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CHILD HEALTH BUDGET IN INDIA: A POLICY BRIEF

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ABSTRACT

The importance for child budgeting has been emphasised that there must be compulsory allocations for child budget and such allocations must be reported in statement 12 (Allocation for children). The Government has not only acknowledged the need for provisioning suitable resources for children, it is also committed to secure and protect their interest while defining the schemes and programme for future growth of India. Nutrition interventions are spread across sectors such as food security, health, education, water and sanitation, poverty alleviation, social safety and agriculture. The past few years have seen some major transformations in terms of the nation's progress vis-à-vis child nutrition and development. That our health indicators for children look far from satisfactory still, tells us how critical the situation is. POSHAN Abhiyaan, launched in 2018, was to cover all districts across the country, with an overall target of reduction in stunting among young children from 38.4 per cent (NFHS-4) to 25 per cent by 2022. A number of departments thus, implement schemes that affect nutrition directly or indirectly. Children need a safe, protecting and enabling environment in which they can learn, grow and develop to their full potential. Therefore, child budget on health and nutrition sectors needs to be discussed to reach out of children. This ambitious target can only be achieved through adequate administrative support and prioritization, and overcoming delays in technological and infrastructural support through multi-stakeholder actions. This paper discussed and analysed the different aspects of child health budget and how it influences the health and nutrition of children. It is divided into major headings.

- a. *Introduction : An Overview of Children in India*
- b. *Thrust Areas for Child Health*
- c. **Union Budget 2020 India:** *Change in allocation for popular schemes, Child budgeting, health sector in budget speech of 2019-20*
- d. *Union budget 2019-20; allocation for children sees a mere 0.5 per cent increase*
- e. *Nutrition for women and children*
- f. *Summarizing promises and priorities 2019-20 : Budget for major schemes relating to Nutrition*
- g. *Promises and policy*
- h. *Public spending on major nutrition schemes in the country*
- i. *Conclusion*

KEYWORDS: *Child, Health, Nutrition, Budget, Policy, India.*

INTRODUCTION

An estimated 26 million children are born every year in India. As per census 2011, the share of children (0-6 years) accounts for 13% of the total population in the country. The child health programme under National Health Mission (NHM) comprehensively integrates interventions that improve child survival and addresses factors contributing to infant and under-five mortality. It is now well recognized that child survival cannot be addressed in isolation as it is intricately linked to the health of the mother, which is further determined by her health and development as an adolescent. Therefore, the concept of Continuum of Care, that emphasises on care during critical life stages in order to improve child survival, is being followed under the national programme. Another dimension of this approach is to ensure that critical services are made available at home, through community outreach and through health facilities at various levels (primary, first referral units, tertiary health care facilities). Newborn and child health are now the two key pillars of the Reproductive, maternal, newborn, child and adolescent health (RMNCH+A) strategic approach, 2013¹.

The Child Health programme under Reproductive, Maternal, Newborn, Child and Adolescent (RMNCH+A) Strategy of the National Health Mission (NHM) comprehensively integrates interventions that improve child health and nutrition status and addresses factors contributing to neonatal, infant, under-five mortality and malnutrition. The National Population Policy (NPP) 2000, the National Health Policy 2002, Twelfth Five Year Plan (2007-12), National Health Mission (NRHM - 2005–2017), Sustainable Development Goals (2016-2030) and New National Health Policy, 2017 have laid down the goals for child health.

CHILDREN IN INDIA

There are 472 million children in India under the age of 18 years, representing 39% of the country's total population. A large percentage, 29% of that figure constitutes children between the ages of 0 to 6 years. Children from rural areas, slums and urban poor families, scheduled castes, tribal communities and other disadvantaged populations suffer from multiple deprivations related to poverty, malnutrition, access to quality health services, child marriage, poor school

attendance, low learning outcomes, lack of sanitation facilities, hygiene, and access to clean water.

Nutrition is one of the most pressing problems in India today. Almost 53 million children in India are stunted and more than half of the women in reproductive age group are anemic.²As per NFHS – 4, the prevalence of stunting, wasting and underweight in children below 6 years of age is 38.4%, 21% and 35.8% respectively. The budget outlay targets to reduce stunting, underweight, wasting, low birth weight and anemia among women and children by 2-3%. At the time of presenting annual budget for the financial year 2014-15, the Finance Minister had acknowledged the urgent need to address the problem of under nutrition and had suggested a need for a comprehensive strategy to halt the deteriorating situation. While this gave hope to many stakeholders, the nutrition situation in India remains largely unchanged³ over the course of five years since then.

Child Health Indicator*	Current status	NHP Target
IMR (Infant Mortality Rate)	33	28 by 2019
Neonatal Mortality rate	23	16 by 2025
Under 5 Mortality Rate	37	23 by 2025

*Aug 17, 2020

Thrust Areas for Child Health:

Neonatal health, nutrition, management of common childhood illnesses and immunization are some areas that affect child health directly or indirectly.

B. (a) Neonatal Health: Clean air, safe and secure surroundings and outlets for physical activity are essential conditions for children to survive and thrive. WHO recommends a continuum of care — from preconception through the formative early years — to safeguard and maximize children's developmental outcomes? Under these broad areas, we have essential newborn care (at every 'delivery' point at the time of birth), facility based sick newborn care (at FRUs & District Hospitals) and Home Based Newborn Care and Home-Based Young Care (HBYC) programs that are crucial.

B. (b) Nutrition: Exclusive breastfeeding is recommended up to 6 months of age, with continued breastfeeding along with appropriate complementary foods up to two years of age or beyond. Promotion of optimal Infant and Young Child Feeding Practices (IYCF) under Mother's Absolute Affection (MAA) Program, micronutrient supplementation (Vitamin A, Iron Folic Acid), management of children with Severe Acute Malnutrition (SAM), and National Deworming Day are some programmes stressing on the nutrition aspect.

B. (c) Management of common childhood illnesses: Integrated management of childhood illness is an integrated approach to child health that focuses on overall well-being of

the child. Management of childhood diarrhoeal diseases & acute respiratory infections fall under this.

B. (d) Immunization: ⁴Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease. Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases and is estimated to avert between 2 and 3 million deaths each year. It is one of the most cost-effective health investments, with proven strategies that make it accessible to the most hard-to-reach and vulnerable population. It has clearly defined target groups, can be delivered effectively through outreach activities, and does not require any major lifestyle change.

C. Union Budget 2020 India:

A sum of Rs 30,000 crore has been set aside for the Ministry of Women and Child Development (WCD) for the next fiscal year in the Budget announced. This translates to a 14% increase over the 2019-2020 financial year. A major chunk of the sum, Rs. 20,532.38 crore, is for 'Anganwadi' services. The total amount allocated for the social services sector, which includes nutrition, social security and welfare, has been increased from Rs 3,891.71 crore in 2019-20 to Rs 4,036.49 crore in 2020-21.

The Budget for National Nutrition Mission or POSHAN Abhiyaan has been increased from Rs 3,400 crore in 2019-20 to Rs 3,700 in 2020-21. POSHAN Abhiyaan, which aims to bring down stunting of children in the age group of 0-6 years from 38.4 per cent to 25 per cent by 2022, has been a key focus area of Ministry of Women and Child Development.

The 'One Stop Centre' scheme received a major boost with allocation being increased from Rs. 204 crore in last fiscal to Rs. 385 crore this fiscal. The scheme aims to facilitate access to an integrated range of services including medical aid, police assistance, legal aid and psycho-social counselling to women affected by violence, including sexual assault.

Additionally, centre's programmes on maternity benefit and child protection services also got a boost in the Budget. Allocation for Pradhan Mantri Matru Vandana Yojana (PMMVY), a maternity benefit programme, has been increased from Rs. 2,300 crore to Rs. 2,500 crore. Under the programme, Rs. 6,000 is given to pregnant women and lactating mothers for the birth of the first living child.

Allocation for Child Protection Services programme under the Integrated Child Development Services has been increased to Rs 1,500 crore from Rs 1,350 crore.

The project 'Beti Bachao, Beti Padhao' has been allocated Rs. 220 crore in the current financial year while the allocation for Mahila Shakti Kendras has been doubled from Rs 50 crore to Rs 100 crore.

The total allocation for the centrally sponsored schemes was Rs. 29,720.38 crore, a boost of Rs. 3,804 crore from the last fiscal. Funds earmarked for National Creche Scheme have also been increased from Rs. 50 crore to Rs. 75 crore. The scheme aims to enable working women to safely leave their children in crèches while they are away at work.

C. (a) Change in allocation for popular schemes

⁵The overall size of budget 2019-20 is estimated to be Rs. 27, 86,346 crore, which is 13% more than the budget presented last year. **Health and education spends constitute 2.3% and 3.4% respectively of the overall budget.** Agriculture however has seen the biggest increase in sector-wise budget allocation. Funds earmarked for agriculture and allied activities have increased by 75% in budget 2019-20. The Government has increased allocation to Rashtriya Swasthya Bima Yojana (143% hike) and National Rural Drinking Water Mission (82% hike), among others.

With regards to important schemes, budget allocation has decreased for MGNREGA, Swachh Bharat Mission, and Umbrella scheme for development of SCs, PM Aawas Yojana, among others. On the other hand, it has increased for Pradhan Mantri Kisan Saaman Nidhi (PM –Kisan), Rashtriya Swasthya Bima Yojana, National Rural Drinking Water Mission, National Livelihood Mission among others.

C. (b) Child budgeting:

In a major initiative to improve the health and nutrition profile of children and adults in the country, Finance minister in her second Union Budget, announced Rs. 35,600 crore provision for nutrition-related programmes for the fiscal year 2020-21.

A jump of over 22 per cent in allocation for nutrition-related programmes, which include mid-day meal schemes in schools and anganwadis, also aims to promote the availability of horticulture and hygienic fish as part of healthy and nutritive food. It is a welcome move considering India accounts for 46.6 million or one-third of the world's stunted children, according to the Global Nutrition Report 2015.

⁶The importance for child budgeting has been stressed by Department of Economic Affairs in the budget circular 2019-20 dated 17th September, 2018. It has been emphasised that there must be compulsory allocations for child budget and such allocations must be reported in statement 12(Allocation for children). The circular directs all the Ministries/Departments to appoint a nodal officer for this. MWCD is monitoring the progress on the issue of child budget.

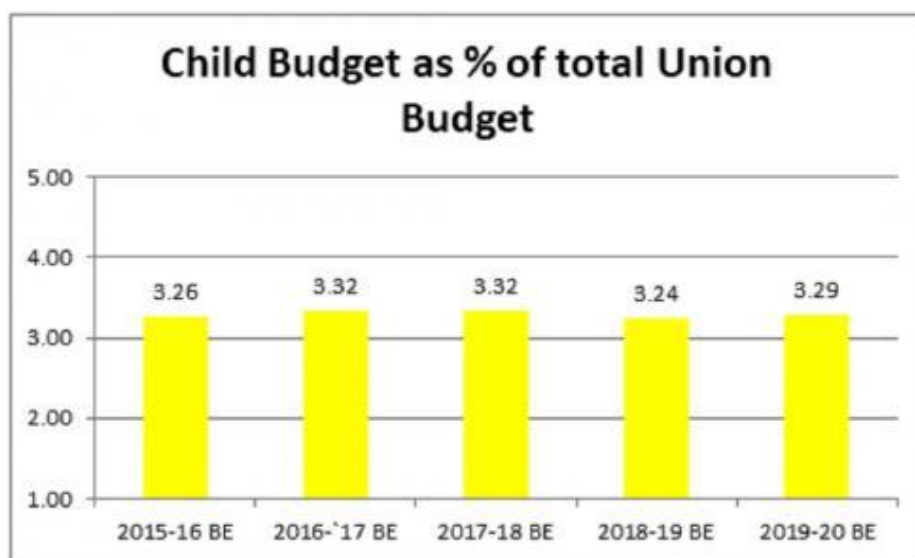
Child budgeting is a relatively new concept in the financial policy domain. However, the Government has not only acknowledged the need for provisioning suitable resources for children, it is also committed to secure and protect their interest while defining the schemes and programme for future growth of India. It is imperative to establish accountability of the Ministries towards children as an equal partner of development initiatives. A collaborative commitment of all the ministries will help to achieve union budget's goal of investing towards child welfare as recommended in the National Plan of Action for children, 2016. There is need for union ministries as well as state governments to also focus on citizens below 18 years of age while ensuring service delivery, and also reflect their commitment in the budget document.

SHARE FOR CHILDREN IN UNION BUDGET

Years	Share for children in union budget (%)
2014-15	4.50

2015-16	3.25
2016-17	3.32
2017-18	3.32
2018-19	3.24
2019-20	3.29

- Budgetary allocation for children in the Union Budget 2019-2020 has shown a marginal increase of 0.05%, going up from 3.24% in the last fiscal to 3.29% in the current fiscal with a grant of ₹91,644.29 crore;
- The share is less than the low share of 5% that the National Plan of Action for Children, 2016, had recommended;
- The share of child budget as a proportion of GDP has remained almost stagnant at 0.43% over the last 5 years;
- Health related financial allocation as a share of the child health budget has shown a decline of 0.39% from 3.90% last fiscal to 3.51%. Though India has set the target of reaching single digit neonatal mortality rate and single digit still birth rate until 2030.
- No new announcements have been made for children in the union budget of 2019-20.
- Some of the intervention like National Creche Scheme, Merit-cum-Means based Scholarship for OBCs and STs, Pre-matric Scholarship for OBCs and STs, National scheme for incentive to girl child for secondary education, etc. have registered a decline in absolute allocations in 2019-20 as compared to 2018-19 figures.



⁷The budget does little for the most vulnerable populations such as women working in the informal sector or their young children. The total budget for the department of health and family welfare for 2019-20 is Rs 62, 659.12 crore, compared to Rs 52,800 last year.

Considering that the budget comes at a time when over 150 children have died due to encephalitis crisis in Bihar, there was expected to be a greater focus on health. These deaths were entirely preventable and highlighted the failures of the public health system and the urgent need to strengthen the delivery of healthcare, especially at the primary level. The importance of paying attention to nutrition and sanitation was also underscored. Although there is an overall increase in the health budget, the required urgency that needs to be shown in the health sector is missing.

C. (c) Hardly any mention of health sector in budget speech of 2019-20:

⁸The National Health Policy 2017 recommends increasing health expenditure by Government as a percentage of Gross Domestic Product from the existing 1.15% to 2.5 % by 2025. Presently India's GDP stands at 1, 40, 78,000 crore and the budgetary expenditure for health as set in the 2019 -20 budget is 62,659 crores, which comes out to be only 0.44% of the GDP.

⁹There was hardly any mention of healthcare in Union Minister of Finance Nirmala Sitharam's Maiden budget speech of 2019-20. Instead the Finance Minister made a reference to the sector, stating that according to the vision presented in the interim budget, a healthy society would remain an area of attention for the government, which she attributed to factors such as Ayushman Bharat and well- nourished children and women.

Budgetary allocation for the department of Health and family welfare has been increased to 15% or Rs 62,659 crores (BE 2019-20) from the revised estimate for 2018-19. Unlike last time, when allocation for the NRHM fell, it was increased to Rs 27,039 crores. The 7.11% raise, however, may not be enough to improve rural health infrastructure. The government's own economic survey highlighted the urgent need to improve rural health infrastructure.

¹⁰While the NRHM also remains under-funded, but as compared to NUHM, outlays for strengthening health systems (Rs. 11,882 crore) and for disease control (Rs. 2,895 crore) have seen a modest 16% and 20% increase respectively. The reproductive and child health funds, however, have stagnated and in real terms, declined.

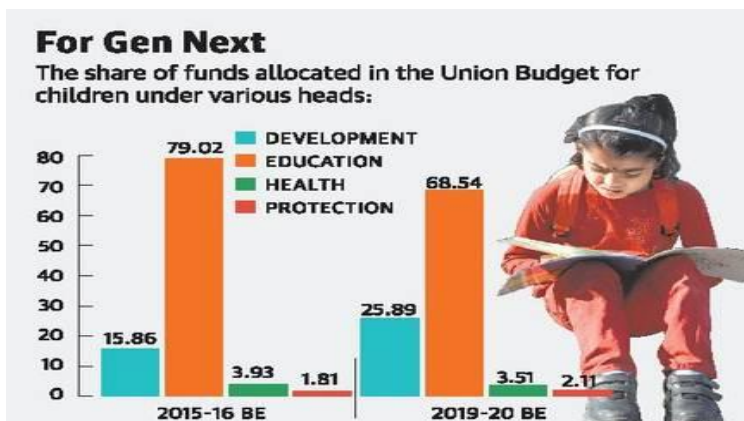
60% of primary health centres (PHCs) in India have only one doctor while about 5% have none and only 20% of existing PHCs fulfill Indian public health standards norms, according to the survey tabled July 4. There is an acute shortage of human resource in these peripheral health institutions, the survey added.

D. Union budget 2019-20; allocation for children sees a mere 0. 5 percent Increase:

¹¹The pillar of 'young India' is 39 % of India's population - the children of our country. A large number of children especially from marginalized background are not able to effectively access services such as education, health, nutrition and protection due to gaps in service delivery. Successful and efficient deliveries of these services require adequate budgets and therefore budgets are seen as an important instrument to establish Government's commitment to providing these services.

¹²The share for children in the total union budget has consistently decreased over the past years. It was 4.2% of the total union budget in 2014-15 (RE) and decreased to 3.4% in 2018-19 (BE). There are 4 sectors under which budget for children is allocated - education, health, child development (ICDS and nutrition) and child protection.

A detailed analysis of the budgetary grant carried out by Child Rights and you for four thematic areas of child rights, including education, health, development and child protection, show that the first two categories have registered a decline while the money allocated for the ambitious plan for nutritional development may be insufficient.



Health related financial allocation as a share of the child health budget has shown a decline of 0.39% from 3.90% last fiscal to 3.51% though India has set a target of reaching single digit neonatal mortality rate and single digit still birth rate until 2030. The country recorded a neonatal mortality rate of 24 per 1000 live births in 2016 and an infant mortality rate of 33 per 1000 live births. The share of reproductive and child health funding, as a share of the overall NHM budget, has fallen significantly, from 40% in the financial year 2016-17, to just 15% in 2018-19.

INTERVENTIONS TOWARDS REPRODUCTIVE AND CHILD HEALTH (RS IN CRORE)

Interventions	2018-19	2019-20
RCH flexible pool including immunization programme, pulse polio immunization programme, National Iodine deficiency disorders control programme	7411	6759
Pradhan Mantri Matru Vandana Yojana (PMMVY)	2400	2500

(The allocation of RCH under NHM have declined)

The NNM has received a boost from Rs 550 crore (RE 2017-18) to Rs. 2928.7 crores (BE 2018-19). In order to arrest child malnutrition at an accelerated pace, nutrition mission should see exponential allocations. Anganwadi services and POSHAN Abhiyaan (National Nutrition Mission) are among the most important govt. programmes aimed at reducing stunting, under weight, anaemia, and low birth weight. While the former has registered an increase of 19% and the latter of 14% in this latest budget announcement, experts have argued that it is inadequate given the expectations from the scheme. Given the multiple demands upon the ICDS system (Anganwadi services), including increase in honorarium for anganwadi workers, even this substantial increase may not be adequate to meet the expectations.

E. Nutrition for women and Children:

Another aspect of the budget worth analyzing is allocations for nutrition schemes for women and children since health outcomes are closely linked to nutrition status. Here again, what we see is a mixed bag- the allocation for 'umbrella ICDS' has gone up from RE of Rs. 23, 356.50 crore in

2018-19 to Rs. 27,584.37 crore, much of this increase is, under the ‘anganwadi services’ (From Rs. 17,890 crore to Rs 19,834.37 crore) and the National Nutrition Mission (from Rs. 30, 61.00crore to Rs. 34, 00.00 crore).

While once again, these are heads under which an increase in allocation was required, the amount is not enough. The increase in ‘anganwadi services’ will most likely be barely enough to cover the enhanced honorariums to anganwadi workers and helpers (which are still at very low levels) with not much available for improving the supplementary nutrition given to children or to improve the infrastructure in anganwadi centres, leave alone providing for additional workers.

Under the ‘Umbrella ICDS’ too schemes which are critical both from the perspective of women’s rights as workers as well as improving child care and nutrition –the Pradhan Mantri Matru Vandana Yojna (PMMVY) and the National Creche Scheme continue to be neglected. The revised budget for 2018-19 for PMMVY was Rs 1,200 crore, a decline Rs2, 400 crore which was the budget estimate, showing that the scheme has not taken off. In 2019-20, once again the allocation is only Rs 2,500 crore, whereas a letter written to the Finance Minister last year by 60 economists recommended that the full fledged implementation of this schemes requires Rs. 8000 crore in the Union Budget.

Budget for the creche scheme has been reduced from Rs. 128.39 crore to Rs. 50 crore Although there are some overall increases, this budget does very little for the most vulnerable populations such as women working in the informal sector and their young children.

It is the time the Government recognised the need for a major financial commitment for health and nutrition in the country.

F. Summarizing promises and priorities 2019-20: ¹³Budget for major schemes relating to Nutrition

- Nutrition interventions are spread across sectors such as food security, health, education, water and sanitation, poverty alleviation, social safety and agriculture
- A number of departments implement schemes that impact nutrition outcomes directly or indirectly
- MWCD, under its umbrella ICDS and Pradhan Mantri Matru Vandana Yojana (PMMVY) is responsible for delivering key nutritional interventions for children and pregnant women and lactating women

G. Promises and policy¹⁴

- The election manifesto of BJP-Ek Bharat Shreshtha Bharat: Sabka Saath Sabka Vikas- although does not mention a comprehensive strategy on nutrition. It made the following commitments:
 - a. For uplifting the poorest of poor, it considered malnutrition as a national priority and to be addressed in a mission mode;
 - b. As part of its widening the platform to enable every citizen to realise his or her full potential, it committed to universal food security and regarded it as integral to national security

- c. In its commitment towards children, the manifesto committed to address issues related to children, which included malnutrition and undernutrition
- POSHAN Abhiyaan was launched with the aim of reducing undernutrition and anemia among children, women and adolescent girls at an accelerated pace. Commencing from 2017-18, the 3 year budget for the mission was Rs. 9046.17. It ensures convergence with various programmes. The Government revised the cost norms for supplementary nutrition with annual indexation under the Aanganwadi services. The unit cost for provision of supplementary nutrition (Rs./day/beneficiary) were revised as follows:
 - For children (6-72 months) from Rs. 6.00 to Rs. 8.00
 - Pregnant women and lactating mothers from Rs. 7.00 to Rs. 9.50
 - Severely malnourished (6 months to 6 years) from Rs.9.00 to Rs.12.00
 - Celebration of Rashtriya POSHAN Maah in the month of September
 - Maternity benefit programme which was later renamed as Pradhan Mantri Matru Vandana Yojana was expanded to cover all the districts in the country. However, the scheme was registered to only the first child and women were required to fulfil certain pre-conditions for availing the benefits. These provisions were against the National Food Security Act, 2013, where no such restriction had been suggested. The incentive for the beneficiary was reduced from Rs. 6000 to Rs. 5000. The scheme was also merged with another scheme for institutional delivery, Janani Suraksha Yojana (JSY).
 - National Nutritional Strategy was announced by NITI Aayog in 2017
 - Constitution of National Technical Board on Nutrition in December 2017 to make technical recommendations on policy relevant issues on nutrition
 - Announcement to increase remuneration for ASHA and Aanganwadi workers in September 2018.

H. Public spending on major schemes in nutrition sector in the country:

- Nutrition interventions are spread across sectors such as food security, health, education, water and sanitation, poverty alleviation, social safety and agriculture. A number of departments thus, implement schemes that affect nutrition directly or indirectly. The budgets for these schemes over the NDA govt. period present a mixed bag, where some schemes were promoted at large scale while other suffered a setback.
- MWCD is crucial in delivering nutrition-specific schemes (related to provision of nutrition supplements and diet) for children under 6 years and for pregnant and lactating women. The budgets for ICDS observed only nominal increase during the period, despite the policy announcements regarding revision of cost norms for providing food and of increase in honorarium to AWCs. The only scheme which observed an increase in allocation was PMMVY; however, the dilution of the provisions of the scheme implies that the reach of the scheme will be limited. Fund utilization for the scheme was low in the last few years
- Overall there was a 15% decline in budget allocations for nutrition related schemes of agriculture department between 2014-15 AE and 2019-20 ARE.

- Mid-daymeal programme saw a decline in allocations until 2018-19 RE compared to the expenditure reported in 2014-15 AE. However, there is a slight increase in present budget with the allocation pegged at Rs. 11,000 crores. Two schemes of the Ministry of Drinking Water and Sanitation experienced contrary trends during the period. While the budget allocations for Swachh Bharat Mission increased more than threefold, NRDWP saw a budget allocation reduction of 25%.

The budgetary allocation towards food subsidy saw an increase from Rs 1, 17,671 crore in 2014-15 BE to Rs. 1, 84,220 crore in 2019-20 BE. The extent of increase during the period was around 60%. The proposed allocation in current financial year seems to be on track to ensure food security as mandated under National Food Security Act. However, there are concerns related to adequate provisioning and errors of exclusion along with numerous implementation challenges that are still unaddressed.

CONCLUSION

In India, every third child in the country was found to be malnourished in the Comprehensive National Nutrition Survey, 2016-18. Only 9.6 per cent of children aged 6-23 months received an adequate diet, according to the National Family Health Survey (NFHS), 2015-16. Chronic malnutrition did not improve in children below five in the last five years and acute malnutrition in the age group worsened, the recent NFHS, which released in December 2020. However, the existing government programmes are addressing food insecurity and malnutrition such as targeted public distribution system (TPDS), mid-day meals (MDM), Integrated Child Development Services Scheme (ICDS) and POSHAN Abhiyaan. Therefore, Government is much focus and concern on child health budget and nutrition as well strengthening of health care services such as health and nutrition-related interventions, which includes immunisation, antenatal care and micronutrient supplementation, among others.

¹⁴Though overall policy announcements by the government were high, although delayed, budgetary commitments towards them remained low. Health Ministry saw a marginal increase in its outlay, in this year's budget, from Rs. 52,800 crore last year to Rs. 62,659 crore this year but mainly due to Rs. 6,400 crore earmarked for the government's key healthcare scheme — Ayushman Bharat. Budget expenditure for all the programmes supporting nutrition except Reproductive Child Health (RCH) and National Creche programme have increased. ¹⁵There was hardly any mention of healthcare in Union Minister of Finance Nirmala Sitharam's Maiden budget speech of 2019-20. Instead the Finance Minister made a reference to the sector, stating that according to the vision presented in the interim budget, a healthy society would remain an area of attention for the government, which she attributed to factors such as Ayushman Bharat and well-nourished children and women.

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