

Report of the Rally and Public Meeting on 2nd September 2008

Over a thousand people, largely women, from 15 states including Tamil Nadu, Orissa, Bihar, Rajasthan, Uttar Pradesh, Uttarakhand, Madhya Pradesh, Delhi, Punjab, Haryana, Chattisgarh, gathered and rallied in the capital on the 2nd of September to press long standing demands for better services for their children in the context of the 'new' 11th Plan. The rally and the public meeting, organised jointly by the Jan Swasthya Abhiyan and the Right to Food Campaign, was the outcome of the government's failure to comply with the orders of the Supreme Court of India for universalising ICDS with quality.

At the Bal Adhikar Sammelan held in the lawns of V.P. House in the morning of the 2nd, parents, Anganwadi workers, Panchayat representatives, ASHAs and grassroots workers, spoke, through songs, slogans and stories of their anger and despair of the state of their children, and the state of the anganwadis that were meant to support the critical age group of children under six. They also came fully prepared to say what needs to be done.

'We are here to present our charter of demands to the prime minister and make it known to the government that we want good quality anganwadis (primary health care centres), universal coverage of Integrated Child Development Services (ICDS) as well as the provision of crèche facility for working parents and maternity benefits for women,' said M. Kasiyammal, Tamil Nadu Anganwadi Workers Union vice-president.

The meeting was conceived of as a platform where local representatives could share their concerns and views with others. Though the members of the coordination committees / steering committees of the Right To Food and Jan Swasthya and Right To Education campaigns came to the stage to show their presence and solidarity, they spoke only to elaborate on the demands being presented to the Prime Minister. Groups of people from different states nominated representatives from among themselves to present their concerns. Anganwadi workers, mothers, NGO activists all came up to the stage to say why they thought and believed in the demands expressed by the campaign - they wanted good Anganwadis, children should get cooked food, and how education benefits children, how women became empowered when they became part of the CSO work....

Vandana Prasad, representing the Working Group for Children Under Six, said: 'Even while we are urging the government to adopt and implement a more holistic policy on children under six and work towards making ICDS an intervention capable of addressing all the basic concerns of children from 0-6 years, we are finding that commercial interests are intent on undermining the rights of children.'

Samir Garg, member of the Working Group explained the strategies for children under six, based on a paper that was recently prepared by a working group of the Right to Food campaign and Jan Swasthya Abhiyan. The paper states a common understanding based on field experiences and academic research. It builds on four complementary interventions: (1) 'Universalisation with quality' of the Integrated Child Development Services (ICDS); (2) crèches and day-care facilities; (3) maternity entitlements; and (4) support for "infant and young child feeding" (IYCF), particularly breastfeeding.

Arun Gupta, another member of the Working Group, detailed how commercial interests were trying to interfere with policy making, and attempting to replace hot cooked meals

at Anganwadis with packaged food, a direction contravention of the Supreme Court orders. If the private sector wanted to contribute, he said, they should first make sure their workers get their due in wages and social security benefits like maternity entitlements.

Women shared and compared experiences between the far advanced Tamil Nadu, rejoicing in greater and greater gains for the ICDS and through that for women and children, and the dismal realities of the same programme in states like Uttar Pradesh. Why, they asked, can children of the same country not have the same basic services under the same programme?

The public meeting was also attended by the Chairperson of the National Commission for Protection of Child Rights, Ms Shantha Sinha, who reiterated that 'Anganwadi is the cornerstone of the ICDS programme, it must be given its due place under the sun, fully recognized and sustained by both the civil society and the government.' Sayeeda Hamid, member of Planning Commission, appealed to the women 'not to be disheartened' and said: 'Given the fact that children continue to be malnourished in unacceptable and large numbers, we need to review the on-going efforts being made to address the issue.'

The food served was made by Anganwadi workers, it was the same 'khichdi' (hot, cooked meal made of local foods) that was being given to Anganwadi children in Delhi. There was some confusion as the estimated number of persons was 800, and actual numbers were around 1200. However, after a little wait, the confusion was sorted out.

After having food, people left in groups, to assemble at Jantar Mantar, where the rally was held. As the permission of the Rally was only up to Parliament Street, the rallyists gathered in front of the three-deep blockade erected by the police, shouting slogans and singing songs. They laid out the huge lengths of cloth that carried over a thousand signatures, on the road. The lengths were subsequently handed over to the Prime Minister along with the demands, which were read out in English and Hindi by Devika Singh, Jean Dreze and Sachin Jain, and endorsed by the people. A small group of five persons, representing various states, was allowed into the PMO to present the Charter of Demands and the Statement on Public Private Partnerships in the field of health care and nutrition.

States which could not be represented at Delhi also participated: Maharashtra, for instance, faxed the Charter of Demands to the Prime Ministers Office after gathering signatures from several people and held a press conference to spell out the demands, which were widely reported by media. The same, sad to say, did not happen in Delhi, where the media was silent about the rally. However, many feature articles and reports followed in subsequent weeks which detailed the concerns behind the public meeting and rally. These are still continuing.

The enthusiasm generated by the 2nd September event is being carried forward by several states. *Wada Na Todo Abhiyan* in Maharashtra posted the memorandum from all 24 district committees, as well as one on behalf of the State Steering Group to the PMO. Madhya Pradesh RTF and JSA are organising a Public Consultation on World food Day (16 Oct 2008) to discuss the Scenario of Malnutrition Deaths in different parts of Madhya Pradesh, Status of ICDS, Impact of Food and Livelihood crisis, State's Denial, Politics of

Packaged food and possibilities of inclusion of GM food in ICDS, and Sharing/Testimonies from the Community.

Tamil Nadu and Jharkhand have decided to facilitate meetings with their state MPs to further these demands. A follow up signature campaign related to the appropriate use of 'Ready to Eat Food' in the context of malnutrition has also been launched.

Bal Adhikar Sammelan (2nd September 2008): Resolutions

The following are urgently required to protect the fundamental rights of children under the age of six.

1. 'Universalisation with quality' of the ICDS
2. Crèches and day care facilities
3. Maternity entitlements
4. Support for "infant and young child feeding" (IYCF), particularly breastfeeding
5. Prevention of interference of commercial interests through 'packaged' or 'ready to eat' food or 'public-private partnerships' in government programmes for child health and nutrition.

For this to be achieved the following are the essential interventions:

1. **Universalisation of ICDS.** An anganwadi centre in every habitation, for every child under six, every pregnant and lactating mother and every adolescent girl. In line with the Supreme Court orders, at least 14 lakh anganwadis should be set up. Further, all infrastructural requirements (adequate space, toilets, safe water, kitchen space, play area etc) of the centre must be ensured.
2. **Exclusive Breastfeeding for children up to six months.** ICDS and the Health System should mainstream skilled counselling and support for women to practice exclusive breastfeeding for six months. Maternity entitlements are required to compensate them for the wages lost during this period.
3. **Skilled Counselling and nutritional support for children under three.** Nutritious and carefully designed take-home rations (THR) based on locally procured food should be provided as "supplementary nutrition" for children in this age group. Also, THRs must be combined with nutrition counselling and nutrition and health education sessions.
4. **Pre-school education and hot, cooked meals for all children in the age group of 3-6 years.** The ICDS must provide a centre-based play-school facility at the anganwadi with the worker trained in conducting preschool activities. For these children a culturally acceptable, varied, nutritious meal must be provided at the anganwadi centre.
5. **Day Care Centres or Crèches.** Crèches must be designed to meet the varying needs of children of different age groups. To begin with a model of anganwadi-cum-crèches can be introduced to provide this service in the village. This would mean that these centres are open full-time, with adequate staff, training and infrastructure. Existing crèche schemes must also be expanded and strengthened.
6. **Second Anganwadi Worker for ICDS Centres.** At least two anganwadi workers are needed at each anganwadi centre, to make it possible for one of them to concentrate on home-based services while the other provides centre-based activities such as pre-school education. The helper would have a role to play in bringing the children, cooking and serving and keeping the centre clean.

7. ***Convergence between Health and WCD Department at all levels.*** Regular health interventions like screening and referral, growth monitoring, immunisation and de-worming must be carried out by the ICDS and Health Department together. Nutritional Rehabilitation Centres should also be provided for highly malnourished children.

8. ***Investing in the ICDS workforce through training and capacity building.*** The training programmes should recognise pre-school education and nutrition counselling as essential components. Within the overall framework, training curriculum, material and approaches should be developed in a decentralised manner, appropriate to the specific state/district level.

9. ***Building a comprehensive monitoring and evaluation system.*** A more robust, regular and independent monitoring and evaluation system, where workers are not forced to under-report malnutrition is needed. A high-level overseeing mechanism should be created which will serve as a strategic oversight, technical support and ensure convergence and accountability in the range of interventions concerned with child nutrition.

10. **Workers' Entitlements.** The concerns and difficulties of Anganwadi Workers, particularly regarding excessive work burden, inadequate and delayed remuneration, and poor working conditions, need to be addressed. Anganwadi workers and helpers to be recognised and regularised as workers and receive fair remuneration.

11. ***Improving governance and involving communities.*** Decentralisation is the key to reducing corruption. A decentralized approach is required, fostering participatory planning, community ownership, responsiveness to local circumstances, and the involvement of Panchayati Raj Institutions.

12. ***Policy on Public-Private partnerships.*** A policy statement should be put in place to guide and regulate PPPs in food, nutrition, health and development through a democratic and transparent process (including proactive disclosure of all the terms and conditions of PPPs, as well as of the decision-making process behind them) rather than allowing the lack of coherent policy to allow every private partner to set its own policies.

13. Allocation of Rs. 1000 crores for Infant and Young Child Feeding (IYCF) should be released.

14. Special efforts to be made to extend ICDS services (including nutrition, pre-school education, health care etc.) to children of migrant labourers.

15. The fundamental right to education should be expanded to children under six and article 45 be converted into fundamental right under article 21.

16. At least half per cent (0.5%) of the GDP to be allocated for children under six.

Letter to the Prime Minister – 2nd September

2 September, 2008

Dr. Manmohan Singh
Hon'ble Prime Minister of India
Prime Minister's Office
South Block
New Delhi 110 001

Dear Dr. Manmohan Singh,

Rights of children under Six

On behalf of civil society organisations across the country working on child rights and food rights, we write to register our grave concern at the persisting problem of under-nutrition facing the youngest children in our country. We are encouraged by your personal interest in this matter, reflected in the fact that you mentioned it as the most important “unfulfilled promise” of this government in your Independence Day speech. However, we feel that unless national policy, programme and practices consciously focus on giving children the best head-start, the issue of chronic child hunger will not be tackled.

A meeting on the rights of children under six was held today in Delhi, with about 800 participants from across the country. The participants included grassroots workers, child rights activists, anganwadi workers, representatives of gram panchayats and academicians. The participants agreed that the following are urgently required to protect the fundamental rights of children under the age of six:

1. ‘Universalisation with quality’ of the ICDS
2. Crèches and day care facilities
3. Maternity entitlements
4. Support for “infant and young child feeding” (IYCF), particularly breastfeeding

Please find enclosed the resolution adopted in this meeting, which lays out more detailed demands based on this framework.

We also draw your attention to two specific issues that are of great concern to us at this time. One is the need for the provision of nutritious cooked meals at the anganwadi for children in the age group of 3-6 years. Many expert committees have recommended nutritious cooked meals based on local foods as the best means of providing nutrition support to children in this age group. Cooked meals also serve many important purposes, such as enhancing child attendance at the anganwadi, fostering egalitarian social norms, providing employment to poor women, and acting as a form of nutrition education. The provision of cooked meals at the anganwadi for children aged 3-6 years must become a national policy. Nutritious supplements based on local foods must also be developed for children under three.

Another urgent issue is the prevention of interference from commercial interests in policies and programmes related to child health and nutrition, e.g. through advocacy of

'ready to eat' food or 'public-private partnerships'. This is a growing threat, as recent lobbying efforts of the biscuit industry (advocating biscuits instead of cooked mid-day meals in primary schools) illustrate. We enclose a more detailed statement on public-private partnerships.

We urge you to intervene in these matters and ensure that all the required interventions for children under six are put in place.

With regards,

