

## A Report

# Sensitizing Members of Legislative Assembly on Education and Health

**Date:** 12<sup>th</sup> March 2010

**Venue:** Hotel Indiana, Near Secretariat, Jaipur



**Organized by:** Resource Institute for Human Rights (RIHR)

**Supported by:** Save the Children, Jaipur

## **Background**

The Indian political system has public representation at all the levels to make the process democratic as well as address the needs of people at a large. It is a democratic system which includes membership of the representatives from village till central level. This process is unique for enabling involvement of common people's contribution for the overall development of the nation. At each level elected representatives including Sarpanch, Pradhan, Pramukh and MLA are in place to plan, implement and monitor the progress and development of their villages, blocks, districts and states respectively.

MLAs are responsible for bridging the gaps in policies and programs through raising the voices and needs of people of their respective constituency in the state assembly meetings.

The sensitizing workshop was organized with the aims of discussing status of children education, medicines and health status in the state, its implementation and their roles to take the real concerns about the same in vidhan sabha for influencing the state policies and programs on children. The focus of the workshop was on the analysis of acts/provisions in area of education, reality of pharmaceuticals companies selling medicines, status of health related programs in rural and urban areas, budget provisions for the implementation of these programs and its effects.

## **Proceedings**

### **Session 1: Status of Education in Rajasthan**

The session was initiated by Mr. Vijay Goyal by briefing about the RIHR, its mission, working areas and its efforts. He also made a presentation which recapped the government commitments of ensuring primary education to all children across country by the year 2000, compulsory enrollment of all children, reducing the school dropout rates and increasing girls education under the education bill amendment in the year 1992. Schemes of central government to universalize the education including district primary education program (1992) which focused on decentralizing of education system, school building construction, teacher training, teaching aids improvements. The Serva Shiksha Abhiyan introduced in 2001 which is focusing on mainstreaming the drop out, Later the statistics of the year 2009 on education was shared by comparing Rajasthan with other ten major states of India. That included students and class room ratio which is 25 percent for all schools while 24 percent for primary schools and 31 percent of schools are having only a single teacher, overall 92 percent of all schools has drinking water facility and almost half of the co-head schools has common toilets while majority (83 percent) of the schools has separate girls toilet. Only 3 percent of schools have computer facility for children,

while only 29 percent schools have electricity facility. In terms of expenditure on education it is analyzed that from 3.9 percent in the year 1998-99 is has increased to only 4.4 percent in the year 2009-10 against GDP. However major focus is given on girl education through many programs and schemes, the expenditure on girl primary education are too small to notice. The major portion of expenditure goes in the salary whereas expenditure on scholarship, library and laboratory are more or less zilch.

Mr. Amit Chowdhary, Advocacy Officer, Save the Children (STC) gave brief introduction about its vision, programs and strategies at national and international level as well as their roles in 15 districts of Rajasthan. STC is actively working on the rights of children with emphasis on quality education, child protection, child survival and hunger along with different NGOs, central and state government ministries and other private bodies to address these sensitive issues of children at different levels.

He reiterated the focus of Serva Shiksha Abhiyan on providing universal elementary education for all children, however still 186 blocks of the state are backward in education. The provisions made in education under 11<sup>th</sup> Five Year Plan were shared, which has Rs.15 lacs provisions for each SC/ST schools including free books, free mid day meal, pre primary education, health services, community participation in school management especially of women and backwards, bridge courses and residential educational camps for girls and under privileged, books in local language, teachers training, provision of anganwari/balwari in every tribal schools to promote girls education and education facilities for the nomadic families.



He discussed the free and compulsory child right to education Act, 2009, which focuses on the children of 6-14 years of age. The provisions of this act included 25 percent enrollment of under privileged children and government will bare their expenditure, prohibition of tuitions and punishment to

the children by teachers, violence free environment, provisions for differently-abled, punishment for schools, freedom to states on defining under privileged, schools can never deny for enrolling any child, etc. Overall the act will facilitate the quality education and enabling environment for the children and especially those are under privileged. Also highlighted the lacking in the act, which mainly included- non inclusion of children of 3-6 years of age, not mentioned the

repairing of old buildings, unclear on which government borne the education expenditure of 25 percent under privileged, not promoted general schools, non inclusion of individual punishment, freedom of forming own management committee to private schools may ignore community participation, not controlling the school annual fees may leads to increasing fees, etc. At the end of presentation, Ms. Anuradha Talwar of Unicef added that in the next fiscal year government is planning to merge Serva Shiksha Abhyan in the Right to Education Act.

### **Open discussion:**

The presentations were informative and motivated the MLA to participate in the discussion. Smt. Anita Badhel, MLA shared her views on the provisions made under the act 2009 and curiosity on central and state contribution on merging of Serva Shiksha Abhiyan under the act. It was highlighted that the merging will be implemented from April 2010, in which state government would play major role in



the allotment of funds for teachers training, etc.

As compare to previous years the state budget has drastically decreased from 625.19 crore (year 2007-08) to 166.04 (year 2009-10). Mr. Gulabchand Katariya discussed the present scenario of private schools

which demands high fees that may become the strong rich and poor people divide in near future, therefore government need to be careful about the same. They shared initially the parents were made accountable for sending regularly their children to the schools, which was taken out in later stage. Also the SDM committee does not have power to take any action against any corrupt teacher. It was concluded that to improve the education system and education status, the government need to work together with active participation of communities.

### **Session: 2 Health Scenario of the State**

Mr. Awtarsingh Dua, Health Specialist, Unicef oriented about the health status of child and mother in the state. Maternal mortality is very high in Rajasthan which affects the overall health of child and families. The government promotes

institutional delivery; however 60 percent of total maternal deaths are noticed after delivery, since the major attention diverted to child and usually health of mother are ignored. Regarding infant mortality rate, 50 percent of infant death occurs within seven days to 28 days of birth, the IMR is higher among rural areas as compared to their counterparts, therefore the quality health services are needed in rural areas. He emphasized that for continuum of care, the services should start from house till hospital, as in our country still majority of delivery taken places at home. This continuum of care should be across life cycle and irrespective of socio economic and educational status of women. He also suggested that MLA could play a crucial role to involve collectively the village health sanitation committee, ASHA, ANM and Anganwari workers to address child and maternal health issues of their respective constituencies.

### **Medicines and Pharmaceuticals companies**

Dr. Narendra Gupta, from prayas Chittorgarh made a presentation on the scenario of reputed pharmaceutical companies affecting the overall economy of common people by selling same medicines in different prices. India is the fourth medicines suppliers of the world, however it lacks proper medication system and medicines on affordable prices for own population. The factual data shared included: about 80 percent of people in India spend money from own pocket for their and families health care, out of which 40-80 percent money is spent only on the medicines. That means only 20 percent health expenditure is borne by the government. About 40 percent people in rural areas borrow money or sell assets to meet the expenses of hospitalization. Whereas about 23 percent of overall people go for treatment only when they are close to critical conditions or death. He informed on the basis of studies that the reputed pharmaceutical companies are charging much higher money under MRP than the actual procurement prices, which is has again the big differences in the prices of different companies for the same medicine. For example the actual price of Nicip medicine is Rs.1.88 which is sold in the MRP of Rs.25/-. That means the procurement cost is just 1-2 percent of MRP, which are available and sold at every medical shops and big & national hospitals. As the major reasons it was shared that the Direct Price Control Organization (DPCO) control over the prices of medicines has decreased from 325 to only 75 medicines. These leads to helplessness of poor people and people are dying due to lack of affordable treatments. Dr. Gupta suggested that when state government will actual spend Rs.325 crore in the health sector would generate the possibilities of free medicines distribution, every person will get easy and low priced treatment and moreover some of the diseases can be eradicated.

### **Health status of State**

Mr. Vijay Goyal of RIHR shared that the national health policy was introduced in the 1982 which aimed to health for all. According to the new health policy, 2002 the total health budget is 3 percent of GDP, in which the state should spend 2



percent of its GDP in the year 2004-05, however it has been observed that only 1.06 percent of state DGP is spent in the year 2008-09. The data reveals that the number government hospital and available beds are higher than the availability of doctors to provide service and care to the patients, strangely only one doctor is available for about 9281 of population. Annually (2008-09) merely Rs.391 is spent by government per person on health services which is Rs.464 and Rs.114 are for urban and rural population respectively. Regarding the state expenditure, maximum i.e. 98 percent of total budget is spent on the salary of doctors and paramedical staff, whereas only 2 percent is spent on medicines, equipments and other expenses.

### **Open discussion**

The MLA found the discussion shocking and informative. they shared that since state government is already spending more than Rs.325 crore in the health sector it can be possible to make available the health treatment in free and affordable cost for all the people.



The MLAs expressed their concern over the serious implications of health and education

programs/schemes of state government on the overall development of people. They also expressed interest to understand it more deeply as well as make efforts to improve the services for the betterment of their people. Towards the end they shared their

expectations from RIHR and Save the Children, which are as follows:

- Need to organize such informative workshop for the representatives of district and village levels.
- Regular workshop especially on analyzing state budget and expenditure on different areas should be organized regularly for the MLA to facilitate their understanding and actions.
- Reorganizing the similar workshop for them and also taken responsibility to ensure more participation of other MLAs.

**List of MLA participate in the workshop**

**12 March 2010**

**Hotal Indiyana Near vidhan shaba**

<b>S. No.</b>	<b>Name</b>	<b>Constituency</b>	<b>Contract Number</b>
1.	Shri Otaram Davasi	Serohi	9829225095
2.	Shri Arjun Lal garg	Belada	9414412510
3.	Mes. Anita Bhadel	Ajmer South	9829270288
4.	Shri Kasaram Chodhary	Marwar Jn.	9414524290
5.	Shri Abhishak Matodeya	Nohar	9829898989
6.	Shri G.C. Katariya	Udaipur	9414158777
7.	Shri Banvarilal Singhal	Alwar	9414016233
8.	Shri Shrvan Kumar	Surajgarh	9414081255
9.	Shri Vasudav davnani	Ajmer North	9414155744
10.	Shri Ramlal Gugar	Aasind	9414574209
11.	Shri Chotusingh Bhati	Jaisalmer	9414149531

## Press Cutting



**Two Electronic Media B.Tv. and E.Tv Rajasthan also cover this workshop.**