

POLICY
BRIEF

Improving Social Protection for Children and Women in Maharashtra

Youth for Unity and Voluntary Action (YUVA) And UNICEF-Maharashtra

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ABSTRACT

This Policy Brief provides a summary of the analysis of the on-ground implementation of following five sets of social protection schemes in Maharashtra which are aimed at providing support and protection to children and women during pregnancy, and presents key actionable recommendations to address the gaps that emerge from the analysis:

1. Mazi Kanya Bhagyashree Yojana (MKBY)
2. Bal Sangopan Yojana (BSY)
3. Mission Vatsalya (Support for women)
4. APJ Abdul Kalam Amrut Ahar Yojana (KAAY)
5. Pradhan Mantri Matru Vandana Yojana (PMMVY) and Janani Suraksha Yojana (JSY).

For each of the above 5 sets of schemes, a detailed brief has been developed as part of this 6 part series.

1 Introduction

UNICEF's Social Protection Framework defines social protection as a set of policies and programmes aimed at preventing or protecting all people against poverty, vulnerability and social exclusion throughout their life-course, with a particular emphasis towards vulnerable groups. The idea of social protection that has gained ground in the last two decades comprises following critical elements: a rights-based approach; responsive to shocks; progressive realisation of universal social protection but with emphasis on vulnerable groups.¹ Considering that children, especially girls, are one of the most vulnerable groups, special emphasis is placed on making the social protection framework child-centric and gender-responsive. Among the various stages within a life-cycle, pregnancy and early childhood are considered the most sensitive and rewarding from the point of social protection interventions, both in terms of shielding from negative outcomes and promotion of positive cognitive abilities. Adolescence is the second most crucial stage in terms of development of necessary human capabilities. Maharashtra has adopted several innovative schemes and programmes which directly and indirectly impinge on the well-being of children. A 2016 mapping exercise observed 154 such schemes linked to children.²

This Policy Brief analyses on-ground implementation of six social protection schemes in Maharashtra which aimed at providing support and protection to children and women during pregnancy. These include:

1. Mazi Kanya Bhagyashree Yojana (MKBY)
2. Bal Sangopan Yojana (BSY)
3. Mission Vatsalya (support for women)
4. APJ Abdul Kalam Amrut Ahar Yojana (KAAY)
5. Pradhan Mantri Matru Vandana Yojana (PMMVY)
6. Janani Suraksha Yojana (JSY).

These schemes primarily involve conditional cash disbursements (apart from KAAY). While some of the schemes are centrally sponsored schemes, others are fully funded out of state budgetary resources. Two departments are involved in the implementation of these schemes: Women and Child Development Department, and Public Health Department.

1.1 Approach and Methodology

UNICEF-Maharashtra had undertaken two major reviews of these schemes - one in collaboration with the International Institute of Population Sciences (IIPS) in 2018³, on behalf of the Department of Finance, Government of Maharashtra and the second was carried out in collaboration with the Regional Centre for Urban & Environmental Studies (RCUES) at All India Institute of Local Self Government (AIIILSG), Mumbai in 2021.⁴

This analysis is based on these earlier reviews and on the experiences (gathered through interviews) of the those who have tried to access entitlements under these schemes between August 2021 and September 2022 through the three Social Protection Facilitation Centres (SPFCs) operated by YUVA in three very diverse districts and contexts in Maharashtra: Panvel, Raigad district (urban, peri-urban), Kagal, Kolhapur district (rural) and Chikhaldara, Amravati district (tribal). Interviews were also conducted with the facilitators who assist the applicants in accessing these schemes at the SPFCs. Overall, 20 applicants and 6 facilitators were interviewed from 3 districts about their experience of interfacing with these social protection measures. Through these interviews, a bottom-up and citizen-centric view of the design and implementation of these schemes was sought. While more detailed observations and recommendations have been made for each scheme in separate policy briefs, this overall Policy Brief highlights some major challenges that emerged from our analysis, and makes some actionable recommendations with regards to each of the schemes selected for analysis.

2. Majhi Kanya Bhagyashree Yojana (MKBY)

The previous *avataar* of Majhi Kanya Bhagyashree Yojana was called the Sukanya Scheme, which was started by Government of Maharashtra (GoM) in 2014, with the aim of improving the education and health status of girls, providing financial assistance, preventing female infanticide, generating positive attitude towards birth of the girl child in the society, preventing child marriages and moving towards gender parity in birth rate. In 2016, the Sukanya Scheme was merged with the 'Beti Bachao-Beti Padhao' campaign of Government of India (GoI) and the combined Majhi Kanya Bhagyashree Yojana (MKBY) was launched.⁵ The combined scheme was extended to all families with annual income less than Rs. 7.5 lakhs per year conditional on either of the parents having undergone family planning operation after the birth of one or two girl children. The revised structure of entitlement is shown in the Table below:-

TYPE OF FAMILY	ENTITLEMENTS
FAMILY TYPE 1: FAMILY WITH SINGLE DAUGHTER (AND NO SON) WITH EITHER OF THE PARENTS HAVING UNDERGONE FAMILY PLANNING OPERATION.	RS 50,000 INVESTED IN THE NAME OF THE SINGLE DAUGHTER; INTEREST WITHDRAWABLE AT 6 YEAR-INTERVALS; ACCRUED PRINCIPAL AMOUNT WITHDRAWABLE AT 18 YEARS.
FAMILY TYPE 2: FAMILY WITH TWO DAUGHTERS WITH EITHER OF THE PARENTS HAVING UNDERGONE FAMILY PLANNING OPERATION.	RS 25,000 INVESTED IN THE NAME OF EACH DAUGHTER; INTEREST WITHDRAWABLE AT 6 YEAR-INTERVALS; PRINCIPAL AMOUNT WITHDRAWABLE AT 18 YEARS.

The accumulated amount can be withdrawn when the girl attains the age of 18 years, completes Standard Xth exams, and remains unmarried till then.

2.1 Present Design Challenges

The number of families under the scheme who have been issued Fixed Deposit certificates has grown at a very slow pace: 1,280 in 2017-18 to 1,797 in 2019-20, then dropping to 1,775 during 2020-21 and 2021-22,⁶ which indicates very limited reach of the scheme. The two reviews undertaken by UNICEF and the interviews conducted with the beneficiaries point to several aspects of the scheme design and implementation which are limiting the access to the scheme.

Eligibility Criteria: The criteria of undergoing family planning operation within 1 year for single girl child and 6 months for two girls, has emerged as a major obstacle since doctors recommend waiting for longer periods than required under scheme and even the parents also prefer waiting for upto five years. The income limit is prohibitive for families in urban areas. Additionally, the condition of “no sons in the family” also leads to wide exclusion.

Awareness and Publicity: Very limited publicity has been provided to the scheme, and hence there is scant awareness about the scheme among the target groups.

Delay in Disbursements of Entitlements: The parents we interviewed highlighted that there was considerable delay in issuance of the Fixed Deposit (FD) certificate. The 2018 review by UNICEF and IIPS had found that only one-fourth of the registered beneficiaries had been issued the FD certificates.

2.2 Actionable Recommendations

1. **Revision of Eligibility Criteria:** Considering that the Total Fertility Rate (TFR) for Maharashtra has come down to 1.7 as per National Family Health Survey V (2019-20), the requirement of family planning operation can be completely done away with.⁷
2. **Increase in Entitlements:** The scope of the scheme can be expanded to include not just attainment of gender parity in terms of birth rates, but also parity in terms of education (and not just literacy) levels. To this end, the scheme amount can be doubled to Rs 1,00,000 for each girl child (in case of two daughters) and Rs 1,00,000 (in case of 1 daughter),

along the lines of the Bhagyashree scheme of the Government of Karnataka.

3. **Awareness and Publicity:** Improved IEC activities and publicity campaigns are required to spread awareness about the scheme. Involvement of panchayats and NGOs can be given priority.

3. Balsangopan Yojana (BSY)

Bal Sangopan Yojana was launched by the Government of Maharashtra in the year 1995, aimed at children (up to 18 years of age) in crises, as an alternative to institutional care, with the aim of providing them a non-institutional, nurturing family-like environment in the form of foster care along with social assistance in the form of educational support. In 2013, the ambit of the scheme was expanded to include children of single parents or parents who are unable to take care of the children; children in crisis-ridden families and school-dropouts/child labour.⁸ As per the revised norms (2021) under the scheme⁹ and the additions made to it in the context of COVID-19 (2021)¹⁰, **children orphaned (both parents not alive) due to COVID-19**, whether residing in care of relatives or institutions, are provided a lump sum term deposit of Rs. 5 lakhs (with interest on completion of 21 years of age); a monthly support grant of Rs. 1100; assistance for education up to 18 years of age. The term-deposit component has been effectively discontinued because of lack of funds, although it has not been officially withdrawn. **Children orphaned for other reasons** are provided a monthly support grant of Rs. 1100. The NGOs/voluntary organisations which bear the responsibility of monitoring the well-being of children placed in non-institutional care by making bi-monthly visits to children placed under non-institutional care are provided Rs 125/- per child. The grants to the NGOs have been capped at 100 children per NGO. The number of children enrolled under BSY increased from 15,887 in 2011¹¹ to 18,000 in 2013¹² and then showed a decline to 17,394 in 2015-16; 13,089 in 2017-18;¹³ 12,961 in 2020-21, which increased to 38,641 in 2021-22¹⁴ because of the revision in the scheme.

3.1 Present Design Challenges

3.1.1 Non-Institutional Foster Care

The 2018 review of the scheme¹⁵ noted considerable delay in transfer of the support amount as a serious shortcoming of the scheme. The 2021 review of implementation of the scheme in Mumbai conducted in the context of COVID-19 cited the restriction placed

on the number of children for which the NGOs can receive grants and the inadequacy of the grant itself (in comparison with the tedious process of enrolment, verification and maintenance of records), as the reason why more NGOs are reluctant to become part of the scheme, and why the coverage of the scheme has not shown improvement.¹⁶ Additionally, the review also revealed that the scheme also suffered from lack of attention and allocation of resources within the department.

3.1.2 Social Assistance

The caretakers interviewed were all women (mothers or grandmothers) who were struggling to make ends meet on their own because of low levels of their earnings. Several challenges faced by the target groups in accessing the scheme were also highlighted during the interviews.

Awareness and Publicity: Firstly, the awareness about the scheme is limited, and in absence of facilitation by NGOs, most of the interviewees wouldn't have come to know about the scheme.

Application Process: Secondly, the applications for the scheme need to be submitted to the district office (for COVID deaths) or *tehsil* office (for non-COVID deaths) and then the follow-up in case of delays or non-response is also required to be done at the district office, which makes it difficult as well as costly for the applicants (guardians or single parents in most instances) to track the status of applications.

Delay in Disbursements of Entitlements: The delay in disbursements of entitlements, as highlighted by previous reviews, continues to undermine the objectives of the scheme. The average time taken for verification of documents, sanction of applications and commencement of monthly grants was reported to be 3 months. In some areas, for example in Amravati district, all the 50 applications filed between January-April 2022 under the scheme remained pending.

Eligibility Criteria: Certain parameters of the scheme also restrict the eligibility pool of the scheme too narrowly and are also perceived to be inadequate in comparison to the increasing needs of the child-in-care. The annual income limit for the scheme is observed to be

too low (at INR 21,000 per year) which excludes several families who desperately need such support.

Extent of Entitlements: With increase in the age of the child, the monthly grant amount becomes insufficient for meeting even basic educational expenses. Currently the monthly payment is made till the age of 18 years which means that the responsibility of higher education would have to be borne solely by the single parent or the guardians, which can be a challenge for most of them.

3.2 Actionable Recommendations

1. **Increase in Coverage of non-institutional care:** To ensure the involvement of a greater number of NGOs in the non-institutional care component of the scheme, the grants given to the NGOs should be increased.
2. **Expediting Disbursements of Entitlements:** The average time taken for the process (verification, sanction and commencement) should be brought down to less than 1 month. In addition to the paper-based applications, an online system of accepting and tracking status of the application should be made available.
3. **Increase in Entitlements:** The monthly grant amount should be revised upwards with an increasing sum being fixed for increasing age brackets. The possibility of continuing the monthly payment till at least the undergraduate-level degree education of the child should be considered by the government.
4. **Revision of Eligibility Criteria:** The annual income limit for the scheme should be raised to INR 50,000 for children being raised by single parents and INR 2,00,000 for children being raised by guardians.

4. Mission Vatsalya

Mission Vatsalya was launched by the Government of Maharashtra in August 2021 in the context of the impact on children (who lost their parents) and on single/widowed women (who lost earning male members of their family) of loss of lives because of COVID-19. The objective of Mission Vatsalya was to facilitate access to existing schemes, which single/widowed women may find difficult to access. Based on the concept of “Government at your doorstep”, direct visits are paid to single/widowed women and orphans at their homes and assistance is provided in applying for various welfare schemes of the government¹⁷ including support in accessing necessary documents for availing the welfare schemes.¹⁸ When the scheme was announced in August 2021, there were estimated 15,095 women who had lost their husbands due to COVID-19.¹⁹ Subsequently, the Supreme Court directed governments to provide *ex-gratia* payment of Rs 50,000 to families who lost members due to COVID-19. This amount was to be paid in addition to *the amounts paid by centre and state under other schemes*.²⁰ As per the directions, the amount was to be paid within 30 days of the submission of the application.

4.1 Present Design Challenges

The publicity provided to the scheme through newspaper advertisements and mobile messages has helped in creating awareness about the scheme and its processes and entitlements.

Adequacy of Entitlements: From the interviews conducted, it emerged that most families had incurred substantial expenses during the treatment of the deceased member, and some had even borrowed money to pay for the treatment. Even in cases where the deceased adult member of the family underwent treatment in government facilities, the family has ended up spending over a lakh rupees on the treatment. For these families, the scheme provides relief that they desperately require. But the current *ex-gratia* payment is insufficient even to cover the cost of treatment, and barely compensates the family for the loss of an adult member.

Application Process: While the applications for the compensation can be filed online, there is presently no way to track the status of the applications and one needs to go to the district office for this.

Delay in Disbursement of Entitlements: In many instances, the payment of the compensation after the submission and acceptance of documents is being delayed by several months. This is in violation of the directions issued by the Supreme Court.

Need for Livelihood Support to Single/Widowed

Women: In several instances, the deceased male member of the family was also the sole earning member. The surviving female adult members have to now bear the sole responsibility of providing for the family, and to fulfil this, they usually take up lesser-paying, unskilled or semi-skilled work. Hence, there is a need to include facilitation of skill-development training and livelihood programmes in the range of schemes being facilitated under the Mission.

4.2 Actionable Recommendations

1. **Improvement of Application Process:** The online application process for availing *ex gratia* payment should also have a public interface where the applicants can check the current status of their applications.
2. **Expediting Disbursements of Entitlements:** The entire process after the submission and acceptance of documents should be completed and compensation amount should be disbursed within a period of one month as laid down by the Hon'ble Supreme Court in *Gaurav Kumar Bansal vs Union of India & Others* (WP 539/2021).
3. **Increase in Entitlements:** Increase in the *ex gratia* amount needs to be increased to at least Rs 1 lakh, inline with the amount being offered by many other state governments.
4. **Livelihood Support:** Employment support including skill development training should be included in the list of schemes being facilitated as part of Mission Vatsalya to support skilled employment for surviving single women.

5. APJ Abdul Kalam Amrut Ahar Yojana (KAAY)

APJ Abdul Kalam Amrut Ahar Yojana (KAAY) was introduced by the Government of Maharashtra (GoM) in the year 2015, with the objective of providing adequate nutrition to pregnant women, lactating mothers and children to reduce malnutrition, maternal and infant mortality and low birth weight in scheduled and tribal-dominated areas. The scheme is being implemented through 85 ICDS projects across 16 districts. Under the scheme, pregnant women and lactating mothers (of all communities) residing in designated areas, are provided a cooked meal during afternoon (in place of Take Home Rations being given earlier) at the nearby *anganwadi* centres for a period of 12 months (6 months before delivery and 6 months after pregnancy). The scheme is significant because of following two improvements over the ICDS programme: the diversity of the meals being provided (which includes cereals, pulses, green leafy vegetables, boiled egg and peanut *ladoo*/soya milk) and a much higher unit cost per meal, as compared to the unit cost under ICDS programme for Take Home Rations for pregnant women and lactating women (Rs. 9.5). The unit cost under KAAY was Rs. 25 per meal in 2015,²¹ which was revised to Rs. 35 per meal in 2018.²² The number of women enrolled under the scheme increased from 127,695 in 2020-21 to 139,531 in 2021-22.²³

5.1 Present Design Challenges

The 2018 review of the scheme found that the existing mechanism of funds transfer was leading to delays in availability of funds with the *anganwadis*, which made it difficult for the Anganwadi *sevikas* to continue providing the services.²⁴ Additionally, the review highlighted the lack of suitable mechanism to monitor the delivery of services under the scheme.

Denial of Service: During our interviews, the women availing the services under the scheme reported that the *anganwadi* staff would often close the centre and deny the meal to the registered women without any

notice or reason. Complaints made to supervisors and through helplines have not been effectively redressed. Additionally, even when meals are provided at the centre, the provisioning of protein-based items in the meal (boiled eggs and peanut *ladoo*) is highly irregular. This was partially attributed to the delay in transfer of funds to *anganwadis*. In part, this could also be because of corruption and leakages in the system, both of which require effective monitoring and supervision of the scheme.

Quality of Meals: The interviewees also reported that the food was not very palatable (attributed to inadequate usage of spices and oil) which leads to non-consumption and wastage of food provided, especially pulses and vegetables.

5.2 Actionable Recommendations

1. **Monitoring and Supervision:** The monitoring and accountability mechanisms under the scheme require strengthening. Regular feedback should be taken from the beneficiaries regarding whether the meals and all the mandatory food items are being served regularly or not. Helpline numbers should be publicised prominently and complaints received should be dealt with effectively.
2. **Expediting Fund Release:** The fund release mechanism for implementation of the scheme needs to be simplified to ensure that funds reach the *anganwadis* well in time for them to be able to procure the provisions required for effective delivery of the services under the scheme.
3. **Improvement in Meal Quality:** To address the palatability of the food being provided, apart from ensuring adequate provisioning of ingredients like oils and spices, more diversity can be brought in the vegetables being used, by including locally available varieties.

6. Pradhan Mantri Matru Vandana Yojana (PMMVY) and Janani Suraksha Yojana (JSY)

The National Food Security Act (NFSA), 2013 guarantees to all pregnant women and lactating mothers, maternity benefits of *not less than Rs 6,000*, except for those in regular employment with government institutions or already receiving such benefits.²⁵ This maternity entitlement is aimed towards providing partial compensation for wages lost during pregnancy to ensure that women take adequate rest during the pregnancy period.

This provision of the NFSA 2013 was operationalized by replacing the existing Indira Gandhi Matritva Sahayog Yojana (IGMSY) with the Pradhan Mantri Matru Vandana Yojana (PMMVY), which was rolled out in 2017. But PMMVY restricts the entitlements guaranteed under the NFSA. Firstly, the benefits have been limited to the birth of the first child only (born after January 1, 2017),

while the Act doesn't provide for any such restriction. Secondly, the amount under the PMMVY has been fixed at Rs 5000 only, and the shortfall is sought to be made up through cash incentives under Janani Suraksha Yojana (JSY).²⁶ For this reason, PMMVY and JSY have been considered together in this Brief, despite both the schemes having different objectives, eligibility criterion, incentive structures and implementation mechanisms. Under PMMVY, the total cash assistance of Rs 5000 is disbursed in three instalments of Rs 1000 (on registration of pregnancy), Rs 2000 (after 6 months of Pregnancy on completion of at least one ante-natal check-up) and Rs 2000 (Completion of Vaccination post-birth of child and registration of birth).

Janani Suraksha Yojana was launched in 2005 as a 100% centrally sponsored scheme to incentivize institutional deliveries with the aim of reducing maternal and neonatal mortalities.²⁷ In Maharashtra pregnant women above 19 years belonging to BPL economic category or to Scheduled Caste (SC) or Scheduled Tribes (ST) groups are eligible for following cash assistance for up to 2 live births:-

DETAILS OF DELIVERY	RURAL AREAS	URBAN AREAS
DELIVERY IN GOVERNMENT HEALTH INSTITUTIONS OR ACCREDITED PRIVATE HEALTH INSTITUTION	RS 700/-	RS 600/-
IN CASE OF HOME DELIVERY	RS 500/- (FOR BPL WOMEN ONLY)	
IN CASE OF C-SECTION	RS 1500/-	

These entitlements are to be disbursed preferably just after the delivery at the institution itself or within 7 days of the delivery.

6.1 Present Design Challenges

Apart from the two reviews undertaken by UNICEF, a concurrent evaluation of PMMVY was also carried out with IIPS on behalf of Niti Aayog in 2019.²⁸ The observations and recommendations in this Brief draws from all these three appraisals as well the experiences of those who have availed of these schemes.

Eligibility Criteria: As the description of the eligibility criteria and the cash support provided under PMMVY and JSY reveals, the combination of these two schemes do not meet the mandate of NFSA Act 2013. Firstly, even if a pregnant woman receives entitlements under both the schemes, the amount doesn't add up to Rs 6000. Secondly, since the eligibility norms under JSY are much narrower (BPL and SC/ST women) than that prescribed by NFSA Act, not every woman entitled to maternity benefit under NFSA is eligible for entitlements under JSY.

Documentary Requirements: The process laid down for availing benefits under the two schemes, especially

under JSY (BPL card or SC/ST Certificate) creates several hurdles. Often women don't have bank accounts in their names which is a mandatory requirement for DBT transfer under both schemes. Names of several women are often not included on the BPL cards of their husband's family, so they are unable to apply for JSY benefits. In case of SC and ST applicants, the certificates of pregnant women often have their pre-marriage names but the scheme insists on certificates with post-marriage names. The cost of opening bank accounts or changing names on the certificates or making a new one, often exceeds the entitlements, especially under JSY.

Awareness and Publicity: The primary channel of awareness and information about the schemes is the ASHA worker, followed by AWW or ANM. Because of the low level of cash assistance being provided under JSY, the scheme is being sidelined in the process of implementation by the Health Department, since more focus is being given to PMMVY, with a target-driven approach being adopted for the latter.

Delay in Disbursement of Entitlements: Both the schemes, especially the PMMVY, are plagued with inordinate delays. Based on our interviews, there is an average delay of 2-3 months in receiving the instalments under PMMVY.

Extent of Entitlements: With institutional deliveries, the out-of-pocket expenditures have also increased, much beyond what is being compensated by the combined cash entitlements under PMMVY and JSY. Our interviewees, for example, reported having to travel 7-15 kms from their residence to the hospital, for check-ups as well as the delivery. Along with this, there are expenses on diagnostics and other hospital expenses, which are compounded in the case of caesarean deliveries which have become the most common form of deliveries now. Most families we interviewed reported that they were meeting these expenses through personal borrowings, which eventually forces women back to work prematurely to pay back the loans. Hence, there is a need to increase the entitlements under the two schemes.

6.2 Actionable Recommendations

1. **Convergence between PMMVY and JSY:** There is an urgent need to achieve convergence between PMMVY and JSY to come up with an umbrella scheme. The combined cash entitlements under the umbrella scheme should be revised to Rs 10,000 keeping in mind that the minimum floor under the NFSA was set over a decade ago. To ensure that the NFSA Act is implemented in its true spirit, the entitlements under this umbrella scheme should not be limited only to the first birth, and should be granted for all pregnancies.
2. **Expediting Disbursal of Entitlements:** Disbursal of the cash incentives should be ensured within one week of submission of documents.
3. **Documentary Requirements:** Opening of bank accounts should be facilitated by the ASHA workers, both at the health facilities where the pregnant women come for ANCs or at the location of their residence. The husband's BPL card should be considered for the scheme even if the wife's name is not there on the card. Alternative documents which are more easily obtainable like marriage certificates issued by *panchayats* which mention the caste category of the applicant should be accepted.

7. Way Forward

The assessment of schemes carried out here in the light of previous reviews and the experiences of the entitlement-holders during the pandemic and post-pandemic months points to some common implementable actions. Firstly, as the previous mapping exercises have demonstrated, achieving convergence of different schemes impinging on children and women during pregnancy and child-care, which were commenced at different points in time, by both the State and the Union government, can pay rich dividends in terms of greater efficiency and stacking of benefits. Common trigger points for enrolment of women and children to integrated social protection programmes can be identified to achieve wider coverage. The process of convergence would also require coordination between different various departments and levels of the government. Secondly, a revision of entitlement amounts is needed in light of the vast change in the magnitude of economic vulnerability and shocks that these schemes seek to protect the target groups from. Finally, because of issues like lack of information; difficulty in getting documentation; complicated nature of application process; uncertainty in receipt of entitlements and delays in disbursements of entitlement amounts, last mile access is an area of sincere concern. Concerted efforts at simplifying processes, greater efforts at publicity and awareness, and greater role for elected bodies like *gram sabhas* and non-governmental organisations as facilitators, are some of the steps which can address some of the teething last mile problems.

Endnotes







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22. Department of Tribal Development, Government Resolution No. AaViVi-2018/Pra.Kra.4/Karyasan-8 dated 22 June 2018.
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