

Women Plays a Vital Role in Development

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"I am quite convinced that in India today progress can be and should be measured by the progress of the women in India"

Jawaharlal Nehru

India - An overview

India is the second most populous country in the world; 120 million women live in poverty. Over 70 percent of India's population - livelihood from land resources.

Rural scenario

Population increased, Sex ratio decreased, Literacy gap, Child labour, Child Marriages and 65% hidden hunger among women and children. As per National and Regional Survey, prevalence of anemia 74% in children below 3 years of age, 85% in pregnant mothers, 90% among adolescent girls.

Maternal mortality

India's maternal mortality rate in rural areas highest in the world.

Antenatal care only 40-50 % of women, pregnancy related deaths- one-quarter of all fatalities. 92 % of women suffer from one or more Gynecological disorders. Most vulnerable sections are adolescent girls, Pregnant and lactating mothers, under weight children under five. Factors effecting are working conditions result in premature and stillbirths, Impact of air and water pollution and lack of sanitation.

Receive far less education than men; largest population of non-school working girls. Literacy rate and Encouragement to private colleges will reduce women's opportunities for higher education.

India is a strategic player in the world in the food sector

Is the second largest producer of fruits and vegetables next to China, Second largest producer of wheat, Third largest in food grains (210 million tonnes). Largest exporter of cashew nut in the world. Fifth largest producer of eggs, largest producer of milk.

Factors effecting women's progress

The invisibility of women's work (Women's work is rarely recognized) the impact of technology (The shift from subsistence to a market economy has a dramatic negative impact on women). Other factors such as Violence against women, Women are Powerless, Child Marriages, Dowries, Divorce, Inheritance, Contraceptive Use and Selective Abortions.

Gender welfare programs

1st to 5th Five -Year Plan (1951-1979) Welfare Approach.; 6th Five -Year Plan (1980-1984) Welfare to Development. DST starts the scheme "S&T for Women" (1981); 7th Five - Year Plan (1985-1989) Department of Women and Child Development setup (1985) Nodal Department; 8th Five -Year Plan (1992-1997), National Commission for Women setup (1992), Women Development Corporation setup in states; India ratifies the Beijing declaration (1995); 9th Five - Year Plan (1997-2002); Development to empowerment, Women Component Plan adapted ensures not less than 30% funds are earmarked for Women related activities in all Ministries. Scheme on Biotechnology Application for Women setup by DBT. Women Empowerment Year celebrated - 2001; 10th Five - Year Plan (2003-

2007) S&T Policy 2003 released by Ministry of Science and Technology Scholarship Scheme for Women, Scientists launched Women Scientists Cell setup at DST.11th Five-Year Plan (2007-2012) Lower gender gap, reduce infant mortality rate, reduce maternal mortality rate, equal access to women to health care, education and vocational guidance.

Economic growth in India has failed nutrition

At current rates India will not meet the millennium development goal until 2043. China, Brazil, Thailand & Vietnam have reduced child under nutrition.

Reducing malnutrition is not just about health, agriculture and economics but it also accounts for politics, Governance and power.

Micronutrient malnutrition is a serious public health problem. Cost of Treating Malnutrition is 27 Times More Than the Investment required for its prevention.

Food wastage

The annual wastage of agricultural produce is almost 30% and equivalent to Rs. 580 corers (Due to inadequate storage and processing facilities).The wasted food could feed almost 232 million people. Food technology can directly contribute to food security through enhancement of nutrient density. Establishment of tiny and cottage – Scale for processing industries in rural areas would help to empower rural women which contribute livelihood security.

Global prevalence of hidden hunger

People in 33 countries consume less calories than required (840 million people as per FAO) 799 million live in developing countries. Food insecurity is due to access and distribution.

Paradigm shifts required in the wake of WTO

Productivity to Profitability, Subsistence to Commercial agriculture, Commodity oriented to Farming systems, Local market to Export-oriented, Monocropping to Crop diversity, Exploitative to Sustainable agriculture, Supply driven to demand driven production, Green revolution to Evergreen revolution, National food security to House hold food security, General Technology to Precision technology, Production revolution to Quality revolution and External inputs to On-farm inputs.

Unhealthy life styles

WHO and World Economic Forum reviled India will incur an accumulated loss of \$236.6 billion by 2015 on account of unhealthy life style and faulty diet.

Changing needs of the rural families

Information Empowerment, Alternate livelihoods for sustainable income, Capacity building for adoption of cost effective technologies, Motivation for effective utilization of all the developmental and welfare programmes, Skill up gradation for storage of foods with suitable value addition, so that they can be used/marketted during lean periods.

Several programs

National Nutrition Policy (1993), National Nutrition Plan of Action (1995), National Nutrition Mission (2001).

Not at achieved nutrition goals because Nutrition is a poor cousin even in health and agriculture planning and execution, Nutrition improvement is not a stated goal with measurable parameters in National Food Security Mission, National Horticulture Mission and National Rural Health Mission.

The Most important National Nutrition Programmes in India are Integrated child Development services program (ICDS). The targeted public distribution system (TPDS), Food for work, The National Mid, Day meals program (NMMP), Micro nutrient (Iron folate; Vitamin A; Iodized salt) schemes.

Action Plan: Reform of the Delivery System: Restructure the delivery systems relating to all nutrition support programme on a life cycle basis, starting with pregnant women and 0-2 infants and ending with old and infirm persons.

Current status of interventions

Community Food Security Systems, Designing and introducing a Food Guarantee Act, Every Village a knowledge centre, Convergence and Synergy among Public, Private and Academic Sector initiatives, Decentralization, Global dimensions of micronutrient deficiencies, Supplementation, Bio-fortification, Dietary Diversification.

S No.	Stage of Life Cycle	Intervention/Action
1	Pregnant Mothers	Food for Nutrition to avoid maternal and fetal mal and under nutrition resolution in LBW children.
2	Nursing Mothers	Support needed for breast feeding for at least Six months
3	Infants (0-2 years)	Not being reached by ICDs
4	Pre-school Children (2-6 years)	Integrated child development services
5	Youth going to school (6-18 years)	Noon meal programmes
6	Youth out of school	Not being attended to
7	Adults (18-60 years)	Food for Eco-Development (Sampoorn Gramin Rozgar Yojana), PDS, TPDS, Antyodaya Anna Yojana
8	Old and Infirm persons	Annapurna and Food for Nutrition Programmes
9	Emergencies	Food during natural calamities

Factors for success

Increased food collaboration and political commitment, Incorporating nutrition in Former Field Schools (FFS), FAO's overall policy to improve Nutrition. Complimentary public health interventions that can help reduce micronutrient malnutrition including de-worming, Malaria prophylaxis, improved water and sanitation facilities and childhood immunization. Holistic strategies using mixture of direct and indirect interventions and public health measures as well as education and awareness campaign have proved to be the best successful in reducing micronutrient malnutrition.

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