

INVOLVING VOLUNTARY ORGANISATIONS IN GOVERNMENT PLANS AND PROJECTS



VOICE OF THE VOLUNTARY SECTOR

VANI

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Contents

Abbreviations	3
Preface	5
Background	6
Objective of the Study	8
Research Methodology	9
Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA), 2005	11
National Rural Health Mission	25
Urban Poverty Alleviation Programme-JNNURM	34
Right to food program (Food Security Act)	41
Way Forward	44
Recommendations	45
Bibliography	47

Abbreviations

ASHA	Accredited Social Health Activist
CAG	Comptroller and Auditor General
CBDT	Central Board of Direct Taxes
CBOs	Community Based Organizations
CHCs	Community Health Centres
CPR	Common Property Resources
CRM	Common Review Mission
EGS	Employment Guarantee Scheme
FCRA	Foreign Contribution Regulation Act
FNGO	Field Non-Governmental Organization
GDP	Gross Domestic Product
GP	Gram Panchayat
HFWD	Health & Family Welfare Department
HIV/AIDS	Human Immunodeficiency/Acquired Deficiency Syndrome
HMIS	Health Management and Information System
ICDS	Integrated Child Development Scheme
ICT	Information, Communications and Technology
IEC	Information, Education and Communication
IHSDP	Integrated Housing & Slum Development Programme
IMR	Infant Mortality Rate
IT	Information and Technology
JNNURM	Jawaharlal Nehru National Urban Renewal Mission
JSY	Janani Suraksha Yojana
KMSS	Krishak Mukti Sangram Samiti
MDG	Millennium Development Goal
MDM	Mid-day Meal
MGNREGA	Mahatma Gandhi National Rural Employment Guarantee Act
MKSS	Mazdoor Kisan Shakti Sangathan
MMR	Maternal Mortality Ratio
MNGO	Mother Non-Governmental Organization
MNH	Maternal and New born Health
NDCP	National Disease Control Programme
NPP	National Population Policy

NRHM	National Rural Health Mission
OPD	Out-patient Department
PDS	Public Distribution System
PHCs	Primary Health Centres
PPP	Public Private Partnership
PRIA	Society for Participatory Research in Asia
PRIs	Panchayati Raj Institutions
PUCL	People's Union for Civil Liberties
RCH	Reproductive and Child Health
RDT	Rural Development Trust
RRC	Regional Resource Centre
RTE	Right to Education
RTI	Right to Information
SC	Scheduled Caste
SEGM	State Employment Guarantee Mission
SERP	Society for Elimination of Rural Poverty
SHRC	State Health Resource Centre
SIFPSA	State Innovations in Family Planning Services
SPARC	Society for the Promotion of Area Resource Centre
ST	Scheduled Tribes
TB	Tuberculosis
TCS	Tata Consultancy Services
UIDSSMT	Urban Infrastructure Development Scheme for Small & Medium Towns
ULB	Urban Local Body
UNICEF	United Nations International Children's Fund
UPAI	Urban Poverty Alleviation Initiative
UT	Union Territory
VHND	Village Health and Nutrition Day
VHSC	Village Health & Sanitation Committee
VO	Voluntary Organization
YIP	Young India Project

Preface

The voluntary organization have been actively involved in mobilizing the people to raise their voice in protest against government policies to protect their own interests at the same time they work with the government agencies on the common areas, which has both positive and negative impacts. This study addresses this key issue of the relationship between non-government and government organizations, and how this delicate relationship between these often contradicting entities is sustained.

The Planning commission of India acknowledged the engagement with the voluntary organizations since its 6th plan and the sector also witnessed the approval for the formulation of the National Policy on Voluntary Sector by Union Cabinet in May, 2007. The policy prepared the ground and provided the scope for the GO- VO partnership in the future, however the approval of the policy by the Indian Parliament is still awaited.

The relationship between the voluntary organizations (VOs) and the government has been undergoing various changes. The government co-opts, regulates and takes action depending on its needs and requirements.

I would like to thank VANI team, especially Ms. Ratna Manjari for writing and Dr. Jyotsna Mohan for coordinating and finalising the study. I would also like to thank Ms. Edda Kirleis, South Asia Desk Bread for the World - Protestant Development Service for her support and Bread for the World - Protestant Development Service for supporting the entire project.

At the outset, the study attempts to analyse the involvement of VOs in decision making processes during the planning and conceptualisation of government funded development projects. The engagement and the relationship are studied on the basis of the broader spectrum i.e. in the process of implementation of programmes, schemes, resource mobilization and service delivery

Based on this conceptual framework, the study seeks to address VO-GO relationships in India. It also describes the characteristics of these relationships and highlights the possible ways through which governments can influence the operational environment for NGOs and vice versa.

Harsh Jaitli
Chief Executive Officer

BACKGROUND

Voluntary organizations (VOs) have been actively involved in providing support in sectors like livelihood, education, health and hygiene, water and sanitation, food security and nutrition, ecological sustainability etc. VOs also supplement government initiatives by acting as a conduit between development programmes and beneficiaries, informing and sensitizing people about their rights and entitlements. Their ability to mobilize people and understand their concerns enables them to better articulate the issues and difficulties encountered by people. Government sector on the other hand, need the support and involvement of VOs to mobilise people, to link the reform measures and integrity of systems with the interests and experience of the people in different parts of society. Considering the above factors, there has been a need to analyse the level and extent of VO participation at state and central level as the government is instrumental in launching and implementing various development schemes in the country. At the same time, it's worth analysing the government endeavour to invite them for their active participation and making them integral part of the development projects.

Since independence and until the 6th five year plan, there was little effort on the part of the government to define and recognize the roles and significance of VOs in the development process. The agenda of the 6th five year plan was to secure people's participation through VOs in the implementation of government programmes and schemes. This trend has also given space to the voluntary sector in the formulation of budget and policies related to their area of operation.

The VOs perform various roles today. They are advocates, educators, catalysts, monitors, whistle blowers, mediators, lobbyists, activists, mobilizers (of both people and resources), and protectors of human rights, conscientizers, animators and conciliators.

Voluntary sector is effectively strengthening the development role of the state. There are now approximately 3.3 million registered voluntary organizations engaged in a wide variety of initiatives across the country and working with the poor and marginalized sections in the urban as well as rural areas of the country.

The relationship between the voluntary organizations (VOs) and the government is undergoing various changes. Their relationship has emerged as most diverse and ever-changing in nature. The government co-opts, regulates and takes action depending on its needs and requirements.

The study attempts to analyse the involvement of VOs in decision making processes during the planning and conceptualisation of government funded development projects. The engagement and the relationship are studied on the basis of the broader spectrum i.e. in the process of implementation of programmes, schemes, resource mobilization and service delivery. The role of the state is to:

- a. Help register under an appropriate Act
- b. Provide grants-in-aid for the implementation of programmes
- c. Ensure that the work of the organization to be on par with the conditions of the grant regulation
- d. Levy Income Tax on the profit of the organization
- e. Give clearance for receiving funds from foreign agencies etc.
- f. Provide license under appropriate legislation

The Role of the Government in Voluntary Efforts

The state is regulating and enacting a variety of controlling mechanisms through its organizations and agencies and through laws and legislations. There are 3 types of legislations that affect VOs directly in India.

- a. Registration laws: The VOs are registered under Society Registration Act 1860, Trust Act 1882 and Companies Act 1956. Some states in India have separate Acts governing the registration of VOs which acts as hindrance in the smooth functioning of the voluntary organization.
- b. Income Tax Act (1961): This Act gives special concessions to charitable organizations like boarding schools, public schools, hospitals and dispensaries including VOs. Changes and amendments in Income Tax Act have been done to further tighten the control over VOs. The VOs have to give an undertaking and statement for their non-profit status to the income tax department in order to get the concessions.
- c. Foreign Contribution Regulation Act, 2010: The FCRA 2010 repeals the 30 year old Foreign Contribution (Regulation) Act of 1976 which was formulated during the emergency to regulate the flow of the foreign grants and contributions to VOs in the country. The new Act gives more authority to enforcement agencies to regulate the receipt and utilization of foreign contribution from abroad. The responsibility of implementation has been entrusted to the Ministry of Home Affairs.

Recently the interface between the government and VOs has increased significantly. Various government organizations have been working in collaboration with VOs in a wide range of activities. However in some places this relationship has come under stress. In several cases this has happened in the case of those VOs and people's movements, which have an excellent record of working for the deprived and the marginalized community.

Mr Jagdananda, State Information Commissioner, Orissa mentioned, *“that the sector is very strong and is working effectively but the problem is with articulation. Very little literature has gone to the government and the sector never had a dialogue with Central Board of Direct Taxes (CBDT) to educate about the sector and unique strength that the sector holds. He further suggested that there is a strong need to work on the networking issue”* (The Conclave of leaders of Voluntary Sector held at New Delhi on February 20, 2012)

The VOs have a major role to play in applying the principles of accountability, greater participation in decision making, transparency, freedom of expression and participation in implementing national schemes such as MGNREGS, NRHM, right to food program, and urban poverty alleviation programs at the local level in the grassroots mobilization. The VOs play an even more crucial role in monitoring the programmes, delivering the services and scrutinizing the existing bureaucracy. For example the human rights VO i.e. People's Union for Civil Liberties (PUCL) and the right to food campaign have played an important role in highlighting the obligation of fulfilling the right to food by the government.

We have taken up the government schemes and tried to study the engagement of the VOs in planning, implementation that has benefitted the community and addressed the livelihood, health and poverty.

OBJECTIVE OF THE STUDY

1. To understand the strengths and weaknesses of the two in the conceptualization, planning and implementation of development programmes.
2. To build confidence, trust and goodwill of the VOs as there is a prevailing doubt, distrust and credibility of the VOs.
3. To ensure and strengthen the participatory approach between the government and VOs.

RESEARCH METHODOLOGY

The study is based on the analysis of the primary data collected from the state, regional and national level consultations and discussions with government bodies:

1. State level workshop held at Ranchi, Jharkhand on April 23, 2012
2. State level workshop held at Chandigarh on July 3-4, 2012
3. Eastern regional workshop on State of voluntary organizations held at Kolkata, West Bengal on September 11-12, 2012
4. National Consultation on Building Bridges: New Age of Voluntarism on 20-21 February, 2013
5. State level workshop held at Bhubaneswar, Odisha on May 22-23, 2013

The secondary data and information were collected from the central and state government's website, Planning Commission website; best practices and case studies of implementation of national policies and schemes in selected constituency; and VO networks and past studies done on the government policies and schemes. The information was put together to provide the background, history and overall status of the involvement of VOs in decision making processes during the planning and conceptualisation of government funded development projects.

In the research study review of 4 national schemes has been carried out which have greater potential to engage VOs. The emphasis is on selected VOs and government departments from five sample states from north, south, east/central, west and north-east region.

- Rural Livelihoods (Mahatma Gandhi National Rural Employment Guarantee Act)
- National Rural Health Mission (NRHM)
- Urban poverty alleviation program-JNNURM (Jawaharlal Nehru National Urban Renewal Mission)
- Right to food program (Food Security Act)

INVOLVEMENT OF VOS IN FORMULATION OF POLICIES

The research study explored the engagement of voluntary organizations in the government funded development projects. The VOs have been involved in formulation of policies, implementation of national schemes and supporting the

government bodies. Keeping in view the focus on the successful implementation of the programme which will benefit the target people, the policy makers adopt a consultative procedure with the VOs. They dialogue and hold discussions with the practitioners and consider the suggestions given by them on issues associated with the livelihood programmes, health benefits and other development programmes.

The VOs are playing an active role in formulation of policies and working in close association with the government bodies and the state departments. There are numerous organizations that are committed and help in effective planning and advocacy keeping in mind the requirements of the society and the community.

Keeping this aspect in view the researcher held discussions with few members of the government bodies and practitioners to analyse the role and involvement of VOs in planning and conceptualization of programmes/schemes.

Mr. Biraj Patnaik, Principal Advisor to the Commissions of Supreme Court on the involvement of voluntary organizations stated that the voluntary sector needs to have a visible presence and the accountability and transparency standards should be scaled up and maintained. The government utilizes the services of the VOs to implement the programmes/schemes as per their requirement at the block, district and state level. The government sub contracts the programmes to the VOs because it is low cost and economical. Hence, the sector as a whole should campaign, raise voices and make a presence in the media so that the country knows that there is an issue which needs to be addressed.

According to him, having an enabling environment for the voluntary sector is not sufficient. A mass movement and unified approach of the voluntary sector can help in image building and visibility of the voluntary organizations. Presently, the sector lacks political will and there should be a presence of a visible leader, public figure that can enhance the image of the voluntary sector.

Similarly another practitioner Dr. Saroj Dhingra, Communication for Health & Development and Research Specialist stated that the VOs have tremendous potential and they should facilitate the government to overcome the problem keeping in mind the needs and requirements of the community and society. There are few components of the development programmes/schemes that are complemented by the VOs. She mentioned that since the VOs have the capability of implementation of government funded development projects and they can foresee the development issues that are interlinked to other issues. Therefore, the VOs can act and do advocacy keeping

in mind the area of operation of the program, the sustainability aspect and the maintenance in the long run.

The government departments do have checklist, evaluation and infrastructure but there should be continuous discussion, feedback, monitoring of the implemented programmes. It was also mentioned that the linkage between the government and the voluntary sector needs to be further strengthened. She categorically cited that a roadmap needs to be drawn in which exchange of ideas and concepts are discussed with the government bodies at the district level. Thus, an effort should be made to do policy advocacy and an action plan drawn. In her concluding remarks she stated that the gaps and learning's should be addressed by the VOs and they should emphasize on the visibility, qualitative and quantitative improvement in the livelihood, health benefits of the target community.

Considering the views of the experts, it is observed that VOs need to scale up and do advocacy with the government bodies as they have tremendous potential in identifying the regulatory areas that require changes. It will further help policy makers as well as other service providers to address issues associated with developmental programmes to target the excluded people keeping in mind the requirements of the community and society.

The study focusses on the involvement of the VOs that is linked with the development programs/schemes at the level of policy advocacy and service delivery.

MAHATMA GANDHI NATIONAL RURAL EMPLOYMENT GUARANTEE ACT (MGNREGA), 2005

On 7th September 2005, the Indian Parliament passed the National Rural Employment Guarantee Act (NREGA), which provides 100 days of guaranteed employment to every rural household. The Act commenced in 200 of the country's poorest districts from 2nd February 2006 and thereafter expanded to 130 more districts from 1st April 2007. The Act has been extended further to all the remaining 266 districts with effect from 1st April 2008. Thus, the MGNREGA covers the entire country with the exception of districts that have a hundred percent urban population. In 2009, Government of India decided to rename its flagship rural employment programme after Mahatma Gandhi. Hence, it is known as Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA).

MGNREGA has placed a judicially enforceable obligation on the state. The Act aims at enhancing the livelihood security of people in rural areas by guaranteeing wage-

employment in a financial year to a rural household whose adult members volunteer to do unskilled manual work.

The objectives of MGNREGA are:

- a) Providing wage employment opportunities
- b) Creating sustainable rural livelihoods through regeneration of the natural resource base i.e. augmenting productivity and supporting creation of durable assets
- c) Strengthening rural governance through decentralization and processes of transparency and accountability¹

The Act ensures equal wages to both men and women. In order to bring women to the forefront, the Act mandates 33 per cent participation for women. This Act is also a significant vehicle for strengthening decentralization and deepening the processes of democracy by giving a pivotal role to local governance bodies, i.e. the panchayati raj institutions.

Role of Panchayat in MGNREGA: The gram panchayats (GPs) are central to the implementation of MGNREGA at the grassroots and they play a significant role in the execution of the scheme. They assume the following responsibilities:

1. To make a development plan of the panchayat and list out projects to be undertaken as MGNREGA in accordance with the gram sabha's sanction.
2. To do registration of families and distribution of job cards.
3. To receive applications for work and providing employment.
4. To execute the sanctioned work by the project office from amongst the development plan of panchayat.
5. To maintain muster roll and distribute wages from the funds received under MGNREGA in the panchayat account.

At least 50 percent of works from the sanctioned one, to be executed through GP while the remaining 50 percent to be undertaken by the other executing agencies like Janpad panchayat, district panchayat, government departments and VOs.

¹ [http://nrega.nic.in/NREGA_VISION-version_4-\(2\).pdf](http://nrega.nic.in/NREGA_VISION-version_4-(2).pdf)

MGNREGA OPERATIONAL GUIDELINES

“In 2013, Ministry of Rural Development issued operational guidelines for various stakeholders engaged in the implementation and evaluation of MGNREGA. The guidelines for the VOs are given below:

Section 2 (g) of MGNREGA states that, “implementing agency” includes any department of the central government or a state government, a zila parishad, panchayat at intermediate level, gram panchayat or any local authority or government undertaking or non-government organization authorized by the central government or the state government to undertake the implementation of any work taken up under a Scheme.”

“As per the guidelines VOs can be engaged in MGNREGA in the following aspects:

1. In awareness building, mobilization, support and strengthening capacities of wage-seekers.
2. To create an interface between implementation structure and wage-seekers so that they are able to secure their rights, demand payment for work on time.
3. In training and support for institutions at central, state, district, block and sub-block levels.
4. As implementation support teams for GPs to provide technical support.
5. In transparency process relating to vigilance and social audit
6. In monitoring and evaluation, doing action-research to develop new models.

Identification of eligible VO: The CEO of State Employment Guarantee Mission (SEGM)/State Programme Coordinator should identify eligible VOs and work out the partnerships in detail. The modus operandi of the partnership especially in terms of area of operation, deliverables, time lines, financial transactions should be clearly laid out by the State Program Coordinator in consultation with the VOs. The State Programme Coordinator is responsible for creating an enabling environment and a strong interface between the implementation machinery and the VOs. The selection of voluntary organization is to be done on merit and the process followed is transparent. In this manner the VOs can strengthen and support the implementing agency i.e. the GP.

The table below shows the type of role the VOs can play”²

	Na-tional	State	Dis-trict	Block	Cluster of GPs
Resource agency	*	*			
Training and support		*	*	*	
Implementation fa-cilitations and support teams				*	*
Mobilization of wage-seekers				*	*
Monitoring				*	*
Vigilance, social audit				*	*

Dr Rajesh Tandon, President, PRIA speaking on the identity and image of the sector mentioned that, *“the economic development rate has grown real fast. We need to assess the consequence of rapid growth in the society where we live and work. There is wide consensus in the country where rapid economic growth is the model. Today the government is putting a bit more money in the schemes like MGNREGA, Sarva Shiksha Abhiyan so that their rapid economic growth model does not get hampered.”*

(National Convention, March 27, 2012 at Vishwa Yuvak Kendra)

Mr Sukumar Singh, Secretary, Mass Education, Kolkata stated that, *“today the scenario is changed. The allocation in the government schemes are getting increased but the development is static”*

(National Convention, March 27, 2012 at Vishwa Yuvak Kendra)

² http://nrega.nic.in/netnrega/WriteReaddata/Circulars/Operational_guidelines_4thEdition_eng_2013.pdf

MGNREGA is an important programme to alleviate poverty. It is quite different from existing poverty alleviation programmes. The Government has the responsibility to reduce poverty through this programme. But the success of this programme depends on the role of VOs.

The section below covers the role of VOs in the planning, implementation and evaluation of MGNREGA. The study focuses on the following five states from five regions:

Southern Region: It comprises of Andhra Pradesh, Tamil Nadu, Karnataka and Kerala. The voluntary sector in this region is engaged in activities and programmes. They bridge the gap between the needs of the people, their rights and entitlements and do capacity building. The government schemes and projects are being implemented in the southern region with the help and support of the local and active VOs, which are working at the grassroots catering the needs and requirements of the communities. Based on the organization's involvement with the community, the VOs are categorized under three heads:

- i. Service delivery - fulfilling the basic requirements and needs of the community
- ii. Rights based approach - making the community aware of their rights and entitlements
- iii. Capacity building - training, building community infrastructure.

In this region, we have taken up Andhra Pradesh, which is the largest southern state in India. We have studied the involvement of VO in MGNREGA in the state.

Andhra Pradesh

Historically, Andhra Pradesh has had a vibrant presence and partnership with VOs for development of the poor. These organizations, small or large, have advocated the need for providing continued work to the poor, for their welfare and improved livelihood. With this like-minded approach, VOs have strived to bring improvements to the implementation of MGNREGA through formal and informal interactions with the administration. VOs have played a constructive role in assisting citizens in various capacities ranging from advocacy and human development to livelihood support. Recognizing the importance of these organizations and their relevance as an independent entity working for the betterment of the masses, the government

of Andhra Pradesh (GoAP) conceived a vibrant partnership with VOs in the area of capacity building and advocacy while implementing MGNREGS.³

To ensure that there is transparency and a grievance redressal system in place where the VOs could play an active role in safeguarding the citizen interests, AP NGO Alliance (APNA) was formed with about 351 NGOs. The primary objective is to guarantee the promise of the MGNREG Act and give suitable place for rights-based VOs to organize the rural poor to demand their rights under the Act.

Under the scheme of MGNREGA, **the state government computerized the entire process from end to end with the help of IT companies.** Thus, for instance, from the process of registration to the issuing of the pay order, the entire process was computerized and available for scrutiny.

Further, in the state of Andhra Pradesh, the government has commissioned VOs to ensure transparency and accountability in the working of MGNREGA through the process of social audits.⁴ But even so, VOs are not coming forward to collaborate with the Government. The Government of Andhra Pradesh observed that very few VOs were willing to come forward to be part of the social audit process.⁵

Policy on Common Lands: Mahatma Gandhi Yuvajana Sangam (Anantapur, Andhra Pradesh) is continuously dialoguing with the Government for the Policy on Common Land that will provide crucial source of livelihood to the rural households. The Common Lands provide wide-ranging contributions to village economy - from food, fodder and timber to farming systems, animal husbandry, resource conservation, and recharge of ground water. The policy has been passed in Andhra Pradesh but is not well implemented in the state. In addition, facilitating and mobilizing the labour and making them aware of their rights and entitlements by organizing meetings and seminars especially to educate the uneducated rural masses about the benefits conferred by the MGNREGA is the area of prime focus of the VOs of the state.

3 <http://aajeevika.gov.in/studies/mgnregs/NREGS-Best-Practices.pdf>

4 A social audit is a process in which the people work with the government to monitor and evaluate the planning and implementation of a scheme or programme. The social audit process is critically dependent on the demystification and wide dissemination of all relevant information.

5 http://www.levyinstitute.org/pubs/EFFE/Transparency_and_accountability_in_employment_programme_Final_version.pdf

There are numerous VOs in Andhra Pradesh that are part of the policy formulation also.

Andhra Pradesh: Policy on Commons - Scaling up CPR-MGNREGS: With the support of Government of Andhra Pradesh, **Foundation for Ecological Security** along with few other VOs is implementing a pilot project on Common Property Resources (CPR) - MGNREGA through dovetailing the MGNREGS funds. This pilot programme on Common Land Development, 'CPR-MGNREGS' is meant to support ecological restoration on 50,000 hectares of degraded common lands in Rayalaseema region by involving Panchayats, VOs and local government officials. Looking at the positive results, the government has agreed to scale up the CPR-MGNREGA from the existing two to twelve districts. Taking cue from our engagements with the government of Rajasthan (GoR) and the subsequent drafting of Common Land Policy in Rajasthan, the Government of Andhra Pradesh has set up a sub-committee of members from Commissioner of Rural Development, partner VOs and other line department to draft a Policy for Commons in the state.

Effective Implementation of MGNREGA in Anantapur district of Andhra Pradesh

The Young India Project (YIP) in Anantapur district of Andhra Pradesh has been working from decades to make the rural poor aware of their rights as defined in the Constitution of India; to stimulate the rural poor to organize themselves into empowering units; and encourage the rural poor to demand their rights. The model that **Narinder Bedi, Director of YIP** is using to implement MGNREGA is one that he developed over several decades and is directed at educating the rural poor about their constitutional rights to work and earn money for the support of their families. This model incorporates three key principles, i.e. 1) to educate the poor about their constitutional rights under MGNREGA; 2) to organize the poor into "unions" whereby giving the rural poor a voice, legal standing, and collective motivation for pursuing the benefits of MGNREGA; and, 3) to demand that the rights of the rural poor as outlined in the Act are fulfilled by the government.

Mr. Bedi is working very actively in the implementation of MGNREGA with the help of YIP models. In 2006, Government of Andhra Pradesh requested YIP to organize the first social audit of MGNREGA in Andhra Pradesh. Two major findings that emerged were: fraud in some *mandals* and lack of information and **awareness**

of MGNREGA and the rights given by it in all the forty *mandals* they covered. None of the MGNREGA workers in those *mandals* knew what rights had been conferred by the Act; therefore the Act was being implemented as any other employment generation program. In post 2007 government created its own social audit department in the Ministry of Rural Development to conduct periodic audits. YIP decided to focus on: 1. To educate the poor about their constitutional rights under MGNREGA; 2. To organize the poor into unions (whereby giving the rural poor a voice, legal standing and collective motivation for pursuing the benefits of MGNREGA); 3. To assist the unions to demand and receive their rights as outlined in the Act.

On account of the dearth of funding, YIP approached the Government of Andhra Pradesh for the implementation of MGNREGA. Today YIP is working actively in the implementation of MGNREGA.

Central Region comprises of Madhya Pradesh and Chhattisgarh states

Madhya Pradesh

The first phase of MGNREGA was launched in February 2006 in 18 districts of Madhya Pradesh. By 2008-09 financial year, all the districts were covered. It ensured at least 100 days of employment for all rural households. The MGNREGS allows the panchayats to implement systems for generating employment as well as meeting sustainable infrastructure. It further empowers the people to play an active role in employment guarantee through gram sabha, social audits and participatory planning. VOs are actively engaged in the social audit, which has improved record keeping in the gram sabha.

Civil society is also an important facilitator for effective implementation of the MGNREGA. In Madhya Pradesh the scheme has been projected as one of the most successful in implementation. However, there remain several challenges in the implementation of the scheme, particularly in efficiently managing the implementation at the village level.⁶ Thus, VOs have to play an effective role in curbing the challenge.

6 <http://www.samarthan.org/2010/07/19/social-audit-on-nrega/>

Implementation of MGNREGA

“Samarthan, a voluntary organization in India works in the states of Madhya Pradesh and Chhattisgarh. It has been monitoring the implementation of MGNREGA since it was enacted. It facilitated social audits of MGNREGA implementation in many districts and conducted two studies on the status of MGNREGA implementation. Through these audits and studies, Samarthan found that the people were not aware of what they were entitled to under MGNREGA. For instance, the people were not aware that they could demand work under the law; how to apply for work; what recourse they could adopt if the work was not given; or did not receive payment for their work within the time period stipulated by MGNREGA.”⁷

Engagement with the Government at Multiple Levels

“Over the years, Samarthan has engaged with the Madhya Pradesh government executive from district to state level. It has worked with various government departments by providing help in building the capacity of their staff and by providing technical assistance for the preparation of district development plans. Samarthan has earned the respect of and access to the executive through this cross-sector – health, sanitation, area planning, MGNREGA, RTI – and multi-level (from block to district to state) relationship. It supported the Madhya Pradesh Rural Livelihood Program spread across 2,080 gram sabhas in nine districts and 2,000 village-level plans were prepared. It gave orientation on the Right to Information to 900 panchayats and helped 200 panchayats in Madhya Pradesh to prepare their self-disclosure documents. About 500 panchayats of the Sehore district were trained in issues of community health and Samarthan facilitated the preparation of panchayat health plans.

On behalf of the Madhya Pradesh State Planning Commission, it prepared a manual on decentralised integrated district planning and facilitated the preparation of plans in five pilot districts. It worked with youths to prepare micro plans on water and sanitation in 25 panchayats.”⁸

7 <http://internationalbudget.org/wp-content/uploads/LP-case-study-Samarthan.pdf>

8 *ibid*

MGNREGA: Great Theory, Flawed in Practice in Bundelkhand Region (comprises of 6 districts of Madhya Pradesh and 7 districts of Uttar Pradesh)

"It was widely felt by people in and around Mahoba that much of the extensive work needed to repair water bodies in Bundelkhand region could be done under MGNREGA scheme. It was found though - in the absence of movements that have forced MGNREGA to work better elsewhere - its implementation here deeply flawed. Most people did not receive job cards. In most places, job cards were lying with the sarpanch. The MGNREGA entitles each household to 100 days of work per year, but the job card is usually made in the name of the men only. Job cards for women were conspicuous by their absence. Those households that had cards did not get work for the last three years.

All those who were interviewed were completely unaware that when people don't get work for a certain number of days, they are entitled to compensation. In one village, people did get work but only for ten days. In another village in Chhattarpur district, women contested the statement that the villagers were not registering their need for employment. The women who knew about MGNREGA were somewhat glad about the fact that at least the job card exists, even though remunerations are negligible. The Uttar Pradesh government has declared that minimum wage under MGNREGA would be Rs 100 a day, but people actually got much less than.

*Wherever work was taken up under MGNREGA, it did not augment community resources as stipulated in the Act. The main work done was road construction. Once roads were made, there was no other work available. Sarpanchs, contractors and pradhans pocketed the sanctioned money. Hence an Act - under which for the first time in independent India, work has been given the status of a right - that has the potential to halt the desperate migration from Bundelkhand, is being eaten up from within."*⁹

Northeast region includes the 'seven sister states' (Assam, Arunachal Pradesh, Meghalaya, Manipur, Mizoram, Nagaland and Tripura). The river systems and their tributaries cover the Northeast region and two-third of the region is hilly terrain

⁹ A sinking feeling: Behind the acute water crisis in Bundelkhand (Report), Kashipur Solidarity Group, Delhi, 2010

interspersed with valleys and plains. Although it is covered by large river systems, massive floods and erosion of riverbanks cause enormous loss of life, property and livelihood. Although the region is agrarian in nature, little land is available for settled agriculture.

Assam

MGNREGA is implemented in all the 27 districts of Assam. It is the second state in the country after Andhra Pradesh to use biometric card system¹⁰ for wage disbursement under the scheme implementation. The VOs are actively involved in imparting training to the people through information, education and communication (IEC) materials, mobilizing community to point out irregularities in the scheme and fund mismanagement in the state of Assam.

Under this programme 29.7 lakh job cards were issued up to the year 2008-09. Out of this 21.5 lakhs number of household demanded for employment and 18.7 lakh households got employment in 2008-09. 2934 disabled persons also got employment in the same year. In 2008-09, 748.80 lakh man-days were generated of which 78.08 lakh, 258.32 lakh and 203.72 lakh man-days were generated for SC, ST and women category, respectively.¹¹

Local Technology - *Bangla Bhatta*

“The Assam district has innovatively adopted a local technology (Bangla Bhatta) for production of bricks by MGNREG scheme job card holders. These bricks are used for road construction and also for other construction work under MGNREGA. The GPs or the implementing agency hires land near the roadsides and inducts MGNREGA job cardholders for brick making. These bricks cost Rs. 2.75 per bricks compared to Rs. 5 in the open market for similar quality. At the worksite in village Tengam in Basudoibam GP of Ghilamara block around 50 workers manufactured the bricks. There was a target of making 1.8 lakhs bricks within 15 day’s time. Sh. S. Brajen Barpatro is a happy man with this opportunity. He says that it is an instantly available employment opportunity within walking distance. He and

10 A biometric card is one of the latest tools of information and communication technology for disbursement of wage.

11 Bordoloi, Dr Jotin, Impact of NREGA on wage rates, food security and rural urban migration: A study in Assam, Agro-Economic Research Centre for North East India, Assam Agriculture University, Jorhat, Assam, 2011

his other relatives have already enjoyed about 20 man-days from this work on this site. Similarly, Sh. Chandan Patro was also in favour of this work. He says that it is not only providing instant employment to him but also generating brick making skill to the otherwise unskilled workers. Mr. Chandan Patro can make about 200 bricks a day now which elsewhere will fetch him about Rs. 200 per day. However, he still wants to continue with MGNREGA work due to its availability in immediate proximity. This is certainly a highly innovative intervention and deserves recommendation for replication in other places too.”¹²

Krishak Mukti Sangram Samiti

“GUWAHATI: Hundreds of Krishak Mukti Sangram Samiti (KMSS) activists were prevented by police from staging a demonstration in the Golaghat district. KMSS claimed that four of their members were injured when police used force to stop their procession, which was heading towards the sub-division office. The activists were also detained. *“We were about 300 people in the procession. We planned the protest after the district administration failed to provide us the inquiry report on fund mismanagement under MGNREGA in Kuruwabari panchayat.”*¹³

Western Region comprises of Maharashtra, Gujarat and Rajasthan states and it is generally considered to be very progressive. This is evident in its decadal growth and GDP rates.

Maharashtra

In Maharashtra MGNREGA did not evoke much curiosity and concern from the villagers as compared to other states. This is because Maharashtra has been a trendsetter in such progressive policy initiatives and the state has a long experience in implementing the Employment Guarantee Scheme (EGS) 1977, the first of its kind in the country. Therefore the registration for work is extremely poor. Another reason for less interest in the scheme is that no clear signals were directed by the administration about differences from earlier EGS and MGNREG Scheme.

12 http://nrega.nic.in/circular/rozgar_sutra.pdf

13 <http://articles.timesofindia.indiatimes.com/keyword/krishak-mukti-sangram-samiti/featured/2>

Northern Region comprises of Uttar Pradesh, Uttarakhand, Delhi, Haryana, Punjab, Himachal Pradesh and Jammu & Kashmir.

Uttar Pradesh

It is the largest and most populated state in India. The VOs in the state are mostly working at the grassroots level and provide training to the people to earn their livelihood. They also do awareness generation of their rights and entitlements, training of people's representatives in the field of panchayati raj. The MGNREGA has benefitted the eastern region of Uttar Pradesh, which is backward as a lot of rural people migrated to urban areas.

“Lucknow based Sahbhagi Shikshan Kendra is one such voluntary organization that addresses the issues of migration. It does capacity building; sensitize both the migrants and the Panchayats and the urban local bodies (ULBs) towards rights of migrants and their families for accessing goods and services and protecting their rights and entitlements. It has also facilitated, ‘Rojgar Grameen Sangharsh Morcha’ and conducts public hearing to address the issues of MGNREGA.”¹⁴

Reducing vulnerability of migrants at source and destination with due focus on their rights, entitlements and access to services. Sitapur is one of the most poverty stricken districts of Uttar Pradesh. It is devoid of any employment opportunity and has poor MGNREGA implementation by panchayati raj institutions (PRI) which has forced poor people to migrate from their native place in search of employment and livelihood. The landless poor people usually migrate for years and visit their home only to spend some time with their family. Due to lack of industrial development and low agriculture productivity it has led to unemployment and poverty in region. Carpet weaving and *chikan* embroidery are predominant in the area which is done by the muslim women community. The rate of migration in the area is quiet high particularly during lean agricultural period.”¹⁵

14 <http://www.sahbhagi.org>

15 <http://www.sahbhagi.org/Reducing%20Vulnerability%20of%20Migrants.htm>

Employment Schemes Stops Workers Migration to Urban Areas in Uttar Pradesh

“Successful execution of the MGNREGA in Gorakhpur district of Uttar Pradesh has stopped the rural masses from migrating to urban areas. Earlier, rural people were forced to migrate to cities in search of work, but now the MGNREGA has enabled them to find work in their villages and remain with their families. *“After the implementation of the MGNREGA in our village, we don’t have to go to the cities in search of work. There are many types of work that we do here, which include digging roads and working in brick factories and drains. This scheme has helped us a lot; now we can manage our families and farmland while working here in our village,”* said Murataza Hussain, a villager. He added that the MGNREGA’s provision of employment opportunities is also a welcome safeguard against food insecurity. The MGNREGA guarantees equal opportunity employment, enabling women to work, as well. *“The implementation of the MGNREGA has helped the fellow villagers. Now they don’t have to shift to the cities in search of work. There are 360 employment cards that have been issued in this village alone,”* said Indravati Devi, a village chief. MGNREGA beneficiaries have found employment in brick factories, construction of roadways and highways, and in orchards and plantations.”¹⁶

ANALYSIS

The study tries to focus on the role of VOs in the effective and meaningful implementation of MGNREGA. The MGNREGA was initiated mainly to curb rural unemployment and migration and to ensure sustainable development. The study has looked into the involvement of VOs in five states namely Andhra Pradesh, Assam, Madhya Pradesh, Maharashtra and Uttar Pradesh.

It has been found that the MGNREG Scheme has been more successful in the state of Madhya Pradesh. It is one of the few states where migration has been reduced substantially. There are several VOs, which have been successfully educating the community about the working of the MGNREG scheme. The VOs have also played a major role in carrying out social audit for the planning and implementation of the scheme in the state.

¹⁶ http://nrega.nic.in/circular/rozgar_sutra.pdf

The MGNREG scheme has not taken off in a big way in the state of Maharashtra. This is because Maharashtra already has an effective Employment Guarantee Scheme in place since 1977. As the scheme has not evoked enthusiasm the role of VOs has also been minimal.

Uttar Pradesh has high level of migration and this is mainly due to lack of industrialization and low agricultural productivity. MGNREGA has therefore made a difference to the rural poor in the region. VOs have been involved in the implementation of the scheme in a big way. They are involved in capacity building of the migrant labours and in sensitizing the panchayat as well as the urban local bodies to the problems faced by the rural poor due to unemployment.

Assam is the second state after Andhra Pradesh to use the biometric card system in the MGNREG scheme. Initially the implementation of the scheme had faced several hurdles like irregularities in implementation of the scheme and fund mismanagement. VOs have played an active role in checking out the irregularities and corruption at different levels. As a result despite the difficulties, the scheme has been fairly successful in the state. This is also partly due to the introduction of the biometric card system that has helped to check irregularities to a large extent.

Andhra Pradesh is a drought prone state. The introduction of MGNREGA has made a difference to the rural people. The VOs have played a major role in advocacy and capacity building for the implementation of the scheme. Andhra Pradesh has a long history of voluntary organizations working at the grass roots. Time and again VOs have been engaged in various programmes for improving the living conditions of the poor. The state has been the first to introduce computerization in the implementation of the scheme and in introducing social audit. It is also the first state to introduce the biometric card system.

NATIONAL RURAL HEALTH MISSION

(REACHING AFFORDABLE, QUALITY HEALTH CARE TO THE POOREST HOUSEHOLDS IN THE REMOTEST REGIONS)

The central government launched the National Rural Health Mission (NHRM) with a vision of carrying out ‘an architectural correction in the health delivery system to provide accessible, affordable and quality health care to the rural population, especially the vulnerable sections’ (Gol 2010). Through a mission approach, the government hopes to reorganize the health care system and make it functional and accountable towards achieving substantial reduction in maternal mortality ratio and

infant mortality rate (MMR and IMR). With the low levels of public expenditure on health care, it is a matter of concern that how such results will be achieved.

NRHM was inaugurated on April 12, 2005 to correct the deficiencies of the health system to increase spending on health from 0.9 percent of GDP to 2-3 percent of GDP. The focus is on 18 states - northern and eastern for good decentralized healthcare, missionary approach.

Objective and Action Plan of NRHM:

- Provision of health activist in each village
- Village health plan prepared through panchayat involvement
- Strengthening of rural hospitals
- Integration of vertical health programs(leprosy, TB, malarial programs, etc.) and traditional medicine
- Integration of plans at different levels
- New health financing mechanisms

Major Stakeholders are

- Accredited Social Health Activist (ASHA)
- Auxiliary Nurse Midwife and Anganwadi Worker
- Panchayati Raj Institutions and VOs
- District Administration
- State Governments

NRHM draft operational guidelines (NRHM-NGO Partnership in the 12th Plan)

“The Ministry of Health & Family Welfare has developed, ‘**Guidelines for NGO Involvement in NRHM during the 12th Plan**’ on 26 November 2012 in New Delhi, which will be finalized by the Drafting Committee and submitted for approval to the Ministry of Health & Family Welfare.”¹⁷

¹⁷ NRHM - NGO Partnership in the 12th Plan: Draft Operational Guidelines, November 2012 http://nhsrindia.org/pdf_files/resources_thematic/Reproductive_Child_Health/NHSRC_Contribution/Draft%20NGO%20Guidelines%20-%20For%20Comments.pdf

Southern Region: Andhra Pradesh

The VOs in Andhra Pradesh work to improve the health system and strengthen NRHM through community action. They also focus on grass root level planning and development. The core areas of involvement include engaging with the masses, taking part in the policy formulation and active participation in the implementation of the centrally sponsored schemes and making the community aware of their rights and entitlements.

Rural Development Trust (RDT), a large VO in Anantapur runs rural hospitals, care and support centre for HIV/AIDS. It also supports community health programme for the marginalized and the poor with a special emphasis on safe delivery, child care and HIV/AIDS.

“Rural poor to have access to healthcare (government or private) with a special emphasis on safe delivery, child care, nutrition and HIV/AIDS.

Since 35 years RDT has tried to support government infrastructure by training local women as Community Health Workers and focuses on the prevention and treatment of common and serious health problems in women and children. RDT has a team of alternative system medicine doctors and midwives working in 932 villages.

- 3855 pregnant women had undergone 4 to 5 health checkups in rural antenatal clinics conducted during 2011 and 421 risk pregnancy cases were identified and referred to hospitals for safe management of delivery.
- Around 26,785 persons including antenatal/postnatal mothers, 1-4 age group children, aged persons and persons suffering from chronic health problems are receiving nutrition in the form of boiled eggs and beverage made of *ragi* powder *jaggery* through 1001 centres spread across 888 villages.
- There are a total of 10 rural health clinics functioning by the end of 2011. In all 78485 children and adults were treated in rural clinics and village level health clinics conducted by doctors.
- 12879 individuals, family members and community persons were counseled focusing on preventive and supportive measures which enabled HIV/AIDS affected persons and families to lead a normal life.

- 4328 persons covered under ART (Anti Retroviral Treatment) of both Government and RDT ART centres are being regularly followed up to see that that they adhere to treatment.”¹⁸

Despite the involvement of VOs in the government run health programme, the Comptroller and Auditor General came up with the statement that the Andhra Pradesh government needs to meet the target as there were shortfalls in the tribal areas.

“According to Comptroller and Auditor General (CAG), Andhra Pradesh government failed to set up any new Community Health Centre (CHCs) and Primary Health Centre (PHCs) in the four year period from 2005-06 to 2008-09.

“There was a shortfall in setting up of 387 CHCs, 464 PHCs in rural areas and 63 CHCs, 63 PHCs and 303 sub-centres in tribal areas of the state with adverse implications for accessibility of the population to primary healthcare.”

The CAG report has mentioned the state government for “lack of planning and absence of adequate monitoring” in implementing NRHM.

- a. Lack of basic facilities in majority of CHCs and PHCs
- b. Below standards physical infrastructure
- c. Mobile medical units were functioning without essential equipment and medical officers.
- d. In the period 2005-12, implementation was done without conducting facility surveys and any perspective plan.
- e. In the immunization programme there was a shortfall of up to 39 per cent (second stage of 10-16 age group).
- f. VOs engaged in the implementation of health programmes were inadequately monitored.

“The Reproductive and Child Health Scheme suffered in terms of institutional delivery care and antenatal care. The objective of converging all the National Disease Control Programmes (NDCP) remained unachieved.”

18 <http://rdtfvf.org/what-we-do/community-health/>

As against the Rs 1,603 crore released by the central government under NRHM for the 4-year period 2005-09, only Rs 1,505 crore were utilized. Poor NRHM implementation took its toll in all health programmes.”¹⁹

Central Region: Chhattisgarh

According to the NRHM report of the 2nd Common Review Mission, Chhattisgarh (Dec. 2008), the State runs the largest trained network of ASHA (mitanin) in the country but the infrastructure and human resources are inadequate. Mentoring role is handled by block level VOs identified by the District Health Societies.

The VOs in the Chhattisgarh state work as an additional technical agency and help in NRHM planning and implementation. The patients in the VO run hospitals are much more than the government hospitals as the facilities and infrastructure are better in these set up. The state has limited capacity in training new personnel as per the requirement of NRHM which is fulfilled by the VOs.

Assessment of Non-governmental Partnerships for Public Health Goals

State Health Resource Centre (SHRC), a non-governmental set up, has been the backbone of community based health sector reforms in Chhattisgarh. SHRC has been working as additional technical agency to department of health with a focus on NRHM planning and implementation. Their role has been visible in many areas and well appreciated by different quarters. However, overlap of SHRC role was observed as compared to other technical agencies and health department especially with the training institutions.

Large scale partnerships with VOs has been observed in the field of *mitanin* programme in which mentoring role is handled by block level VOs identified by the District Health Societies. Under blindness control program, cataract surgeries are being carried out by VOs. State has also involved 6 MNGOs and several Field NGOs as part of RCH programme. MNGO, FNGOs were identified but detailed activities carried by them are not well within the knowledge of district authorities.

19 <http://www.governancenow.com/news/regular-story/poor-implementation-plagues-nrhm-andhra-pradesh>

Jan Swasthya Sahyog (JSS) is a voluntary organization run hospital, in block Takhatpur. It has good facilities in rural areas of Chhattisgarh. Common Review Mission (CRM) team has observed huge outpatient department (OPD) attendance in VO run hospital as well as waiting lists for surgeries to be conducted. The hospital authorities has communicated that large number of population suffering from diseases like tuberculosis, leprosy, malaria were not taken care off by the routine programs run by public sector run hospitals. This is due to lack of manpower and resources and lack of flexibility of the programme.²⁰

Western Region: Gujarat

“NRHM is implemented in Gujarat with the objective of reducing infant mortality rate and maternal mortality ratio, ensuring population stabilization, prevention and control of communicable and non-communicable diseases. Various activities under NRHM have been implemented and there is a significant progress. Numerous new schemes launched are Saubhagyawati Surakshit Matretev Yojana, a scheme to promote institutional deliveries by involving private sector providers.

The objective is to achieve the highest attainable standards of services at the public health institutions; have well equipped facilities and adequate skilled manpower at every level.”²¹

Public Private Partnership

“Government of Gujarat revolutionizes its state-wide health care services with the help of Tata Consultancy Services (TCS)

The Health and Family Welfare Department (HFWD) of the government of Gujarat, realised that an integrated and effective tool was required for the timely monitoring of services and for health-related policy-making. It therefore conceptualized a Health Management and Information System (HMIS) to ensure better quality and monitoring of healthcare services. With the Information Communication and Technology (ICT) it helps to provide standardised clinical and diagnostic pathways,

20 <http://health.cg.gov.in/ehealth/CRMReport/Chhattisgarh2ndCRMReport.pdf>

21 http://www.mohfw.nic.in/NRHM/Documents/Non_High_Focus_Reports/Gujarat_Report.pdf

hospital functioning administration and integration of management information at the state level.

The Gujarat Government chose TCS to develop and deploy a state-of-the-art healthcare solution for HFWD. The HMIS developed by TCS have brought about a complete transformation in the delivery of health services in the state. The system has created a win-win situation for all stakeholders - the patient, the doctor, the hospital administration and the state health authorities.”²²

Northern Region: Uttar Pradesh

According to the NRHM state report the health department depends on good VOs to improve implementation of health services in Uttar Pradesh. It has the highest infant and child mortality rates in India and polio is endemic in the state. Malnutrition, diarrhoea and common childhood illness are areas of great concern. The state needs to reduce the infant mortality rate, maternal mortality ratio, stabilize population and prevention and control of communicable diseases. In order to promote institutionalized deliveries new scheme called Surakshit Matretev Yojana was initiated.”²³

The department of health and family welfare has engaged the voluntary organizations along with other stakeholders in research and advocacy, planning, implementation and service delivery to reduce the health problems of the state.

Training of Accredited Social Health Activist (ASHA) on the “Postpartum Home Visits” in Sure Start UP

Sure Start is an initiative to bring improvements in maternal and newborn health (MNH) through effective community action in selected districts of Uttar Pradesh and urban sites of Uttar Pradesh. Sure Start is supported by the Bill and Melinda Gates Foundation as part of its “Community Health Solutions” program, in partnership with PATH.²⁴

22 http://www.tcs.com/SiteCollectionDocuments/Case%20Studies/Government_CaseStudy_Gujarat_state-wide_healthcare_services_05_2011.pdf

23 http://www.mohfw.nic.in/NRHM/Documents/High_Focus_Reports/UP_Report.pdf

24 <http://www.sahbhagi.org/concluded%20projects.htm>

Capacity Building of Women Gram Panchayat Pradhan under Child Rights Project in Eastern Uttar Pradesh

Sahbhagi Shikshan Kendra as a resource agency completed the task of first phase capacity building and training of women gram panchayat pradhan on child rights and protection. The training program was based on child protection and role of panchayat to develop a child protective environment in the village. In the training program 351 women pradhan from 22 blocks of three districts namely Jaunpur, Mirzapur and Sonebhada participated. The entire training program was facilitated with collaboration of UNICEF, partner organizations and supported by a team of professionals at state level.²⁵

State Innovations in Family Planning Services (SIFPSA)²⁶

As part of the reproductive and child health programme, the department of health and family welfare started Mother NGO (MNGO) scheme in 1997-2002. It identified and sanctioned grants to selected NGOs that in turn provide support to Field NGO (FNGO) to promote reproductive and child health (RCH) programme. In Uttar Pradesh SIFPSA has been identified as a regional resource centre (RRC) by government of India to do capacity building of VOs in public private partnership and networking; conduct survey, monitoring and provide technical assistance and nurturing of VOs; sensitize VOs and stakeholders about RCH service delivery strategy.

Northeast Region: Assam

“In the north eastern region Assam state is progressing towards attaining the goals and objectives shared under NRHM, National Population Policy (NPP) and Millennium Development Goals (MDG). The activities under NRHM are transforming the health care delivery to rural populace. Assam has enhanced the coverage under Janani Suraksha Yojana (JSY); improvement in infrastructure; availability of paramedical and medical personnel.

25 <http://www.sahbhagi.org/concluded%20projects.htm>

26 <http://sifpsa.org/rrc.htm>

However attention is being given to services to tea plantation workers and people living in tribal and char areas. Full coverage of immunization has improved. First phase of community monitoring pilot has been completed in the state. For further improvement in health services, more involvement and support of VOs is required. There is a need to speed up sub centre construction and capacity building of PRIs for better functioning of village health & sanitation committee (VHSC). Though VOs are involved in community monitoring programme there could be greater involvement.”²⁷

ANALYSIS

The NRHM is a government of India programme for providing health activist in village, preparing a health plan for every village through the involvement of the local panchayat, strengthening rural hospitals, integration of vertical health programmes like malaria, TB etc. and integration of plans at different levels. The major stakeholders in the programme are ASHA, auxiliary mid nurse wife and anganwadi workers, panchayati raj institutions, voluntary organizations and private sector.

In Andhra Pradesh the NRHM programme has not been very successful as there is a shortfall in setting up of community and primary health centre at the village level. There is a lack of adequate monitoring in implementation of NRHM and poor infrastructure facility. Mobile health clinics have been made operational without essential equipment and medical officers to run them. The voluntary organizations engage in the implementation of the health programmes were not adequately monitored. Poor implementation of the scheme in the state took its toll on all health programmes. It has been found that even the funds released by government of India were not fully utilized in the financial year.

Chhattisgarh runs the largest trained network of ASHA. There has been a lack of infrastructure and human resources in the implementation of the programme. This lacuna has been filled up to a large extent by voluntary organizations which have worked as additional technical agencies in the planning and implementation of NRHM. It has been found that the hospitals run by the VOs have much better facilities than the government hospitals. Therefore the locals prefer the hospitals run by the VOs to that of the government hospitals. It has been found that there is a large scale partnership of VOs with the state government in the field of ASHA.

27 http://www.mohfw.nic.in/NRHM/Documents/NE_Reports/Assam_Report.pdf

Gujarat is a non high focus state as the health index in the state is not alarming. The public private partnership (PPP) has played a major role in rural health. With the help of Tata Consultancy the NRHM programme has been fully computerized in the state.

Uttar Pradesh is the most populous state in the country. It has the highest infant and child mortality rate in India and polio is endemic in the state. There is large scale malnutrition and diarrhoea among the rural population. The state department of health and family welfare has involved VOs along with other stakeholders for research and advocacy, planning and implementation and for service delivery to reduce health problems in the state.

Assam state is moving towards achieving goals under NRHM. The national population policy and millenium development goals have been taken up by the state government. Health care and delivery to rural population with increase in accessibility to health facilities have been brought about under NRHM. Assam has enhanced the coverage under Janani Suraksha Yojana (JSY). There is an improvement of infrastructure and availability of para-medical and medical officers. Special effort has been made to provide health care to people in the tea plantations and to tribals in the Char area. Immunization facilities in the state have improved. However for better results more involvement of VOs is essential.

URBAN POVERTY ALLEVIATION PROGRAMME-JNNURM

“The World Bank defines urban poverty as not just a collection of characteristics, which apart from other things include limited access to employment opportunities and income, inadequate and insecure housing and services, violent and unhealthy environments but also as a dynamic condition of vulnerability or susceptibility to risks.”²⁸

“In India, urban poverty is defined in terms of minimum calorie intake, at 2100 calories per capita per day. This is a convenient measure for identifying the urban poor for the purpose of implementing Urban Poverty Alleviation Initiatives (UPAIs). The Planning Commission’s revised methodology of 1997 results in an average poverty line for India of Rs.353/- per capita per month for 1996-97. This equals approximately Rs. 21,180/- per household per annum. On this basis, Planning Commission data indicates that the urban poor were estimated to be 7.5 crores, comprising 38 percent

²⁸ http://www.niua.org/publications/working_papers/nakul_ruchira_urban_poverty.pdf

of the total urban population in 1988. This number rose to 7.63 crores in 1993-94, i.e. 32% of the total urban population.”²⁹

Jawaharlal Nehru National Urban Renewal Mission (JNNURM) is a programme to provide water supply, sanitation, primary education facilities, health care, adult literacy and non-formal education facilities to the urban poor. It envisages provisions of shelter up gradation, community empowerment, garbage and solid waste management, as well as improvement and convergence of different social sector programmes through creation of sustainable support systems. In other words the focus is on community infrastructure, provision of shelter, empowerment of urban poor women, training, skill up gradation and advocacy and involvement of VOs, CBOs, private institutions and other bodies. Under the scheme, Planning Commission allocates the funds to states/UTs annually and Ministry of Finance releases it to the states. The states further diversify the funds within their districts as per their requirement. Ministry of Urban Development has been nominated as Nodal Ministry to monitor the progress of the scheme.

Urban Poverty is a multi-dimensional concept, with the manifestations and the causes for poverty moving in a cyclical pattern. One dimension of urban poverty gives rise to another dimension and one form of deprivation gives rise to another. For example, a household with lack of adequate resources cannot send its children to school. The children without adequate literacy cannot secure livelihood. This would restrict them from improving their living standards. Urban poverty broadly has 3 dimensions i.e. livelihood/employment, health and education.³⁰

In order to study and assess the condition of the urban poor, the researcher has made an attempt to look at five states namely Gujarat, Delhi, Chhattisgarh, Andhra Pradesh and Assam state.

The state government with the support of VOs formulates the plans and implements them for the respective city development programmes. The large VOs in the states were given the task of conducting surveys to estimate the existing conditions of basic services that were available for the urban poor. The VOs and the community-based organizations are also consulted while doing the urban planning and what kind of services is required for the urban poor. Therefore the VOs that are working with the urban poor in their area of operation have a better understanding of the ground level reality.

29 ibid

30 ibid

Western Region: Gujarat

“In Gujarat the VOs are playing the role of advocacy and hold meetings in which the government of Gujarat did presentations on JNNURM. They are also actively involved in capacity building of the municipal officials and elected representatives of urban local bodies (ULB). In other words they provide training series on Urban Infrastructure Development Scheme for Small & Medium Towns (UIDSSMT) and for Integrated Housing & Slum Development Programme (IHSDP).”

UMEED Programme

To address the issues of urban poor the government of Gujarat has come up with innovative solutions. UMEED programme is an ongoing initiative under the Rs 13,000-crore Garib Samruddhi Yojana of the Gujarat government, which aims to achieve sustained reduction in the vulnerability and poverty of the poor. The programme is jointly run by four organizations namely SAATH a voluntary organization, CAP Foundation, Aid-et-Action and Skill Pro Foundation - as region-wise resources agencies for conducting training and the municipalities and corporations assist VOs to implement the project at the city level. The VO- SAATH has facilitated participatory processes that improve the quality of life for the urban and rural poor. SAATH's one-stop, integrated services reach over 100,000 slum dwellers in Ahmedabad, and other regions in Gujarat.

Implementation of the UMEED in Ahmedabad has been quite unique due to the strong support of the local VOs. But its coverage is limited, as it has not addressed the basic livelihood issue of the larger section of urban poor. Even as a limited coverage it appears that most of the beneficiaries have gained knowledge of basic computer and few state-of-the-art software necessary to be learnt in today's technologically advancing world.³¹

(Source: Livelihoods for the Urban Poor: A case study of UMEED programme in Ahmedabad by Dr C. N. Ray, September 2010, Ahmedabad)

31 <http://spcept.ac.in/download/cuewp/cue-wp-008.pdf>

Northern Region: Delhi

In Delhi the VOs play an instrumental role in addressing the issues of urban poor specially the resettlement colonies of Seema Puri in west Delhi, Madanpur Khadar in south Delhi and Bawana in northern Delhi to name a few. They have also been involved in the urban planning, improvement in the community infrastructure, water supply, sanitation and hygiene, women's empowerment and provision of shelter. Rural-urban migration has played a significant role in urbanization of Delhi especially during the Asiad games in 1982 and Common Wealth Games in 2010. The migrant labour contributes enormously and engages in major sectors such as construction, small industries and hospitality services.

Rights and Entitlements

Pardarshita a VO with the support of ActionAid India, takes up projects in Seema Puri in consultation with the slum dwellers. Seema Puri is a 30-year-old settlement in the capital consisting mostly of slums.

Pardarshita supports people to avail benefits from the state and expose malpractices in government welfare provisions such as the right to education (RTE) and the public distribution system (PDS) as a result of corruption. In this regard, the Right to Information Act has been used to fix accountability of government officials and make private institutions answerable to the community. The community groups, especially women and youth, have been mobilized and strengthened to campaign on these issues, and connected with state level VO networks that work on similar issues.

Profile of Seema Puri Slum in Delhi: The living condition of Seema Puri is cramped and unhygienic. Most of the houses are *kuchcha*; with a few *pucca* or partially constructed ones. Supply of water is deficient and the community depends on hand-pumps. Only a few houses have soak-pit toilets and most of them use the community toilets on payment basis or defecate in the open. There is one primary school in the locality which has inadequate infrastructure and staff.

The number of Anganwadi centers is not sufficient for the population and the ones that exist do not offer the other, essential services such as monitoring children's growth, health services for children, pregnant women and lactating mothers and preschool education.

The inhabitants of the slum are mostly migrants from other states who work as daily wage labourers, drivers, rag pickers, construction workers or street vendors/ shopkeepers. More than 90 percent of the people do not have voter ID cards. Many have applied for cards several times but owing to administrative lapses or demands for bribe by officials. They have problem of identity which has implications for all communities. Seema Puri's slum-dwellers do not have any say in policy-making which makes them vulnerable to eviction, and "sealing drives" that have shut small factories in the area affecting the livelihood of daily-wage earners. Pardarshita holds regular meetings with the community to do planning.³²

Aragami India: Nutritional practices in Madanpur Khader, Sarita Vihar, Delhi

In the low-income urban settlement of Madanpur Khader, in New Delhi, Aragami India intervened to reduce the prevalence of anaemia in children approaching adolescence. This intervention reached 909 boys over a 12-month period. Mothers and children were educated on anaemia and its effects on nutritional practices, which would help prevent anaemia, and the need for iron and folic acid to counteract anaemia. The mothers attended nutritional education classes and the children were encouraged to come for quarterly weighing, to give them a concept of how to monitor their own growth. When the intervention had started 76 percent girls and 40 percent boys were anaemic. This had reduced and only 18 percent of girls and 6 percent of boys remain anaemic.³³

Central Region: Chhattisgarh

"In Chhattisgarh the VOs do capacity building and awareness generation on UIDSSMT and IHSDP schemes. They are actively involved in conducting training of Councilors and detailed project reports preparation for cities. The VOs conduct state level workshops with the state urban development department to explore possibility of engaging with civil society in urban development efforts. Apart from this an information booklet on JNNURM and UIDSSMT schemes are brought out by VOs for awareness generation among the municipal staff, councilors and the VOs."³⁴

32 <http://www.actionaid.org/india/projects/urban-poverty-alleviation-delhi>

33 http://unitedwaymumbai.org/ngo273_agragami.htm

34 http://jnnurm.nic.in/wp-content/uploads/2011/01/Report_final1.pdf

Terra Urban is an urban forum led by Society for Participatory Research in Asia (PRIA) and Society for the Promotion of Area Resource Centres (SPARC). They are engaged in tracing urban issues, strengthening the voice of civil society and do action-research. Therefore the urban forum was formulated to be an exchange platform, to be a knowledge portal, to facilitate knowledge creation, action research and to facilitate in creation of networks of VOs/academicians/professional/community and various other stakeholders.³⁵

Southern Region: Kerala

In Kerala more than fifteen lakh families of the state, alias ‘gods own country’ are in the clutches of poverty. Rapid growth of urban population, expansion of towns and cities and low investment in urban development has created deficiencies in basic amenities. The urban poor face land tenure, environmental threat, lack of facilities and there is no proper data available on urban poverty. There is absence of social support system, non-convergence of activities of various government departments and the lack of community empowerment. The Municipal Councillors and urban local bodies are also not clear about the various provisions in the scheme, which is meant, for community participation and CSO participation.³⁶

SAHAYI is a voluntary organization, which works with SPARC and PRIA. It takes necessary steps for poverty alleviation through collectivizing civil society and people at large. It also develops database and empower the people with the necessary knowledge about issues around urban poverty. SAHAYI has prepared 7 learning materials in Malayalam on urban poverty/urban development schemes, which are being implemented by Municipalities/ Municipal Corporations in Kerala and distribute the learning materials during workshops.³⁷

35 <http://terraurban.wordpress.com/tag/chhattisgarh/>

36 <http://terraurban.wordpress.com/2012/09/19/strengthening-civil-society-voice-on-urban-poverty-in-kerala-initiative-by-sahayi-sparc-and-pria/>

37 <http://terraurban.wordpress.com/tag/kerala/>

Northeast Region: Assam

The JNNURM in Assam envisages to provide better water facilities to the urban population. Assam Urban Infrastructure Investment Programme initiated by Government of Assam takes up capacity building of the urban local bodies, implementation and improvement of water supply, sewerage and urban transport system in Guwahati. This will benefit the citizens in providing improved environment, living condition and public health.

ANALYSIS

JNNURM is an urban poverty alleviation program which was introduced by the government of India with the objective of providing water supply, sanitation, education facilities, community empowerment and garbage and solid waste management. This study is looking into the role of the VOs in the implementation of this programme in the states of Gujarat, Delhi, Chhattisgarh, Kerala and Assam. It has been seen that the VOs have been instrumental in playing the role of advocacy and capacity building of the local municipal bodies for poverty alleviation programmes in these states. The VOs have been providing series of training on urban infrastructure development schemes for small and medium towns and integrated housing and slum development programmes. For instance in Gujarat UMEED programme has been initiated by the government in partnership with local VOs which aims at reducing the vulnerability of poverty of poor with the help of local municipal bodies. In Delhi the migration of the labour is the highest. Large slum dwellings have come up in and around the city. Efforts are being made to resettle the slum dwellers in resettlement colonies like Seema puri, Madanpur Khadar and Bawana. These resettlement colonies situated in the outskirts of the city lacks basic infrastructure facilities. It is only with the help of VOs that the basic amenities have substantially improved in these resettlement colonies. In Chhattisgarh also it is found that the VOs are engaged in conducting training programmes for Councillors in local municipal bodies. In all these states it is observed that the VOs are engaged in dissemination of information about the programme and its benefits by bringing out IEC materials in simplified language. As compared to other states the condition of urban poor in Kerala state has improved through programmes like Kudumbashree a poverty eradication programme in the state. Assam being the flood prone state, programme like Assam Urban Infrastructure Investment Programme (AUJIP) initiated by the government has gone a long way in improving public health and transportation facilities in urban areas.

RIGHT TO FOOD PROGRAM (FOOD SECURITY ACT)

RIGHT TO FOOD

The right to food campaign is an attempt to realize the aspirations and guarantees enshrined in the Indian Constitution. Article 21 of the Constitution is a guarantee of the “right to life”, and imposes upon the state the duty to protect it. The Supreme Court has held in previous cases that the right to life includes the right to food. However, under-nutrition is widespread and even starvation deaths occur periodically in the country.

The primary responsibility in implementing the right to food lies with the government (center and states). However, in order to fulfill the obligations all levels of government and public sector organizations must coordinate their actions. This coordination should be not only among themselves, but also with other parties within the country including VOs, individuals and other national institutions. Such coordination, or at least the existence of a functioning coordination mechanism, would be essential for effective implementation of right to food.

Southern Region: Andhra Pradesh

In Andhra Pradesh, rainfall levels have been inadequate and food shortages are touching new lows, which lead to the chaos of food insecurity and debt among the community. The problem has deep and complex implications on society. For the poorest of the poor, the effects are devastating - severe food shortages; inadequate nutrition and primary health care are compounded by economic losses due to low agricultural production and loss of animal wealth. The most glaring feature is that areas with high incidence of hunger overlap areas that are chronically drought prone. Thus, right to food focuses on the situation of hunger and food insecurity that arises amongst the poorest sections of rural society as a consequence of chronic drought.

The need of the hour seems to be a decentralized food assurance system that complements the PDS. In May 2001, Hyderabad-based VO initiated a relief measure in a drought prone tribal village of Chittoor district with five tonnes of rice. It was a modest beginning that worked well. Then the Chief Minister took the initiative and released 10,000 tonnes of rice. With the basic design in place, Society for Elimination of Rural Poverty (SERP) in collaboration with VOs launched a pilot project that expanded to cover severely affected drought areas in various districts of Andhra Pradesh. After the success of the first phase, the Chief Minister further sanctioned

50,000 tonnes for the second phase. In two years, a total of 60,000 tonnes of rice was disbursed to the poorest of the poor.³⁸

Food Assurance has worked very well in Andhra Pradesh. The operational guidelines have proved to be very workable and have been implemented with success. However, the programme is still an ad hoc measure that needs to be stabilized further. Reforms to food distribution need to be built into government policy.

Western Region

Voluntary organizations in cooperation with mahila mandals are making significant efforts in the Maharashtra for passing the food bill.

Rajasthan

Voluntary organizations are taking efforts continuously to address the problems arising out of improper implementation of food security schemes and related Acts. Main schemes that have been more emphasized for their better implementation through people organizations during last five years are PDS, Mid Day Meal, and ICDS. During the last year MDM, PDS and MGNREGA have been focused intensively by people's organization.

National Case: law on the Right to Food³⁹

In India, the NGO People's Union for Civil Liberties (PUCL) filed a case before the Supreme Court claiming that starvation deaths had occurred in drought-affected rural areas while public granaries were overflowing. The Court acknowledged that preventing hunger and starvation was one of the Government's prime responsibilities and failure to do so would constitute a violation of the right to live with human dignity as well as the State's duty to raise the level of nutrition and the standard of living of its people under the Constitution. It issued a series of interim orders directing the central and state governments to implement several existing schemes, such as the Famine Code of 1962, to improve the situation.

38 http://www.rd.ap.gov.in/velugu/pdf/vFood_Assurance.pdf

39 <http://www.ohchr.org/Documents/Publications/FactSheet34en.pdf>

Central Region

Chhattisgarh

Chhattisgarh is known as the Rice bowl of India and the agriculture supports 75 percent of the state's population. It is the 3rd highest contributor in India to the central food pool. The government of Chhattisgarh has been on the forefront in providing right to food to its people.

Northern states and northeast states are also advocating for the formation of Food Security Act, which is in the Bill stage. VOs and social reformists all over the country are actively participating in various forums at national and international level. VOs and social movements are following a wide variety of practical and legal approaches to solve hunger and malnutrition.

ANALYSIS

In India resources in terms of availability of food grains do not seem to be a problem. It is true that most of the state governments are having fiscal problems. However, it is the lack of political will rather than resources, which is the constraint.

Providing resources is only one part of the story. Effective implementation of the programme is important in order to reach the benefits to the poor. In order to implement the programme, political will is important. The southern states in India have done well in terms of political will as compared to some of the northern and eastern states.

Voluntary organizations have played a major role in fulfilling the right to food. They have helped in two ways. First, VOs have organized innovative programmes for raising food security of the poor. Secondly, they have helped the government in fulfilling the obligation of right to food. VOs have a major role to play in applying the principles of accountability, transparency and participation in implementing the right to food. A very effective role in the implementation of the rights and entitlements can be played by VOs. However, right to food has to be realized in a participatory manner, with participation of the beneficiaries in the decision-making and benefit sharing in a widely decentralized process. VOs have to play an even more crucial role in monitoring the programme and delivering the services and sometimes may have to replace the existing bureaucracy.

The human rights NGO, PUCL and the right to food campaign have played important role, in recent years, in highlighting the obligation of fulfilling the right to food by the government. However, there has been a proliferation of VOs in India. The issues of funding, the identities and the commitments of VOs are quite complex. There is a need for transparency and accountability for VOs.

“Full Godowns—and Empty Stomachs, India 2001

Malnutrition levels in India are very high. According to the second National Family Health Survey (1998-99), about half of all Indian children are chronically undernourished. Many Indians are too poor to pay the high food prices on the market or even in the ration shops. India, the land of food scarcity? Quite the opposite. Fifty million tons of grain is stored in government godowns. The government accumulated these massive amounts after the excellent yields of recent years, using a minimum support price for farmers as an incentive. Fifty million tons is certainly more than ample for those threatened with starvation, for example, in the drought-affected areas of Rajasthan. The situation in India, where people starve in the shadow of overflowing godowns is a clear illustration of food-related oppression. Deaths from hunger were criticized in a number of states. A Supreme Court ruling in November 2001 ordered state governments to make these food supplies available to vulnerable groups.”⁴⁰

WAY FORWARD

In order to have a sustainable and equitable society a social, political and economic arrangement would entail all citizens to have the right and full opportunity to participate in decision-making based on the principles of ecological sustainability and human equity.⁴¹

The VOs have made a lot of difference in the following manner:

1. There is growing mobilization of VOs which has struggled and brought about changes in the economic growth model. There has been a significant growth in the mass movements against growth models which are not conducive development projects meant for the communities who are the most affected by the displacement or degradation of their environment, supported by civil society groups in urban areas.

40 <http://shr.aaas.org/manuals/food/RTF.pdf>

41 Two Decades of Neoliberalism, Alternate Economic Survey India, December 2010

2. Basic needs are facilitated by the VOs: This is due to the frequent failure of the state in delivery process and it has prompted VOs to take on the role of provision of basic facilities and infrastructure, facilitating local empowerment. It is to be noted that in doing this the state's role is not exempted.
3. Reforms and policy shifts: Advocacy by the VOs and initiatives taken by many reformists and individuals has led to policy shifts and reforms which are contrary to the trend of economic globalization and in the interest of the states and country. This can be seen from the three recent legislative measures like - the Right to Information Act 2005; the National Rural Employment Guarantee Act 2006; the scheduled Tribes and Other Traditional Forest Dwellers (Recognition of Forest Rights) Act 2006. All the three has emerged out of the peoples' initiatives. For example the RTI emerged from the grassroots struggle in Rajasthan, Delhi and elsewhere, led by the Mazdoor Kisan Shakti Sangathan (MKSS) demanding access to official records on employment and funding.
4. Awareness, education and capacity building: Social awareness, ecological sustainability and the capacity to deal with related issues and problems have increased exponentially in the last 2-3 decades but a huge and massive campaign to spread awareness about the numerous crises one faces needs to be addressed at their root cause and build capacity for meaningful solutions.
5. Shift in technology: In the field of agricultural production, housing and construction, transportation, household equipments and industrial production many technological shifts have made human life easier, and ecologically sensitive. The relevance and importance of this shift can be seen in agriculture, and other manufacturing fields.
6. Financial measures: Various reform measures in macro-economic and fiscal policies have been recommended to move towards greater sustainability. For example shifting subsidies from ecological practices such as chemical-heavy agriculture to a sustainable led organic farming are a few impacted changes which have been demanded by civil society groups.

RECOMMENDATIONS

Measures have been initiated in the past to strengthen the collaborative relationship between government and VOs but still a lot has to be done in this regard. It is felt necessary to explore possible ways to nurture genuine partnerships and dialogue, while recognizing the independent roles, responsibilities and special capacities of each sector. The recommendations are listed below:

1. There is a lot of variation in the procedures/guidelines of the departments of the central and state governments, and other organizations, for involving VOs in different programmes/schemes. Thus, steps need to be taken to make procedures for providing grants to VOs simplified and user friendly.
2. Institutional mechanism for close interaction between the government and VOs should be set up from the centre right up to the panchayat levels.
3. Proposals received from VOs should be acknowledged promptly and preferably an

- indication should be given as to the timeline by which they may expect final decision. Status of the proposal(s) should be available at the reception office and on the website of all concerned departments/ministries.
4. Elements of conflict, if any, between the government and VOs need not be overplayed and instead be replaced by professionalism, openness and efforts to resolve these conflicts to sub serve the society.
 5. The government should take responsibility for providing the right orientation and training to the officials that deal with VOs at various levels.
 6. The concept of decentralization of power and authority should be enhanced.
 7. The rules and regulations governing the relationship between the government and VOs should be made simple and easier.
 8. Each department/ministry should maintain a database of all those VOs that are involved in their schemes and have availed funding from them, along with their articles/memorandum of association, etc. Once a VO has been granted assistance after furnishing information to a department/ministry, it need not be necessary for it to file the same information repeatedly year after year (unless there is a change).
 9. Decentralized approach should be followed to sanction the schemes to the VOs. The model of Mother NGOs (MNGOs) adopted by Department of Health and Family Welfare may be adopted by other departments/ministries. A designated MNGO or a nodal NGO may be allowed to take care of the work of three-four related sectors. However, while adopting the concept of MNGOs care should be taken that it should not hamper the growth of smaller/newer NGOs.
 10. VOs should not be treated as contractors by the government officials at any level.
 11. Voluntary sector organisations should be allowed freedom of work and all the guidelines should be flexible and it should not be bound by the interference of district or state level committees. It has been observed during the state and regional workshops that VOs avoid the funds that are accompanied with strict control and rigidity.
 12. There should be an inbuilt provision for some amount of funding for training in schemes to be implemented through voluntary sector. While sanctioning bigger projects to VOs, some percentage of grants could be earmarked for capacity building under the heading of training, for enhancement of the capability of the VO workers.
 13. In the government development programmes the criteria for the selection of implementing agency should be merit only and not any other consideration. The organizations run by government officials should be excluded from the criteria. The work must be allotted to proven agencies, as it is essential to ensure the returns to the massive national investments.

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