



A STUDY BASED ON MUKHYAMANTRI KANYA UTTHAN YOJNA (MKUY) IMPLEMENTATION FROM ICDS DAUDNAGAR, AURANGABAD

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Abstract - In April 2018, the Mukhyamantri Kanya Utthan yojna (MKUY) was launched. The aim of the scheme is to create awareness about gender parity at birth and also to provide financial support to the parents of the girl child to lighten the burden. On a small scale in Daudnagar in Aurangabad, we visited the ICDS Office and Anganwadi schools and interacted with the beneficiaries of the scheme. By asking the anganwadi workers questions, we were able to understand the mindset of the people, the need for counselling to the parents and family of the child, and the interaction with the beneficiaries gave us an insight into the working style and development of the parents' mindset. The Indian Council for Development (ICDS) and the health department are both working for the scheme. People are now moving to hospitals for the child birth. They are taking help from doctors, counselling for the nutrition and education of the girl child and their mother.

Index Terms – Mukhyamantri kanya utthan yojna (MKUY), Anganwadi worker (AWW), Anganwadi helper (AWH), Integrated child development services (ICDS), Gender Parity, Social Welfare, Bihar

INTRODUCTION

Launched in Bihar by Chief Minister of Bihar Shri. Nitish Kumar in April 2018, Mukhyammantri kanya utthan yojna (MKUY) is a scheme to encourage girls to pursue higher education. This scheme provides financial assistance to the girl child from the time of birth to the time of graduation. The scheme aims to provide benefits to approximately 1.60 crore girls in the State of Bihar. The Government of Bihar has initiated this scheme to promote women's social and economic empowerment. The Bihar MKUY was launched to encourage the girls of the state to pursue higher education in the state. The scheme provides an amount of Rs.94,100 per girl child from the date of birth to the date of graduation in instalments. The scheme also provides funds for the purchase of sanitary napkins and uniforms for the girls.

Daudnagar Block is a Block in the state of Bihar. The population of the Daudnagar block is

197,747 in 2022. According to the 2011 Census of India, the total population of the state of Bihar is 154,490 with 79,973 male population and 74,517 female population. In 2021, the population of the Block was 191,568 with 90,452 literate population out of which 53,894 male population and 36,558 female population. Daudnagar is a medium-sized block with agriculture as the main occupation and business and Others as secondary. The female sex ratio is around 905 to 1000 males. Healthcare in Daudnagar depends on one Provincial Public Health Centre (PPHC) and one newly built State-of-the-Art Hospital (SOH). There are several private hospitals and doctors in the city. Due to the mix of rural and urban population, the absence of medical facilities, the low sex ratio, and the distance from the District Headquarter makes Daudnagar a good place for research on the MKUY Scheme initiated by the Chief Minister of Bihar Shri.

IMPLEMENTATION :

The MKUY program aims to prevent female feticide, reduce infant mortality, improve girls' education, and stop child marriage. The Bihar Minority Youth Union (MBUY) offers assistance to girls from the time they are born until they reach the age of graduation. As of February 2021, the government has increased the amount of aid granted to girls for their education from 60,000 to 94,100 rupees. The MBUY offers benefits to girls at each stage of their lives, from birth to graduation, as follows:

When a girl child is born, she will receive Rs. 2,000. When the girl child reaches 1 year of age, she will get Rs. 1,000. When she completes the whole immunization within 2 years, she will receive 2,000. Upon admission in Class 1 or Class 2 (for uniform), she will receive 600 per year (total Rs. 1,200 for 2 years), between Class 3 and Class 5 (for uniform) she will receive 700 per year (Total Rs. 2,100 for 3 years) between Class 6 and Class 8 (for uniform), between Class 9 and Class 12 (for uniform) Sanitary pads between Class 7 and 12 (total Rs. 300 per year) for a total of 6,800 for 6 years. For passing Intermediate/Plus 2 (unmarried), she will receive 25,000, for passing Graduation (unmarried) she will receive 50,000, for a total of 94,100.

ELIGIBILITY :

The eligibility criteria for this scheme are as follows: The girl should be residing in Bihar state Only two girls from the same family are eligible for this scheme The girl belongs to the Economically Weaker Section of the society Every girl from the state is eligible for this scheme regardless of her caste or religion The girl's parents must not work as a Government Employee.

OBJECTIVE :

The objective of this scheme is to motivate girls to pursue higher education and to provide them with financial assistance from the time of birth to the time of graduation so that they can lead better lives. On the occasion of the birth of girl child: Rs 2,000 On the first vaccination: Rs 1,000 On the passing of intermediate or +2 exam: Rs 10,000 on the completion of graduation degree: Rs 25,000 In total, 40,000 rupees will be distributed to girl child families.

The MKUY programme aims to change gendered attitudes towards girl children. MKUY includes 6 existing and 4 new interventions to address the life cycle vulnerabilities of girls and young women from birth to the age of 21. The 10 interventions are implemented through 23 age specific cash grants cumulatively amounting to 54,100 Indian Rupees. The grants are designed as conditional cash transfers with the aim of achieving a range of positive outcomes for girls, including improved birth registration, complete immunization, school attendance and attendance up to completion of the age of marriage (see Table 6.1 for more details on the design). The

programme aims at reaching 16 million girls annually. At full coverage, MKUY is estimated to cost USD 320 million (about 1 per cent of Bihar's gross domestic product), which is higher than the USD 180 million cost of previous programmes. The implementation of MKUY is shared across three government departments: the Ministry of Social Welfare (MSDP), the nodal department to coordinate the programme, and the Ministry of Health & Education. All grants are directly transferred to the parent or child's bank account.

PAYMENT SYSTEM :

The payment function was relatively well integrated (implementing line departments using direct benefit platform e-kalyan), but processes to initiate payments varied significantly across departments, leading to varying service quality across cash grants. For example, the education grants provide girls with the longest exposure to MKUY, but these grants are separate from the life cycle programmatic approach of MKUY. While this does not impact uptake, it detracts from the programme's objectives. A harmonised payment system would prevent operational inefficiencies and duplication of resources to make payments to same beneficiaries. There is a general lack of clear feedback on payment status, which may reduce demand for the

MKUY IN DAUDNAGAR :

When a Girl Child is born in a Government Hospital, the MKUY Form is filled by the Hospital itself. After birth, the form does not need to be filled out again. However, if the baby is born in a place other than Government Hospital, the parents can contact the nearest Anganwadi Sevika (AWW), fill out the form and submit it to the office after verifying the date of birth and providing the necessary documents. The form can also be filled out online at the website, icsdsonline.nic.in, to benefit from the Scheme. The details of the Scheme implementation can be found below:

MARK FOR PAYMENT ENTRIES				
MKUY ICDS DAUDNAGAR				
Sl.No.	Block	Target	Total Beneficiary	Mark for Payment
01	Daudnagar	1182	623	94
	Total :	1182	623	94

Table.1 MKUY DATA FROM DAUDNAGAR

ROLE OF ANGANWADI

Gender sensitisation of the social sector workforce is essential for gender-sensitive intervention and must be invested in. Direct orientation and engagement of frontline workers on the objectives, purpose and implementation of the MKUY programme will help to align programme delivery with programme objectives.

Anganwadi centers all over the district, including those in daudnagar, hold camps to collect MKUY forms from eligible applicants. Anganwadi staff will organize a counselling session to determine the eligibility, documents, and benefits of the applicants, and then collect the form from them. The form details are verified by the Anganwadi worker and presented to the office, where the lady supervisor will upload the form details on the website. After verifying the

documents, the government will transfer the amount to the beneficiary's account. When asked about their involvement in this scheme, Anganwadi Workers NEERA KUMAR (AWW) of Tarari Panchayat said that they are responsible for 0-6 year old children, pregnant & breastfeeding mothers of the ward assigned to them. They are aware of the beneficiaries of the scheme and inform the mothers at their centers about it. Saroj Kumari from the Akodha Panchayat, who works in the area, has seen a decrease in people's worries since the program was launched. She states that the government is providing financial assistance to the program, and that the main focus of the program is to provide guidance to parents and families on nutrition, sanitation, and education. She believes that if girls are treated well in their family and society, they can achieve great things. We visited a few recipients to get their feedback on the ICDS program and its implementation. Sunita Kumari from Akodha Panchayat said that Anganwadi Sevika came to her house to explain the scheme, which is a great initiative by the government and will help reduce the financial burden of raising a child. Suman Kumari from Tarari Panchayat also said that her child was low birth weight and Anganwadi Sevika had come to her house to give her advice on raising a low weight baby and to take documents for the scheme from home. She also advised her to follow a healthy diet and to only give the child milk. Another Resident of Tarari, Anupama Devi, said that during her child birth, the attendants took her Aadhar, account details, and the Birth Certificate and MKUY form were filled out by the hospital staff.

ISSUES :

Access to low-cost bank accounts is a major bottleneck that delays programme enrolment and benefit disbursements. Large and repetitive documentation is required to enrol, and there are often discrepancies in beneficiary information across documents, particularly for new mothers. Getting Aadhaar cards for children (India's unique national identification system) is another major bottleneck.

LITERATURE SURVEY

SAMSUNNESSA KHATUN, AZNARUL ISLAM 'Death Before Birth' - A Study on Female Feticide in India Feticide is a crime that causes the death of a fetus. In a legal context, it's the intentional or accidental killing of a fetus by a criminal act, like a blow to the abdomen of a pregnant woman. As a medical term, feticide is the destruction of a fetus, which is the first stage of a legal abortion (Wikipedia, 2011). In certain situations, it's inevitable and legal, especially in the early stages of pregnancy. However, sex selective abortion is not supported at all. In the absence of genetic testing, infanticide was the only humane way to discard the female child. This is still a practice in the southern parts of India, where families can't afford an illegal ultrasound test, but people in western states can afford it.

ADETUTU AINA-PELEMO, SIMRAN SALUJA Comparative Analysis of Sex-Selection in Nigeria & India. International Journal of Humanities and Social Science Studies (IJHSSS), 2018, 4(5), 71-89 The study compared the Nigerian perspective on sex selection with the Indian perspective on sex selection. Sex selection is widespread all over the world despite the fact that it is prohibited by the policies or laws of many countries. Is there a need to prohibit sex selection in Nigeria as compared to the Indian perspective? The paper used both primary data sources and secondary data sources. A semi structured interview was conducted with 100 participants; 50 from Nigeria and 50 from India by convenience sampling method. The research showed that sex-imbalance exists in both countries. In Nigeria, there are more female adult than male adult. In

India, there are more male adult than female adult.

SUDIP BHATTACHARYA, AMARJEET SINGH CHANGING STRATEGIES OF FEMALE FOETICIDE IN INDIA: A NEVER ENDING STORY IN ORDER TO PREVENT FEMALE FETICIDE, THE GOVERNMENT PASSED PNDT ACT. THE REACTION TO THIS WAS TO START PRENATAL SEX SELECTION. AGAIN, THE GOVERNMENT TOOK ACTION BY CHANGING THE PNDT ACT IN 1994 INTO PC-PCD ACT. PEOPLE REACTED BY SEX SELECTION IN STATIC VAN. LATER, DUE TO RAIDS, IT WAS CONVERTED INTO MOBILE VAN. IN THIS CASE STUDY, WE SEE THAT IN ORDER TO EVADE THE PC-PCD ACT, PEOPLE CAME UP WITH NEWER STRATEGY. STRATEGY OF SEX DETERMINATION AND FETICIDE BY MOBILE TEAM WITH PORTABLE ULTRASOUND MACHINES. OUR CASE STUDY IS SIGNIFICANT BECAUSE IT SCRATCHED THE SURFACE. MUCH MORE NEEDS TO BE DONE. UNLESS AND UNTIL PEOPLE UNDERSTAND THE IMPORTANCE OF WOMEN IN OUR SOCIETY, THIS TYPE OF REACTION WILL KEEP REOCCURRING.

MICHELLE OBAMA, WHEN GIRLS ARE EDUCATED, THEIR COUNTRIES BECOME STRONGER AND MORE PROSPEROUS : ARTICLE ON GIRL CHILD EDUCATION Many girls choose not to study because of financial constraints at home, domestic responsibilities, and even lack of interest. Girls' education is important because they play an important role in the economy and society. Women are the primary carers at home. Girls could improve their lives and those of their families if they were educated properly. Child labour will go away if educated girls share the responsibility of earning money. The only way to empower girls is through education. A well educated girl will realise her dreams. Only a well educated woman can provide for herself and be truly independent. She will not only benefit from her education but will also spread the light of knowledge to all around her.

EFEVBERA, Y., BHABHA, J. Defining and deconstructing girl child marriage and applications to global public health. *BMC Public Health* 20 Through an in-depth analysis of first-hand and second-hand evidence, including legal literature, third-party research, academic books, and academic grey literature across multiple disciplines, we look at what the concept of girl child marriage encompasses and why it captures the current global efforts better than other terms such as early, teenage or adolescent marriage.

SAVE GIRL CHILD & IMPORTANCE OF GIRL CHILD IN INDIAN SOCIETY, CULTURAL INDIA FEMALE FETICIDES AND INFANTICIDES, ALONG WITH THE DEATH OF GIRL CHILDREN DUE TO NEGLIGENCE AND ABUSE HAVE AFFECTED THE SEX RATIO, WHICH MAY HAVE LONG-TERM SOCIAL-PSYCHOLOGICAL CONSEQUENCES. THE EXCESS OF MEN IN A SOCIETY MEANS THAT MANY OF THEM REMAIN UNMARRIED, WHICH LEADS TO MARGINALIZATION IN THE SOCIETY, WHICH IN TURN RESULTS IN ANTI-SOCIAL BEHAVIOUR AND VIOLENCE, WHICH IN TURN THREATENS THE STABILITY AND SECURITY OF THE SOCIETY. THIS MAN-INDUCED CHANGE OF DEMOGRAPHIC CANNOT BE IGNORED, WHICH IN TURN AFFECTS THE SOCIAL VIOLENCE AND HUMAN DEVELOPMENT AS WELL AS THE OVERALL DEVELOPMENT OF THE COUNTRY.

CONCLUSIONS

The program itself is novel in its design and will bring about social transformation. It will motivate parents to stop discriminating between girl and boy children. Parents will not see the girl child as an inconvenience and will put their time and money into the health and educational needs of the girl child, especially the financially and socially disadvantaged sections of society. Parents will understand the significance of child birth in hospitals, they will understand the nutritional needs of girl child and mother, they will enrol girl child in school and then in college, and after this wonderful approach, the sanitary requirements will be met. Even though the number of child births in government hospitals has decreased, the number of child birth at home has increased. ICDS only addresses child birth outside government hospitals. The government payment channels should be fastened to attract more beneficiaries to this Scheme.

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