a

37. <http://164.100.47.132/LssNew/psearch/Result13.aspx?dbsl=4858>

38. Ministry of Health and Family Welfare, Government of India’s “Health and Family Welfare Statistics in India 2013”, Page 209, <https://nrhm-mis.nic.in/PubFWStatistics%202013/Complete%20Book.pdf>

39. Statement of then Minister of Health and Family Welfare Mr Ghulam Nabi Azad in response to Unstarred Question No. 257 in the Rajya Sabha on 6 August 2013,

40. See <http://www.cehat.org/go/uploads/AapIndia/summary.pdf>

41. Population Research Institute, “Sex-Selective Abortion Around the World”, <https://www.pop.org/content/sex-selective-abortion>

Ministry of Health and Family Welfare report, 649,795 abortions were performed in government-approved MTP clinics during 2008-2009, 675,810 abortions during 2009-2010, 648,469 abortions during 2010-11, 625,448 abortions during 2011-12 and 636,010 abortions during 2012-2013.⁴²

State-wise medical termination of pregnancies performed during 2008-09 to 2012-13 is given below.⁴³

Sl No	State/Union Territory/ Agency	No. of Terminations					
		2008-09	2009-10	2010-11	2011-12*	2012-13*	Total
1	2	3	4	5	6	7	
I.	Major States (population >20 million)						
1	Andhra Pradesh	6,826	7,490	5,315	6,794	6,417	32,842
2	Assam	78,155	70,294	69,937	70,866	64,057	3,53,309
3	Bihar	9,182	15,884	18,555	13,129	11,145	67,895
4	Chhattisgarh	7,375	5,151	4,323	2,832	2,531	22,212
5	Gujarat	14,931	29,980	17,914	21,863	20,213	1,04,901
6	Haryana	29,656	25,726	27,085	27,808	25,888	1,36,163
7	Jharkhand	3,862	17,665	10,613	6,454	9,079	47,673
8	Karnataka	22,366	22,660	22,107	31,763	31,514	1,30,410
9	Kerala	12,375	11,746	12,090	11,689	11,041	58,941
10	Madhya Pradesh	24,994	20,090	26,009	30,391	30,634	1,32,118
11	Maharashtra	90,990	86,339	109,806	109,282	148,254	5,44,671
12	Odisha	24,372	27,547	14,537	17,473	19,217	103,146
13	Punjab	12,267	11,003	11,204	9,171	9,799	53,444
14	Rajasthan	36,846	41,743	27,734	29,167	22,980	158,470
15	Tamil Nadu	59,793	60,359	57,893	61,718	59,320	299,083

42. Source: Ministry of Health and Family Welfare, "Health and Family Welfare Statistics in India 2013", P 209, <https://nrhm-mis.nic.in/PubFWStatistics%202013/Complete%20Book.pdf>

43. Ibid

16	Uttar Pradesh	72,522	83,952	81,289	63,826	58,966	360,555
17	West Bengal	50,460	58,916	58,774	52,249	48,692	269,091
II	Smaller States						
1	Arunachal Pradesh	990	957	973	1,192	1,574	5686
2	Delhi	45,285	32,318	29,298	21,620	20,798	149,319
3	Goa	1,175	978	919	963	1,118	5,153
4	Himachal Pradesh	2,010	2,785	2,068	1,742	1,691	10,296
5	Jammu & Kashmir	6,663	9,222	12,855	11,078	10,713	50,531
6	Manipur	6,525	6,968	6,307	5,660	4,148	29,608
7	Meghalaya	216	411	477	652	338	2,094
8	Mizoram	930	588	497	370	477	2,862
9	Nagaland	372	816	1,103	1,135	1,578	5,004
10	Sikkim	19	20	11	11	6	67
11	Tripura	7,417	7,485	5,934	4,533	3,890	29,259
12	Uttarakhand	11,047	8,653	8,316	7,373	6,723	42,112
III	Union Territories						
1	A&N Islands	260	98	153	126	209	846
2	Chandigarh	1,028	1,148	980	1,026	1,066	5,248
3	D&N Haveli	184	162	140	259	471	1,216
4	Daman & Diu	NA	NA	123	197	338	658
5	Lakshadweep	0	3	6	9	34	52
6	Puducherry	1,199	1,996	916	680	604	5,395
IV	Other Agencies						
1	M/O Defence	5,956	2,531	1,883	-	-	10370
2	M/O Railways	1,547	2,126	325	347	487	4832
	All India	649,795	675,810	648,469	625,448	636,010	3235532

* Figures are provisional, NA = not available

On the other hand, an analysis of the figure on termination of pregnancies performed under the MTP Act in the major States where population is over 20 million suggests that the figure were under reported. It is assumed that States with more population will report more such cases. For example, Assam with a total population of 31 million as per 2011 census reported a total of 3,53,309 cases of termination of pregnancies under the MTP Act during 2008-2009 to 2012-2013. Whereas Uttar Pradesh with a population of 199 million as per 2011 census reported a total of 3,60,555 cases during the same period. In other words, Uttar Pradesh despite having 159 million populations more than Assam reported only 7,246 cases more than Assam. On the other hand, Maharashtra having a population of 112 million as per 2011 census i.e. less than Uttar Pradesh reported 5,44,671 cases of termination of pregnancies under the MTP Act during the said period.⁴⁴

This shows that the figures were under reported in Uttar Pradesh. Similarly, some other major States with population more than Assam as per 2011 census appears to be under reported. These States include **Andhra Pradesh** (32,842 cases) with over 84 million population; Bihar (67,895 cases) with population of over 100 million; Gujarat (1,04,901 cases) with population of over 60 million; Karnataka (1,30,410 cases) with population of over 61 million; Madhya Pradesh (1,32,118 cases) with population of over 72 million; Odisha (103,146 cases) with population of over 41 million; Rajasthan (158,470 cases) with population of over 68 million; Tamil Nadu (299,083 cases) with population of over 72 million; and West Bengal (269,091 cases) with population of over 91 million.⁴⁵

44. The population figures are taken from 2011 Population Census, Govt. of India <http://censusindia.gov.in/>

45. Ibid

5. GIRL CHILD PROTECTION SCHEME

The New Girl Child Protection Scheme (NGCPS) was launched in April 2005 and aimed at eliminating gender discrimination, eradicating female infanticide, improving sex ratio to empower and protect the rights of girl children and women through direct investment from Government. The management of the scheme was entrusted to Life Insurance Corporation (LIC) of India, Hyderabad. The scheme provides for risk coverage for life insurance for the girl child commencing from the age of 3 years. A single girl child is entitled to receive Rs.1 lakh after completion of 20 years of age and in case of two girl children, both of them are entitled to receive Rs.30,000 each after completion of 20 years of age. Project Director is the nodal officer of the scheme in the district.⁴⁶

Objectives of the scheme

The objectives of the Girl Child Protection Scheme (GCPS) are the following⁴⁷:

- Promote enrollment and retention of the girl child in school and to ensure her education at least up to intermediate level.
- Encourage girls to get married only after the age of 18 years.
- Encourage parents to adopt family planning norm with two girl children.
- Protect the rights of the girl child and provide social and financial empowerment to girl child.
- Eliminate negative cultural attitudes and practices against girls.
- Strengthen the role of the family in improving the status of the girl child.

46. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

47. <http://gcps.ap.nic.in/>

- Extend a special dispensation to Orphans/Destitutes and differently abled girls

Eligibility conditions

The conditions of eligibility for enrollment under the Girl Child Protection Scheme⁴⁸ are:

- Families with only single girl child or only two girls shall be eligible.
- Either of the parents should have undergone family planning operation on or after 01-04-2005.
- For children born before 03-01-2013 the total annual income of the family of girl child shall have to be below Rs. 20,000/- per annum for rural areas and Rs. 24,000/- per annum for urban areas.
- For children born on or after 03-01-2013 the total annual income of the family of girl child shall have to be below Rs. 40,000/- per annum for rural areas and Rs.48,000/- per annum for urban areas.
- Girl child born after August 2009 should get registered under RBD Act and produce birth certificate from competent authority i.e., Village Secretary/Municipality concerned.

However, some of the above given eligibility conditions have been relaxed in case of Orphans, Destitute, HIV/AIDS victims and disabled girls. The relaxed eligibility norms⁴⁹ are stated below:

- All such destitute or orphans or disabled girls who have not crossed 18 years as on May, 2008 were to be eligible for the benefits under Girl Child Protection Scheme.
- Girls whose disability is more than 80% shall be eligible for the benefits under Girl Child Protection Scheme provided the income of

48. <http://gcps.ap.nic.in/eligibility.jsp>

49. <http://gcps.ap.nic.in/eligibility.jsp>

their Parents / Guardian from all sources does not exceed Rs.1.00 lakh per annum.

- In respect of severely Disabled Girls (more than 80% disability) the condition of the Girl Child being either single or two girls alone shall not apply. A Girl with one or two male siblings will also be eligible for the benefit of Girl Child Protection Scheme.
- The condition of formal education shall be relaxed in case of such severely disabled girls.

Apart from the above conditions for enrolment, there are also conditions to be fulfilled by the girl child/girls consequent to enrolment to receive the benefits: These are⁵⁰:

- Girl children born after July 2009 should get immunized completely as per the schedule and produce immunization certificate by an Anganwadi worker/Auxiliary Nurse Midwife (ANM).
- A girl child who has been enrolled in the scheme should be admitted into school at the age of five to get the benefit of the scheme. No girl is entitled to receive the maturity value, if she has not completed schooling.
- The head of the Institution, where the child is pursuing studies has to give a certificate every year from Standards 8 to 12 or equivalent to CDPO, certifying that the child is continuing her education during the academic year, to enable her to claim the scholarship every year.
- No girl will get the final payment of the incentive, if she marries before the age of 18.
- She has to study intermediate (Standard 12) or equivalent to receive the final payment.

50. Special Financial Incentive Schemes for the Girl Child in India: A Review of Select Schemes by T.V. Sekher International Institute for Population Sciences, Mumbai, 2010 for The Planning Commission Government of India; available at: http://www.unfpa.org/sites/default/files/resource-pdf/UNFPA_Publication-39772.pdf

- Even if the girl fails in Standard 12 or an equivalent exam, she will be eligible for the final payment after completion of 20 years.

Formalities for application under the Scheme

Eligible applicant living in areas covered by the Integrated Child Development Scheme (ICDS) can obtain the application form from the Anganwadi Worker concerned or download from the dedicated website and submit the same with enclosures to the Anganwadi worker concerned. In non-ICDS areas, applicant the can submit their applications to the Child Development Project Officer concerned (CDPO). The following documents⁵¹ are required to be submitted along with the application:

- Two Photographs;
- Income certificate issued by MRO;
- Family Planning Certificate;
- Attested copy of Birth Certificate;
- White Ration Card and
- Disability Certificate Issued by Chief Medical Officer (in case of orphan/disabled)

As soon as an eligible applicant (with income below Rs. 20000 per annum for rural areas and Rs. 24000 per annum for urban areas) has one daughter or two daughters and undergoes family planning operation, he/she can apply to Anganwadi worker/Child Development Project Officer within the age of 3 years of girl child.⁵²

Benefits under the GCP Scheme

The following are the benefits entitled to the beneficiaries under the GCP Scheme⁵³:

51. <http://gcps.ap.nic.in/howtoapply.jsp>

52. <http://gcps.ap.nic.in/howtoapply.jsp>

53. <http://gcps.ap.nic.in/entitlements.jsp>

- In case of a single girl child she is entitled to receive Rs. 1.00 lakh after completion of 20 years of age.
- In case of two girl children, both of them are entitled to receive Rs. 30,000/- each, after completion of 20 years age.
- Apart from the above, each of the girl child are entitled to receive Rs. 1,200/- per annum as scholarship from 9th class to 12th class (including ITI course) during their period of study, as a benefit under the scheme.
- The beneficiary girl child who is the nominee of her either parents who is insured under Janasree Bima Yojana is entitled to: Rs. 30,000 on natural death of the insured or Rs. 75,000 on death or total permanent disability due to accident or Rs. 37,500 on partial permanent disability due to accident.

In case of payment of maturity amount to orphan/destitute beneficiaries there are some extra measures to ensure their maximum welfare. These include:

- The benefit under Girl Child Protection Scheme on completion of 20 years of age to orphans/destitute, shall be transferred/ reinvested in the name of the beneficiary girl child only after she is appropriately counseled by the Project Director, DWCD, CDPO concerned along with an authorized and qualified counselor (specialist in child psychology).
- The counseling committee shall counsel and guide the girl child on the options available to her, taking into consideration her aptitude, academic background, her interest etc. Depending on the girl child's request after such counseling, the amount shall be accordingly invested in Govt. schemes in her name or transferred to her account.

V. Procedure for enrolment, Selection and Sanction

The following procedures are to be followed for enrolment and selection of the beneficiaries⁵⁴:

54. <http://gcps.ap.nic.in/procedure.jsp>

1. As soon as a girl child or second girl child (there should be no other siblings) is born and either of the parents undergoes sterilization, Anganwadi worker must handover application with conditions and eligibility criteria to parents/guardian concerned. The eligible applicants can apply by downloading application from nearest Kisok/Computers with internet facility.
2. The Anganwadi Worker in the village shall conduct survey and prepare the list along with applications of sterilized couples from below poverty line having only one girl child or two-girl children.
3. The ICDS Supervisors shall verify the contents of application and scrutinize the certificates and submit the consolidated list with applications and enclosures to the CDPO concerned for cross-verification.
4. In areas which do not have Anganwadis, the concerned ICDS Supervisor, shall conduct survey and send the list along with requisite certificates etc., to the CDPO.
5. However, in respect of the twin cities of Hyderabad & Secunderabad, the District Collector may prescribe the modalities of selection so as to ensure full coverage of eligible children while ensuring transparency and accountability.
6. The mandal level committees comprising of CDPO as Convener and Supervisors, PHC doctor/MRO as members shall be formed to scrutinize the applications pertaining to financial year 2009-10 onwards. After verification of the applications and the final list of beneficiaries are shortlisted/approved by the Mandal level committee, the CDPO shall forward same to the Project Directors concerned for the approval of District Collector.
7. The District Collector shall after required verification issue sanction proceedings and arranges for distribution of certificates to beneficiaries.
8. The list of sanctions shall be published on the notice board of CDPOs and P.Ds offices every year and kept on their district and the department websites.

9. Along with certificates shall be given to the parents/guardians for fulfilling other conditions and furnishing the particulars thereof, starting with admission to class VIII with account No. and Bank particulars for crediting of annual scholarship amounts and other entitlements thereafter.

Assessment of performance of the GCP Scheme

The Girl Child Protection Scheme was announced by the Chief Minister of Andhra Pradesh on 8 March 2005. This is a modified version of an earlier scheme that was initiated in 1996. The Department of Women Development and Child Welfare is the nodal agency for planning, implementation, monitoring and evaluation of the scheme. This is being implemented and monitored by the District Collector at the district level. At the state level the Commissioner, Women Development and Child Welfare Department in coordination with the Life Insurance Corporation of India (LIC) are responsible for the same.⁵⁵

During the last one decade i.e. FY 2005-2006 to 2014-15, the State Government of Andhra Pradesh allocated total budget of Rs.43,050.67 lakhs. These included Rs.4887.50 lakhs during FY 2005-2006 to 2007-08; Rs.5,267 lakhs during FY2008-2009; Rs.5,991.90 lakhs during FY 2009-2010; Rs.4,820.63 lakhs during FY 2010-2011; Rs.6,31.32 lakhs during FY 2012-2013; Rs.767.22 lakhs during FY 2013-2014 and Rs.43,050.67 during FY 2014-2015.⁵⁶

A. Conditions to receive benefits restrictive

Though the conditions of eligibility for enrollment under the Girl Child Protection Scheme are lenient but conditions to be fulfilled by the girl child/girls consequent to enrolment to receive the benefits are restrictive and make the scheme redundant. Some of these conditions are stated below:

55. Special Financial Incentive Schemes for the Girl Child in India: A Review of Select Schemes by T.V. Sekher International Institute for Population Sciences, Mumbai, 2010 for The Planning Commission Government of India; available at: http://www.unfpa.org/sites/default/files/resource-pdf/UNFPA_Publication-39772.pdf

56. Available at: <http://wcdsc.ap.nic.in/protectionchildMain.php>

First, the beneficiary girl child born after July 2009 should get immunized completely as per the schedule and produce immunization certificate by an Anganwadi worker/Auxiliary Nurse Midwife (ANM). Failure to produce the immunization certificate would render the beneficiary ineligible to receive the benefits despite being enrolled under the GCP scheme.⁵⁷

Second, another eligibility condition is that a girl child who has been enrolled in the scheme should be admitted into school at the age of five to get the benefit of the scheme. It further states that no girl is entitled to receive the maturity value, if she has not completed schooling. Admission into school after 5 years of age or non-completion of school shall therefore make a girl child enrolled under the GCP Scheme ineligible to receive the maturity value.⁵⁸

Third, to receive the maturity value the beneficiary girl has to study minimum intermediate (Standard 12) or equivalent. Failure to reach at least intermediate will render her ineligible to receive the full entitlement under the GCP Scheme.⁵⁹

The above conditions are found to be restrictive as non-fulfillment of any of the above would make the beneficiary girl child ineligible to receive the maturity value that she would otherwise be entitled to under the GCP scheme. In effect, these eligibility conditions required to receive the maturity value makes the scheme ineffective given drop out rate in Andhra Pradesh.

B. Effectiveness of the GCP Scheme

During the last one decade i.e. FY 2005-2006 to 2014-15 the total number of beneficiaries were 6,65,320. This included 39,297 beneficiaries during FY 2005-2006; 85,588 beneficiaries during 2006-2007; 94,194 beneficiaries during 2007-2008; 68,739 beneficiaries during 2008-2009; 95,951 beneficiaries during 2009-2010; 95,098 beneficiaries during 2010-2011;

57. Special Financial Incentive Schemes for the Girl Child in India: A Review of Select Schemes by T.V. Sekher International Institute for Population Sciences, Mumbai, 2010 for The Planning Commission Government of India; available at: http://www.unfpa.org/sites/default/files/resource-pdf/UNFPA_Publication-39772.pdf

58. Ibid

59. Ibid

74,888 beneficiaries during 2011-2012; 65,88141 beneficiaries during 2012-2013 and 46,424 beneficiaries during 2013-2014.⁶⁰

C. Problems of implementation

The Office of the Comptroller and Auditor General of India (CAG) conducted performance audit of the State Government Departments and Autonomous Bodies under the General and Social Sectors during the period 2013-2014 as well as those which came to notice in earlier years. Some of the problems noted by the CAG audit⁶¹ are discussed below:

i. Records do not reveal break-up of category of beneficiaries

The guidelines under GCPS prescribe a ratio of 15 per cent for SC, 6 per cent for STs and remaining to others for extending the benefits. The budget allotted was under three heads viz., Normal State Plan, Special Component for SCs and Tribal Sub-Plan for STs. However, the CAG audit found that the records did not reveal any break-up of beneficiaries category-wise i.e. SCs, STs and General. In the absence of these details, Audit could not verify if the coverage of the above categories of beneficiaries was as per the guidelines of the scheme.⁶²

ii. Discrepancies in processing/disbursement of claims

The CAG audit scrutiny with regard to processing and disbursement of claims revealed the following:

First, claims amounting to Rs. 85.94 lakh settled by Life Insurance Corporation and paid to the Commissioner, WD&CW for disbursement to the nominees of the insured parents were lying with the latter as of July 2014 without disbursement.⁶³

60. Available at: <http://wcdsc.ap.nic.in/protectionchildMain.php>

61. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

62. Ibid

63. Ibid

Second, against 142 claims proposed by Project Directors (PDs), 106 claims were settled by LIC and 34 claims were returned to PDs for want of information. The remaining claims were not paid due to non-availability of bank details.⁶⁴

Third, in Kurnool, 13 claims received during 2009-2010 and 2011-2012 pertaining to seven students were pending as of July 2014 while in Prakasam district, claims of five death cases were not settled for want of proposals and in Adilabad district, seven death cases (2005-2006 to 2009-2010) and two maturity claims (2009-10 and 2010-11) were not paid the insured amount as the claims were not forwarded to LIC. Orphans enrolled in children homes and orphan homes were not being covered under the scheme in Adilabad district.⁶⁵

iii. Non-issue of bonds by LIC due to lack of coordination between the Department of Women and Child Welfare and LIC

The CAG audit also found that in the test checked districts, 1,01,700 applications were received during 2009-2014 of which, only 49,313 (48 per cent) bonds were issued leaving a balance of 52,387 bonds yet to be issued as of July 2014. Bonds were not issued at all during the years 2011-12 and 2012-2013.

Thus, lack of coordination between the department and LIC led to variation in the number of beneficiaries, giving scope for payment of premium for non-existent beneficiaries. Further, delayed payment of premium resulted in levy of penalties besides non-issue of bonds and non-coverage of beneficiaries to that extent during this period. Moreover, due to the delay in processing the claims at various levels in the department and lack of bank detail, etc., girl children were deprived of the benefit under GCPS. The non/delayed settlement of claims has thus defeated the very purpose of the scheme.⁶⁶

64. Ibid

65. Ibid

66. Ibid

6. ANDHRA PRADESH BANGARU TALLI GIRL CHILD PROMOTION AND EMPOWERMENT ACT, 2013

Bangaru Talli Scheme is meant to take care of the girl child in every household from her birth till she completes her graduation.⁶⁷ With a view to facilitating faster socio economic growth of the girl children and to further empower the women, Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 was enacted to provide financial incentives on achieving certain milestones in the life of girl children born in the State on or after 1st May 2013 till they attain their 21st year.⁶⁸

Eligibility conditions

To become eligible under the Banagaru Talli scheme, the eligibility conditions⁶⁹ are:

- Resident of Andhra Pradesh
- Should be Below Poverty Line family holding white Ration card holders like WAP/RAP/TAP/YAP/AAP
- The Girl child born within “two live births norm” born on or after 1st May 2013. For example: (i) A girl child is ineligible if the mother has two living children before May 1st 2013 irrespective of the gender. (ii) If twins are born in the first delivery and are living, no more children born in successive deliveries are eligible. (iii) If one child born is either boy or girl and living from previous deliveries and any number of girl children born in the next one delivery are eligible.⁷⁰

67. Available at: <http://bangarutalli.ap.gov.in/pdf/BT-ACT-2013.pdf>

68. Available at: http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

69. Who is eligible for Bangarutalli Scheme? Available at: <http://www.aponlineinfo.in/2015/12/bangarutalli-pathakam-scheme-in-ap.html>

70. Available at: <http://bangarutalli.ap.gov.in/faq.html>

- Institutional delivery in Public or Private Hospital (home deliveries are considered in ITDA areas, in other home deliveries are considered but the first milestone incentive i.e. Rs. 2,500 entitled on birth of a girl child will not be paid).⁷¹

Formalities for enrolment under the Scheme

Section 3(1) of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 provides for setting up an electronic Central Registry to create Central Registry for creating and updating database of all the girl children born on or after 1st May 2013 and the mothers thereof.⁷²

Section 4 of the Act provides for procedures to register the girl children and mothers. Sub-section (1) states that particulars of mothers shall be filed by the Village/Ward Implementation Authority using the online data entry process and incorporated in the database preferably in the first trimester of the pregnancy. Sub-section (2) states that if the child born is a girl child, the particulars of the birth shall be uploaded by the Village/Ward Implementation Authority (VIA/WIA) into the central registry using the online data entry process within 21 days of the date of the birth of the girl child along with the following documents⁷³ names:

- i. Birth Certificate issued by the Registrar of Births and Deaths at the Gram Panchayat/Ward level.
- ii. Photograph of the girl child and her mother/guardian
- iii. The Aadhar card of the mother/guardian
- iv. Copy of the Ration Card containing therein the name of the mother/guardian

71. Who is eligible for Bangarutalli Scheme? Available at: <http://www.aponlineinfo.in/2015/12/bangarutalli-pathakam-scheme-in-ap.html>

72. Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at: http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

73. Ibid

- v. Copy of the Joint bank account in the name of the girl and her mother/guardian.

Sub-section (3) provides that the details so entered shall be authenticated by the Authentication Authority within 7 days from the date of such registration, after due verification, and irrespective of whether the birth has taken place in an institution to which they are attached to.⁷⁴

Section 5 of the Act provides for procedures for updating and changing of details in the Central Registry. Sub-section (1) requires that particulars of every girl child registered in the central registry shall be updated at least once a year before 15th July online by the functionaries listed in section 9 of the Act.⁷⁵

Incentives and disbursal

Bangaru Talli scheme is meant to take care of the girl child in every household from her birth till she completes her graduation. Schedule I to the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 provides for quantum of incentives provided to the beneficiaries under the Bangaru Talli scheme. These are state below and the criteria for disbursement of the benefits⁷⁶ are given as under:

- Rs. 2,500 on birth of a girl child
- Rs. 1,000 during 1st year for which milestone is immunization
- Rs. 1,000 during 2nd year for which milestone is immunization
- Rs. 1,500 during 3rd year for which milestone is joining Anganwadi center

74. Section 4 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

75. Section 5 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

76. Schedule I to the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

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- Rs. 1,500 during 4th year for which milestone is attending Anganwadi center
 - Rs. 1,500 during 5th year for which milestone is attending Anganwadi center
 - Rs. 2,000 during 6th year for which milestone is admission to 1st Standard
 - Rs. 2,000 during 7th year for which milestone is studying in 2nd Standard
 - Rs. 2,000 during 8th year for which milestone is studying in 3rd Standard
 - Rs. 2,000 during 9th year for which milestone is studying in 4th Standard
 - Rs. 2,000 during 10th year for which milestone is studying in 5th Standard
 - Rs. 2,500 during 11th year for which milestone is studying in 6th Standard
 - Rs. 2,500 during 12th year for which milestone is studying in 7th Standard
 - Rs. 2,500 during 13th year for which milestone is studying in 8th Standard
 - Rs. 3,000 during 14th year for which milestone is studying in 9th Standard
 - Rs. 3,000 during 15th year for which milestone is studying in 10th Standard
 - Rs. 3,500 during 16th year for which milestone is studying in 11th Standard
 - Rs. 3,500 during 17th year for which milestone is studying in 12th Standard
 - Rs. 4,000 during 18th year for which milestone is admission in Graduation
-

- Rs. 4,000 during 19th year for which milestone is doing Graduation
- Rs. 4,000 during 20th year for which milestone is doing Graduation
- Rs. 4,000 during 21st year for which milestone is doing Graduation

Apart from the above, Sub-section 7 of the Act provides that on reaching the age of 21, the beneficiary shall be paid a lump sum incentive of: (a) Rs. 50,000 if the girl child passes as a regular student the Intermediate (+2) or equivalent exam and (b) Rs. 1,00,000 if the girl child passes as a regular student the Degree or equivalent exam. Sub-section (3) provides that the stated above incentives shall be independent of and in addition to any central scheme already under implementation or launched subsequently.⁷⁷

Section 8 of the Act prescribes the manner for management of incentive funds and disbursal of the same to the beneficiaries. Sub-section (1) requires the State Implementation Authorities shall create and operationalize the Electronic Fund Management system which facilitates direct electronic transfer of funds from Treasury to the bank/postal account of the beneficiaries.⁷⁸

Under Sub-section (1) of section 9 of the Act the State Implementation Authorities shall ensure that within 7 days from the date of authentication of eligible milestone in the database, an electronic pay order is automatically generated by the central registry advising the bank to electronically debit the Bangaru Talli Public Deposit Account and credit the bank account of the beneficiary. Sub-section (2) requires the State Implementation Authorities to ensure that the incentives are disbursed on or before 15th August each year. Section 10 of the Act requires transfer of all incentives to the beneficiaries electronically and directly into the bank accounts using the Aadhaar Payment Bridge System.⁷⁹

77. Section 7 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

78. Section 8 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

79. Sections 9 and 10 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

Assessment of performance of the Bangaru Talli Scheme

There are two components of the Bangaru Talli scheme viz., Society for Elimination of Rural Poverty (SERP) and Mission for Elimination of Poverty in Municipal Areas (MEPMA).⁸⁰

Under the Society for Elimination of Rural Poverty component, a total of 4,50,538 girls have been registered under the Bangaru Talli Scheme across 29 districts of undivided Andhra Pradesh from May 2013 to 23 January 2016. These included 2,72,839 in 17 districts of Andhra Pradesh⁸¹ and 1,77,699 in 12 districts of Telangana⁸². During the corresponding period the amount of incentives released was Rs. 62,76,32,500 to 2,51,053 beneficiaries in Andhra Pradesh⁸³ while Rs. 18,10,12,500 was released to 72,405 beneficiaries.⁸⁴ The cumulative percentage of the number of beneficiaries who received incentives out of the total number of beneficiaries registered in Andhra Pradesh and Telangana was 71.79%.

Under the Mission for Elimination of Poverty in Municipal Areas component, a total of 82,609 girls were registered in 25 district of undivided Andhra Pradesh from May 2013 to 23 January 2016. These included 50,704 in 15 districts of Andhra Pradesh⁸⁵ and 31,905 in 10 districts of Telangana.⁸⁶ During the corresponding period, incentives of Rs.1,78,35,000 was released to 7,134 beneficiaries in Andhra Pradesh⁸⁷ and incentives of Rs.1,86,12,500

80. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

81. SERP-Andhra Pradesh- Available at: <http://bangarutalli.ap.gov.in/Serp/Status%20Reports/BeneficiaryRegistrationAndIncentiveStatusReport/districtWiseEligibleBeneficiariesReport.jsp?status=Y&todayDate=23-01-2016&districtId=0&fromDate=&toDate=&firstTimeFlagState=firstTimeFlagState&district=0&mandalId=0&panchayatId=0&panchayatId=0&villageId=0&villageId=0&vold=0&vold=0>

82. Ibid

83. Ibid

84. Ibid

85. MEPMA-Andhra Pradesh-Available at: <http://bangarutalli.ap.gov.in/Mepma/Status%20Reports/BeneficiaryRegistrationAndIncentiveStatusReport/mepmaDistrictWiseEligibleBeneficiariesReport.jsp?status=Y&fromDate=&toDate=&todayDate=23-01-2016&firstTimeFlagState=firstTimeFlagState&districtId=0&district=0&municipalId=0&slumId=0&slumId=0>

86. Ibid

87. Ibid

was released to 7,445 beneficiaries in Telangana⁸⁸. The cumulative percentage of the number of beneficiaries who received incentives out of the total number of beneficiaries registered in Andhra Pradesh and Telangana was 17.64%.⁸⁹

The Office of the Comptroller and Auditor General of India (CAG) conducted performance audit of the State Government Departments and Autonomous Bodies under the General and Social Sectors during the period 2013-2014 as well as those which came to notice in earlier years. According to the audit, the Government of Andhra Pradesh allocated Rs.80.30 crores through supplementary provision in the budget during FY 2013-2014. Out of this, an amount of Rs. 79.19 crore was drawn and adjusted to the Public Deposit (PD) accounts of both components of the Bangaru Talli Scheme - Society for Elimination of Rural Poverty (SERP) and Mission for Elimination of Poverty in Municipal Areas (MEPMA).⁹⁰

The audit found that only an amount of Rs. 39.51 crore was only utilised covering 1,58,059 beneficiaries (57 per cent) as against 2,75,674 registered beneficiaries. The implementing agency SERP diverted an amount of Rs. 1.42 crore towards administrative expenses (SPMU) which was not authorised as per the scheme guidelines.⁹¹

The audit further found that there was a balance of Rs. 41.30 crore (SERP: PD Account – Rs. 21.20 crore, Current Account Rs. 7.75 crore and MEPMA-PD Account Rs. 12.35 crore) as of April 2014. It was found that utilization certificates (UCs) were not furnished by MEPMA till the time of the audit. The UC furnished by SERP for the period March 2014 for Rs. 42.17 crore as against the actual expenditure of Rs. 20.33 crore in respect of 81,309

88. Ibid

89. Available at: <http://bangarutalli.ap.gov.in/Mepma/MIS%20Reports/Analytical%20Reports/FundTransferDetailsReport/mepmaDistrictWiseFundTransferDetailsReport.jsp?status=Y&fromDate=&toDate=&todayDate=22-01-2016&firstTimeFlagState=firstTimeFlagState&districtId=0&district=0&municipalId=0&slumId=0&slumId=0>

90. Report of the Comptroller and Auditor General of India on General & Social Sector for the year ended March 2014 of Government of Andhra Pradesh (Report No. 3 of 2015); Available at: http://www.saiindia.gov.in/sites/default/files/audit_report_files/Andhra_Pradesh_Report_3_2015.pdf

91. Ibid

beneficiaries was found to be incorrect. It was further found that the Commissioner, WD & CWD was furnishing the UCs for the entire amounts released to SERP and MEPMA instead of for the actual utilisation. In respect of the releases (Rs. 14.53 crore) to MEPMA, the details of beneficiaries, district-wise registrations, expenditure, UCs, etc were not available with the Commissioner, WD & WCD.⁹²

Conduct of Social Audit on performance of the Bangaru Talli scheme

Section 21 of Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 provides for conduct of Social Audit of implementation of the Bangaru Talli scheme. Sub-section (1) prescribes that Social Audit shall be conducted in rural areas in accordance with the AP Social Audit Rules 2008 as amended from time to time. Sub-section (2) states that Social audit shall be conducted for a Mandal at a time, in every village, once in every six months scheduled along with social audit of other schemes. In respect of social audit in urban areas, Sub-section (3) provides that in urban areas it shall be conducted for a town at a time in every ward once in every six months schedule along with the social audit of other schemes.⁹³

Under Sub-section (4), Social Audit is to examine whether the entries in the Central Registry correspond to the field reality and whether or not the beneficiaries received the incentives disbursed under the Act while Sub-section (5) requires recording of all cases of deviations and fixing of responsibility. Sub-section (6) makes it mandatory for the Sub Divisional Implementing Authority shall attend the Social Audit Public Hearings and shall also be responsible for taking follow up action as per the observations of the Social Audit.⁹⁴

92. Ibid

93. Section 21 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; available at: http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

94. Section 21 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at: http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

Grievance redressal mechanism

Section 22 of Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 provides for Grievance Redressal system under the Act. Sub-section (1) provides that any person aggrieved about non-implementation or the manner of implementation of any provision of the Act, or aggrieved by any action, or inaction of a functionary mandated to perform certain function under the Act, can complain to the Sub Divisional Implementing Authority either in person or by a letter. Sub-section (2) states that grievances can also be registered through a toll-free Help Line made operational by the Nodal Authority and shall be considered in the manner provided under the Act. Sub-section (3) requires the Sub Divisional Implementing Authority to conduct suitable enquiry within 15 days from the date of receipt of such complaint and pass appropriate orders for action with due intimation to the aggrieved. Sub-section (4) provides for opportunity of an appeal against the orders of the Sub Divisional Implementing Authority before the District Implementing Authority, who shall dispose it off within 30 days from the date of receipt of such appeal. Sub-section (5) provides that the orders passed by the District Implementing Authority shall be considered as final and binding on all parties.⁹⁵

95. Section 22 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013; Available at: http://bangarutalli.ap.gov.in/pdf/29062013PR_MS307.PDF

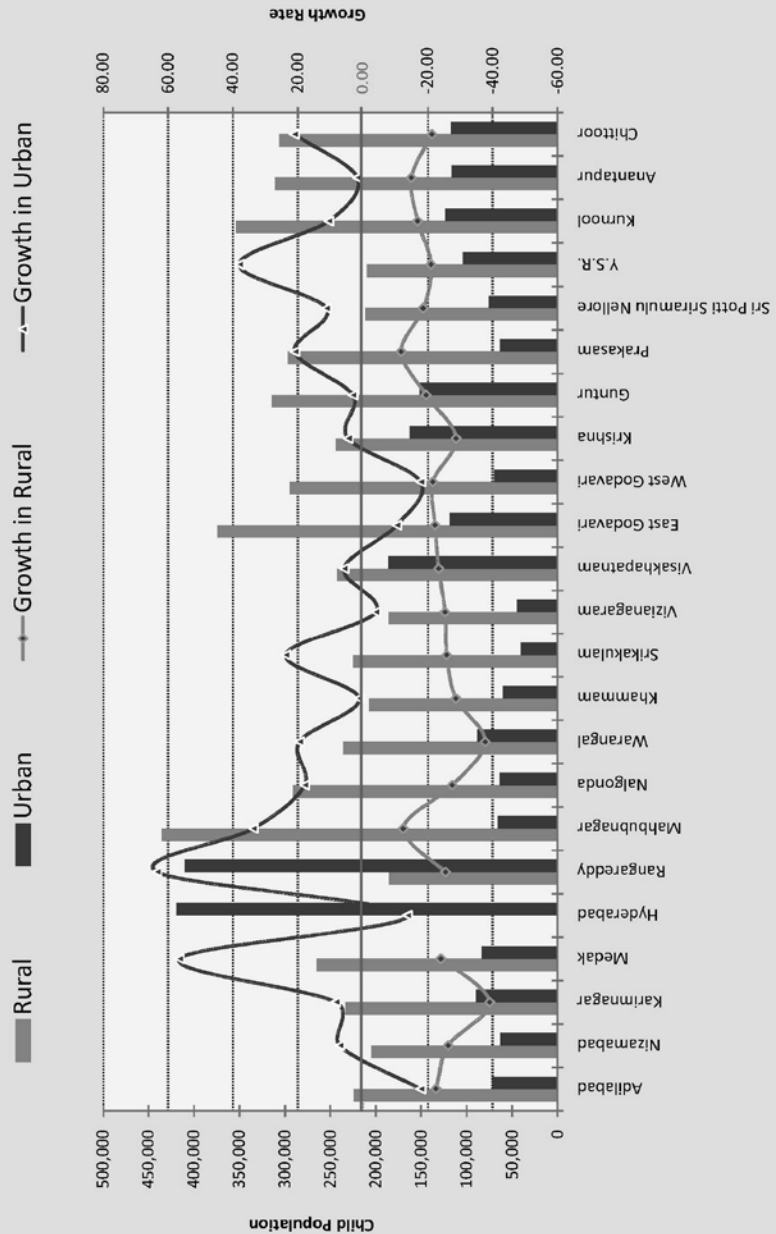
ANNEX I: CHILD POPULATION AND DECADAL GROWTH IN ANDHRA PRADESH

Census of India 2011
Provisional Population Totals

Child population and decadal growth by residence - Persons

State/ District Code	State / District	Child Population 0-6 Years (Persons) 2011			Percentage Decadal Growth child population 0-6 years (Persons) 2001-2011		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	8,642,686	5,852,284	2,790,402	-15.03	-23.22	9.43
01	Adilabad	295,811	224,228	71,583	-21.49	-22.60	-17.80
02	Nizamabad	268,202	205,225	62,977	-20.52	-26.35	7.13
03	Karimnagar	322,897	233,272	89,625	-30.70	-39.14	8.38
04	Medak	348,721	265,098	83,623	-13.39	-24.09	56.49
05	Hyderabad	419,500	0	419,500	-13.70	0.00	-13.70
06	Rangareddy	595,352	185,629	409,723	19.06	-25.56	63.46
07	Mahbubnagar	501,878	435,734	66,144	-8.33	-12.51	33.72
08	Nalgonda	354,940	290,927	64,013	-22.16	-27.57	17.96
09	Warangal	324,410	236,006	88,404	-28.35	-37.70	19.55
10	Khammam	267,553	206,917	60,636	-23.59	-28.70	1.14
11	Srikakulam	265,404	225,041	40,363	-21.03	-25.85	23.75
12	Vizianagaram	231,021	186,040	44,981	-21.93	-25.31	-3.99
13	Visakhapatnam	429,234	242,612	186,622	-12.96	-23.39	5.77
14	East Godavari	492,446	374,246	118,200	-19.73	-22.27	-10.46
15	West Godavari	363,536	294,280	69,256	-20.90	-21.60	-17.81
16	Krishna	406,927	244,086	162,841	-18.39	-28.81	4.56
17	Guntur	466,285	314,670	151,615	-13.38	-19.57	3.11
18	Prakasam	360,461	296,805	63,656	-7.42	-11.85	20.96
19	Sri Potti Sriramulu Nellore	287,368	211,779	75,589	-12.50	-18.68	11.20
20	Y.S.R.	313,455	209,426	104,029	-7.99	-21.06	38.06
21	Kurnool	477,198	353,718	123,480	-11.24	-16.94	10.48
22	Anantapur	426,922	310,720	116,202	-11.03	-15.03	1.78
23	Chittoor	423,165	305,825	117,340	-12.85	-21.33	21.18

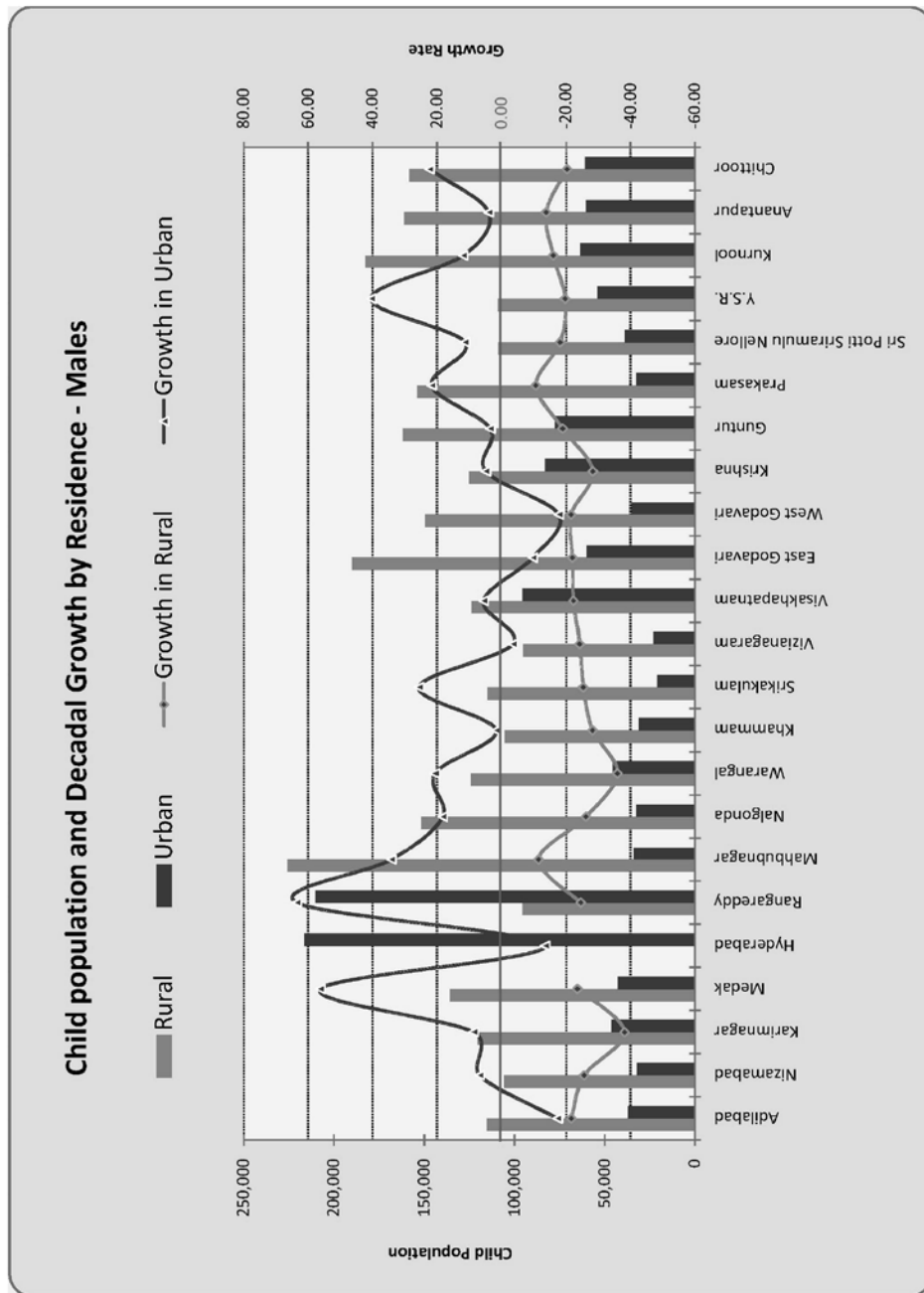
Child population and Decadal Growth by Residence - Persons



Census of India 2011
Provisional Population Totals

Child population and decadal growth by residence - Males

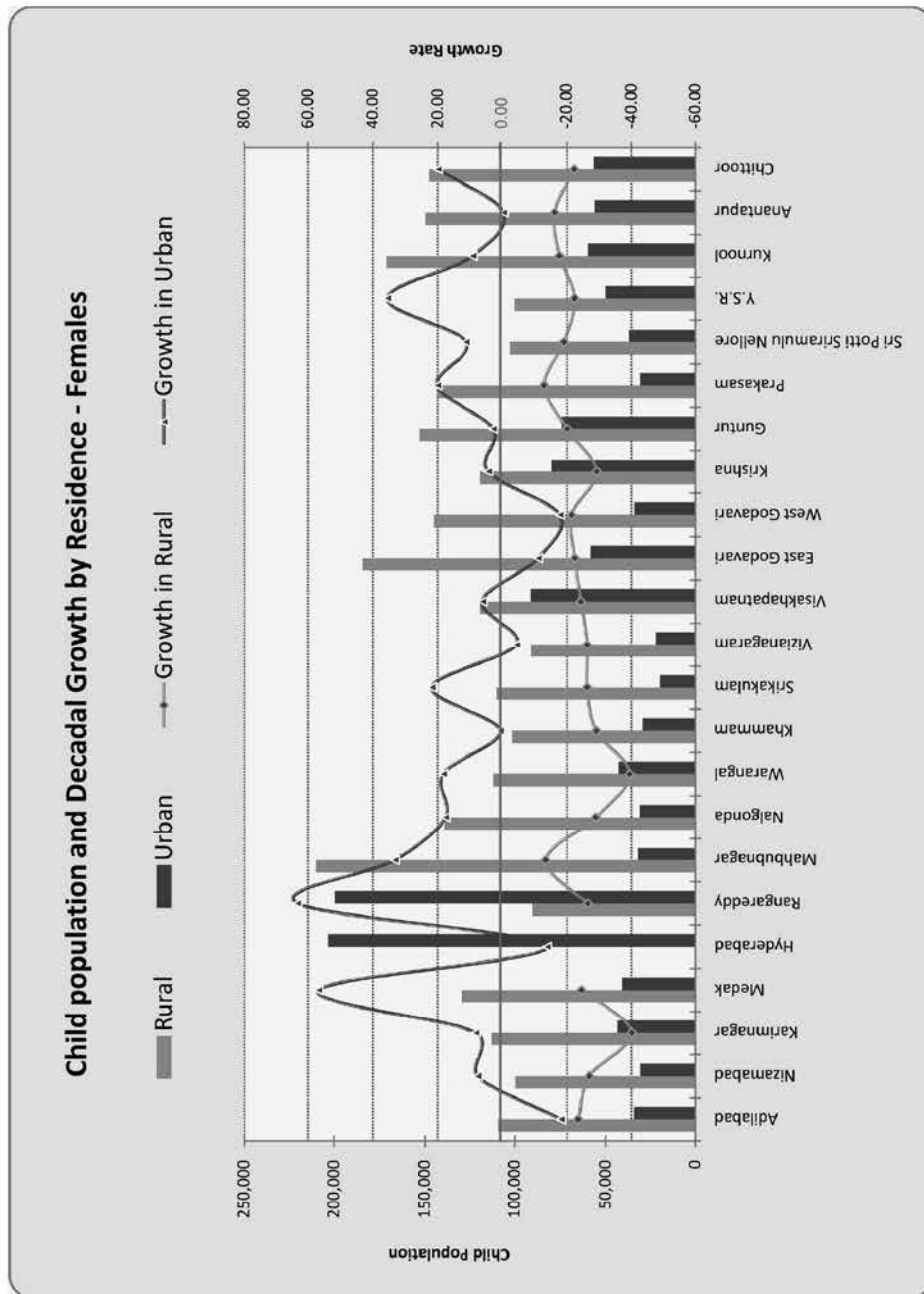
State/ District Code	State / District	Child Population 0-6 Years (Males) 2011			Percentage Decadal Growth child population 0-6 years (Males) 2001-2011		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	4,448,330	3,014,087	1,434,243	-14.25	-22.38	9.96
01	Adilabad	152,362	115,243	37,119	-20.64	-21.65	-17.36
02	Nizamabad	137,788	105,633	32,155	-20.02	-25.70	6.81
03	Karimnagar	166,698	120,554	46,144	-29.81	-38.19	8.69
04	Medak	178,441	135,720	42,721	-12.94	-23.59	56.21
05	Hyderabad	216,428	0	216,428	-13.49	0.00	-13.49
06	Rangareddy	305,728	95,454	210,274	19.79	-24.65	63.58
07	Mahbubnagar	259,810	225,834	33,976	-7.39	-11.52	34.17
08	Nalgonda	184,739	151,914	32,825	-20.93	-26.21	18.27
09	Warangal	169,654	124,136	45,518	-26.74	-35.96	20.70
10	Khammam	136,637	105,499	31,138	-23.10	-28.26	1.71
11	Srikakulam	135,929	115,074	20,855	-20.43	-25.39	25.63
12	Vizianagaram	118,149	95,043	23,106	-20.96	-24.29	-3.50
13	Visakhapatnam	218,923	123,492	95,431	-12.26	-22.39	5.57
14	East Godavari	250,086	190,050	60,036	-19.36	-21.99	-9.71
15	West Godavari	184,513	149,461	35,052	-20.92	-21.64	-17.73
16	Krishna	208,341	125,037	83,304	-17.96	-28.36	4.90
17	Guntur	239,408	161,846	77,562	-12.86	-19.00	3.51
18	Prakasam	186,581	153,840	32,741	-6.31	-10.69	21.69
19	Sri Potti Sriramulu Nellore	147,719	109,041	38,678	-12.10	-18.22	11.37
20	Y.S.R.	163,371	109,271	54,100	-6.45	-19.73	40.48
21	Kurnool	246,345	182,537	63,808	-10.28	-16.09	11.92
22	Anantapur	221,539	161,163	60,376	-9.57	-13.79	4.02
23	Chittoor	219,141	158,245	60,896	-11.78	-20.32	22.32



Census of India 2011
Provisional Population Totals

Child population and decadal growth by residence - Females

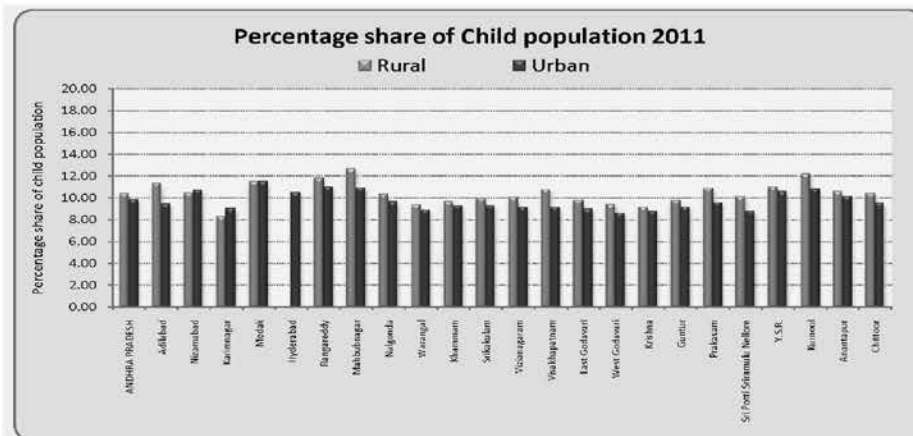
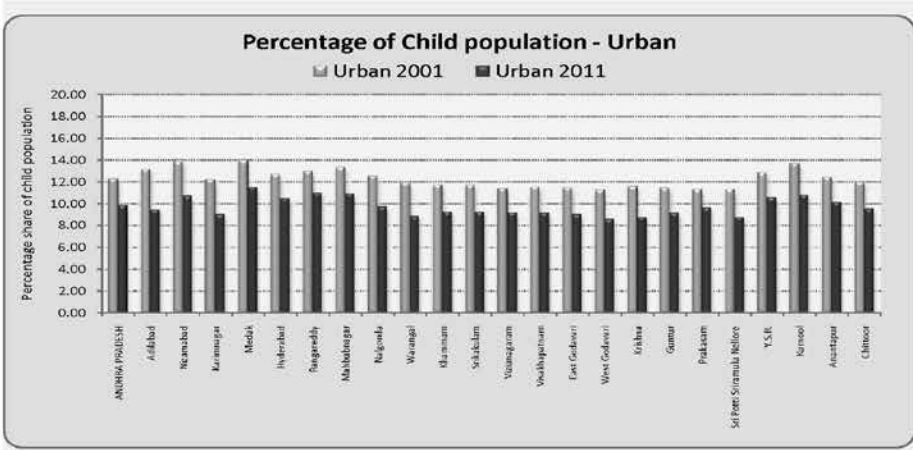
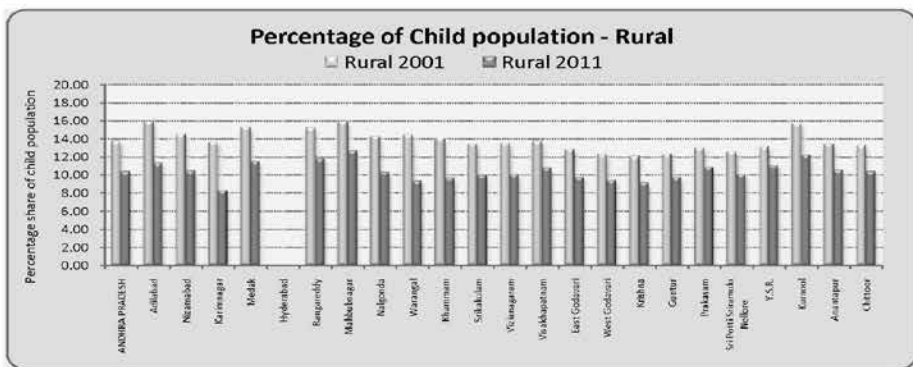
State/ District Code	State / District	Child Population 0-6 Years (Females) 2011			Percentage Decadal Growth child population 0-6 years (Females) 2001-2011		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	4,194,356	2,838,197	1,356,159	-15.85	-24.09	8.86
01	Adilabad	143,449	108,985	34,464	-22.37	-23.58	-18.27
02	Nizamabad	130,414	99,592	30,822	-21.03	-27.02	7.46
03	Karimnagar	156,199	112,718	43,481	-31.63	-40.11	8.05
04	Medak	170,280	129,378	40,902	-13.86	-24.60	56.78
05	Hyderabad	203,072	0	203,072	-13.92		-13.92
06	Rangareddy	289,624	90,175	199,449	18.31	-26.50	63.32
07	Mahbubnagar	242,068	209,900	32,168	-9.32	-13.55	33.25
08	Nalgonda	170,201	139,013	31,188	-23.45	-29.01	17.64
09	Warangal	154,756	111,870	42,886	-30.03	-39.51	18.36
10	Khammam	130,916	101,418	29,498	-24.09	-29.14	0.55
11	Srikakulam	129,475	109,967	19,508	-21.65	-26.32	21.80
12	Vizianagaram	112,872	90,997	21,875	-22.93	-26.35	-4.50
13	Visakhapatnam	210,311	119,120	91,191	-13.67	-24.40	5.98
14	East Godavari	242,360	184,196	58,164	-20.11	-22.56	-11.23
15	West Godavari	179,023	144,819	34,204	-20.88	-21.56	-17.88
16	Krishna	198,586	119,049	79,537	-18.83	-29.27	4.20
17	Guntur	226,877	152,824	74,053	-13.91	-20.16	2.69
18	Prakasam	173,880	142,965	30,915	-8.58	-13.08	20.20
19	Sri Potti Sriramulu Nellore	139,649	102,738	36,911	-12.91	-19.17	11.03
20	Y.S.R.	150,084	100,155	49,929	-9.60	-22.47	35.53
21	Kurnool	230,853	171,181	59,672	-12.24	-17.82	8.98
22	Anantapur	205,383	149,557	55,826	-12.55	-16.33	-0.53
23	Chittoor	204,024	147,580	56,444	-13.98	-22.39	19.98



**Census of India 2011
Provisional Population Totals**

Percentage of child population by residence - Persons

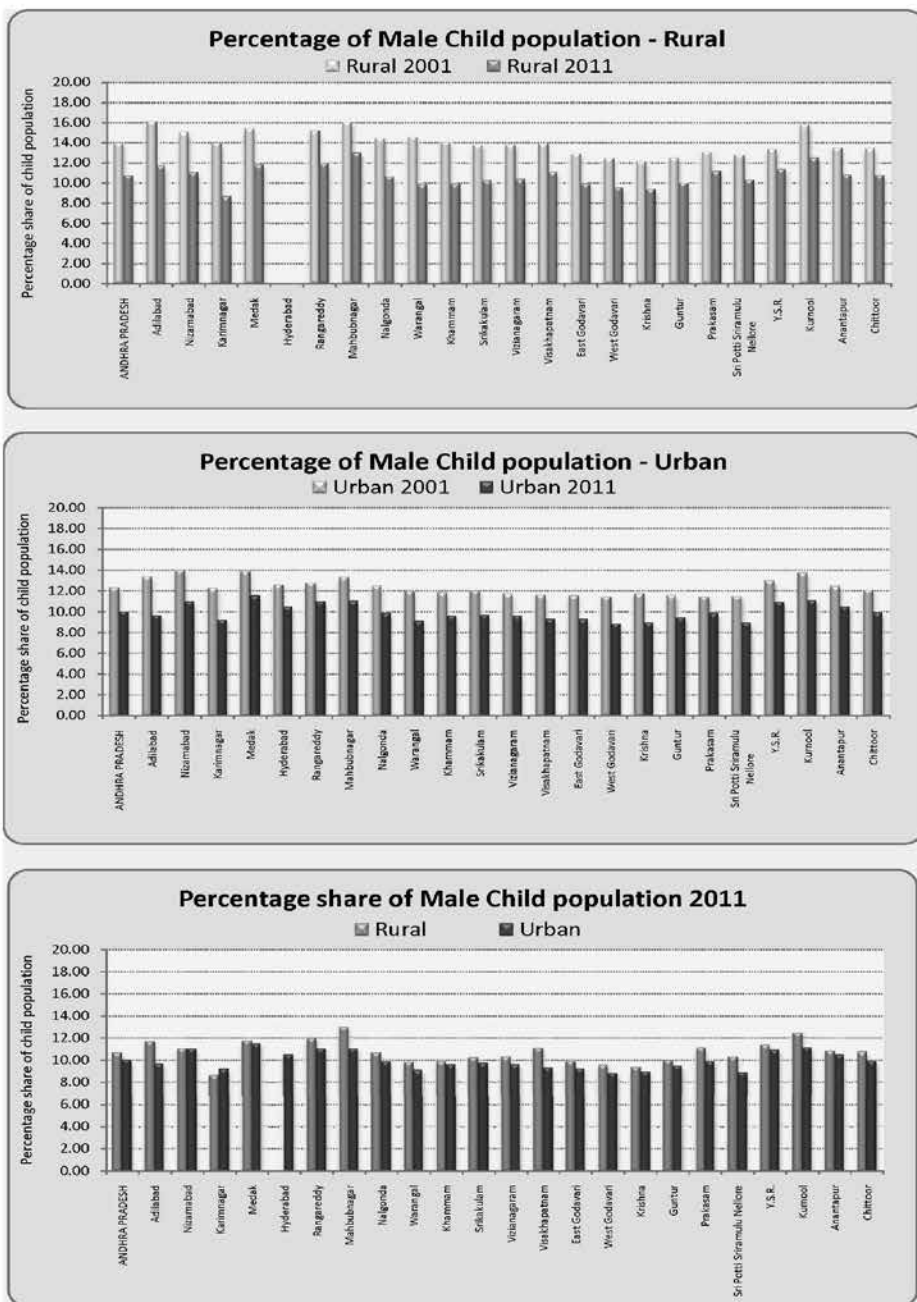
State/ District Code	State / District	Percentage of Child Population in Age Group 0-6 Years 2001 (Persons)			Percentage of Child Population in Age Group 0-6 Years 2011 (Persons)		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	13.35	13.76	12.25	10.21	10.39	9.84
01	Adilabad	15.14	15.85	13.19	10.80	11.33	9.45
02	Nizamabad	14.39	14.51	13.84	10.51	10.45	10.71
03	Karimnagar	13.34	13.62	12.18	8.47	8.28	9.01
04	Medak	15.08	15.27	13.93	11.50	11.51	11.48
05	Hyderabad	12.69	0.00	12.69	10.46	0.00	10.46
06	Rangareddy	13.99	15.23	12.94	11.24	11.81	11.00
07	Mahbubnagar	15.58	15.85	13.32	12.42	12.68	10.91
08	Nalgonda	14.04	14.27	12.54	10.19	10.31	9.67
09	Warangal	13.95	14.44	11.87	9.21	9.35	8.86
10	Khammam	13.58	14.03	11.74	9.56	9.66	9.25
11	Srikakulam	13.24	13.43	11.70	9.83	9.94	9.25
12	Vizianagaram	13.16	13.56	11.36	9.86	10.04	9.17
13	Visakhapatnam	12.87	13.76	11.53	10.01	10.78	9.16
14	East Godavari	12.52	12.84	11.46	9.56	9.75	8.99
15	West Godavari	12.08	12.30	11.22	9.24	9.41	8.57
16	Krishna	11.91	12.05	11.59	8.98	9.14	8.77
17	Guntur	12.06	12.31	11.44	9.54	9.73	9.15
18	Prakasam	12.73	12.99	11.26	10.62	10.87	9.61
19	Sri Potti Sriramulu Nellore	12.31	12.58	11.35	9.69	10.07	8.77
20	Y.S.R.	13.09	13.17	12.82	10.87	11.02	10.57
21	Kurnool	15.23	15.70	13.67	11.79	12.19	10.80
22	Anantapur	13.18	13.44	12.42	10.46	10.58	10.13
23	Chittoor	12.96	13.25	11.94	10.15	10.40	9.55



Census of India 2011
Provisional Population Totals

Percentage of child population by residence - Males

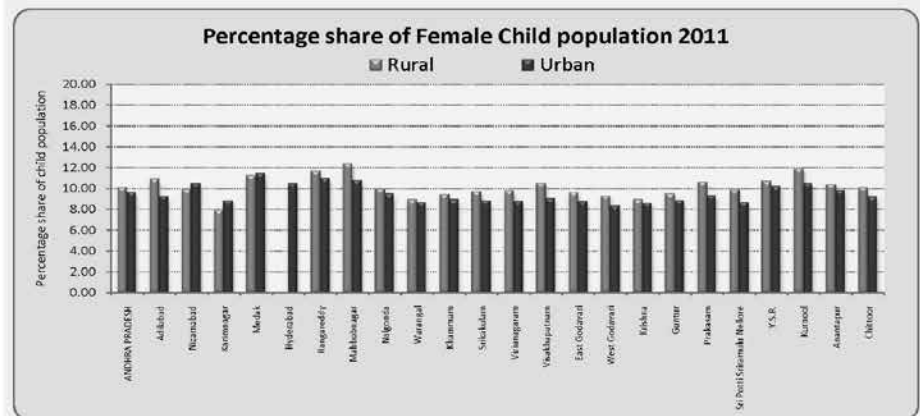
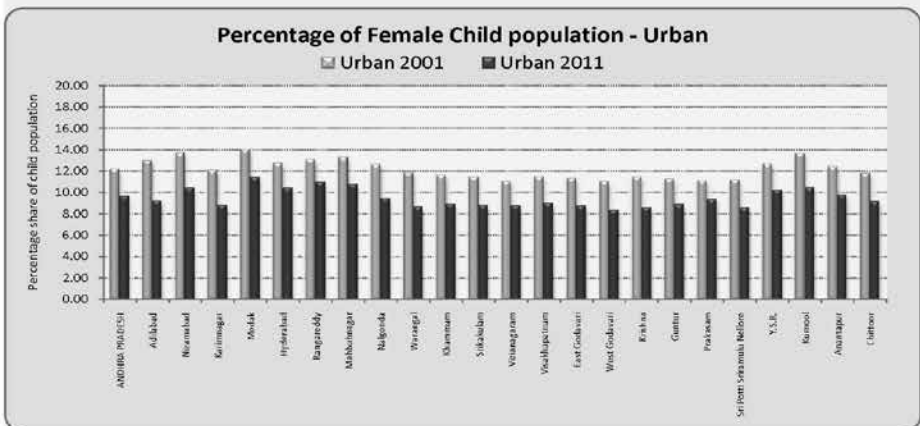
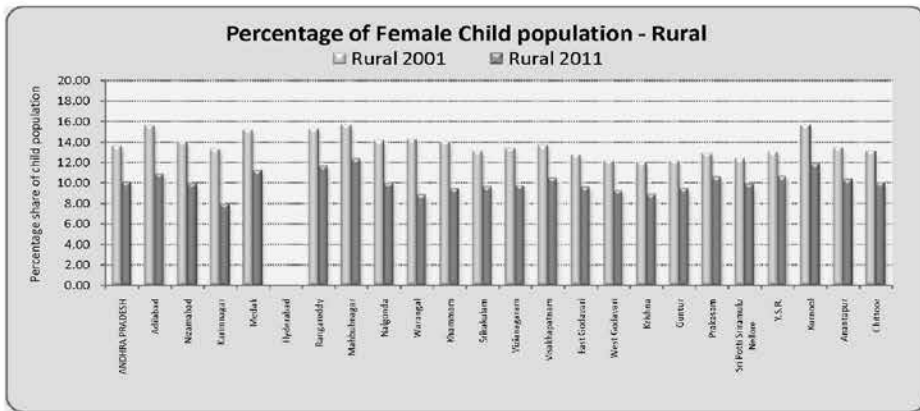
State/ District Code	State / District	Percentage of Child Population in Age Group 0-6 Years 2001 (Males)			Percentage of Child Population in Age Group 0-6 Years 2011 (Males)		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	13.46	13.90	12.32	10.46	10.68	10.04
01	Adilabad	15.35	16.07	13.37	11.15	11.72	9.68
02	Nizamabad	14.81	15.00	13.99	11.00	11.01	11.00
03	Karimnagar	13.59	13.91	12.28	8.79	8.63	9.22
04	Medak	15.15	15.37	13.88	11.71	11.77	11.52
05	Hyderabad	12.63	0.00	12.63	10.48	0.00	10.48
06	Rangareddy	13.88	15.18	12.79	11.29	11.95	11.01
07	Mahbubnagar	15.74	16.03	13.33	12.70	12.99	11.05
08	Nalgonda	14.14	14.40	12.47	10.51	10.65	9.89
09	Warangal	14.08	14.59	11.92	9.61	9.81	9.08
10	Khammam	13.61	14.04	11.85	9.82	9.88	9.60
11	Srikakulam	13.56	13.75	11.98	10.14	10.22	9.71
12	Vizianagaram	13.35	13.72	11.70	10.17	10.32	9.60
13	Visakhapatnam	12.93	13.84	11.59	10.23	11.09	9.29
14	East Godavari	12.61	12.92	11.57	9.73	9.89	9.26
15	West Godavari	12.22	12.40	11.44	9.40	9.55	8.81
16	Krishna	11.99	12.13	11.71	9.18	9.35	8.95
17	Guntur	12.21	12.45	11.61	9.81	9.99	9.45
18	Prakasam	12.83	13.08	11.41	10.89	11.13	9.89
19	Sri Potti Sriramulu Nellore	12.50	12.78	11.51	9.89	10.29	8.91
20	Y.S.R.	13.25	13.33	12.97	11.23	11.39	10.94
21	Kurnool	15.29	15.76	13.72	12.08	12.45	11.13
22	Anantapur	13.17	13.43	12.41	10.73	10.82	10.48
23	Chittoor	13.14	13.44	12.09	10.52	10.77	9.91



Census of India 2011
Provisional Population Totals

Percentage of child population by residence - Females

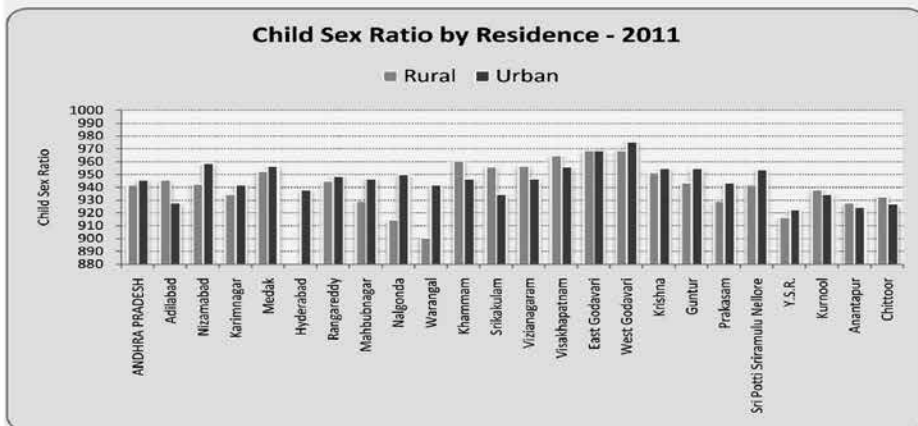
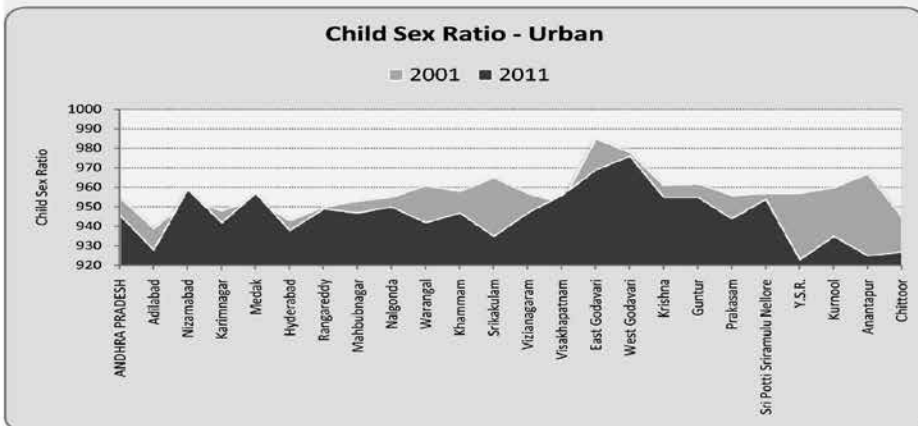
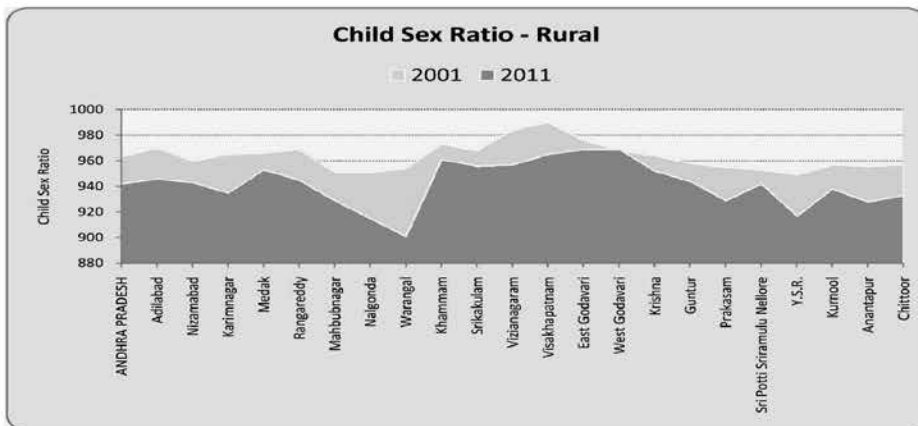
State/ District Code	State / District	Percentage of Child Population in Age Group 0-6 Years 2001 (Females)			Percentage of Child Population in Age Group 0-6 Years 2011 (Females)		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	13.23	13.61	12.19	9.95	10.10	9.64
01	Adilabad	14.94	15.62	13.01	10.46	10.94	9.20
02	Nizamabad	13.96	14.02	13.68	10.03	9.91	10.43
03	Karimnagar	13.10	13.34	12.08	8.16	7.93	8.81
04	Medak	15.00	15.17	13.99	11.29	11.25	11.44
05	Hyderabad	12.76	0.00	12.76	10.44	0.00	10.44
06	Rangareddy	14.10	15.29	13.09	11.19	11.66	10.99
07	Mahbubnagar	15.42	15.66	13.31	12.13	12.37	10.76
08	Nalgonda	13.93	14.13	12.62	9.86	9.96	9.45
09	Warangal	13.81	14.29	11.81	8.81	8.88	8.63
10	Khammam	13.54	14.02	11.62	9.31	9.43	8.90
11	Srikakulam	12.94	13.12	11.44	9.53	9.67	8.80
12	Vizianagaram	12.96	13.40	11.03	9.56	9.77	8.76
13	Visakhapatnam	12.81	13.68	11.46	9.79	10.48	9.03
14	East Godavari	12.42	12.76	11.35	9.39	9.61	8.73
15	West Godavari	11.95	12.19	11.00	9.08	9.28	8.33
16	Krishna	11.82	11.98	11.48	8.78	8.92	8.59
17	Guntur	11.90	12.16	11.26	9.27	9.48	8.86
18	Prakasam	12.62	12.89	11.11	10.35	10.60	9.34
19	Sri Potti Sriramulu Nellore	12.11	12.39	11.18	9.48	9.84	8.62
20	Y.S.R.	12.93	13.01	12.67	10.49	10.64	10.20
21	Kurnool	15.18	15.64	13.63	11.51	11.92	10.46
22	Anantapur	13.19	13.45	12.42	10.18	10.33	9.78
23	Chittoor	12.78	13.05	11.78	9.78	10.02	9.18



**Census of India 2011
Provisional Population Totals**

Child sex ratio by residence

State/ District Code	State / District	Child Sex Ratio (0-6 Years) 2001			Child Sex Ratio (0-6 Years) 2011		
		Total	Rural	Urban	Total	Rural	Urban
1	2	3	4	5	6	7	8
28	ANDHRA PRADESH	961	963	955	943	942	946
01	Adilabad	962	970	939	942	946	928
02	Nizamabad	959	960	953	946	943	959
03	Karimnagar	962	965	948	937	935	942
04	Medak	964	966	954	954	953	957
05	Hyderabad	943	0	943	938	0	938
06	Rangareddy	959	969	950	947	945	949
07	Mahbubnagar	952	951	953	932	929	947
08	Nalgonda	952	951	955	921	915	950
09	Warangal	955	954	961	912	901	942
10	Khammam	971	973	958	958	961	947
11	Srikakulam	967	968	965	953	956	935
12	Vizianagaram	980	984	957	955	957	947
13	Visakhapatnam	976	990	952	961	965	956
14	East Godavari	978	976	985	969	969	969
15	West Godavari	970	968	978	970	969	976
16	Krishna	963	964	961	953	952	955
17	Guntur	959	958	962	948	944	955
18	Prakasam	955	955	956	932	929	944
19	Sri Potti Sriramulu Nellore	954	953	957	945	942	954
20	Y.S.R.	951	949	957	919	917	923
21	Kurnool	958	957	960	937	938	935
22	Anantapur	959	956	967	927	928	925
23	Chittoor	955	957	945	931	933	927



ANNEX II: ANDHRA PRADESH BANGARU TALLI GIRL CHILD PROMOTION AND EMPOWERMENT ACT OF 2013

Registered No. HSE/49

[Price : ₹. 0-90 Paise.



ఆంధ్రప్రదేశ్ రాజపత్రము

THE ANDHRA PRADESH GAZETTE

PART IV-B EXTRAORDINARY

PUBLISHED BY AUTHORITY

No. 5] HYDERABAD, SATURDAY, JUNE 29, 2013.

**ANDHRA PRADESH ACTS, ORDINANCES AND
REGULATIONS Etc.**

The following Act of the Andhra Pradesh Legislature received the assent of the Governor on the 28th June, 2013 and the said assent is hereby first published on the 29th June, 2013 in the Andhra Pradesh Gazette for general information.

ACT No. 5 OF 2013.

**AN ACT TO PROVIDE FOR PROMOTING THE SOCIO
ECONOMIC DEVELOPMENT OF THE GIRL CHILD
AND FOR THE MATTERS CONNECTED
THEREWITH OR INCIDENTAL THERETO.**

Be it enacted by the Legislature of the State of Andhra Pradesh in the Sixty fourth year of the Republic of India, as follows:-

1. (1) This Act may be called the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013.

Short
title,
extent,
commen-
cement
and appli-
cation.

[1]

A.786-1

2 ANDHRA PRADESH GAZETTE EXTRAORDINARY [Part IV-B]

(2) It extends to the whole of the State of Andhra Pradesh.

(3) It shall be deemed to have come into force with effect from the 1st May, 2013.

(4) It shall apply to all girl children born on or after 1st May, 2013 limited to the first two children of the same mother.

Definitions.

2. In this Act, unless the context otherwise requires,-

(1) 'Anganwadi worker' means the person appointed for running an Anganwadi centre;

(2) 'Beneficiary' means the girl child or her mother till the girl child attains the age of 7 years; or her father in case mother is not alive; or the guardian if both parents are not alive; or head of the institution giving shelter in case of orphans and abandoned children; or as notified from time to time; and shall be identified through the Unique ID issued by the Unique Identification Authority of India;

(3) 'Central Registry' means the central database of the girl child maintained by the State Implementing Authority (Rural) which allows online updation by the implementing authorities;

(4) 'Economically backward household' means any household having annual income below the limits notified by the State Government;

June 29, 2013] ANDHRA PRADESH GAZETTE EXTRAORDINARY

(5) 'Girl child' means a girl child born in an economically backward household on or after 1st May, 2013;

(6) 'Government' means the State Government of Andhra Pradesh;

(7) 'Head master' means the head of any Primary or Secondary or High School either Government or Private in which the girl child is admitted;

(8) 'Household' means a family in which the girl child is born;

(9) 'Implementing Authority' means an Officer or an institution notified to implement the provisions of the Act;

(10) 'Institutional delivery' means delivery of the child in any healthcare institution;

(11) 'Milestones' means the age-specific and essential actions or activities required for healthy mental and physical growth of the Girl Child, as specified from time to time;

(12) 'Nodal Authority' means the Department of Women, Children, Disabled and Senior Citizens, in the Government;

(13) 'Notification' means, notification published in the Andhra Pradesh Gazette and word notified shall be construed accordingly;

(14) 'Prescribed' means prescribed by the Government by rules under this Act;

4 ANDHRA PRADESH GAZETTE EXTRAORDINARY [Part IV-B

(15) 'Principal' means the head of any college either Government or Private in which the girl child is admitted;

(16) 'Registrar' means the person designated as such as per the Andhra Pradesh Registration of Births and Deaths Rules, 1999;

(17) 'Slum Level Federation' means the Federation of Women Self-Help Groups at the slum level in urban areas facilitated/promoted by the Mission for Elimination of Poverty in Municipal Areas (MEPMA);

(18) 'Village Organisation of SHGs' means the Federation of Women Self-Help Groups at the village level formed by the Society for Elimination of Rural Poverty (SERP);

Services provided to the girl children and their mothers.

3. (1) Save as otherwise provided, the Government shall strive to ensure that each girl child or her mother as the case may be, is provided access to the following services:

(a) Public health facilities to the expectant mothers for safe institutional deliveries;

(b) Pre and post-natal health and nutrition services including a full complement of immunisation from birth to 6 years of age;

(c) Three years pre-school education in the Anganwadi centres run by Government;

(d) Five years of primary education in the Government schools, followed by three years upper primary

June 29, 2013] ANDHRA PRADESH GAZETTE EXTRAORDINARY 5

education, two years of high school education in any educational institution in the manner prescribed;

(e) Two years of education after the 10th standard and three/four years of college education up to graduation in the manner prescribed;

(f) Skill training as required for finding suitable employment opportunities.

4. (1) Subject to such terms and conditions of eligibility as may be prescribed, each girl child shall be provided such financial and other incentives on achieving the milestones as may be prescribed from time to time. Incentives for achieving milestones.

(2) Government shall ensure that adequate resources for the Bangaru Talli programme are included in the budget proposals submitted to the Legislature every year.

5. Unless otherwise prescribed, all incentives under this Act shall be credited electronically into a bank or postal account of the beneficiary within the time stipulated for such payment; and preferably disbursed using biometric authentication. Mode of payment.

6. (1) There shall be constituted a State Council, to over-see the implementation of the Act, with the Chief Minister as its Chairman and such other Members as may be required, in the manner prescribed. State Council.

(2) The State Council shall meet at such time and place as may be decided by the Council.

6 ANDHRA PRADESH GAZETTE EXTRAORDINARY [Part IV-B

**Nodal
Author-
ity.**

7. (1) The Department of Women, Children, Disabled and Senior Citizens shall be the Nodal Authority for planning, funding, monitoring and evaluation of the scheme in coordination with the Departments of Health, Medical and Family Welfare, Primary Education, Secondary Education, Higher Education, Rural Development and all other Welfare departments.

(2) For the purpose of administration of the Act, the State Implementing Authority (Rural) shall in consultation with the Nodal Authority, put in a Central Registry of the Beneficiaries which shall be updated by all the Implementing Authorities after authentication as prescribed.

**Imple-
menting
Authori-
ties.**

8. Unless otherwise prescribed the following shall be the implementing Authorities for the purposes under this Act;

(1) The State Implementing Authorities are agencies designated by Government for implementing the provisions of the Act in the manner prescribed.

(2) The Collector and District Magistrate shall be the District Implementing Authority.

(3) The Sub Divisional Magistrate shall be the Sub-divisional Implementing Authority for that revenue sub-division.

(4) The Tahsildar of a Mandal in rural areas and Municipal Commissioner in urban areas shall be the Mandal/Municipal Implementing Authority.

June 29, 2013] **ANDHRA PRADESH GAZETTE EXTRAORDINARY** 7

(5) The Village Organisation of Self Help Groups in rural areas shall be the Village Implementing Authority.

(6) Slum Level Federation of Self Help Groups in urban areas shall be the Ward Implementation Authority in urban areas.

9. (1) It shall be the responsibility of the following functionaries of Government to discharge the functions required for implementation of the Act; **Responsibilities of functionaries.**

(a) Auxiliary Nursing Midwife shall intimate the list of pregnant mothers to the Primary Health Centre as well as to Anganwadi centre and Village/Ward Implementation Authority for the purpose of pre and post natal care;

(b) Unless otherwise prescribed, the Anganwadi worker at the place of birth, shall report to the Registrar of Births and Deaths of the concerned area and the Village/ Ward Implementing Authority concerned regarding birth of the girl child within twenty one days from the date of such birth; and the Village/Ward Implementing Authority shall enter the same in the central registry electronically;

(c) The Registrar of Births and Deaths at the village level/urban local body level shall register the birth and issue certificate of registration to the mother/guardian and to the Village/Ward Implementation Authority within 7 days from the date of intimation of such birth;

(d) The Anganwadi Worker shall be responsible for reporting the admission of the girl child in the Anganwadi centre and her progress once a year to the Village/Ward Implementing Authority in the last week of July, and the

8. ANDHRA PRADESH GAZETTE EXTRAORDINARY [Part IV-B]

Village/Ward Implementing Authority shall update the same electronically in the central registry;

(e) The Head Master shall be responsible for reporting the admission and progress of the girl child to the Village/Ward Implementing Authority once a year during the last week of July; and the Village/Ward Implementing Authority shall update the same electronically in the central registry;

(f) The Principal shall be responsible for reporting the admission and progress of the girl child once a year during the last week of July by electronically updating the central registry.

(2) The State Implementing Authorities shall be responsible for electronic transfer of incentives under the Act within stipulated time as may be prescribed.

(3) The District Implementing Authority shall review the implementation of the provisions of this Act and resolve difficulties if any for its smooth implementation.

(4) The State Implementing Authorities shall be responsible for overseeing the timely disbursal of incentives to the beneficiary.

Penalties.

10. Whoever contravenes the provisions of this Act and the rules made thereunder or fails to comply with the orders, instructions, directions etc., issued by the Government from time to time in this regard shall be liable for penalty as may be prescribed.

June 29, 2013] **ANDHRA PRADESH GAZETTE EXTRAORDINARY** 9

11. The Government may from time to time, notify suitable additional arrangements and provide such other incentives as may be considered necessary for proper implementation of the provisions of this Act in tribal areas of the State. **Tribal areas.**

12. (1) The expenditure incurred under this Act shall be subjected to Social Audit to be conducted by the Society for Social Audit, Accountability and Transparency (SSAAT) in accordance with the rules framed for the conduct of social audit. **Social audit.**

(2) All observations brought out in social audit shall be acted upon by the departments concerned within 30 days from the conduct of the social audit.

13. If any difficulty arises in giving effect to the provisions of this Act, the Government may, by order, do anything not inconsistent with such provisions and which appear to them to be necessary or expedient for the purpose of removing the difficulty. **Power to remove difficulties.**

Provided that no such order shall be made after the expiry of a period of two years from the commencement of this Act.

14. The Government may from time to time, issue such orders, instructions, directions etc., not inconsistent with the provisions of this Act, and the rules made thereunder, as may appear to them to be necessary for proper administration of the provisions of the Act which shall be complied with by such officers and other persons employed or connected with the implementation of the Act. **Power to issue directions.**

ANNEX III: THE ANDHRA PRADESH BANGARU TALLI GIRL CHILD PROMOTION AND EMPOWERMENT RULES 2013

GOVERNMENT OF ANDHRA PRADESH

ABSTRACT

AP Bangaru Talli Girl Child Promotion and Empowerment Act 2013 – issue of AP Bangaru Talli Girl Child Promotion and Empowerment Rules 2013 – Notification - Issued

PANCHAYAT RAJ & RURAL DEVELOPMENT (RD-II) DEPARTMENT

G.O.Ms.No.307

Dated: 29.06.2013

Read :

AP Bangaru Talli Girl Child Promotion and Empowerment Act 2013

ORDER

Whereas the Government, with a view to facilitating faster socio economic growth of the girl children and to further empower the women, have enacted Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 providing therewith financial incentives on achieving certain milestones in the life of girl children born in the State on or after 1st May 2013 till they attain their 21st Year;

2. Now, therefore, the Government of Andhra Pradesh have, in exercise of the powers conferred on the State Government under Section 15 of the said Act, prescribe the following modalities for operationalizing the scheme and its implementation;

3. Accordingly the following notification will be published in an extraordinary issue of the Andhra Pradesh Gazette dated: 29.06.2013.

NOTIFICATION

In exercise of the powers conferred by sub-section (1) of section 15 of the Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act, 2013 the Governor of Andhra Pradesh hereby makes the following Rules.

PART – I

Preliminary

Short Title, Applicability & Commencement:

- 1 i) These Rules may be called “**The Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Rules 2013**”.
- ii) These rules shall come in to force with immediate effect.

2. Definitions

In these rules, unless the context otherwise requires:-

- a) "Aadhaar number" means the unique ID issued by Unique Identity Authority of India.
- b) "Act" means The Andhra Pradesh Bangaru Talli Girl Child Promotion and Empowerment Act 2013.
- c) "Authentication Authorities" means agencies listed in Schedule II who shall authenticate the details in the online database.
- d) "Bangaru Talli PD Account" means a Public Deposit Account opened by the State Implementing Authorities, electronically connected to the Central Registry and the participating banks for the purpose of online transfer of incentive funds directly into the accounts of the beneficiaries.
- e) "Bangaru Talli Scheme" means the scheme for operationalizing the provisions of the Act.
- f) "Beneficiary" means a person as defined in Section 2 (2) of the Act.
- g) "Electronic Fund Management System" means the system of transfer of funds electronically into the accounts of the beneficiaries using Aadhaar System.
- h) "Guardian" means any person made legally responsible for protection of the girl child if the mother is not alive, or alive but is unable to take care of the child;
- i) "Mother" means the mother of the girl child born on or after 1st May 2013.
- j) "Permanent migration" means the migration of the household including the girl child and the mother/guardian to another place duly identified and for period more than 6 months.
- k) "Registration" means entering the details of the girl child and the yearly milestones in the electronic central registry.
- l) "School" means any recognized educational institution and shall include madarasas run for the muslim minorities.
- m) "Village Implementing Authority (VIA)" means Village Organisation of Self Help Groups as defined in subsection (5) of Section 8 promoted by the Society for Implementation of Rural Poverty (SERP).
- n) "Ward Implementing Authority (WIA)" means the Slum level Federation of Self Help Groups in the urban areas as notified by the Mission for Elimination of Poverty in Municipal Areas (MEPMA).

PART - II

Central Registry, Registration and updating database

3. Central Registry

- (1) The State Implementing Authorities (Rural) shall set up and operate an electronic Central Registry for creating and updating database of all the girl children born on or after 1st May 2013 and the mothers thereof.
- (2) Access to the Central Registry shall be restricted to the personnel, authorized under the Act to either register or authenticate the database of girl child.
- (3) All the functionaries specified in section 9 of the Act shall be registered and their identity authenticated; after which they shall be provided

username and password for entering and updating the details required under the Act.

- (4) All Authentication Authorities in **Schedule II** shall be registered online after due diligence by the District Implementing Authority (DIA).
- (5) Any change in the functionaries in Section 9 or the Authentication Authorities shall be instantaneously notified by the District Implementing Authority.

4. Registering the girl children and mothers:

- (1) Particulars of mothers shall be filed by the Village/Ward Implementation Authority in **Form I** using the online data entry process and incorporated in the database preferably in the first trimester of the pregnancy.
- (2) If the child born is a girl child, the particulars of the birth shall be uploaded by the Village/Ward Implementation Authority (VIA/WIA) in **Form II** into the central registry using the online data entry process within 21 days of the date of the birth of the girl child along with the following documents names :-
 - a.) Birth Certificate issued by the Registrar of Births and Deaths at the Gram Panchayat/Ward level.
 - b.) Photograph of the girl child and her mother/guardian
 - c.) The Aadhar card of the mother/guardian
 - d.) Copy of the Ration Card containing therein the name of the mother/guardian
 - e.) Copy of the Joint bank account in the name of the girl and her mother/guardian.
- (3) The details so entered shall be authenticated by the Authentication Authority stated in **Schedule II** within 7 days from the date of such registration, after due verification, and irrespective of whether the birth has taken place in an institution to which they are attached to.
- (4) Failure to authenticate within the time limits specified above shall automatically result in disciplinary action as per Part V of these Rules.
- (5) Aadhaar identity issued by the Unique Identity Authority of India shall be mandatory for registration of new entries.
- (6) Where there is no Aadhaar number readily available for the mother, the District Implementing Authority shall facilitate securing Aadhaar Identity and a Bank account at the time of registration of pregnancy itself.
- (7) On attaining 7th year, the girl child shall be issued an Aadhaar Number, which shall be incorporated in the database.

5. Changes and Updating of the Central Registry:

- (1) Particulars of every girl child registered in the central registry shall be updated at least once a year before **15th July** in **Form III online** by the functionaries listed in section 9 of the Act.
- (2) Every death or permanent migration of the girl child shall be updated in the central registry giving details of such an event by the

Village/Ward Implementing Authority concerned.

- (3) The following process shall be followed for effecting any change in the database:
 - a) Registering authority, after due verification, shall register any change in the database in **Form III-A** online.
 - b) All such changes have to be authenticated by the Authentication Authority within 7 days from the date of such registration.
 - c) A log of all such changes shall be generated and placed before the Mandal/Municipal Implementing Authority for conducting suitable verification.
- (4) In case of permanent migration of the girl child, the responsibility of monitoring the milestones in Schedule-I and updating central registry shall be entrusted by the concerned Mandal/Municipal Implementation Authority to the Village/Ward Implementing Authority of the place where the household has migrated to.
- (5) The updated particulars shall be authenticated online by the Authentication Authorities within 15 days from the date of such updation and in no case, later than **31st July** each year.

6. Authentication to be made compulsory:

- (1) Every entry or its updation shall be notified instantaneously and electronically to the concerned Authentication Authority in Schedule II by the Central Registry.
- (2) It shall be the responsibility of the Authentication Authority to verify personally regarding the accuracy of such entry or updation and authenticate the same online within 15 days from the date of such entry or updation.
- (3) The Implementation Authorities and the Authentication Authorities shall be held responsible for the accuracy of the data entered or updated.

PART – III

Incentives and disbursal

7. Incentives:

- (1) Every beneficiary shall be eligible for the annual financial incentives as per **Schedule I** subject to achieving the milestone specified therein.
- (2) On reaching the age of 21, the beneficiary shall be paid a lump sum incentive as follows:
 - a) Rs. 50,000 if the girl child passes as a regular student the Intermediate (+2) or equivalent exam.
 - b) Rs. 1,00,000 if the girl child passes as a regular student the Degree or equivalent exam.
- (3) The incentives stated above shall be independent of and in addition to any central scheme already under implementation or launched subsequently.

8. Electronic Fund Management System:

- (1) Within 3 months from the date of issue of these Rules, the State Implementation Authorities shall create and operationalize the Electronic Fund Management system which facilitates direct electronic transfer of funds from Treasury to the bank/postal account of the beneficiaries.
- (2) A Public Deposit (PD) Account will be opened for implementing the Bangaru Talli scheme by the State Implementing Authority.
- (3) Within 30 days from the date of updation of the database in the Central Registry, the Authentication Authorities in Schedule II shall verify and authenticate to the correctness or otherwise of the same.

9. Automatic Electronic Pay order:

- (1) The State Implementation Authorities shall ensure that within 7 days from the date of Authentication of eligible milestone in the database, an electronic pay order is automatically generated by the central registry advising the bank to electronically debit the Bangaru Talli PD Account and credit the bank account of the beneficiary.
- (2) In any case, State Implementation Authorities shall ensure that the incentives as per Schedule I are disbursed on or before **15th August** each year.

10. Electronic Benefit Transfer:

- (1) All incentives paid under the Act shall be transferred electronically and directly into the bank accounts using the Aadhaar Payment Bridge System.
- (2) The benefits may be distributed preferably at the door step through the Banking Correspondents after biometric authentication.

PART - IV

State Council and other Bodies

11. State Council

- (1) There shall be a State Council for overseeing the implementation of the scheme with the following:

i. Chief Minister	Chairman
ii. Minister Women & Child Welfare	Member
iii. Minister Rural Development	Member
iv. Minister School Education	Member
v. Minister Higher Education	Member
vi. Minister Finance	Member
vii. Minister Social Welfare	Member
viii. Minister Tribal Welfare	Member
ix. Minister Minority welfare	Member
x. Minister, Health & FW	Member
xi. Minister, MA&UD	Member
xii. Chief Secretary	Member
xiii. Principal Secretary, Social Welfare	Member

xiv. Principal Secretary, Tribal Welfare	Member
xv. Principal Secretary, Minority Welfare	Member
xvi. Principal Secretary, Health & FW	Member
xvii. Principal Secretary Rural Development	Member
xviii. Principal Secretary, Education	Member
xix. Principal Secretary, Higher Education	Member
xx. Principal Secretary Finance	Member
xxi. Principal Secretary, Women Welfare	Member(convener)
xxii. Secretary, MAUD	Member

(2) The Council shall meet at least once a year to review the progress of the scheme and to remove difficulties in its smooth implementation.

12. Role of Nodal Authority

- (1) Nodal Authority shall be responsible for the following:
 - a) Prepare annual plan and budget for implementation of the scheme.
 - b) Ensure that the funds are drawn and kept in the Bangaru Talli PD Account in time for disbursement.
 - c) Coordinate with other departments in collecting the information about the programme.
 - d) Monitor the implementation of the programme from time to time and make recommendations for proper implementation.
 - e) Guide the State Implementation Authorities in proper implementation of the programme.
 - f) Measure the outcomes from the scheme periodically and share with all stakeholders.
 - g) Place before the Legislature an annual report on the 'State of Girl Child' in the month of April.

(2) For the purpose of the above, Nodal Authority can call any office or functionary to render a function or assistance; and no one who is called upon to provide such assistance shall refuse to render such service or function.

13. State Implementing Authorities:

- (1) The Society for Elimination of Rural Poverty (SERP) shall be the State Implementing Authority for rural areas and shall be responsible for putting in place the Central Registry and the Information Technology (IT) system connecting all the Implementing and Authentication Authorities.
- (2) The Mission for Elimination of Poverty in Municipal Areas (MEPMA) shall be the State Implementing Authority for urban areas.
- (3) The STATE Implementation Authorities shall be responsible for the following:
 - a) Implementation of the scheme as laid down under the Act and the Rules.
 - b) Activate all the SHG federations for active participation in implementation of the provisions of the Act.

- c) Ensure timely disbursement of incentives as provided in the Act and Rules.
- d) Ensure proper and timely discharge of the functions by the functionaries mandated under the Act.
- e) Bring all the implementing authorities into the IT system.

14. District Implementing Authority:

- (1) The District Implementation Authority shall be responsible for the following:
 - a) district so that they can play the role mandated under Overall supervision of the implementation of the scheme in the district.
 - b) Ensure opening of bank account and securing an Aadhaar number to all expectant mothers.
 - c) Marshaling all the Implementing Authorities in the District in proper discharge of the functions provided under the Act.
 - d) Build capacities of the various Implementing Authorities within the the Act or the Rules.
 - e) Resolve difficulties if any, in implementation of the scheme.

15. Village/Ward Implementing Authorities;

- (1) The Village/ Ward Implementing Authorities shall be responsible for the following:
 - a) Involve the community in building up a favourable environment for social and educational progress of the girl child and thereby striving for ending discrimination against the girl child.
 - b) To register the milestones in the central registry using the software provided.
 - c) To coordinate with other agencies like the anganwadis, and primary health care system including the ANMs and ASHAs for smooth implementation of the provisions of the Act.
 - d) To ensure full coverage of all eligible beneficiaries in their area.
 - e) To supervise timely payment of the incentives to the eligible girl children.
 - f) To monitor the performance of various agencies involved in implementing and bring to notice of Mandal/ Sub-divisional/ District Implementing Authorities in case of failure to discharge a duty cast on them as per the Act.
- (2) All agencies involved in implementing the provisions of the Act shall share the information with the Village/Ward Implementing Authorities as and when called upon.

16. Monitoring, coordination and behavioral change structure:

- (1) The Village Health, Nutrition, Sanitation and Education Committee constituted at the Gram Panchayat level shall be responsible for monitoring the scheme at the village level.
- (2) The Child Development Project Officer shall be responsible for monitoring the scheme at the Mandal level.

- (3) Project Director Integrated Child Development Services shall be responsible for monitoring the scheme at the district level and assisting the District Implementing Authority.

PART - V **Penalties**

17. Failure to perform a function:

- (1) Any functionary listed in Schedule I or Schedule II fails to perform a function mandated under the Act or fails to furnish the information within the time period specified shall be liable for punishment as per the disciplinary rules governing the service conditions of such a functionary.
- (2) A complaint stating such failure may be filed before the Sub Divisional Implementation Authority by the Village/Ward Implementing Authority/Mandal Implementing Authority or any other aggrieved person within 30 days from the date of such failure.
- (3) The Sub Divisional Implementation Authority, after due verification and after being satisfied about such failure, shall forward the same to the competent disciplinary authority for taking action as per the disciplinary procedure within 7 days from the date of receipt of such complaint.
- (4) The Competent Disciplinary Authority, on receipt of such reference from the Sub Divisional Implementation Authority, shall start the disciplinary proceedings so as to conclude the same within 30 days from the date of such reference.
- (5) The District Implementation Authority shall monitor the progress of disposal of all such cases.

18. Furnishing incorrect information:

- (1) Any functionary in Schedule I or Schedule II, deliberately furnishes wrong information, shall be liable for punishment as per the disciplinary rules governing the service conditions of such a functionary.
- (2) A complaint stating such a failure may be filed before the Sub Divisional Implementation Authority by the Village/Ward Implementing Authority/Mandal Implementing Authority or any other aggrieved person within 30 days from the date of such failure.
- (3) The Sub Divisional Implementation Authority, after due verification and after being satisfied about such failure, shall forward the same to the competent disciplinary authority for taking action as per the disciplinary procedure within 7 days from the date of receipt of such complaint.
- (4) The Competent Disciplinary Authority, on receipt of such reference from the Sub Divisional Implementation Authority, shall start the disciplinary proceedings so as to conclude the same within 30 days from the date of such reference.
- (5) The District Implementation Authority shall monitor the progress of disposal of all such cases.

19. Furnishing fraudulent information:

- (1) Any person or functionary furnishes fraudulent information with the intention of misappropriating or misusing the funds of the scheme shall be prosecuted under the relevant provisions of the Indian Penal Code.
- (2) The District Implementing Authority shall monitor the progress of these cases and submit monthly reports to the Nodal Authority.

PART - VI
Tribal areas

20. Delegation of authority for tribal areas:

- (1) The Commissioner Tribal Welfare shall be the authority to make suitable additional arrangements for proper implementation of the scheme in tribal areas.
- (2) The directions issued by the Commissioner Tribal Welfare shall be followed by all the Implementing Authorities in the tribal areas.

PART - VII
Social Audit

21. Conduct of Social Audit:

- (1) Social Audit shall be conducted in rural areas in accordance with the AP Social Audit Rules 2008 issued vide G.O. Ms. No. 98 PR & RD (RDII) Department Dated 9.3.2010 as amended from time to time.
- (2) Social audit shall be conducted for a Mandal at a time, in every village, once in every six months scheduled along with social audit of other schemes.
- (3) Social audit in urban areas shall be conducted for a town at a time in every ward once in every six months schedule along with the social audit of other schemes.
- (4) Social Audit shall examine whether the entries in the Central Registry correspond to the field reality and whether or not the beneficiaries received the incentives disbursed under the Act.
- (5) All cases of deviations shall be recorded and responsibility shall be fixed on the persons concerned.
- (6) The Sub Divisional Implementing Authority shall attend the Social Audit Public Hearings, and shall also be responsible for taking follow up action as per the observations of the Social Audit.

22. Grievance Redressal system:

- (1) Any person aggrieved about non-implementation or the manner of implementation of any provision of the Act, or aggrieved by any action, or inaction of a functionary mandated to perform certain function under the Act, can complain to the Sub Divisional Implementing Authority either in person or by a letter.
- (2) All such grievances can also be registered through a toll-free Help Line made operational by the Nodal Authority and shall be considered in

the manner provided hereunder.

- (3) The Sub Divisional Implementing Authority shall, on receipt of such complaint, conduct suitable enquiry within 15 days from the date of receipt of such complaint and pass appropriate orders for action under Part V or otherwise, with due intimation to the aggrieved.
- (4) Any person aggrieved by the orders of the Sub Divisional Implementing Authority, can file an appeal before the District Implementing Authority, who shall dispose it off within 30 days from the date of receipt of such appeal.
- (5) The orders passed by the District Implementing Authority shall be considered as final and binding on all parties.

Schedule I

Incentives provided as per Section 4

Age	Milestone	Outflow from State Budget (Rs)	Trigger/ Activity to be achieved	Functionary responsible for registration/ updation
1	2	3	4	5
At Birth	Registration of Birth	2500	Institutional Delivery	VIA/WIA
Year 1	IMMUNIZATION	1000	IMMUNISATION (ANM)	VIA/WIA
Year 2	IMMUNIZATION	1000	IMMUNISATION (ANM)	VIA/WIA
Year 3	ANGANWADI	1500	ANGANWADI	VIA/WIA
Year 4	ANGANWADI	1500	ANGANWADI	VIA/WIA
Year 5	ANGANWADI	1500	ANGANWADI	VIA/WIA
Year 6	1 ST CLASS	2000	1 st to 5 th standard in any recognized school	VIA/WIA
Year 7	2 ND CLASS	2000		VIA/WIA
Year 8	3 RD CLASS	2000		VIA/WIA
Year 9	4 TH CLASS	2000		VIA/WIA
Year 10	5 TH CLASS	2000	In any recognized school	VIA/WIA
Year 11	6 TH CLASS	2500		VIA/WIA
Year 12	7 TH CLASS	2500		VIA/WIA
Year 13	8 TH CLASS	2500		Head Master
Year 14	9 TH CLASS	3000		Head Master
Year 15	10 TH CLASS	3000		Head Master

Year 16	11 TH CLASS	3500	In high school/ junior college for +2/intermediate as a regular student and should appear for exam	Principal of Junior College/High School
Year 17	12 TH CLASS	3500		Principal of Junior College/High School
Year 18	GRADUATION- 1	4000	In a college as a regular student and pass exam	Principal of Degree college
Year 19	GRADUATION- 2	4000		Principal of Degree college
Year 20	GRADUATION -3	4000		Principal of Degree college
Year 21	GRADUATION -4	4000		Principal of Degree college
Year 21	Lump Sum incentive	50,000/ 1,00,000	If pass the intermediate (+2) level/Degree level	PD ICDS
Sub Total		1.55,500		

Schedule II
Authentication Authorities

Age	Milestone	Outflow from State Budget (Rs)	Registration Authority	Authenticatio n Authority
1	2	3	4	5
At Birth	Registration of Birth	2500	VIA/WIA	ANM and Medical Officer of the Institution
Year 1	IMMUNIZATION	1000	VIA/WIA	ANM

Year 2	IMMUNIZATION	1000	VIA/WIA	ANM
Year 3	ANGANWADI	1500	VIA/WIA	Supervisor ICDS
Year 4	ANGANWADI	1500	VIA/WIA	Supervisor ICDS
Year 5	ANGANWADI	1500	VIA/WIA	Supervisor ICDS
Year 6	1 ST CLASS	2000	VIA/WIA	Head Master of the school
Year 7	2 ND CLASS	2000	VIA/WIA	Head Master of the school
Year 8	3 RD CLASS	2000	VIA/WIA	Head Master of the school
Year 9	4 TH CLASS	2000	VIA/WIA	Head Master of the school
Year 10	5 TH CLASS	2000	VIA/WIA	Head Master of the school
Year 11	6 TH CLASS	2500	VIA/WIA	Head Master of the school
Year 12	7 TH CLASS	2500	VIA/WIA	Head Master of the school
Year 13	8 TH CLASS	2500	Head Master of the school	Mandal/Municipal Education Officer
Year 14	9 TH CLASS	3000	Head Master of the school	Mandal/Municipal Education Officer
Year 15	10 TH CLASS	3000	Head Master of the school	Mandal/Municipal Education Officer
Year 16	11 TH CLASS	3500	Head Master/Principal of the college	Mandal/Municipal Implementing Authority
Year 17	12 TH CLASS	3500	Head Master/Principal of the college	Mandal/Municipal Implementing Authority

Year 18	GRADUATION- 1	4000	Principal of the college	District Implementing Authority
Year 19	GRADUATION- 2	4000	Principal of the college	District Implementing Authority
Year 20	GRADUATION -3	4000	Principal of the college	District Implementing Authority
Year 21	GRADUATION -4	4000	Principal of the college	District Implementing Authority
Final Lump sum	Intermediate/ Degree	50,000/ 1,00,000	PD, ICDS	District Implementing Authority
Total		1,55,500		

Form I (to be filled 6 months prior to the expected date of delivery)	
Name (of the expectant mother)	
Husband's name	
Address	
Village/Gram Panchayat	
Mandal/Town	
Aadhaar ID	
Ration card number	
MCP card Number	
Phone Number	
Phone Number of husband/guardian	
Date of Birth	
Caste (SC/ST/ Others)	
Name of Sub-Centre	
Name of ANM	
Phone Number of ANM	
Name of the AWW	
Phone number of AWW	
Name of associated ASHA	
Phone Number of ASHA (if available)	
Linked facility for delivery (Sub-Centre/DH/ CHC/PHC/Private etc)	
Name of Facility	
LMP	Date

1 st ANC (including Registration)	Date
2 nd ANC	Date
3 rd ANC	Date
4th ANC	Date
TT1 (immediately at detection of pregnancy)	Date
TT2 (after 1 month of TT1 administration)	Date
TT Booster	Date
IFA tablets given (Date on which 100 IFA Tabs completed)	Date
Anemia (Moderate <11/Severe <7/Normal)	
Weight taken at the time of registration	
Weight at the time of delivery	
Complication (Hypertensive /Diabetics /APH/Malaria/None)	
RTI/STI (Y/N)	
Outcome Numbers (0/1/2/3/4/5) 0=Still Birth	
Date of Delivery (dd/mm/yyyy)	
Time of delivery (hh:mm)	
Place of delivery (Home-Type/ Institutional-Type)	Home (address)
	Public (Name of institution and address)
	Private (Name of institution and address)
Delivery Type (Normal/CS /Instrumental)	
Complications (Y/N)	
Date of Discharge from Institution (if applicable) (dd/mm/yyyy)	
JSY Benefits paid(Date)	
Abortion (MTP<12/ MTP>12 /Spontaneous /None) (If None, then other details to be filled)	
PNC Home Visit (Within 48 hours/7 days)	
PNC Complications (PPH/ Sepsis/ Death/ Others/ None)	
Post Partum Contraception Method (Sterilisation/IUD/Injectibles)	
PNC Checkup (Y/N)	

Form II (in continuation of Form I, to be filled after birth)	
Child 1 The following details to be captured for each child born-for child tracking	Name
	Sex (M/F)
	Weight at Birth (Kg)
	Initiated Breastfeeding within 1 Hr (Y/N)
Child 2	Name

The following details to be captured for each child born-for child tracking	Sex (M/F)
	Weight at Birth (Kg)
	Initiated Breastfeeding within 1 Hr (Y/N)
In case of Girl Child/children, scan and upload the following documents	
a. Birth Certificate issued by the Registrar of Births and Deaths at the Gram Panchayat/Ward level.	
b. Photograph of the girl child & her mother/guardian	
c. The Aadhar card of the mother/guardian	
d. Copy of the Ration Card containing therein the name of the mother/guardian	
e. Copy of the Joint bank account in the name of the girl & her mother/guardian.	

Form III (to be filed before 15th July each year)

Name of the girl child:
Name of mother/guardian
Aadhaar ID of mother/guardian
Aadhaar ID of the child (if more than 7 yrs)
Date of birth
Milestone achieved
Date of achieving the milestone
Location where the milestone is achieved:
Name of the Hospital/school/college:
Address of the institution:
Evidence of milestone (to be scanned and uploaded)

4. Principal Secretaries/Secretaries of the departments concerned are requested to issue necessary instructions to their field functionaries for expeditious implementation of these Rules. A copy of this order is available on the Internet and can be accessed at the address: <http://www.rd.ap.gov.in>.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

R.SUBRAHMANYAM

PRINCIPAL SECRETARY TO GOVERNMENT (RD)

To

The Commissioner, Printing, Stationery and Stores Purchase (Printing wing) Printing Press, Chanchalguda, Hyderabad with a request to publish the Notification in the next issue of extraordinary Gazette and furnish 1000 copies to PR & RD (RD.II) Department.

The Chief Executive Officer, SERP, A.P., Hyderabad

The Principal Secretary to Government Women Development and Child Welfare

The Principal Finance Secretary

The Principal Secretary to Government Primary Education

The Principal Secretary to Government Social Welfare

The Principal Secretary to Government Dept., for WD & SCs

The Principal Secretary to Government, HM & FW
The Principal Secretary to Government, Higher Education
The Principal Secretary to Government, MA & UD
The Principal Secretary, Tribal Welfare, AP, Hyderabad
The Principal Secretary Minorities welfare
The Director, SSAAT, A.P., Hyderabad
The Secretary, Legislative Affairs & Justice, Law Dept.,
The Mission Director, MEPMA, Hyderabad
All District Collectors in the State
All Project Directors DWMA for conducting suitable training Programmes
All Project Directors DRDA in the State

Copy to:

The PS to Special Secretary to Chief Minister
The PS to Chief Secretary
The PS to Minister for IKP, Pensions, Self Help Groups & Women Development, Child
Welfare & Disabled Welfare, Juvenile Welfare
The PS to Minister for Major Industries, Sugar Commerce & Export Promotion
The PS to Minister for Information & Public Relations, Cinematography, A.P. Film, T.V.
& Theatre Development Corporation
The PS to Minister for Mines & Geology
The PS to Minister for Finance Planning, Small Savings, State Lotteries.
The PS to Minister for Social Welfare
The PS to Minister for Tribal Welfare
The PS to Minister for Law & Courts
The PS to Minister for APVVP, Health, Family Welfare & AP Aids Control Society,
Minister for Medical Education, Arogyasree, Health Insurance, 104 & 108, Medical
Infrastructure, Ayush, Yogadhyayana
PS to Minister Minorities Welfare
PS to Principal Secretary to Government (RD)
The PR & RD (Genl.) Department, (2 Copies)
SF/SC

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SECTION OFFICER

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All the reports and forthcoming publications under National Campaign for elimination of female foeticide in India are available at: <http://www.stopfemaleinfanticide.org/>



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