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**WOMEN
EMPOWERMENT
INITIATIVES**



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WOMEN EMPOWERMENT INITIATIVES

MISSION POSHAN 2.0

Mission Poshan 2.0 is an Integrated Nutrition Support Programme. Four Centrally-sponsored schemes namely are anganwadi services, POSHAN Abhiyan, Scheme for Adolescent Girls, and National Creche Scheme have been merged to form the new Saksham Anganwadi or Mission POSHAN 2.0. It seeks to address the challenges of malnutrition in children, adolescent girls, pregnant women and lactating mothers through a strategic shift in nutrition content and delivery and by creation of a convergent eco-system to develop and promote practices that nurture health, wellness and immunity. Poshan 2.0 will seek to optimize the quality and delivery of food under the Supplementary Nutrition Program.

Need of the initiative

About 68 percent of deaths in children under the age of five in India could be attributed to malnutrition in children and mothers, Lancet said in 2019. Malnutrition adversely affects a child's physical and mental development and is one of the most important risk factors for other diseases. This basically means that dealing with total malnutrition, instead of dealing with one disease at a time, will keep our children more secure and make their future brighter. Studies also show that malnourished children are less likely to go to school and more likely to drop out. This means that half of our children fall behind in silence, and no development can have real meaning without ensuring that our children and mothers are nourished and healthy. Empowerment and protection of women and children who constitute 67.7% of India's population and ensuring their wholesome development in a safe and secure environment is crucial for sustainable and equitable development of the country and for achieving transformational economic and social changes.

Constitutional Provisions for Women and Children

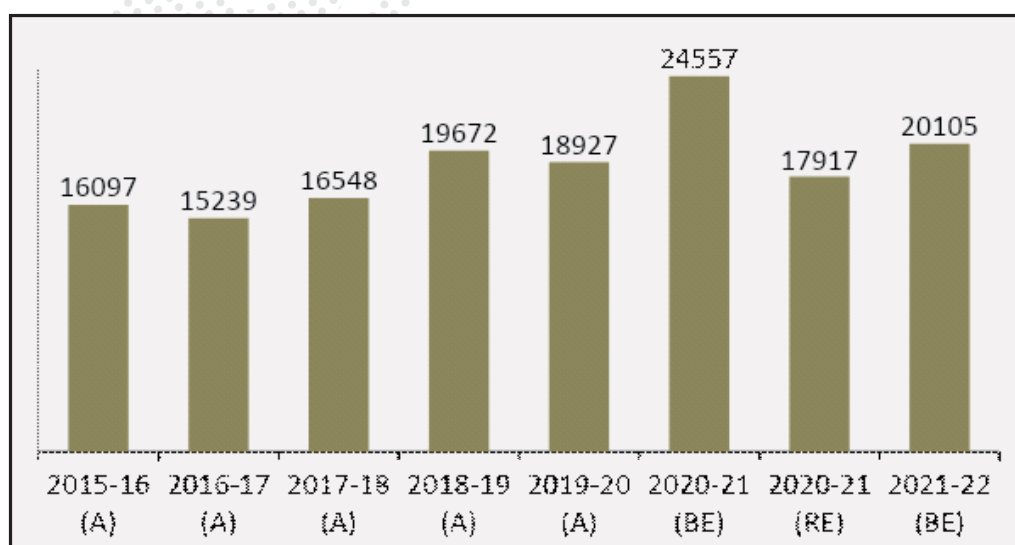
- Article 15(3): It permits the state to make special provisions for women and children.
- Article 23: Under the fundamental right against exploitation, flesh trade has been banned.
- Article 42: Urge state to make provisions for maternity relief.
- Article 45: Urges the state to provide early childhood care and education for children up to 6 years of age.

About the initiative

- Mission Poshan 2.0 will contribute to human capital development of the country; address malnutrition challenges; promote nutrition awareness and good eating habits for sustainable health & well-being and address nutrition related deficiencies through key strategies.
- Under the programme, nutritional norms and standards and quality and testing of THR will be improved and greater stakeholder and beneficiary participation will be promoted besides traditional community food habits.
- Poshan 2.0 shall focus on Maternal Nutrition, Infant and Young Child Feeding Norms, Treatment of MAM/SAM and Wellness through AYUSH. It will rest on the pillars of Convergence, Governance, and Capacity-building.
- Poshan Abhiyan will be the key pillar for Outreach and will cover innovations related to nutritional support, ICT interventions, Media Advocacy and Research, Community Outreach and Jan Andolan.
- Mission Poshan 2.0 will integrate several key strategies to fulfil its objectives, viz., Corrective strategies, Nutrition Awareness strategies, Communication strategies and Creation of green eco-systems. The objectives under Mission Poshan 2.0 will be realized through strong interventions-driven convergent activities with key Ministries/Depts./Organizations.
- Digital infrastructure under the "Poshan Tracker" rolled out through National e-Governance Division as a governance tool, will strengthen and bring about transparency in nutrition delivery support systems.
- Technology under Poshan Tracker is being leveraged for (i) dynamic identification of stunting, wasting, under-weight prevalence among children; (ii) last mile tracking of nutrition service delivery.

How the scheme has worked so far?

- The allocation for Mission POSHAN 2.0 in 2021-22 shows a drop of as much as 18.5 per cent compared to the combined allocation for the four merged schemes in 2020-21.
- This indicates that the rationalisation exercise may have paved the way for shrinking the total resource envelope for nutrition interventions delivered under these schemes.
- The total number of beneficiaries of the Supplementary Nutrition Programme (SNP) has even fallen from Rs 10.2 crore in 2016 to Rs 8.6 crore in 2020, a drop of 15%.
- The total allocation for Mission Poshan 2.0 in 2021-22, which also subsumes three other schemes, is less even when compared to this reduced allocation for the previous year.



Total Expenditure / Allocation for Schemes Merged under the New POSHAN 2.0 (Rs. crore)

- It was stated that an 'intensified strategy' would be undertaken under Mission POSHAN 2.0 to improve nutritional outcomes across 112 aspirational districts.
- With NFHS-5 showing an increase in undernutrition in many states, there remains a need to focus on nutrition outcomes beyond just these districts.
- The allocation of Rs 20,532 crore for anganwadi services in 2020-21 was against a demand of Rs 24,810 crore.
- Lower allocations for these schemes, along with the lack of a clear implementation plan on how the services will be consolidated, indicate a lack of priority for nutrition.

Way Forward

- Advising more women to breastfeed for longer periods, this improves the immune system.
- Momentum of nutrition was disturbed once Covid lockdowns led to the shutting of schools, Anganwadi centres, Nutritional Rehabilitation Centres. Thus frontline workers had to be engaged in children suffering from severe acute malnutrition and moderate acute malnutrition among other nutrition-strengthening activities.
- we must double our efforts to ensure that we do not lose the recent gains made in the nutrition space.
- The nutritionist also evaluated and monitored the indicators in real-time of the program using technology, in order to make timely adjustments to lessons in a variety of situations.
- Rising above political differences, it is important to document and learn from states like Gujarat, Madhya Pradesh and Rajasthan, which have scaled up Community-based Management of Malnutrition practices in recent times, so that best practices can be adopted and incorporated.

KISHORI SHAKTI YOJANA

Kishori Shakti Yojana is a redesign of the already existing Adolescent Girls (AG) Scheme being implemented as a component under the centrally sponsored Integrated Child Development Services (ICDS) Scheme. The new scheme dramatically extends the coverage of the earlier scheme with significant content enrichment, strengthens the training component, particularly in skill development, aspects aimed at empowerment and enhanced self-perception. It also fosters convergence with other sectoral programmes, addressing the interrelated needs of adolescent girls and women.

Need of the initiative

Adolescence is a crucial phase in the life of a human being, especially women. At this stage, various emotional and physical changes happen in a girl and vital interventions at this stage can help the individual develop positive attitudes towards health and well-being. The adolescent girls do not have adequate access to vital health and nutrition information/Services/Programmes aimed at improving the nutritional and health status of adolescent girls and promoting self-development, awareness of health, hygiene, nutrition, family welfare and management. Lack of nutritional food and healthy and hygienic practices can hamper the growth and development of a girl and hinder her from fully achieving her potential. It is with this intent that the Kishori Shakti Yojana was envisaged.

About the initiative

- Kishori Shakti Yojana (KSY) seeks to empower adolescent girls, so as to enable them to take charge of their lives.
- It is viewed as a holistic initiative for the development of adolescent girls.
- The programme through its interventions aims at bringing about a difference in the lives of the adolescent girls. It seeks to provide them with an opportunity to realize their full potential.

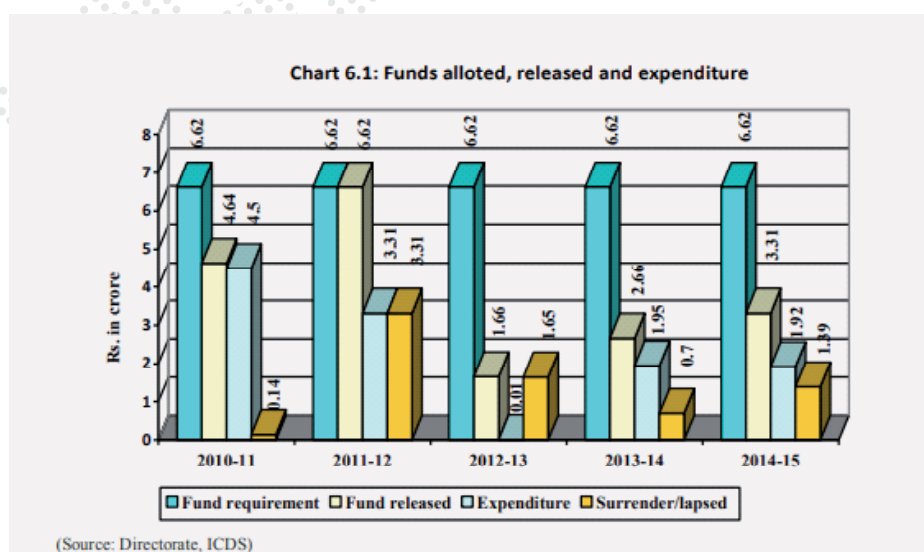
- States are maintaining Kishori Health Cards for Adolescent Girls in Angawadi Centres (AWCs) to record the information about the weight, height, Body Mass Index (BMI) along with other services provided under the scheme.

Objectives

- to improve the nutritional and health status of girls in the age group of 11-18 years;
- to provide the required literacy and numeracy skills through the non-formal stream of education, to stimulate a desire for more social exposure and knowledge and to help them improve their decision making capabilities;
- to train and equip the adolescent girls to improve/ upgrade home-based and vocational skills;
- to promote awareness of health, hygiene, nutrition and family welfare, home management and child care, and to take all measure as to facilitate their marrying only after attaining the age of 18 years and if possible, even later;
- to gain a better understanding of their environment related social issues and the impact on their lives; and
- to encourage adolescent girls to initiate various activities to be productive and useful members of the society.

How the scheme has worked so far?

- Against the requirement of 33.10 crore during 2010-15, 32.42 crore was allocated; 18.88 crore (58 per cent of allocated amount) was released; and 11.69 crore (62 per cent of released amount) was spent for implementation of the scheme in the State.
- Thus, there was huge gap between allocation and release and also between release and actual expenditure. Insufficient budget provisions and non-utilisation of available funds resulted in shortfall in physical achievement of the targets.
- The KSY scheme was initiated with the objective of improving nutrition and health status of AGs in the age group of 11-18 years but it provided for coverage of only 60 girls per Block (Project) in a year in 53 districts covered under the scheme.
- As a result of this ceiling of covering 60 AGs per block, it was noticed during scrutiny of records of test-checked 14 districts that against the total population of 70,74,240 AGs, only 35,100 AGs were covered under the KSY scheme during 2012-15. Hence, only one per cent of the AGs in these districts could be covered under KSY.



- **Health and Vocational training:** Under the scheme, 1,80,600 AGs in 602 sanctioned projects in the State were to be imparted three days training in respect of health and nutrition and 60 days vocational training in two batches of 30 girls under each project/block. The vocational training covered area such as stitching, pickle making etc

Year	Total no. of Projects	Targeted no. of Beneficiaries as per norm ²	Actual no. of Beneficiaries	Shortage	Shortage in per cent
2010-11	602	36,120	25,922	10,198	28
2011-12	602	36,120	18,040	18,080	50
2012-13	602	36,120	0	36,120	100
2013-14	602	36,120	10,981	25,139	70
2014-15	602	36,120	20,940	15,180	42
Total	3,010	1,80,600	75,883	1,04,717	58

(Source: Directorate, ICDS)

Way Forward

- Building social assets by strengthening social networks, positive peer groups, female role models, group affiliation and membership.
- Provisions for physical strength and fitness, mental and emotional health, self-confidence, information and knowledge around gender-based violence, sexual and reproductive health and rights, economic empowerment, and life skills are needed.
- The creation of safe, female-friendly public spaces where girls can gather to learn new skills, form friendships, expand their social networks, and receive mentoring in a supportive environment is an important strategy in overcoming the social isolation that many girls face.
- A safe and supportive environment is a contributory factor in motivating young people to make healthy choices.

NIRBHAYA SCHEME

Following the tragedy of December 2012, the Government has set up a dedicated fund – “Nirbhaya Fund”, which can be utilized for projects specifically designed to improve the safety and security of women. It is a non-lapsable corpus fund, being administered by Department of Economic Affairs, Ministry of Finance.

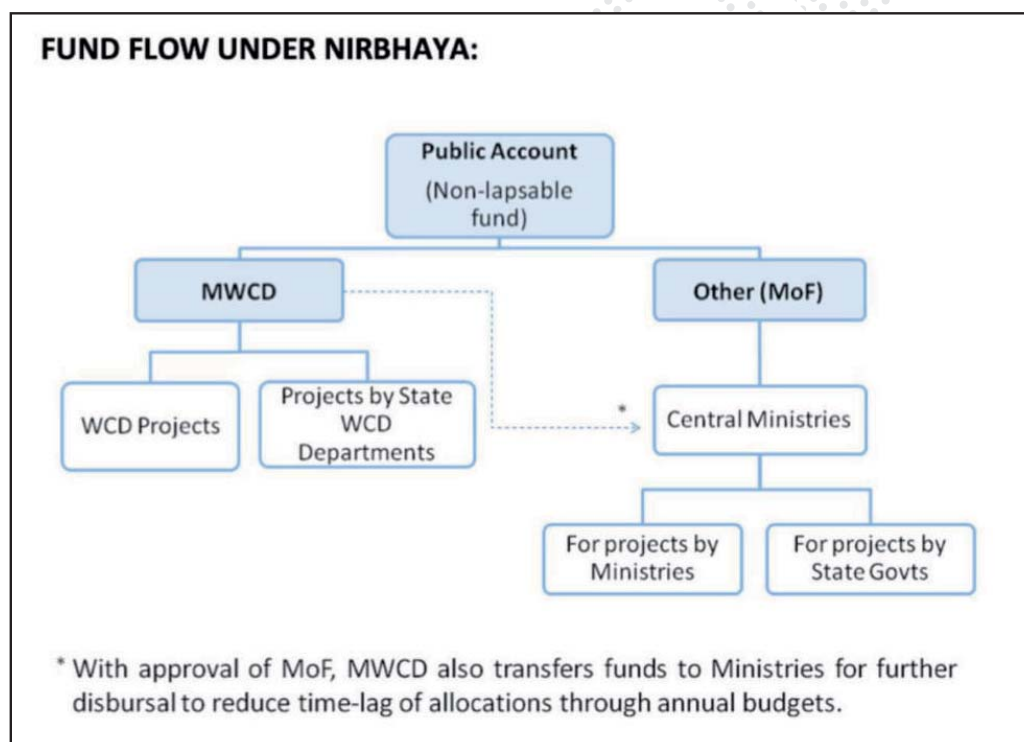
Need of the scheme:

Violence and abuse against women and girls is frequent on streets, in public transportation and in other public places. Such occurrences restrict women’s right to mobility, discouraging their freedom to walk freely and move in public spaces of their choice. Such violence also limits their access to essential services and adversely impact their health and wellbeing.

About the scheme:

- The Ministry of women and child development (MWCD) is to appraise, recommend proposals and schemes to be funded under the Nirbhaya Fund.
- The Nirbhaya Fund is a non-lapsable corpus fund. The empowerment committee has enumerated that the proposed projects under Nirbhaya Fund should have the following features:

- Direct impact on safety and security concerns of women
 - Optimum use of existing infrastructure
 - Innovative use of technology
 - No duplication of existing government schemes/programmes
 - Provision for real time intervention as far as possible
 - Strict privacy and confidentiality of women's identity and information.
 - Defined role of all stakeholders
 - No. of beneficiaries to be reached – absolute or estimated
 - Defined monitoring mechanism – from lowest level up to MWCD
 - Support of State WCD/Social Welfare Department, State Home Department and concerned central Ministry/Department (in case of proposals from States)
- The below standard funding pattern will be followed:
- 60:40 for all States
 - 90:10 for States with difficult terrains
 - 100% for UTs
 - Few initiatives are 100% funded



Major Projects Launched under the Fund:

■ Central Victim Compensation Fund (CVCF)

- CVCF has been set up under Nirbhaya Funds at a total cost of Rs. 200.00 Crore.
- CVCF has been released as a one-time grant to States/UTs to support and supplement the Victim Compensation schemes in respective States/UTs and expenditure from this fund is allowed to States/UTs after consuming non-budgetary resources with them.

■ One Stop Centres (OSCs):

- For women, One Stop Centres (OSCs) have been set up across the country.
 - Popularly known as Sakhi Centres.
- The Scheme is implemented across the country since 1st April, 2015 for facilitating access to an integrated range of services including police, medical, legal, psychological support and temporary shelter to women affected by violence.

■ Scheme of Universalisation of Women Help Line:

- The Scheme of Universalisation of Women Help Line is also being implemented since 1st April, 2015 and is intended to provide 24 hours emergency and non-emergency response to women affected by violence through
 - referral services (linking with appropriate authority such as police, One Stop Centre, hospital) and
 - by providing information about women welfare schemes/ programmes across the country through a single uniform number (181)
- So far, women helplines have become operational in 33 States/UTs. They have managed more than 54.25 lakh calls.

■ Mahila Police Volunteer (MPV) Scheme:

- The Mahila Police Volunteer (MPV) Scheme is being implemented by the Ministry in collaboration with Ministry of Home Affairs.
- This scheme is funded by Nirbhaya Fund as a centrally sponsored scheme with the aim to create and empower MPVs.
- They are to act as a link between police and the community and facilitate women in distress.
- MPVs serve as a public police interface in order to fight crime against women and report incidents of violence against women such as domestic violence, child marriage, dowry harassment and violence faced by women in public spaces.

■ Emergency Response Support System (ERSS):

- Ministry of Home Affairs (MHA) has accepted the recommendations of the Justice Verma Committee in the backdrop of unfortunate incident of Nirbhaya in December 2012.
- It has approved a national project by name of 'Emergency Response Support System (ERSS)', with budgetary provision of ₹321.69 Crore with a view to introduce a Pan-India Single Emergency Response Number '112' to address all kinds of distress calls such as police, fire and ambulance etc.

Monitoring and Evaluation

- MWCD is responsible to review and monitor the progress of sanctioned projects/schemes under Nirbhaya Fund in conjunction with the concerned Central Ministries/Departments.
- The monitoring and reporting mechanism to be followed at the State Government/UT level and at the level of the concerned Central Government Ministry/ Department and should form a part of the proposal.
- Strict monitoring will be followed for all proposals, including those which have already been appraised by EC and funds disbursed to the respective Ministries/Departments or States/UTs.

ONE STOP CENTRE SCHEME

These Centres are being established across the country to provide integrated support and assistance under one roof to women affected by violence, both in private and public spaces in phased manner.

Need of the initiative

Gender Based Violence (GBV) is a global health, human rights and developmental issue that transcends **geography, class, culture, age, race and religion** to affect every community and country in every corner of the world. In India, gender based violence has many manifestations; from the more universally prevalent forms of **domestic and sexual violence** including rape, to harmful practices such as, dowry, honour killings, acid attacks, witch - hunting, sexual harassment, child sexual abuse, trafficking for commercial sexual exploitation, child marriage, sex selective abortion, sati etc. These societal backlogs in India made it a call for the government to take such an initiative for welfare of the **vulnerable group of the country**.

About the initiative

- Ministry of Women and Child Development (MWCD) has formulated a Centrally Sponsored Scheme for setting up '**One Stop Centre**'.
- It was initiated as a sub -part of Umbrella Scheme for **National Mission for Empowerment of women including Indira Gandhi Matritav Sahyaog Yojana**.
- Popularly known as **Sakhi**, the scheme is being implemented since 1st April 2015.
- Target group:** The scheme will support all women including girls below **18 years** of age affected by violence, irrespective of caste, class, religion, region, sexual orientation or marital status.

■ Services offered to the beneficiaries:

- Emergency Response and Rescue Services
 - Medical assistance
 - Legal Aid and counselling
 - Shelter
 - Video Conferencing Facility
- Implementing agency:** by State Government/ UT Administration.
 - Fund allocation:** The Scheme will be funded through Nirbhaya Fund . The Central Government will provide 100% financial assistance to the State Government /UT Administrations under the Scheme.

■ Administration of the Scheme:

- At the **national level**, Ministry of Women and Child Development would be responsible for budgetary regulation and administration.
- At the **State level**, the Department of Women and Child Development will be responsible for the overall direction and implementation of the scheme.

Objective

- One Stop Centres (OSC) is intended to support women affected by violence, in private and public spaces, within the family, community and at the workplace.
- Women facing physical, sexual, emotional, psychological and economic abuse, irrespective of age, class, caste, education status, marital status, race and culture will be facilitated with support and redressal.
- Aggrieved women facing any kind of violence due to attempted sexual harassment, sexual assault, domestic violence, trafficking, honour related crimes, acid attacks or witch-hunting who have reached out or been referred to the OSC will be provided with specialized services.
- To provide integrated support and assistance to women affected by violence, both in private and public spaces under one roof.

- To facilitate immediate, emergency and non - emergency access to a range of services including medical, legal, psychological and counselling support under one roof to fight against any forms of violence against women.

Significance

- The intention of the One-Stop Scheme (OSC) is to support women affected by the violence that they may face within the family or at the workplace or within the community, in **private or public places**.
- A **support mechanism** and redressal for women are some of the facilities of this scheme for women who face **sexual/physical/psychological/emotional/economic abuse**, irrespective of their caste, creed, race, class, education status, age, culture, or marital status.
- **Specialized services** would be provided to the aggrieved women facing any kind of violence due to attempted acid attacks, witch-hunting, domestic violence, trafficking, sexual assault or sexual harassment and have reached out or been referred to the OSC.

Challenges

- **Lack of proper infrastructure:** Lack of basic resources is common at OSCs and compromised quality of care (HC). Some sexual assault centres reported insufficient basic comfort items like clean clothes and sanitary pads, as well as other basic supplies (HC).
- **Poor monitoring system:** Poor documentation and data management were seen across contexts. Reasons for this included lack of staff knowledge on how to document violence, outdated information systems, variable record keeping procedures and the ethical and logistical challenges of tracking survivors. A related barrier was lack of evaluation and research; many sites gathered data, but failed to analyse data.
- **Less accessibility:** Free services at the OSC facilitated access to survivors (LC). However, 11 reports from OSCs in over 20 countries found that some survivors were forced to pay user fees (MC). Survivors from rural areas faced geographical barriers to access at OSCs (MC), often due to high cost of transportation.
- **Lack of Clarity of roles and responsibilities:** Implementing partners often disagreed on OSC priorities, responsibilities and budgets (MC). At some OSCs, these disputes led to confusion among staff on whom and how services should be delivered (LC).

How it has been working so far?

- The One-Stop Crisis Centres were recommended to be established by the **12th Plan Working Group on Women's Agency and Empowerment**.
- **In 2013, Usha Mehra Commission** submitted a report stating the need for a One-Stop Centre at a notified hospital to help a victim of sexual assault.
- **In 2015, the One-Stop Centre scheme was implemented.**
- One-Stop Centres have been established across the country in a phased manner:
 - **Phase I** – 1 One Stop Centre per state/UT
 - **Phase II** – 150 additional One Stop Centres in 2016-17
- As of July **2019 data, 462 one-stop centers have been set up:**
 - The highest number of one-stop center – Uttar Pradesh (75), followed by
 - Madhya Pradesh – 51
- A fund of **Rs.74 crores** has also been announced by the government under the Nirbhaya fund for rape victims who are minors.

Way forward

- **Proper fund allocation:** for total coverage, there is 14% more need to increase the budget for the scheme.
- **Involvement of non-governmental agencies:** only government interventions will not work for better implementation of the scheme. Civil societies, NGOs and community participation can help bring more beneficiaries for the welfare scheme.
- **Increase awareness:** women and needy should get adequate knowledge regarding its benefits and implementation, which can be ensured by involving locals in the scheme and organising 'sabhas' in market places.

UJJAWALA: A COMPREHENSIVE SCHEME FOR PREVENTION OF TRAFFICKING AND RESCUE, REHABILITATION AND RE-INTEGRATION OF VICTIMS OF TRAFFICKING AND COMMERCIAL SEXUAL EXPLOITATION

'Ujjawala' scheme is a comprehensive scheme for prevention of trafficking and rescue, rehabilitation, reintegration and repatriation of victims of trafficking for commercial sexual exploitation. The **Ministry of Women and Child Development** is implementing it. India has emerged as a source, destination and transit for both **in-country and cross border trafficking**. The problem of trafficking of women and children for commercial **sexual exploitation** is especially challenging due to its myriad complexities and variation.

Need of the initiative

Trafficking of children and women for commercial sexual exploitation is an organized crime violating basic human rights. Lack of **a protective environment, low status of women, and poverty** are a few reasons for trafficking. A multi sectoral approach is needed which will undertake preventive measures to arrest trafficking especially in vulnerable areas and sections of population; and to **enable rescue, rehabilitation and reintegration of the trafficked victims**. Ujjawala is a thorough scheme launched by the government for the prevention of illicit trafficking of the victims who were trafficked for commercial sexual exploitation.

About the initiative

- **Aim:** The Ujjawala scheme was launched in **2007** to put an end to the trafficking of children and women. The aim is to prevent, rescue, rehabilitate, reintegrate, and repatriate victims trafficked for commercial sexual exploitation.
 - **Identification of beneficiaries:** The **State Governments/Union Territories (UTs)** have notified their victim compensation schemes in terms of **Section 357A** of the **Code of Criminal Procedure (Cr.PC)**.
 - **Fund allocation:** to support and supplement the State Compensation Schemes, Ministry of Home Affairs will release grants to State Governments/ UTs under the Central Victim Compensation Fund from **Nirbhaya Fund**.
- **Components of the scheme:**
- Rescue
 - Prevention
 - Rehabilitation
 - Re-integration
 - Repatriation

■ **Targeted group:**

- Women and children who are vulnerable to trafficking for commercial sexual exploitation.
- Women and children who are victims of trafficking for commercial sexual exploitation.

■ **Implementing agencies:**

- Women and Child Welfare Department or Social Welfare Department of State Government
- Women's Development Corporations/Centres
- Urban Local Bodies
- Renowned Public-Private Trusts
- Voluntary Organisations

■ **Eligibility conditions for implementing agency:**

- The organization should be **registered under the law** and must have a managing body with its powers and functions clearly in sync with the guidelines and framework laid down in the Constitution for such bodies.
- The agency should not have the primary motive of **gaining profit from any individual or group**
- Minimum of 3 **years of experience** is a must post-registration of the organization
- The organization should be financially sound with proper availability of resources and experienced personnel to handle delicate issues.

Objectives

- Prevention of trafficking of children and women for commercial sexual exploitation by means of social mobilization and awareness generation programmes, the participation of local communities, generation of public debates, and opinions through seminars/workshops and other innovative activities.
- Facilitating the **rescue of victims** and placing them in safe custody.
- Provision of rehabilitation services to the victims through the provision of basic amenities and needs **like food, clothing, shelter, medical help, legal aid, guidance, counselling as well as vocational training.**
- For working towards **reintegrating the victims** into their family and the society at large.
- Facilitating **cross-border victims to repatriate into their home country.**

Challenges

- **Poverty:** is a cause behind child trafficking. Some parents sell their children, not just for the money, but also in the hope that their children will escape the situation of chronic poverty and move to a place where they will have a better life and more opportunities.
- **Social or cultural practice of devaluing women and girls in society:** thus making women disproportionately vulnerable to trafficking.
- **Porous nature of borders:** corrupt Government officials, the involvement of international organized criminal groups or networks and limited capacity of or commitment by immigration and law enforcement officers to control borders.
- **Migration:** The desire of potential victims to migrate is exploited by offenders to recruit and gain initial control or cooperation, only to be replaced by more coercive measures once the victims have been moved to another State or region of the country, which may not always be the one to which they had intended to migrate.
- Some of the common reasons behind migration are poverty, oppression, lack of human rights, lack of social or economic opportunity, dangers from conflict or instability and similar conditions.

How it has been working so far?

- As on date of launch, **273 projects including 151 Protective and Rehabilitative Homes** have been supported under the Scheme.
- These rehabilitative centres are given **financial support for providing shelter and basic amenities** in the case the victims are children, as well as for undertaking vocational training and income generation activities to provide the victims with alternate livelihood option.
- Under the Scheme, arrangements are made by the implementing organization for providing vocational training to the women through the Vocational Training Institutes recognized by Directorate General of Employment and Training under the **Ministry of Labour and Employment**.
- Training and examination fees are reimbursed on submission of the certificate issued by the **vocational training institute** on successful completion of training.
- The number of beneficiaries that can be provided shelter State/Union Territory wise is as mentioned below.**

Sl. No.	Name of The State	Beneficiaries
1.	Andhra Pradesh	600
2.	Arunachal Pradesh	25
3.	Assam	1025
4.	Bihar	50
5.	Chhattisgarh	75
6.	Delhi	50
7.	Karnataka	1100
8.	Kerala	150
9.	Maharashtra	750
10.	Manipur	600
11.	Madhya Pradesh	25
12.	Mizoram	100
13.	Punjab	50
14.	Nagaland	25
15.	Rajasthan	275
16.	Orissa	725
17.	Tamil Nadu	200
18.	Uttar Pradesh	300
19.	Uttarakhand	150
20.	West Bengal	100
21.	Gujarat	75
22.	Haryana	100
	Total	6350

Way forward

- Formation and functioning of Community Vigilance Groups.
- Formation and **functioning of Balika** (adolescent girls)/Balala (adolescent children) **Sanghas**.
- **Sensitization Workshops/Seminars** should be conducted for the victims.
- Awareness generation through **mass media** including kalajathas, **street plays, puppetry or** through any other art forms, preferably traditional.
- Development and printing of awareness generation material such as **pamphlets, leaflets and posters**.
- **Rescue operations** (details on the methodology, network and relationship of the implementing agency with the local authorities, police etc).
- Provide **Medical Care, Legal Aid, Administrative Support, Education, Vocational Training** and Income Generation Activities for victims.
- **Setting of Half-Way Homes:** The Half –way Home will be set-up by the implementing agency when there are enough women victims ready to leave the peer home and are in employment/vocational activity and can financially sustain themselves.

Adequate **auditing of funds allocated** in the scheme to reduce misuses of funds.
