

Critique on Section VII : HEALTH, NUTRITION AND CHILD CARE of India's Country Report (February 1997) on CONVENTION ON THE RIGHTS OF THE CHILD

Most of this section of the report is devoted to Statements from the Constitution, National Health and other policies and programs launched at various times in the past which affect Children directly or indirectly (mostly through programs affecting the mother) with a smattering of statistics which depict progress.

The Priorities for Action in Health (7.13); Priority Areas for Action in Nutrition (7.37); and Priority Areas for Action in Child care (7.51) are remedies identified to improve the Health of the Child.

The links between the Policies / programs and the necessity for identifying such priorities are missing, despite all of these being authentic.

Is there a logic, reasoning and process in our programs, or, are we just moving towards more and more activities / programs, hoping that improvement should occur somehow and somewhere? Also, therefore, how much of each of our efforts 'trickled down', or, are most of these merely on paper?

Some other aspects that need to be addressed in this section are:

- a) Health Care - the quality of services; access especially to women and children; the capabilities of those of who deliver this care and the load on them, especially when it is seen as Integrated, Comprehensive and Holistic.
- b) Socio-economic factors - the pockets of poverty and their remoteness from development, seen as differences between states; between districts within states and within districts, cities, towns and villages.

- the impact of urbanization, industrialization, migration and unemployment.

The vastness and varied characteristics of the people of a sub-continent deserves consideration.

- c) **Nutrition** - not only in terms of specific programs, but also nation-wide efforts like the Public Distribution system which is a major determinant for survival and hence the impact it has when deranged for various reasons. Food security for people is a major determinant of health.
- d) **Water and Sanitation** - for the programs relevance, cost-benefits, appropriateness to local needs and cultural reasons for acceptance or otherwise. Its impact on disease prevalence like Malaria, Filariasis and other vector borne diseases due to ecological and other wider imbalances it causes; and
- e) Last, but the most important, that Health is a 'state' subject funded partly by the Central Government (predominantly for National Health programs) and needs to fund, provide in terms of human, technical and other resources depending on local "state' needs.

These need to be addressed / projected, if pragmatic planning and implementation of programs is to be done for the child.



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