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## THE TALE OF THE MISSING GIRLS:

# EXPLORING THE CHANGING ORIENTATION OF THE TRADITIONAL DEVELOPMENTAL FACTORS IN DETERMINING THE DECLINING JUVENILE SEX RATIO: A MICRO-LEVEL ANALYSIS OF PUNJAB STATE, INDIA

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Abstract: One of the key and unusual demographic features of Punjab is its sharply declining Juvenile Sex ratio rationalized by strong cultural preference of sons over daughters. The present study econometrically attempts to capture the changing role of the traditional developmental outcomes in determining the declining juvenile sex ratio under the light of modern regime of pre-natal sex-selection with the help of Census 2001 data. Analysis show that traditional developmental factors like female literacy or female workforce participation has a negative effect over child sex ratio as the decision making power of the females in the villages is highly dependent upon their male counterparts who are not enough literate. Spatial factors like proximity to towns have also a significant negative effect on rural child sex ratio as more exposure to the clinics for sex selection are available at towns. Availability of public goods like secondary schools or community health workers at the village level plays important role in determining the growth of juvenile sex ratio in the villages of the state. However, due to lack of awareness, misuse of some of the public goods are evident as the presence of primary health centres in the villages show statistically significant negative effect over juvenile sex ratio, which are often used as centres for sex selection. The study also traces out the fact that the selective treatment of the girl child is much lesser within the scheduled caste population rather than the people of the higher castes, showing the evidence of strong vertical segregation.

# **INTRODUCTION**

A key and unusual demographic feature of India is an imbalance in the sex ratio. The ratio of females to males has been steadily declining for much of the last century. The juvenile sex ratio i.e the ratio of females to males aged 0–6 years has been declining even more sharply which is assumed to be a better indicator of social response and attitude towards the girl child. This decrease would perhaps have a cascading effect on population over a period of time leading to diminishing sex ratio across the country. While most countries around the world have a small imbalance in their juvenile sex ratios for biological reasons i.e., there is a biological tendency for more male than female babies to be born to compensate for the slightly higher risk of mortality among newborn boys, the imbalance in India is acute, and is indicative of prenatal selection and excess female infant and child mortality. This in turn reflects a strong cultural preference for sons over daughters and the problem of 'missing females' (i.e., unborn girls) becomes inevitable. The present study tries to draw light upon the determinants of this increased masculinity in child population of rural Punjab particularly under the newer regime of sex selective abortions.

# THEORETICAL FRAMEWORK

Diversities in sex ratio patterns occur along economic, social, regional, and cultural dimensions. However, the strongest determinant in this regard is the cultural factors of a region, which necessarily fixes the fact that whether sex selection is *socially acceptable*, and why the birth of a son should be perceived as being more advantageous than that of a girl. According to Coale (1973), three preconditions needed to be met in order for birth rates to fall towards male children; birth limitations had to be within the 'calculus of *conscious choice*' for parents, it has to be *advantageous* to them, and it has to be *feasible*.

Therefore the Rationale behind Sex Selection is of twofold:

• Economic Rationale involving two main facets

- i. Cost factors entail extra burden incurred in rearing a girl child related to protective efforts and dowries
- ii. The Expected Economic Support assumed from the girl child is lower in future i.e. lower opportunity costs.
- Symbols and Traditions as sons are vital to continue the family lineage (gotra) in the patrilineal society.

# JUVENILE SEX RATIO TRANSITION IN PUNJAB

In the light of the theory of sex selection mentioned above, the present study attempts to show how some of the determining factors, both structural and policy variables, are likely to influence the circumstance of sex selection. It is clearly seen from many works (Croll, 2000 Attane and Guilomoto 2007, Agnihotri 2000) that the juvenile sex ratio transition in North West India has undergone the complex discourse of a host of factors in different regimes:

- Old Regime of neglect to the female child and infanticide.
- The New Regime (from the 1980s) comprising of two processes:
  - i. Pre-natal sex determination and Sex-selective abortion through the use of modern techniques which are more efficient
  - ii. Selective use of contraceptives for birth control depending upon the sex of the existing child: called the Intensification Problem.

Based on the above theoretical background, the present study enquires the changing role of social, economic and cultural determinants in the dynamics of juvenile sex ratio through the modern regime. The main question enquired in the study is how and to what extent the value of the traditional developmental outcomes have been changed under the modernizing transition of sex selection, and thus, declining juvenile sex ratio at the villages of Punjab.

The sole objectives of this paper basically pertain:

- To trace out the levels and spatial variation in Juvenile Sex Ratio at the micro level.
- To look into the major determinants affecting Child Sex Ratio and the associated horizontal and vertical diffusion of the innovative behavior gearing sex selection.
- To enquire which kind of social, economic and cultural policy variables are responsible for spatial heterogeneity across the villages in terms of Juvenile Sex Ratio and to suggest some policy implications for the regional backwardness.

#### **METHODOLOGY**

In the analytical framework used in the present analysis (Figure 1) factors are distinguished at four different levels and the present section deals with the selection of indicators under those heads.

i. Selection of Indicators for Knowledge, Awareness and Workforce Participation

As the role of female literacy and workforce participation seemed to be increasingly important in terms of traditional developmental significance and the changing adaptation of modern techniques of sex selection, the female literacy rate and the female workforce participation rate have been taken as the two most crucial indicators under this head. Moreover, as the role of male literacy cannot be overlooked, it is taken as another indicator to portray the actual decision making authority by the females in a patriarchal society.

ii. Selection of Indicators for Externality

In order to trace out the degree of horizontal diffusion of modern techniques across space, average distance from the towns and the communication facilities are taken into consideration. The proximity to towns, as mentioned before, smoothens the transfer of modern techniques more ef-

ficiently to the villages. However, availability of bus stops, which is a proxy indicator of transport and telephone connection for communication have been taken as another variables.

# iii. Selection of Indicators of Accessibility

The accessibility to infrastructure have been discussed under two broad heads, a special emphasis have been given to the availability of health infrastructures separately than other infrastructures, keeping in view the immense importance of them in determining child health and mortality. However, to portray the availability of public health infrastructures, percentage of villages having primary health centers within 5 km. of their radius have been taken into consideration, as these PHCs provide most elementary level of health care facilities in rural India. However, percentage villages having community health workers have been taken as another important indicator, which signifies the extent of Government initiative to spread health and family planning awareness among the rural women, especially the pregnant women. However, as the public health facility in rural India is not satisfactory in terms of quality and coverage, a sizeable portion of rural area are covered by registered medical practitioners. Hence, the percentage of villages entitled with such practitioners has been taken into consideration.

The infrastructures pertaining to education are one of the important factors to portray the general education profile of the village. In this regard, the percentage of villages entitled with a primary school and at least one secondary school within 5 km. of their radius have been taken into consideration. Moreover, availability of tap water facilities, which is assumed to be the purest source of drinking water, is taken to show the levels of physical infrastructure present in a village.

#### iv. Selection of Indicators for Income and Vertical Diffusion

As the data on income or consumption at the village level for individuals is not available, the percentage of agricultural laborers has been taken as a proxy for portraying the income differentials within villages. However, proportion of scheduled caste population has also been considered to show vertical diffusion as Punjab is regarded as one of the most highly SC dominated state in India.

To have a clear picture child sex ratio at the village level, the villages are grouped into five quintile classes. There are total 12125 inhabitable villages in Punjab, among whom some are rejected which portrays abnormally high JSR, primarily due to over enumeration caused by larger variations in village size. The villages are arranged in a descending manner on the basis of child sex ratio i.e. Village with highest child sex ratio has given rank 1 and the village with lowest sex ratio has given rank 10500. Therefore there are 2100 villages in each quintile. Bivariate analyses like Pearson's Product moment correlation have been taken into consideration in order to show the association between juvenile sex ratio and indicators under different heads. Instead of making any composite index, which often hides important variability in the indicators at the micro level due to its weighting criteria, Crosstabs have been formulated to portray the progressive relationship between JSR at each quintile class and the value of the indicators belonging to that class. A separate multivariate model have also been constructed to see the net effect of all the concerned factors over JSR and to predict the observed relationship.

#### **DISCUSSION**

Cross Sectional Analysis of Juvenile Sex ratio

The tehsil wise variation in Juvenile Sex Ratio (Figure 2) clearly shows a broad regional pattern in which the central tract comprising Firozpur, Moga, Faridkot, etc record better situations in comparison to its northern and southern counterparts. The sharp decline in JSR values towards the districts adjoining Haryana namely Ludhiana, Fatehgarh Sahib, Sangrur, Rupnagar (in the

south east) indicates a strong evidence of spatial diffusion of cultural preference for sons and daughter aversion on the other. It could be clearly noticed (Table 1) that the districts of Hoshiarpur, Gurudaspur, Kapurthala record high variability in JSR where a substantial proportion of villages record both in the top and bottom JSR classes. However for Faridkot, Muktsar, Moga, Firozpur, etc wherein villages have a high concentration in the topmost quintile the gap between the top 20% and bottom 20% is quite high and hence the variability is also low. These are the districts which pinpoint towards a better scenario in average Child Sex Ratio patterns occupying the south western fringe of Punjab lying at the cross border junctions of Pakistan in its west and Rajasthan to the south where influences of cross border immigration and exchange of cultural value systems takes place thereby improving the child sex ratio. On the other hand the districts of Fatehgarh Sahib, Kapurthala, Sangrur, Mansa, Patiala, etc. records more number of villages in the below 20% quintile (Figure 3), the highest gap being that of Fatehgarh Sahib. All these districts are located in the vicinity of Haryana state which culturally follows a rigid pattern manifested towards the neglect of girl children who are basically treated as economic burden due to widespread prevalence of dowry system originating from the cultural roots of the society later taking shape in economic terms.

Emperical Evidence of the Underlying Determinants

Knowledge, Awareness and Workforce Participation

Traditional approach shows female education has more powerful influences on gender bias in fertility as educated women have greater decision making power over their male counterparts. Educated women also have less dependency on their sons for old age security. In Punjab, exactly opposite relationship is ascribed to greater awareness among the literate mothers regarding modern techniques of sex selection (Table 2a). Therefore, the role of male literacy is important (statistically significant at 1% level), as it might lead to provision of actual decision making power to their female counterparts to bear a girl child (Table 2b). The association of Female WPR is not strong with JSR due to the absence of gainful employment. In fact an inverse relationship (Table 2a) exists between them (statistically significant at 5% level). Male literacy also assumes a paramount role in female WPR. In the Second quintile itself (Table 2a) it is found that male literacy tend to have a positive impact upon female WPR rather than female literacy which is in absolute terms is undergoing a decline.

Accessibility to Basic Infrastructure and Health facilities

Secondary schooling facilities seem to have most notable positive association with JSR (Table 3b) as it provides a considerable level of gainful education. Association of primary health centre with JSR is negative, which indicates as basic source points for the performance of sex selection tests in the name of birth control, in spite of the implementation of the PNDT act. Significantly negative association can also be found in the case of registered private medical practitioners. Weak Government regulations of the entire private health sector in Punjab have created significant unevenness in the quality of these doctors, who are constantly engaged into the illegal business of aborting female foetus in rural areas. Community health Workers (CHW), also referred to as village health guides, is meant to provide preventive care and outreach services to rural households. In Punjab the distribution of CHW is very low and rare, the top quintiles enjoying more than the bottommost quintiles (Table 3a). So positive associations exist, the JSR condition improves as the number of CHWs also increases. Contaminated water poses one of the most significant risks to child health in India. A positive correlation (Table 3b) may be obtained from percent of villages having tap water facilities and JSR. Recently, in Punjab the local Governance has played an active role in situating taps providing clean fresh supply of water in the villages.

But the distribution is more confined to the middle quintile villages (highest in the second quintile) which show a positive impact upon its JSR.

Horizontal Diffusion through Externality

The factor of externality depicts the fact that how and to what magnitude the role of space matters in consecutive decline of JSR in rural Punjab. However, the recent most paradigm of sex selective abortion, as already noted is ascribed to higher publicity and advertising agencies by the providers. However, the private health care services are the stronger agencies than the public sector in this regard, which are more accessible in the towns rather than the villages or in those villages which are in proximity to the towns. Such a factor often leads to a 'Distance Decay Effect' on JSR (Figure 4), which is also evident from the significantly positive relationship between the average distance to town and JSR (Table 4b). The other additional indicators used in the externality determinants such as villages having accessibility of at least one phone connection, bus facility and access to newspaper and magazines are basically used as proxy indicators in a way to understand the availability to utilize the sex selection as various media to fulfill their required purpose. All of them show a positive statistically significant relationship at the 5% level indicating a direct relationship between them. As the scope of communication to a town increases, the JSR gets all the more worsened (Table 4a).

Income and Vertical Diffusion

Correlation co-efficient calculated between JSR and proportion of agricultural labourers (taken as a proxy of poverty) is -0.233, significant at 1% level. In rural settings, the rich peasant among whom women generally enjoy no security rights over family, land, etc as daughters or widows may have to part some of their fields to cover dowry expenditures. But among the lower classes i.e, low income groups as among the agricultural laborers, the picture is slightly different (Table 5), owing to the absence of 'transmissible assets' (such as land). As such, the women labor is considered a more decisive contribution to the prosperity of the household. This upholds the value of women among the low income households as well as lower sex discrimination. The top 20% of the JSR villages recorded larger concentration of SC population than the bottom 20%, which suggests that the process of vertical diffusion in sex selection is still not prevalent in rural Punjab (Figure 5).

Explaining the Net Effect through the Multivariate Model

In order to trace out the net or independent effect of the different factors operating under different heads (i.e. knowledge, awareness and workforce participation, externality factors, accessibility to infrastructure, income and social division), a separate multivariate model have been used (Table 6). The principal aim of this exercise is to identify the main policy variables for tackling the declining JSR in rural Punjab as well as to explain the observed structural variations in JSR. The indicators required for the model is selected from the bunch of indicators used to ascertain the gross association; and used in the model by the following equation:

$$y = \infty + \beta_1 X_1 + \dots + \beta_n X_n + \mu_i$$

Where,

y= Juvenile Sex Ratio

 $X_1$ ..... $X_n$  = A set of explanatory variables chosen from different categories of determinants

 $\beta_1 \dots \beta_n = \text{Slope coefficients}.$ 

 $\mu_i$  = Disturbance or error terms

The log of the total population of the villages have been taken to control the erratic effects caused by village size, which often causes over or under enumeration of JSR. The independent

effect of male literacy is strongest in explaining the variation in JSR in rural Punjab (Table 6). One unit observed change in male literacy results 2.887 units increase in JSR. The net effect of female literacy and FWPR is also negative over JSR, which is statistically significant. Such a result is ascribed to two factors:

- 1. Attainment of a considerable level of education is very low among the women, primarily due to shortage of secondary schooling facilities, as evident from the result.
- 2. The strong and rigid cultural profile, accompanied by the low literacy level of the male counterparts have left very little space for women to raise voice against sex selection at birth

Factors of externality, especially average distance from the nearest town and availability of bus facilities have significant net effects over JSR (Table 6). It is evident from the result that enhancement of communication facilities and nearness to larger market centres, i.e. for which towns have taken as a proxy, have intensified the probability of sex selection at clinics. Availability of secondary schools and the presence of community health workers in the villages have most notable positive effect over JSR. Instead of primary schools, secondary schools provide some amount of gainful education for generating awareness against sex selection. In spite of the implementation of the PNDT Act (Pre-Natal Diagnostic Techniques Regulation and Prevention of Misuse Act, 1994), statistically significant negative effect of the village PHCs are observed over JSR (Table 6). In terms of income differentiation and social divisions, it can be opined from the result that the process of vertical diffusion in terms of sex selection is still not effective in Punjab.

#### **RESULTS**

- The role of traditional developmental factors has been changed undoubtedly in the modernizing context of declining juvenile sex ratio in Punjab. Progressive increase in the use of modern techniques of sex determination has reconfigured the effects implied by the factors like female literacy or workforce participation.
- The role of male literacy seems to be increasingly important in determining the degree and magnitude of sex selection in the patriarchal society of Punjab. Male literacy have the most significant independent effect to increase the juvenile sex ratio in rural Punjab, and it even transmits its effect in enhancing awareness to females and gearing their workforce participation, which is essential for enhancing the value of girls in the society. It is also notable that although the primary effect of female literacy and workforce participation is negative over the juvenile sex ratio of rural Punjab, households pertaining equally high male and female literacy tend to practice lesser sex selection, as literate males are always more lenient regarding the decision making power of their female counterparts in terms of sex selection.
- The role of female literacy and workforce participation tends to be negative over the juvenile sex ratio because of the fact that the male counterparts are not enough literate. However, without gaining a considerably higher level of education, females are not able to raise proper voice resentment against their male counterparts in a patriarchal society. However, the value of female literacy can be only obtained when they are employed in some gainful activities and are able to attain a larger decision making capacity, unless they are compelled to abide by the rules created by the larger society, even being literate.
- In Punjab, the workforce participation by females are largely governed by the literacy rates of their male counterparts, which is supportive of the argument that an en-

hanced male literacy rate allows the working capability of women to be encouraged, and therefore, gears the value of girls in the society.

- The availability of infrastructures and public goods like secondary schools or community health workers seems to be increasingly important in boosting the juvenile sex ratio. However, attaining a considerable level of education, as mentioned before, is the only way to provide gainful employment to people, especially women, which is inevitable to raise the value of girls in the society. In the rural areas of Punjab, there is an extreme deficiency of secondary schools even within 5 km. radius of many villages, which is the main obstacle to gear a considerable level of education (as being only literate is not an effective solution).
- In terms of structural variation, widespread effect of horizontal diffusion of modern technology is observed in the rural areas from the well advanced urban areas, which has effective role in reconfiguring the juvenile sex ratio patterns of villages. However, gradual transmission of modernizing elements from the external environment into the traditional cultural society of the rural areas have created an interesting cocktail of declining juvenile sex ratio.
- In terms of vertical diffusion, no significant variations can be observed as juvenile sex ratio tends to be higher the highly SC populated villages or among the agricultural labourers. It can be seen that the JSR has followed a more shrinking profile in the higher strata of the population, irrespective to caste and class.

#### **CONCLUSION**

The declining pattern of JSR can result into potential squeezing of the girls in marital age groups which can force men to delay their marriages and have essential implications on demographic structure of the population. Due to reduced number of women at the marital age, women's family roles might be increasingly in demand which may result expense of other life courses like workforce participation. This would raise the demand for male labour, especially in the lowskilled and low-wage sectors that are currently largely occupied by women. The knowledge attained by the individuals should be properly channelized in order to relieve the increasing value of girl children in the society. For this purpose, provision of a considerable level of education is necessary, both for males and females. Increasing availability of secondary and senior secondary schools will be the foremost option to boost such initiatives as in Punjab. Improvement of health facilities, increase in institutional delivery and a sizeable increase in the number of community health workers to create awareness among the pregnant women are necessary. The proper enforcement of legal initiatives, especially the PNDT act is necessary to combat the phenomenal growth of private medical centres and clinics within the towns nearby the villages, primarily to prevent horizontal diffusion. A more relational domain is necessary to be created among various sections of the population in the society, and especially among the females to interexchange the inflow of changing values of women in the society as well as to enhance the strategic needs of the women which enable them to move jointly against the rule of patriarchal society. The role of press is necessary in this regard, for enhancing the coverage of the relational domain for making the framework more integrative.

However, none of these policy measures will seem to be significant unless and until the basic root of the problem, the rigid cultural domain would be modified. The orientation of the utilitarian framework and traditional developmental outcomes will continue to be negative if the social acceptability of sex selection does not change. Culture is the strongest determinant in boosting

such problems and an integrative approach is necessary for an acceptable modification of the cultural domain.

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#### **Appendices**

Table 1: Percentage of Villages existing in Top and Bottom Quintiles within Different Districts

Top 20% Bottom 20%	Less than 15%	15%-20%	20%-25%	25%-30%	More than 30%
Less than 15%	Bathinda (99.94)	Moga (156.66)	Faridkot (127.9), Muktsar (119.83)		
15%-20%	Mansa (101.62), Sangrur (122.59)	Amritsar (154.77)	Jalandhar (150.88), Ludhiana (138.8)	Firozpur (166.56)	
20%-25%		Patiala (156.45)	Gurudaspur (226.67) Nawanshahr (161.99)	Hoshiarpur (281.33)	
25%-30%		Kapurthala (203.29)	Rupnagar (170.21)		
More than 30%		Fatehgarh Sahib (167.79)			

Note: Standard Deviation values are in parentheses

Source: Computed from Village Directory of Census of India, Punjab, 2001.

Table 2a: Changing Pattern of Juvenile Sex Ratio with Knowledge, Awareness and Workforce Participation (WPR)

Quintiles	Avg Female Literacy	Avg Male Literacy	Avg Female WPR
Q1	42.14	57.86	24.70
Q2	42.09	57.91	25.01
Q3	42.19	57.81	24.69
Q4	42.70	57.30	25.15
Q5	42.98	57.02	24.93

Source: Computed from Village Directory of Census of India, Punjab, 2001.

Q1, Q2......Q5 are the different quintiles. Q1 is the first quintile, Q5 the last quintile.

Table 2b: Correlation Matrix showing the inter association between Female literacy, Male Literacy and Female Work Force Participation

	Juvenile Sex Ratio	Avg Female Literacy	Avg Male Literacy	Avg Female WPR
Juvenile Sex Ratio	1	-0.418*	0.418*	0.228**
Avg Female Lit		1	-1.000**	-0.227**
Avg Male Lit			1	0.227**
Avg_Female_WPR				1

Note: Significance levels; \*1%, \*\*5%, \*\*\*10%

Source: Computed from Village Directory of Census of India, Punjab, 2001.

Table 3a: Changing Pattern of Juvenile Sex Ratio with Accessibility to Infrastructure

Quintiles	a	b	С	d	e	f
Q1	96.80	10.00	4.10	36.50	1.80	59.40
Q2	98.20	12.40	6.80	42.80	1.70	64.30
Q3	98.10	14.90	7.90	44.80	1.40	66.40
Q4	98.50	12.60	6.50	41.30	1.50	62.30
Q5	94.90	11.50	3.60	31.80	0.70	52.50

Source: Computed from Village Directory of Census of India, Punjab, 2001.

Table 3b: Correlation Matrix showing the inter association among the Infrastructure indicators

Indicators	JSR	a	b	c	d	e	f
JSR	1	0.237	0.425*	-0.447*	-0.296*	0.179	0.296
A		1	0.074	-0.086	-0.089	-0.1	0.431**
В			1	0.096	0.219	0.137	0.397**
С				1	0.004	-0.041	-0.219
D					1	-0.324**	-0.005
Е						1	0.077
F							1

Note: Significance levels; \*1%, \*\*5%, \*\*\*10%

Source: Computed from Village Directory of Census of India, Punjab, 2001.

**Table 3c: Definition of Indicators** 

	Table 3c: Definition of Indicators					
a	% of villages having primary schools					
b	% of villages having secondary schools within 5km. Of radius					
c	% of villages having primary health centers within 5km. Of radius					
d	% of villages having registered private medical practitioners					
e	% of villages having community health workers					
f	% of villages having tap water facilities					

Table 4a: Changing Pattern of Juvenile Sex Ratio with Externality

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Quintiles	a	b	с	d		
Q1	88.10	77.80	83.10	9.0		
Q2	92.60	83.10	87.60	8.9		
Q3	94.00	84.30	88.00	9.0		
Q4	90.90	83.20	87.40	8.6		
Q5	85.80	76.20	80.60	8.4		

Source: Computed from Village Directory of Census of India, Punjab, 2001.

Table 4b: Correlation Matrix Showing the Inter Association among the Externality Factors

	JSR	a	b	с	d
JSR	1	0.340**	0.315**	0.164	0.328**
a		1	0.384**	0.302*	0.125
b			1	0.477*	0.215
С				1	-0.325**
d					1

Note: Significance levels; \*1%, \*\*5%, \*\*\*10% Source: Computed from Village Directory of Census of India, Punjab, 2001.

**Table 4c: Definition of Indicators** 

a	% of villages having at least one phone connection
b	% of villages having Bus facility
c	% of villages having access to papers and magazines
d	Average Distance from the Nearest Town

Table 5: Variation of JSR among Agricultural Labourers

Quintiles	Avg. % of Agricultural Laborers
Q1	22.03
Q2	22.31
Q3	21.87
Q4	20.28
Q5	18.97

Source: Computed from Village Directory of Census of India, Punjab, 2001.

**Table 6: Summary of Regression Analysis** 

Independent Variable	Dependent Variable		
	Juvenile Sex Ratio		
	Co-efficient	Standard Error	
Male Literacy	2.887*	0.432	
Female Literacy	-2.412*	0.412	
Female WPR	-0.159***	0.085	
% of Agricultural Labourers	-0.440*	0.107	
% of SC Population	0.492*	0.087	
Distance from the Nearest Town	0.423***	0.210	
Presence in the village of <sup>+</sup>			
Primary Health Centre	-4.970***	2.759	
Any Registered Private Medical Practitioner	2.805	3.558	
Community Health Workers	21.102***	12.986	
Availability in the village of⁺			
Secondary Schools	12.332*	4.981	
Tap Water	7.632**	3.496	
At least one Phone Connection	-5.673	5.916	
Bus Facilities	-6.028***	3.253	
Paper and Magazines	-7.821	4.659	

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Log of village population	5.805*	2.338	
Constant	462.053*	167.729	
$\mathbb{R}^2$	0.315		
Adjusted R <sup>2</sup>	0.214	ı	
F	10.15	*	
N	1050	3	

Note: Significance levels; \*1%, \*\*5%, \*\*\*10%

Source: Computed from Village Directory of Census of India, Punjab, 2001.

Decline in the Juvenile Sex Ratio

Increasing Propagation of Modern Techniques of Sex Selection/ Selective use of Contraceptives depending upon the sex of the existing child

Knowledge, Awareness and Workforce Participation

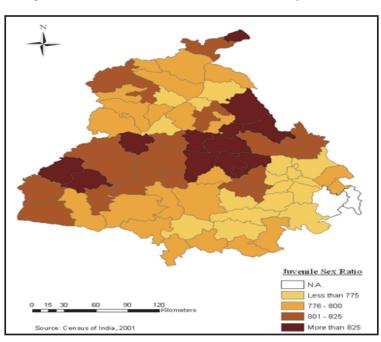
Horizontal Diffusion through Externality

Accessibility to Social and

Figure 1: Schematic Representation of the Factors affecting Juvenile Sex Ratio



Physical Infrastructure



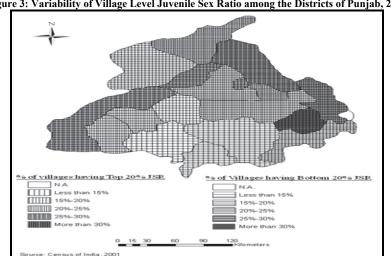


Figure 3: Variability of Village Level Juvenile Sex Ratio among the Districts of Punjab, 2001

Figure 4: Effect of Spatial Distance from Towns over Juvenile Sex Ratio of the Villages of Punjab, 2001

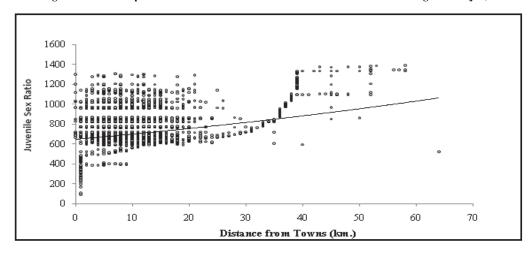
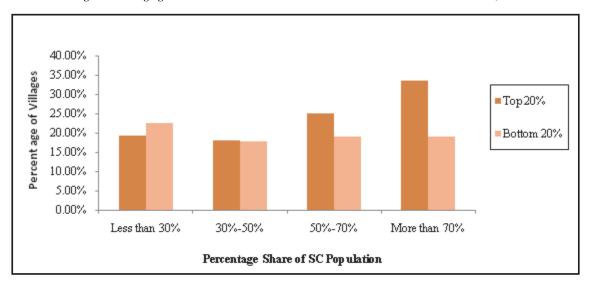


Figure 5: Changing Pattern of Juvenile Sex Ratio within Different SC Concentration Classes, 2001



# STATUS OF HEALTH CARE SYSTEM IN SIKKIM, INDIA

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**Abstract**: "Health is wealth" is the universal dictum throughout the globe. Keeping in view of the same national governments of all countries are committed to address the health issues particularly the Community Health. It may be recalled that healthy community can only provide disease free society. Keeping in view of the same Government of India also embraced the policy for fine tuning the process management. It may be mentioned that the importance of health happens to be one of the concrete indicators under overall socio-economic development. It is therefore imperative to have a comparative study of the past and present status of implementation of the Goals with reference to the performance. Keeping in view of the same, sustained campaign at national, regional, state, and community level to adopt and address various policy resolutions have emerged at appropriate level by the respective committees. Government of India is committed to extend the support the health care system. This paper shall study the process of intervention both prior and after the grounding of the scheme.

#### INTRODUCTION

World Health Organisation (WHO) mandated appropriate interventions to curve the health menace in terms of the Millenium Development Goal(MDG) approach. The policy focus is mainly towards community health. "Health is Wealth" is an age old saying. Healthy citizen only can think of healthy society. However, the interventions need to be up scaled the quality. for improving the health status of the people as well as the quality in healthy life of one billion plus population, the National Rural Health Mission (NRHM) was launched on 12 April 2005. The National Rural Health Mission (NRHM) represents an important public health initiative to address essential health needs of the country's underserved population. The position of Sikkim in the aspects like Education, Economic development, Health, Sanitation etc. are continuously in progress since 1975 after the merger into Indian National Union. The public Health status and indicators of Sikkim are improving despite several constraints. A mission is a strongly felt commitment- a calling and requires mobilizing and co-ordination at all levels to have effective, efficient and sustainable action to the level of primary health care. The progress made by the state of Sikkim during last four decades reveals the dedication of government and efficient functioning of health service providers despite various challenges. The health indicators of Sikkim are still contributing to the pride of the Republic of India. The time has come for action for empowering people to be responsible for their health; thereby, truly representing the sprit of Alma Ata Declaration, "Health for All and All for Health". This paper summarises the basic history of public health initiatives, policy making, planning and implementation with special references to the state of Sikkim.

#### HISTORY OF HEALTH CARE IN SIKKIM

The history of healthcare is as old as the human civilization itself. It can be said that from the dawn of civilization, the human beings have been feeling the need of proper healthcare and this has led to the growth of an assortment of theories and quite a few process of healthcare. While on one hand, Europe contributed a lot in this regard; on the other hand, contributions of ancient civilizations of India and China were immense<sup>1</sup>. For that reason, the concept of healthcare was highly esteemed once and even the religious scriptures state that healthcare is one of the noblest services in the human society.

The Government of has acknowledged the problems afflicting the public health system and the public health services in the country. Since the beginning of the Bhore Committee (1946) and the first Five Year Plan (FYP) period (1951-56), many other committees have identified such problems. In turn, many recommendations have been made since the 1970s in order to develop a well-functioned and comprehensive primary health care structure in the country, tailored not only to the needs of our rural population; but also to provide free and universal health services to all sections. Declaration of Alma Ata on Primary Health Care, 1978 "Health for all by 2000 AD" and its objectives however have still remained largely unrealized<sup>2</sup>. The mission also comes into function during a phase of health sector reforms being implemented in many states. These reforms were initiated in the early 1990s and are being financed by international institutions such as the World Bank (WB) and the European Commission (EC). They are being carried out at several levels: structural and functional, reforms in financing, governance-related, and involvement of the private sector through PPPs. Instead of improving the health services, such measures have only further weakened the existing fragile primary health infrastructure and also encouraged and reinforced the growth of an unregulated private health sector. Additionally, policy developments formulated by the World Bank and other international agencies, such as EC and WHO ('development partners') have been working to restrict public health to certain selective 'cost-effective' interventions and packages through the rural health infrastructure, which, unfortunately works against comprehensive primary health care.<sup>3</sup>

After going through all the relevant reports and literature reviews, it appears that the health care provisioning has not been able to cope up the menace of the public health system. As a result, ground situation of health care system has a huge gap in the country more particularly in the rural hinterlands. This has caused a retreat of the State from the goals of providing universal access to primary health care. It is for this reason that an immediate intervention is a must to put the health care back in to rail as envisaged by the World Health Organisation. Sequel to this syndrome, the unique system under the caption" National Rural Health Mission" (NRHM) has been grounded throughout the country. The state of Sikkim also adopted the policy resolution made as envisaged by the National Steering Group" under the Chairmanship of the Honourable Prime Minister of India.

#### IMPORTANCE OF HEALTH CARE

Recognizing the importance of health in the process of overall socio-economic development and for improving the health status of the people as well the quality in healthy life of one billion plus population, the National Rural Health Mission (NRHM) was launched on 12 April 2005 by the United Progressive Alliance (UPA) Government to acknowledge the promises made under the Common Minimum Programme regarding rural health and access to primary health care. It has adopted the key guidelines given in the National Health Policy 2002, e.g. gender equity, decentralization, involving Panchayati Raj Institutions (PRIs) and local bodies in owning primary health care management thus strengthening primary Health care institutions etc. It highlights the commitment of the government to the National Health Policy as the national government has already increased its health budget from 0.9% to 1.3% of the GDP, with commitment to increase it by 30% so as to achieve it to 2-3% of the GDP within mission period. Although the mission covers the entire country, it specifically focuses on 18 states, which have relatively poor infrastructure.

## **HEALTH CARE - SIKKIM'S PERSPECTIVE**

Thirty-Six years back, when Sikkim became the twenty-second State of India, the State had very limited development space both in economic and political scenario. The onset of democracy

and building of economic structure changed the entire profile of Sikkim. From a traditional economy with feudal slant, Sikkim has emerged as a modern and robust State today. Sikkim, with a total area of 7,096 sq km, constitutes 0.22 per cent of the total geographical area of India. The State is divided into four districts—South, North, East and West (Registrar General of India, 1989). Completely landlocked and criss-crossed by green valleys, high peaks, and rippling rivers; decorated by a spectacular array of the most exotic and colourful orchids, Sikkim is referred to as *nye-ma-el* (heaven) by the *Lepchas*, which means 'new palace' in *Nepali*, and as *denzong* (land of rice) by the *Bhutias*. (*Lepcha*, *Nepali and Bhutia are three major communities habitat of sikkim*) It lies in the north-eastern Himalayas, between 27°04'46''to 28°07'48''North latitude and 80°00'58''to 88°55'25''East longitude.

Sikkim has made significant interventions towards "Human Development" aspects after its merger with India in 1975. Few of these are as under:

- The population of Sikkim as per 1971 Census was 2, 09,843 and it has increased to 6, 45,321 according to the census of 2011.
- The percentage in decadal growth rate in 1971-81 was 29.38% and it is sustained at 12.36% in 2001-11.
  - The infant mortality rate dropped from 60 in 1991 to 30 in 2010 (SRS).
- Free family planning services are on offer to eligible couples through hospitals, PHCs and PHSCs. Couple protection rate has increased from 2 per cent in 1961 to 60 per cent in 2010 and Total Fertility Rate sustained to 2.02 since 2007 (NFHS-3).
- The percentage of expectant mothers receiving antenatal care from the State health agencies in rural areas has increased from 3 per cent in 1979 to 95 per cent in 2010.
- Institutional deliveries have gone up to 67% despite various social constraints and the home deliveries are also conducted by trained attendants.
- In 1976–77, hardly 30 per cent of infants were immunized. This has increased to 77 per cent in 2008 (DLHS-3), 92% in 2010 (HMIS).
- Literacy rate has gone up from 17.4 per cent in 1951 to almost 82.20 per cent in 2011. Close to 89 per cent of 6–17 years old children attend school.

The results of improved health care are also partially reflected in changes in birth and death rates, which have been constantly lower than the national average since 1981. By 2001, the birth rate in Sikkim had reduced to 19.5 per thousand, as against the national average of 27.2 per thousand, while the death rate was 6.5 per thousand as against the national figure of 8.9 per thousand populations. (CBR-17.8, CDR 5.6, 2010- Sikkim) The decline in the mortality rate is an indicator of better delivery of health care services, improved nutrition and higher rates of women's literacy in the state. It is also important to know the basics of *Human Development Indicators of Sikkim* 5,6,7

Table - 1: Basic Human development Indicators of Sikkim

Indicator	Sikkim indicators as per Decadal Census				Remarks	
	1971	1981	1991	2001	2011	
Population	209843	316385	406457	540851	607688	
Male	107921	167342	211113	288484	321 661	
Female	101922	149043	195344	252367	286 027	
Growth Rate	29.38	50.77	28.47	33.07	12.36	
Population Densi-	29	45	57	76	86	
ty						
Sex Ratio	863	835	878	875	889	
Literacy rate	17.74	34.05	56.94	68.81	82.20	
TFR			NA NFHS	2.8	2.02	NFHS1=

	1	NFHS 2	NFHS 3	1992-93,
				<i>2= 1998-</i>
				99,
				<i>3= 2005-</i>
				06

Source: Census report published by Government of India in 1971,81,91,2001, & 2011, & NFHS report

The difficult terrain and inaccessibility, results in increase of unit cost of health service delivery as well as resource constraints have their impact in terms of unmet health targets in the State. The progress made since the merger period is nevertheless laudable. It must be appreciated that while in 1980, only 0.04 per cent of the State budgetary resources were allocated to health, in 1990 the allocation increased to 0.43 per cent and further to 5 per cent in 1998 and 6.5% in 2011. Since 1975, there has been a considerable expansion of the public health infrastructure, on account of consistent investments in the health sector. The numbers of hospitals have grown up alongside the enhancement in the bed strength and facilities for diagnosis and treatment consid-In 1979, Sikkim had only four Community Health Centres (located at Singtam, Gyalshing, Namchi and Mangan) in addition to the Sir Tashi Namgyal Memorial (STNM) Hospital, at Gangtok. What began as a 50-beded hospital in 1917 has now expanded to 300 beds with a comprehensive array of specialized services. A 500-beded Central Referral Hospital at Tadong near Gangtok with modern facilities is serving quality services. Today, there are 24 Primary Health Centres (PHCs), 147 Primary Health Sub-Centres (PHSCs), Four 100 beded District Hospital and a 30 beded Tuberculosis Hospital in the State. This makes Sikkim possibly the only State in the country to compliance with the national norm of establishing 1 primary health centre for 20,000 people and 1 PHSC for 3,000 people (on the basis of the population growth in 2001). The majority of health care services are provided by public manned facilities and the 500-beded Central Referral Hospital is functioned under Public-Private Partnership with the State government.

As against the initial phase of the 1970s, when these PHCs were grossly under-staffed and compounder ran many dispensaries; in the late 1990s, there were 1–2 doctors, as well as paramedical personnel, and presently all the PHCs have electricity connections and have an ambulance. The utilization pattern of health services indicates that the overwhelming majority of the people depend on the public health facilities.<sup>8</sup>

The emphasis has been on providing preventive, promotional and curative services in the rural areas. Efforts have been made to reduce infant and maternal mortality, in conformity with strategies to achieve the goal of health for all. However, traditional medicine has continued to play an important role in the State. As envisaged under NRHM for mainstreaming of AYUSH for providing more choices to the people, state has also established clinics of *Amchi, Ayurveda and Homoeopathy* at four district hospitals.

Diseases related to inadequate environmental sanitation, tuberculosis, goitre and alcoholism continue to occupy an important place in the State health profile. At the same time, new problems, e.g. HIV/AIDS, Non Communicable diseases like Hypertension, Cancer, Diabetes, Mellitus etc. and reappearance of Malaria, Dengue, Kala Azar give challenges on close surveillance to overcome the epidemics. <sup>9</sup>

#### **CONCLUSION**

By understanding the main concerns at this point of time and differentiating it from other less immediate concerns, public opinion and more civil society participation can contribute to reshaping the health policies. Any successful development program stands on four pillars, i.e. political will, financial resources, administrative infrastructure and scientific leadership. With the political will and financial resources having been committed by the government through NRHM, what

remains is the task to put administrative infrastructure in place and provide scientific leadership. Skills of people in various disciplines like behavioural science- sociology, anthropology, psychology, economics, political science, management and public health engineering need to be woven into the very fabric of health care delivery. A mission is a strongly felt commitment- a calling and requires mobilizing and co-ordination at all levels to have effective, efficient and sustainable action to the level of primary health care. The progress made by state of Sikkim during the last four decades reveals the dedication of the government and efficient functioning of health service providers despite various social stigma and myths. The health indicators of Sikkim are still contributing pride to the Republic of India. There can be no simple solution to the long-standing complex issues related to health and development and in a vibrant democracy like ours. The time has come for action to empower people to become responsible for their health; thereby, truly representing the spirit of Alma Ata Declaration, "Health for All and All for Health".

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#### THE NIGERIAN EDUCATIONAL SYSTEM: A CRITICAL ASSESSMENT

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Abstract: This paper examined the Nigerian Educational System. It reviewed the development of educational system in Nigeria since the advent of the colonialists. In doing this, it examined the educational system put in 1936, highlighting the merits and demerits in system. It compared the structure of the educational system put in place in the former three regions of the country and the former federal territory of Lagos. It then reviewed the 1981 National Policy on Education and the revised edition of 1998. It was found that the education policy has not been fully implemented. This might be due to the inconsistency in the structure of the former systems. There were the lack of coherence and orderliness in the system coupled with inadequate funding. It was therefore concluded that the Nigerian educational system has not been effective in achieving the desired results. It was then recommended that more funds should he allocated to the education sector of the country's economy to fully implement the educational system. The unique importance of education in Nigeria calls for special attention in terms of adequate funding of the educational system and better management strategies. The funding should however be in line with the UNESCO's directives of allocating 26 percent of the country's budget on education.

#### INTRODUCTION

A system may be defined as an array of thing in which we are concerned particularly with the way they relate to, and interact with each other (Davis & Oslon, 1984). It can refer to abstract things like a body of knowledge or physical things but it usually comprise component parts that relate or work together in a way that differentiates the overall system from any other system (Lucey, 1995). A system is thus a network of interrelated components that work together as an interrelated whole embedding checks and balances to ensure a smooth operation and enhance the achievement of a common objective (Awe, 2000). A system is thus a set of objects together with relationships between the objects and their attributes.

As system could be seen as being open or closed. The educational system is an open system whereas the computer system is a closed system. As an open system, the educational system was regarded by Simkins (1981) as a productive system in the very sense that it produces outputs. Thus, no matter what a system is, the analysis of the system provides an outlook into its component parts and how it works. For example, the face-to-face encounter of teachers in the school sub-system representing one sub-culture on the one hand and children representing another sub-culture on the other hand is an interaction, which tends to move from the unconscious sphere to that of the conscious and awareness. An understanding of this process of interaction is one of the achievements of system analysis.

In this regard, system analysis is a method of understanding the way in which a system works preparatory to influencing or controlling it. Thus, since educational planning is concerned with activities leading to the achievement of goals and objectives such as the establishment of ends and means relations, ranking of alternative strategies, allocating personnel, materials, space and other resources, analyzing performance, constructing time and cost schedules and the regular revision of objectives, the system analysis provides a rational framework for planning everyday activities of the school sub-system and other sub-systems within the educational system.

## DEVELOPMENT OF EDUCATIONAL SYSTEMS IN NIGERIA

Since the attainment of independence in 1960, Nigeria has witnessed much development in its educational system. Although the 1882 Education Ordinance set the pace of educational development in the country by creating the general Board of Education, Adesina (1977) remarked that the 1926 Education Ordinance really laid the foundation of Nigeria's Educational System. According to him, the Code of 1926 streamlined the course that Nigeria's educational development should take and it was the main source of guidance up till independence. This 1926 Code standardized the Nigerian school system into the following order: Infants 1 and 2, primary standards 1 to 6 and secondary forms 1 to 4. It was thus, a system comprising eight years of primary education and four years of secondary education. The system was, however, amended in 1930 by Hussey, the first director of education in Nigeria when it was noted that only a few pupils could afford to stay in schools for the eight years period. The new proposal therefore, comprised a sixyear school system consisting of infants 1 and 2 and primary standards 1 and 4 while the middle school comprised former primary standards 5 and 6 and secondary forms 1 to 4. This structure shows an educational system comprising six years of primary education and another six years of secondary education; and it was operational mainly in the South.

As a result of the gap in the educational development between the southern part of the country and the northern part, Hussey recommended a four-year primary school system and a six-year middle school for children in the Northern part of the country. It was necessary to mention, however, that Mission schools were not bound to accept this system of education. Hence, most of them continued with the old system and nomenclature of standards, classes and forms instead of the system proposed by Hussey (Fafunwa 1971). Since the attainment of Self-Government by the defunct Western Region of Nigerian in 1954, there has been series of developments in the educational system. Thus, the defunct Western Region set the pace in educational development in the country through its laudable free and universal primary education scheme which was launched in 1955. As such, there was the introduction of a new educational system that was geared towards removing wastage and confusion in the old systems. This new system comprised a 6:6 educational system made up of six years in primary schools and another six years in secondary schools. Although, this system was widely accepted throughout the Region, the position of modern schools needs to be mentioned. After the six years of primary education, pupils who could not afford the payment of school fees for a six-year secondary school system always proceeded to a three-year modern school where they would acquire skills and competences required for teacher and technical education. Many of these pupils proceeded to a two-year grade III teachers' college and another two-year grade II teachers' college. At the end of the programme, the successful candidates would receive the elementary teachers' grade II certificate and be eligible to teach in primary schools. This system of education was therefore, a 6-3-2-2 educational system, that is, six years in primary schools, three years in modern schools, two years in grade III teachers' college and another two years in grade II teachers' college. Apart from going to teachers' college, some products of modern schools usually proceeded to trade centers now known as technical colleges for a period of three years.

In the defunct Eastern Region, UPE scheme was launched in February 1957. The Government introduced a 7-5 educational system in 1961. This educational system initially comprised seven years of primary education, but it was reduced to six years in January 1964 thereby providing for a 6-5 educational system made of elementary primary 1 to 6 and secondary classes 1 to 5. The defunct Northern Region had a 4-3-6 educational system which was made up of four years in junior primary schools, three years in senior primary schools and six years in secondary Schools.

The Federal Territory of Lagos too, had a 8-6 educational system made up of eight years in primary schools and six years in secondary schools.

It should, however, be mentioned that the sixth-form, commonly referred to as the higher school certificate (HSC) classes, colleges of education, polytechnics and universities formed the tertiary level of the educational system. While the sixth-form was for a period of two years, the university was for a period of three years for advanced level or HSC students. Thus, in Western Nigeria, the educational system at that time was a 6-6-2-3 system comprising 6 years in primary schools, 6 years in secondary schools, 2 years in the sixth-form classes and 3 years in the university. In Eastern Nigeria, it was a 6-5-2-3 educational system made of 6 years in primary schools, 6 years in secondary classes, 2 years in the sixth-form classes and 3 years in the university. In Northern Nigeria, it was a 4-3-6-2-3 system comprising of 4 years in junior primary schools, 3 years in senior primary schools and 6 years in secondary schools, 2 years in the sixth-form classes and 3 years in the university.

Students who proceeded to the university directly after secondary education spent four years in the university instead of three years. The system of education for such students in Western Nigeria was 6-6-4 that is, 6 years in primary schools, 6 years in secondary schools and 4 years in the university. In Eastern Nigeria, it was a 6-5-4 educational system made of 6 years in primary schools, 5 years in secondary schools and 4 years in the university while in Northern Nigeria, it was a 4-3-6-3 system, that is, 4 years in junior primary schools, 3 years in senior primary schools, 6 years in secondary schools and 4 years in the university. Although some mission schools were until recently presenting their students for the School Certificate examinations at the end of the fifth year, the common feature was for students to sit for the West African School Certificate examinations at the end of the sixth year in secondary schools.

Considering the foregoing, it was observed that there had been disparities in the educational system in the country before and after independence. Thus, in a bid to remove these disparities and give education a sense of direction based on a solid foundation, the Federal Government formulated a National Policy on Education which became operational in 1981 and reviewed in 1998. This National Policy aimed at achieving five national objectives for Nigeria. These objectives include the building of:

a free and democratic society; a just and egalitarian society; a united, strong and self-reliant nation; a great and dynamic economy; and a land full of bright opportunities for all citizens (National Policy on Education, 1998).

In achieving these objectives, a new educational system was introduced to embrace all States of the country. Accordingly, the sixth form classes were abolished and a uniform system of education known as the 6-3-3-4 educational system was adopted. In compliance with this system, children between the ages of 6 and 12 years would spend 6 years in primary schools while children from ages 13 to 15 years would spend 3 years in the junior secondary schools. Children from ages 16 to 18 years would spend another 3 years in the senior secondary schools while those from ages 19 to 22 years would spend 4 years in the universities for the basic degree programmes.

Although most of the basic courses in the university run for a period of 4 years, professional courses run for 5 or 6 years especially in the Faculty of Engineering and the Colleges of Medical Sciences. Thus, higher education is a stage of specialization with a minimum entry qualification of the senior secondary school certificate (SSC). Candidates whose desire is to pursue professional courses could however, seek admission into the polytechnics, colleges of technology, colleges o education and other professional colleges or institutes after the completion of the senior

secondary certificate programme. Figure 1 shows the Nigerian 6-3-3-4 educational system and the different levels of the system. It also emphasized the end of each level of the system which is usually by examination and certification.

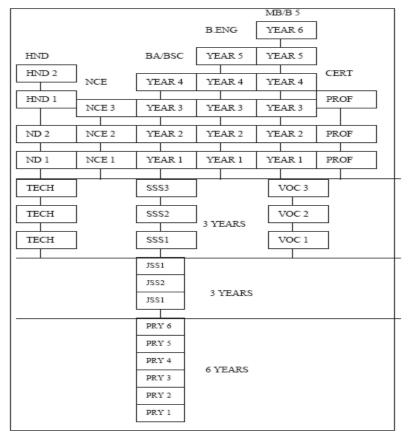


Figure 1: Structure of Nigerian Educational System

It needs to be mentioned, however, that the junior and senior secondary classes are usually situated in the same school under the headship of one principal in many States. However, with the introduction of the Universal Basic Education (UBE) in some States especially Lagos and Ekiti States, the junior and senior secondary classes are separated into junior secondary and senior secondary schools each with its own principal and staff. Hence, students who desired to pursue purely academic subjects would proceed to the senior secondary class one in the senior secondary schools at the end of the JSC course. Students who preferred technical education would proceed to technical colleges while students who desired craft or design would proceed to vocational schools. As such, the senior secondary class one (SS1) is a continuation of secondary education for students who passed the JSC examinations while students who failed would have to repeat the junior secondary class three or proceed to learn trades.

However, new changes have been made hi the system. One of such changes is the fact that vocational education is now to be received in technical colleges according to the revised Federal Republic of Nigeria National Policy on Education (FRN, 2004). More emphasis has also been given to continuous assessment which is the assessment of pupils on a continuous basis and the compilation of their scores in different tests, quiz or examinations in order to determine how the pupils perform in the class throughout a session or school year.

## ASSESSMENT OF THE EDUCATIONAL SYSTEM

The National Policy on Education has regarded education in Nigeria as an instrument per excellence' for effecting national development and it has witnessed the participation by non-governmental organizations, individuals and communities as well governments' intervention. Towards this end, it might be necessary to ask the question, 'has the Nigerian Education system been fully implemented as to achieve good results?' In answering his question, there is the need to reiterate that primary and secondary education occupy a very unique position in any country's educational system, as both serve as the bedrock of the system. The success or otherwise of a country's educational system could be greatly determined by the performance at the primary and secondary levels. It is therefore imperative to make these levels of education functional so as to enhance the self-actualization of the individual.

However, owing to the huge investment on education annually, it is expected that schools would have buildings that are conducive to learning, adequate classrooms and furniture, well-equipped laboratories and libraries with up to date books and materials. It is also expected that schools would be adequately staffed with qualified teachers. Towards this end, Obemeata (1995) noted that if all these factors, which are indicators of quality, are provided in schools, it is expected that quality as well as attainment of schools objectives would be high and achieved. In the Nigerian setting, the opposite seems to be the case. Although literacy levels and academic achievement could determine individual's job attainment and earnings as well as economic well-being of the society (Longe, 1999), the quality of life in the society is affected by the level and quality of the knowledge and skills acquired in schools.

Common observations have shown that primary and secondary educations in Nigeria are in no doubt experiencing the worst of times. There is acute shortage of instructional materials in schools such as books, audio-visual materials and of course, science equipment (Omotosho, 1992). There is equally a widespread shortage of teachers and inadequate classrooms in many schools (Adeyemi, 1998; Aghenta, 2001; Alani, 2003). Likewise, education at these levels is grossly under-funded and therefore poorly maintained (Kanu & Ozurumba, 1992). All these are factors which could hinder the performance of the pupils in primary and secondary schools as well as the attainment of high standards in colleges and tertiary institutions.

Considering the various inputs into the system and the output of the system, it seems that the inputs into the Nigerian schools system have not match the quality of output (Adeyemi, 2003). This is justified by the poor level of performance of students at the terminal point of almost each level of the educational system (Ojerinde, 2003, Oderinde 2003; Onipede 2002). Perhaps, the greatest reason for the poor quality of education is the gross inadequacy of schools' inspection and supervision (Aiyepeku, 1983; Obemeata, 1995). Thus, Obemeata (1995) remarked that unless teachers are kept constantly on their toes, it is not likely that they would always put in their best. This view was consistent with Aiyepeku's (1983) claim that inspection of schools has been a very much neglected aspect of school management in Nigeria. He then argued that unless constant inspection of schools is done at regular intervals, government might remain insensitive to the problems of quality in Nigerian schools.

Illo (2003) too, observed that education in Nigeria today is in a state of crisis as the necessary physical and infrastructure facilities are inadequate, schooling is irregular while teachers' salaries are often unpaid for several months, case in point is the non- payment of salaries of Lagos State teachers for several months. How can one expect quality in the performance of the education system in such a situation? This is capable of making teachers and pupils' morale to be low and could lead to deterioration in the educational system. Despite the obvious roles which teachers

play in the classroom towards attaining educational objectives, the lack of motivation remains a very serious problem. No wonder the remarks made by Akinwumi (2000) that teachers' motivation was very low in Nigerian schools.

Furthermore, the slipshod manner in which educational policies have been implemented in this country in the last 43 years of independence calls for mentioning! In a bid to universalize free education for the country, the Federal Government launched the Universal Primary Education (UPE) in 1976. Although the Scheme was well motivated, it was faced with insufficient funding, limited infrastructure, inadequate number of qualified teachers, poor management and the uncooperative attitude of voluntary agencies (Fafunwa, 1974; Bassey & Archibong, 2001). Neither the Universal Primary Education (UPE) Policy of 1976 nor the 6-3-3-4 system of 1981 has been properly implemented even though both were well-conceived.

In pursuance of Section 18 (l) of the 1999 Constitution which stipulated the idea of Universal Basic Education (UBE) with the objective that government shall direct its policy towards ensuring that there are equal and adequate educational opportunities at all levels in the country, eradicate illiteracy and as at when practicable provide free compulsory and universal primary education; free secondary education; free university education and free adult literacy programme among others to its citizenry, the Universal Basic Education (UBE) was launched in September 1999 and it was sequel to the 1948 Universal Declaration of Human Rights which stipulated the right of every citizen to education (Jomtien Conference, 1990; World Bank. 1990; Obanya, 2000). However, if the UPE of 1976 was hurriedly implemented, what of the current UBE programme? The Bagauda Lake Seminar of 1980 provided ample realistic guidelines for proper implementation but one has not seen any real evidence that there is a will to heed such recommendations. Thus, *Education For All* remains a mirage if proper provisions are not made for the levels targeted by the UBE.

Thus, an assessment of the educational system shows the picture of Nigerian Secondary school where teaching and learning have been inadequate. It has further shown the picture of a school system with low level attainment at the end of each level of the education system (Oderinde, 2003; Onipede, 2003). The continued low level attainment from the schools' system shows that something must have been wrong within the educational system as not all the students could be academically poor. Hence, the educational system needs to be overhauled since all the necessary facilities for effective performance were in short supply in many schools. The UNESCO Standard of allocating 26 percent of the nations' budget to education has not been complied with (Onifade, 2003). Instead of striving to achieve that minimal by the Federal Government, the allocation to education is diminishing. Onifade therefore argued that it seems the government is not really serious about funding education in Nigeria. There was inconsistency in the structure of the former systems. There were the lack of coherence and orderliness, inadequate funding and the inability of the systems to work effectively. There was the lack of proper control, inadequate coordination and planning, insufficient school inspection and inadequate funding of the system (Adeyemi, 1998). The implication of this is that the educational system is in the throes of severe crises.

#### IMPLICATIONS FOR FUTURE PLANNING

The introduction of the Universal Basic Education (UBE) has opened up another dimension in die educational system. Although the structure remains the same but the UBE is to cater for the first nine years of a child's education, that is from primary class one to junior secondary class three. This shows a six-year programme for primary schools and the first three years of secondary schools. Although it is common to find that the junior secondary schools and the senior sec-

ondary schools are being operated in the same location under the headship of one principal in many States, a situation which negated the structure of the educational system, a welcome development in some States of the country now is the separation of the two levels of secondary education whereby each level would have its own principal and staff. This in effect would allow for effective management of schools at both levels. It is worth noting technical education needs to be more emphasized in the educational system by making it a direct six-year period after the primary six certification instead of the three-year junior secondary period. Polytechnic education too needs to be given more emphasis. All these call for a review of the educational system.

At the World Conference on 'Education for All' in Jomtiem, Thailand in March 1990 representatives of 155 countries signed a declaration which put the onus on the countries represented to cater for the whole population and offer courses that are as rich and varied as are the needs and abilities of the population (Obanya 2000). As such, considering the indices of school quality such as adequately trained teachers, well-equipped workshops and laboratories adequate number of classrooms, appropriate infrastructure, healthy organizational structure, effective leadership, and supervision, funding strategies for quality education must be in place in planning for the effective implementation of the educational system. Although the Nigeria's economy grew by 5% in year 2003 (Omotade, 2004), yet not much has been allocated into the education sector of Nation's economy. A weak production base has been identified as a major obstacle to industrial development in the country (Daniel, 2004).

The high rate of expansion of the Nigerian educational system implies that something urgent must be done to adequately fund the system. This is because the hues and cries on the implementation of the educational system seem to be centered on serious under-funding of education at all levels. The explosion in enrolment as a result of the influx of students into primary and secondary schools calls for immediate government attention in employing other sources of funding education. Since the educational system needs to be financed, certain questions should be addressed. One of such questions is 'who pays for education this country?' Another question is 'what are the sources of funding education? Yet another is 'would the funding be sourced from the private or the public sector or external assistance in form of loans, grants, personnel, equipment or training?' These are questions that require pertinent answers. It needs to be mentioned however, although external assistance represents about five to ten per cent of the government's expenditure on education (Olawepo, 2001; Adeyemi, 2004), the over-dependence on foreign assistance shows that the various governments in Nigeria could no longer alone finance their educational systems.

As a result of the inadequacies in educational funding in the country, .Olawepo (2001) reported that "the decay in the educational sector and the gross under funding of the universities took root during the .military era and remarked that in 1985, Nigeria's expenditures on education in relation to the gross domestic product (GNP) was a scandal compared with other less endowed African countries. He reported that Nigeria spent 1.2 per cent of its GNP on education. Although he noted that wastage is closely associated with chronic under-funding, he suggested that government must allocate about 26 per cent of the national budget as recommended by UNESCO to education in order to start rebuilding the education sector.

Although Maiyashi, (2003) agreed that good education finding is necessary for economic growth, he suggested that the government should let the people realize that it cannot do it alone. Agreeing that the government has not performed to expectation in terms of finding education in Nigeria, stressing that the Federal Government has not allocated up to 17% of its annual budget

to education in any given year, he reported that the government should create awareness and avenues for communities to assist government in the financing of education.

It was therefore concluded that the Nigerian educational system has not been effective in achieving the desired results. Hence, much still needs to be done to put the educational system in its right position if the aims and objectives of the National Policy on Education (FRN, 2004) are to be achieved. It was then recommended that more funds—should be allocated to the education sector of the country's economy to fully implement the educational system. The unique importance of education in Nigeria calls for special attention in terms of planning for funding of the educational system and better management strategies. The funding should however be in line with the UNESCO's directives of allocating 26 percent of the country budget on education.

#### **CONCLUSION**

The various problems highlighted in this paper have led the authors to conclude that the Nigerian educational system has not been fully implemented since its inception. There is no doubt that a perfect structure of an educational system has been put in place by the Federal Government to manage education in the country but the effective functioning of the system has much to be desired. It is therefore concluded that much still needs to be done to put the educational system in its right position as the country still has a long way to go if the aims and objectives of the National Policy on Education (FRN, 2004) are to be achieved.

Considering the conclusion made in this paper, it is recommended that more funds should be allocated to the education sector of the country's economy to fully implement the educational system. The unique importance of education in Nigeria call for special attention in terms of planning for funding of the educational system and management strategies. The funding should however be in line with the UNESCO's directives. Likewise, public funds should not be used for providing elitist schools under the guise of model schools, since every school is expected to be a model in any event. There is need for educational planners to put in place planning for quality education that would make provision for appropriate infrastructure, physical facilities, healthy organizational structure and effective leadership. There is need for government to provide funding strategies for quality education through education tax fund. Education could also be made to be community-based so that all adults in the community could contribute and participate in the management. Supervision strategies for quality education should be adopted. The approach would ensure quality by empowering internal and external monitoring of the educational system. This paper also upheld the suggestion made by Onifade (2003) that the Federal Government should endeavour to meet the UNESCO standard of allocating 26% of the nation's budget on education in order to meaningfully finance the education system in the country.

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## HUMAN TRAFFICKING IN ASIA: A HEINOUS CRIME AGAINST HUMANITIES

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**Abstract:** This paper discusses the human trafficking especially women and children trafficking in Asia. Human trafficking is not only a local problem but also a global concern. It is performed for various purposes such as labor, prostitution, organ transplant, drug couriers, and arm smuggling and affects virtually every country in the world. Recently trafficking of human being increased alarmingly due to globalization and liberalization. In Bangladesh and Nepal trafficking becomes an importance issue regionally, nationally and internationally. The victims mainly come from urban and rural areas of poor families. The governments and various NGOs of the world have taken various steps to stop human trafficking. This paper has taken an attempt to discuss aspects of human trafficking and highlights on various steps to prevent it.

#### INTRODUCTION

The United Nations (UN) protocol to prevent, suppress and punish trafficking in persons, especially women and children, supplementing the UN Convention against Transportational Organized Crime, trafficking is defined as any activity leading to recruitment, transportation, harboring or receipt of persons, by means of threat or use of force or a position of vulnerability. When the methods of trafficking may be such as coercion, luring, duping, abducting, kidnapping etc. then these happens due to social and economical constraints of the victims which make them vulnerable. Human trafficking is considered as the third largest source of profit for organized crime, following arms and drug trafficking. Trafficking is performed for various purposes such as labor, prostitution, organ transplant, drug couriers, arm smuggling etc. (Miko and Park 2002, Sarkar 2011). It is very difficult to collect data on trafficking, as the trade is secretive, the women and girls are silenced, the traffickers are dangerous and not many agencies are counting (Hughes 2000). Recently trafficking of human being increased alarmingly due to globalization and liberalization. People tend to migrate in search of better opportunities to make themselves rich and wealthy which is a positive trend the people for developing countries. But it sometimes creates problems such as smuggling of people across borders and unsafe migration by unscrupulous touts and agents. Increase trafficking also creates an adverse impact on the problem of HIV. The women and girls migrated for better ambition but at last they are sold in brothel by the traffickers and they have to confine for longtime in the brothel which sometimes cause HIV infection due to poor negotiation for safe sex methods. If a woman or girl is HIV infected then she may be return to his own country and her country has to spend huge costs for health and rehabilitation sectors. The UN estimates that about 4 million people trafficking in a year are treated against their will to work in some form of slavery, many of them are children. It is roughly estimated that in the last 30 years trafficking in women and children for sexual exploitation in Asia alone has victimized more than 30 million people. Asia is mainly an origin region as well as a destination for trafficking in persons.

Due to absence of social protection, economic security and legal support, an alarming number of women from the poor families become easy victims of trafficking. As trafficking and sexual exploitation is a crosscutting issue in this subcontinent, it has become a growing concern especially across borders. The problem is more acute for a country like Bangladesh that shares a porous border with India. As there is a heavy demand for women and girls traffickers takes trafficking as a highly profitable business. The organized gangs of traffickers often lure young women and girls with false promises of better jobs or false proposals of love and marriage. Bangladeshi

and Nepalese women and girls are more innocent and attractive, so that they become the first target of traffickers. Victims of trafficking are generally trafficked for forced prostitution, for purposes of organ transplants and slave labor. Accurate statistical data about the number of women trafficked from Bangladesh to serve the sex trade in neighboring countries is absent. The trafficked victims end up in brothels where they are sold for sexual exploitation or serve as street sex workers in India, Pakistan and the Middle East. Although the government has enacted stringent laws and implemented various policies to combat this menace, trafficking continues to be a significant problem in Bangladesh (Farouk 2005). Special target of traffickers are Bangladeshi girls, because the customers think that girls are virgins and are less likely to be infected with HIV. There is a blind belief that intercourse with a virgin girl cures a person's sexually transmitted diseases (STDs), though there is no evidence for this belief. Traffickers use Kolkata of India as the trafficking point for other destinations such as India, Pakistan and Middle East for Bangladeshi women and girls (Sarkar 2011).

The present form and nature of trafficking can be explained by poverty and social disintegration. The spread of wage employment or bonded labor such as domestic labor, women working in the sex trade, in entertainment (camel jockeys), child abuse, and organ trading can be identified as demand factors of trafficking.

In South Asia, Bangladesh and Nepal are the countries that face the brunt of global child and women trafficking. From Bangladesh, Nepal and Pakistan, a high number of women being trafficked mainly to India, Eastern Europe and Middle East for commercial sex and maid service works. Indian traffickers lure young women and female children for lucrative jobs and better standard of living from Assam, West Bengal, Uttar Pradesh, Madhya Pradesh, Jharkhand, Bihar, Chattrisgarh and Rajasthan, and finally push them into Indian brothels.

Migration without valid documents is more rampant throughout the world because of a variety of factors, including existence of unclear rules governing immigration in the developing world and their weaker implementation, inability of the countries to law enforcement their extensive borders due to lack of sufficient resources and trained manpower, unholy links between and among the migrants, borders security forces and international gangs of human smugglers and traffickers and powerlessness of the civil societies. In sub-Saharan Africa, for instance, irregular and illegal migration is probably the dominant form of migration. Here the children are trafficked for farm labor and women for sexual exploitation. It is estimated that up to 200,000 children are trafficked each year in Western and Central Africa alone. According to an estimate, by the end of 1990s, around 400,000 people had entered the European Union as a result of human smuggling and trafficking (Ugur 2007).

According to an estimate of the US government, for example, between 800,000 and 900,000 victims are trafficked globally every year and between 17,000 and 18,500 are trafficked into the USA each year.

### **DEFINITION OF TRAFFICKING**

The UN Protocol to Prevent, Suppress and Punish Trafficking in Persons defines trafficking as follows: "Trafficking in persons' shall mean the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs."

The US Government definition of trafficking in persons is as follows: "All acts involved in the transport, harboring, or sale of persons within national or across international borders through coercion, force, kidnapping, deception or fraud, for purposes of placing persons in situations of forced labor or services, such as forced prostitution, domestic servitude, debt bondage or other slavery-like practices".

Some religious groups, as well as feminist organizations, have campaigned to broaden the definition of trafficking to include all forms of prostitution, whether forced or voluntary, on grounds that prostitution is never truly voluntary and that traffickers will simply force their victims to claim to be acting voluntarily.

In 2000, the UN General Assembly adopted the Convention on Transnational Crime, including a Protocol on Trafficking. A Protocol to the Convention on the Rights of the Child on Sale of Children, Child Prostitution and Child Pornography was signed by the United States July 2000 (Miko and Park 2002).

#### TRAFFICKING IN ASIA

Asian victims sometimes trafficked from Asia to Asian countries, in particular to Thailand, Japan, India, Taiwan and Pakistan (UN 2004). The US Department of State estimates that 600,000 to 800,000 women and children are trafficked for sexual purposes across international borders each year, of which about 80% are women and 50% are minors. Also International labor Organization (ILO) estimated that about 12.3 million people trafficked worldwide for labor annually and the annual profit made from the exploitation of all trafficked and forced labor is about \$31.7 billion (US Department of State 2006).

In South Asia, Bangladesh and Nepal are the countries that face the brunt of global child and women trafficking. From Bangladesh, Nepal and Pakistan, a high number of women being trafficked mainly to India, Eastern Europe and Middle East for commercial sex and maid service works. In south Asian countries the demand of women and girls is more than male.

Chinese, Asian, Mexican, Central American, Russian and other former Soviet Union gangs are among the major traffickers of people. Chinese and Vietnamese Triads, the Japanese Yakuza, South American drug cartels, the Italian mafia, and Russian gangs increasingly interact with local networks to provide transportation, safe houses, local contacts, and documentation (Miko and Park 2002).

It is estimated in 1995 that approximately 45,000 Nepalese girls arrive in the brothels of Mumbai and approximately 40,000 in brothels of Kolkata every year (Women's Groups in Nepal 1995). In Mumbai, children as young as 9 years old are bought for \$1,200 at auctions (Freidman 1996). There were about 1,000,000 Bangladeshi and more than 200,000 Burmese were trafficked women in Karachi, Pakistan (Chakraborty 2006). More than 19,000 Pakistani children have been trafficked to the United Arab Emirates (UAE) (Sinha 2006). Approximately 10,000 to 12,000 girls from rural areas of Bangladesh are trafficked and prostituted to pedophiles abroad by organized crime groups (Bedi 1997).

# UNITED NATIONS AND SOUTH ASIAN POLICY OF TRAFFICKING

Trafficking in people, especially women and children, for prostitution and forced labor is one of the fastest growing areas of international criminal activity and one that is of increasing concern to the US Administration, Congress, and the international community (Miko and Park 2002).

The United Nation's former definition of a 'victim of trafficking' perceived women mostly as a group which surfaces as a variable only under specific circumstances. This has been visibly appropriate in the adaptation of the 1949 Convention for the Suppression of Traffic in Persons and

its further development is found in 2000. After much debate, an internationally agreed definition of human trafficking now exists in Article 3 of the Palermo Protocol. This definition focuses on exploitation of human beings, be it for sexual exploitation, or other forms of forced labor, slavery, servitude, or for the removal of human organs. As per the definition, "trafficking takes place by criminal means through the threat or use of force, coercion, abduction, fraud, deception, abuse of positions of power or vulnerability" (DeStefano 2007).

After the advancement of international anti-trafficking efforts like the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (UN 2004), south Asian countries have started strengthening their constitutional laws regarding trafficking and prostitution (US Department of State 2008). Sri Lanka and Myanmar have established anti-trafficking units. Pakistan added section to combat trafficking not stated in the Sharia law. Nepal passed the Traffick in Humans (Control) Act in 1986, but it was considered ineffective due to the lack of political and judicial enforcement (Hennink and Simkhada 2004). Bangladesh has recently passed laws such as the Suppression of Violence against Women and Children Act and India has amended its Immoral Traffic Suppression Act (SITA) with the Immoral Traffic Prevention Act (PITA). Unfortunately, these laws are often enforced by penalizing the victims of violence under the charges of 'public indecency' and 'public nuisance' (Gangoli 2007).

## CAUSES OF SOUTH ASIAN COUNTRIES VICTIM OF VIOLENCE

In South Asia it is a common deadly fate of life for millions of women and girls. Here one in every two women faces violence in her home. Violence is an inescapable reality of women's lives, as the social customs and attitudes that support violence against them are entrenched and institutionalized at all levels such as at home, family, community, society, and the state. Breaking the silence on this violence is not an easy, or even a real option for most women and to do so would threaten their lives (Mehta 2004). South Asian women suffer multiple forms of violence including domestic violence, rapes, gang rapes, dowry deaths, sexual harassment, and suicides due to domestic physical and mental tortures or stigma after rape, forced marriage, trafficking, and other psychological and financial oppressions (Mohajan 2012). Women and girls are sometimes underestimated by keeping in purda (special dress to cover the body), deprive from education and do not allow for jobs. So that violence against women is consider as a normal situation by the society (Farouk 2005). South Asian countries show a patriarchal culture at different levels in society including caste, class, and extreme gender discriminations. Gender discrimination begins at the primary level of education where parents invest in the education of boys over girls. This is because men's wages in the labor market are historically higher than women's. Gender discrimination is observed more in families living below the poverty line as they have to make choices when resources are scarce (Dollar and Gatti 1999). In most cultures, a son is preferred, and daughters are often a liability to the natal family as a result of societal customs like dowry and arranged marriages. Poor parents prefer to marry their daughters off to strangers who make less or no monetary demands, thus making them more vulnerable to trafficking (D'Cunha 2002). Also, in economically backward regions of Nepal, due to the economic limitations parents often sell their daughters to traffickers for small income (CATW 2003). Young girls are commonly married off to elderly men. Similarly, the girls from ethnic minorities and lower caste groups are more at risk of trafficking (Ejalu 2006). Some cases pre-natal female fetus' are killed by abortion when parents confirm by ultrasonography that their coming baby will be female. This is because the parents feel the female as a burden of the family (Mohajan 2012).

UNDP (2003) exposes how women in this region remain deeply vulnerable and disadvantaged; indicators for literacy, health, economic activities, work burden, empowerment, and political par-

ticipation are among the lowest in the world. A recent World Bank regional brief for South Asia reinforces the message that women are in crisis; stating that 56% of South Asian women are illiterate, and one third of all maternal deaths in the world occur here (Mohajan 2012).

Married women in South Asia are not fully aware of their own sexual and reproductive rights, and have only limited control over their own bodies. A woman's freedom of choice regarding sexual intercourse, birth control, pregnancy, pre-natal care, and abortion are decided by her husband and his family members. A man sometimes intercourse with his wife against her opinion and she is a passive participant to satisfy her husband only. Sometimes he threats his wife of taking second wife if she does not take part of intercourse according to his wish. Often there is a pressure from the husband's family for the wife to male offspring. Hence sometimes a young woman might begin conceiving at a very early age and endure several consecutive pregnancies in the hope of a male offspring and if she fails to give a male child then physical and psychological oppressions begin upon her (Mohajan 2012).

India, Pakistan and Malaysia are well-known for hosting a number of illegal Bangladeshi migrants including those smuggled and trafficked from Bangladesh. These countries are also well-known for their use as transit countries by the illegal Bangladeshi migrants and their smugglers and traffickers (Mehdi 2010).

#### LEGAL AND ILLEGAL MIGRATION IN ASIA

Human beings have always been on the move and their migration due to a variety of factors including wars, conflicts, violence, environmental hazards, hunger, disease, indignity and quest for a better future have been both voluntary and forced and regulated and unregulated. Traffickers advertise the phony jobs, as well as marriage opportunities abroad in local newspapers, and the men and women from poorer families are the victim of these false promises.

There are many causes for human trafficking and some of them are as follows (Sarker and Panday 2006):

- chronic poverty,
- increase number of parentless street and working children,
- false hope of employment and marriage without dowry,
- the insecurity of basic needs and civic facilities,
- marital closing in terms of abandonment, separation and divorce of the women,
- unemployment and rapid growing need of cheap labor in the international market,
- natural disaster and displacement of people,
- increased activity of traffickers and the entry and consolidation of organized crime syndicate in the arena of trafficking,
  - corruption among the agencies responsible for enforcing law and order,
  - increased tourism around the world,
  - rapid growth of transport facilities, networking, paper advertising, and
- increased criminalization and brutalization of society against women and children, such as rape and acid throwing.

At present there are about 191 million international migrants worldwide. More than 700,000 people are believed to be trafficked each year worldwide; some 50,000 to the USA. The largest number of victims comes from Asia, with more than 225,000 victims each year from Southeast Asia and more than 150,000 from South Asia. More than 15,000 women and children are believed to be trafficked out of Bangladesh every year. Over 4,000 women and children from

Bangladesh are trafficked to Pakistan each year. In total, more than 200,000 women are believed to have been trafficked to Pakistan.

About 7,000 Nepalese women and children are trafficked for prostitution to the Asia Pacific area, especially in Hong Kong. A non-government source reports that about 200,000 Bangladeshi women and children have been trafficked to the Middle East in the last 20 years. Some 20,000 Pakistani children are said to have been trafficked to the United Arab Emirates (UAE). India is a source, transit, and destination country, receiving women and children from Bangladesh, Nepal, Bhutan, Sri Lanka, and Pakistan and sending them to Europe and the Middle East. The growth of sex tourism in this region is one of the main contributing factors. Large-scale child prostitution occurs in many countries. Thailand, Cambodia, and the Philippines are popular travel destinations for sex tourists, including pedophiles, from Europe, North America, Japan, and Australia (Miko and Park 2002).

The former Soviet Union is now believed to be the largest new source of trafficking for prostitution and the sex industry, with over 100,000 trafficked each year from that region. An additional more than 75,000 are trafficked from Central and Eastern Europe. More than 100,000 come from Latin America and the Caribbean, and more than 50,000 victims are from Africa. Most of the victims are sent to Asia, the Middle East, Western Europe and North America (Miko and Park 2002).

The demand for the labor force will continue to grow in the coming years and decades due to globalization. On the other hand the number of countries interested in sending their labor force abroad for works. As a result, the international job market is much more competitive today than it ever was. So that the labor force reputed to be professional, hard working and dedicated and belonging to countries known for being relatively peaceful, secular, democratic and forward-looking will be preferred by the labor importing countries and demand for work force from countries known for being violent, corrupt, retrogressive and poorly governed will gradually decline. Especially the work force from the countries widely censored for not doing enough to combat and prevent illegal migration, smuggling and trafficking of their own citizens and the citizens of other countries will not be welcomed by the international job market (Mehdi 2010).

For the migration states like Bangladesh, Pakistan and India are facing challenging times but enormous opportunities for them and there is lot of space in the international job market for their labor force. Being hugely labor surplus and poor countries, they aspire to export more work forces to earn more remittances and reduce the level of unemployment at home. They need to provide quality training and education to their citizens and invest in the people and build up their reputation as supplier of professional, hard working, honest and cooperative labor force. They also need to establish their credentials as countries not only opposed to illegal migration, human smuggling and trafficking, but also as countries doing whatever they can to combat these evils (Mehdi 2010).

Pakistan is an attractive transit state concerning illegal migration, human smuggling and trafficking from Bangladesh to Pakistan and the traffickers tempted to pass through Pakistan to the Gulf and the Middle East, Great Britain, USA, Canada, Malaysia and Japan. Illegal migration, smuggling and trafficking of Bangladeshi men, women and children into Pakistan are continually increasing as the Gulf and the Middle Eastern countries are allegedly having considerable demand for children (for camel races, domestic work and sexual abuse), for young girls and women (for sexual exploitation and domestic work), and for men (for slave labor) (Mehdi 2010).

The issue of illegal migration of Bangladeshis to Pakistan and their smuggling and trafficking into Pakistan or their flight through Pakistan into the adjoining countries and beyond is part of a

larger issue concerning almost all the countries of the world and the entire humanity. Of course this is a part of a larger issue of human slavery, prostitution and dehumanization of the humans. But it challenges the evolving global, regional and national human rights regimes and structures and retards the pace of humanizing and democratizing process at local and international level. It is important for both Bangladesh and Pakistan that they deal with the issue with mutual understanding, cooperation and determination, and with care, empathy and creativity (Mehdi 2010).

Japan is the largest market for Asian women trafficked for sex, where some 150,000 non-Japanese women are involved, half are from the Philippines and 40% are from Thailand. Victims are also trafficked in increasing numbers to newly industrializing countries and regions, including Taiwan, Malaysia, Hong-Kong, and Thailand. Cross-border trafficking is prevalent in the Mekong region of Thailand, Myanmar, Laos, Cambodia, Vietnam, and the Southern Yunan province of China. Vietnamese women are trafficked to China and Cambodia. According to various NGO sources, hundreds of thousands of foreign women and children have been sold into the Thai sex industry since 1990, with most coming from Myanmar, Southern China, Laos, and Vietnam. East Asia, especially Japan, is also a destination for trafficked women from Russia and Eastern Europe (Miko and Park 2002).

Victims from Southeast Asia, especially China, Burma, the Philippines, Thailand, Cambodia, and Vietnam, are also sent to Western Europe, the United States, Australia, and the Middle East.

## ILLEGAL BOARDER KILLING AND ARREST

In the recent years the illegal boarder killing increases alarmingly. About 390 persons were killed in the year 2008 and 417 in 2009 to cross the US-Mexican border and about 705,022 persons were arrested while trying to cross the border illegally (The Daily Jang 2010). At least 920 migrants died when trying to reach Europe between 1992 and 1997 and more than 4,000 had killed between 1992 and 2003. Most of them died while crossing the Strait of Gibraltar. Estimates of the death toll range from 3,861 to 5,607 in the last fifteen years (Jimenez 2009). It is estimated that, during the last 12 years, over 4,000 migrants died crossing the wall that separates Mexico from the United States, which is 15 times more the number of people who died crossing the Berlin Wall during the 28 years it existed (International Federation for Human Rights, FIDH 2008).

Human rights violations by the Indian Border Security Force (BSF) at border areas continued between January and September 2011. BSF abduct farmers at work in the fields by intruding into Bangladesh territory. On 7 January 2011, a 15-year old girl, Felani Khatun, was shot and killed by the BSF while she was entering Bangladesh from India, near the international pillar 947 of the Anantapur border in Phulbari Upazila under Kurigram district. Her body was left hanging from the wire fence for 5 hours. The BSF took down Felani's body after the 5 hours and handed her over to BGB after 30 hours. According to information gathered by Odhikar, since January to September 2011, along the India-Bangladesh border, the BSF allegedly killed 21 and injured 51 Bangladeshis Odhikar (2011).

Over the past 10 years Indian security forces have killed about 1,000 people, mostly Bangladeshis, turning the border area into a South Asian killing fields (The Guardian 2011).

## TRAFFICKING OF BANGLADESHI WOMEN AND CHILDREN

In Bangladesh trafficking becomes an importance issue regionally, nationally and internationally. There is well organized channel of trafficking in women and children constituted by the traffickers of Bangladesh, India, Pakistan and Middle East. Bangladesh is a poor developing country in the world, the density of population is very high, most of the populations are illiterate, natural disaster is recurrent, gender inequality prevails in every society, erosion of river bank due

to over flood make shelter less women and girls. The traditional social structure, economic system, cultural condition and geographical setting of Bangladesh are vulnerable. As a result Bangladeshi women and children become easy victim of human traffickers. Easily crossable boarder with India which extends over 4,222 km is one of the contributing factors for trafficking in women and children to India. The women are generally instructed to wear a particular band or amulet on their arms for easy identification at the transit points and destinations. At the boarder, the women and girls are kept in particular houses for prearranged fees and then simply walk across fields adjunct to the border at a convenient time (Paul and Hasnath 2000). Due to monetary gain and individual sexual favors, a number of dishonest border police in Bangladesh assist in carrying trafficked women across the national border (Momen 1998). Western border districts of Bangladesh, particularly Jessore and Khulna are widely used by traffickers for trafficking purposes. A small number of women are taken directly by air from Bangladesh to Middle East and European markets. Corrupt officers at the airport and travel agents are involved in issuing the documents necessary for international air travel for a specified amount of money (Sarker and Panday 2006).

About 40,000 to 50,000 young women and children are being victim of trafficking every month from Bangladesh. About 600,000 women and children per year are being victims of trafficking to India, Pakistan, Middle East, Africa (especially in Libya), Europe and the USA in search of work and they become vulnerable to exploitation and unprotected law due to their illegal status. Many of them are forced to work for extremely low wages, while other auctioned for sex work to develop tourism or forced marriage, which is often a form of slavery. The traffickers lure the poor families of the rural area of Bangladesh with the false promise of employment, marriage without dowry and better quality of life. The traffickers use the technique of illegal border crossing. The trafficking women and children are compelled to involve in sex-trade with the probability of HIV/AIDS infection, domestic work, harmful industrial work, debt bondage labor, forced marriage, forced begging, camel jockeying, adoption trade and sometimes trafficked victims are killed for organ harvesting.

The illegal trafficking of Bangladeshi women have started for the first time when the large scale migration of both male and female laborers to the Middle East commenced in 1976. In 1981, a presidential order was announced, allowing only professional women to migrate. An organization of migrant workers in Kuwait together with an Islamic organization in Bangladesh forced the government to stop the migration of women. They argued that women's honor could only be protected if women were not allowed to leave their families, their communities and their home (Sarker and Panday 2006). Many women who legally entered in the Middle East prior to 1982 face the ill-treatment and offensive behavior included overburden, whipping, dishonor, insufficient food, sexual persecution and rape (Hossain 1993, Paul and Hasnath 2000).

The trafficking strangely and instinctively exaggerated in early 1982, when the government of Bangladesh in response to the problems generally faced by maids employed there, passed protective legislation to dissuade the migration of women workers to the Middle East.

Anti-Trafficking Policies of the Government

Bangladesh government accepted to the UN Optional Protocol to the convention on the elimination of all forms of discrimination against women. The government has promulgated a numbers of laws and formulated policies to prevent trafficking in women and children. The Suppression of Immoral Trafficking Act of 1993 provides stringent penalties for forcing a girl into prostitution. The Children Act of 1974 and 1993, seek to protect children from exploitative and hazardous conditions. The Anti-Terrorism Ordinance of 1992 makes all types of terrorism including

the abduction of women and children a punishable offence. The Penal Code of 1860 contains strict provisions and penalties for kidnapping. The Women and Children Repression Prevention Act of 1995, which was replaced by the Women and Children Repression Prevention Act of 2000, act specifies that trafficking a woman for prostitution or unlawful or immoral purposes or import or export or buying or selling or renting or engaging in any other form of transportation of women is a subject to life imprisonment and fine. Kidnapping a woman for illegal or immoral purposes such as prostitution, non-consensual marriage or forced or falsely enticed coitus is an offence punishable by life punishment, 10 years rigorous punishment and fine. Illegally importing, exporting, buying or selling a child, keeping a child or transferring a child to another is subject to the death penalty or life imprisonment. However, enforcement of these laws is weak, especially in rural areas. The government also has enacted laws specifically prohibiting certain forms of discrimination against women, including the Anti-Dowry Prohibition Act of 1980, the Cruelty to Women Law of 1983 (Sarker and Panday 2006).

Bangladesh government has introduced National Action Plan in consultation with NGOs which gives priority in 14 ministries and divisions under initiative of The Ministry of Women and Children's Affairs. Besides, UN Task Force in Bangladesh, UNAIDS in Bangladesh, Office of the High Commissioner for Human Rights (OHCHR), United Nations Development Programme (UNDP), United Nations Children's Fund (UNICEF), United Nations Development Fund for Women (UNIFEM), ILO–IPEC supports NGO program, International Organization of Migration (IOM), United Nations Population Fund (UNFPA) and World Health Organization (WHO) are involved for combating the trafficking of women and children. Many international NGOs such as, Save the Children Alliance, The Asia Foundation, Plan International, Action Aid, etc are working against human trafficking. In addition, some major INGOs and donor organizations such as CIDA, DANIDA, SIDA, OXFAM, CEDPA, Population Council, USAID, Red Barnet, Trafficking Watch Bangladesh, etc. are involved in anti-trafficking programs (UNIFEM 2003, Sarker and Panday 2006).

The government of Bangladesh established a Police Monitoring Cell at the Police Headquarters in 2004. Its functions include collection of information and intelligence regarding human trafficking specially trafficking in women and children, and the monitoring of the movement of criminals involved in human trafficking, arrest of criminals, rescue/recovery of trafficked persons, assisting in prosecuting relevant cases, rehabilitation of trafficked persons and subsequent follow up, and regularly following up the progress of disposal of such cases. The Monitoring Cell at the Police Headquarters maintains the database of cases related to trafficking. A monitoring unit has been formed in each of the 64 district headquarters and it sends updated statistics to the police headquarters (Bangladesh Country Report 2007).

The Bangladesh Rifles (BDR), the Bangladesh Police, the Bangladesh Coast Guard and also the Rapid Action Battalion (RAB) have been given strict instructions to prevent any trafficking in women and children, and apprehend the traffickers. 407 traffickers have been arrested since 15 June 2004 to 15 February 2007 and in this connection, 373 cases were instituted in different police station (Bangladesh Country Report 2007).

A monthly meeting is held regularly in the Ministry of Home Affairs with the representatives of the US Mission in Bangladesh wherein updated information is given on different aspects of the problem and ideas are exchanged. The US Mission officials have also attended interministerial meetings and the meeting with the NGOs to see the working of such committees. As a result of the endeavors so made, Bangladesh was cited as a positive example in combating trafficking in persons in two hearings before the US Congress. Again in an interim assessment report

prepared recently by the US State Department, it has been mentioned that Bangladesh has made clear and significant progress in combating trafficking in persons (Bangladesh Country Report 2007).

Rehabilitation/Reintegration of Recovered Persons

The members of law enforcing agencies, the Deputy Commissioners, the Superintends of Police and NGOs have been tasked to rehabilitate the recovered trafficked persons through social reintegration process. The recovered trafficked persons are rehabilitated in the following two ways, (i) the trafficked persons are sent to their parents or guardian after due verification and proper documentation and (ii) if parents or guardians are not found immediately, the trafficked persons are sent to the nearest government or NGO-run safe homes (shelter). Some initiatives have been taken by respective GO / NGO in their safe homes for the welfare of the trafficked persons, while waiting for the reintegration with their family/society. These are physical and mental treatment, psychosocial counseling, shelter, food, clothing, and legal aid, training on skills development for economic and social reintegration. Of the recovered victims during 15 June 2004 to 15 February 2007, 484 persons were rehabilitated by being sent to their parents and guardians after proper verification and documentation, 11 persons were sent to the safe homes of the Ministry of Social Welfare and the Ministry of Women and Children Affairs, and 39 persons were sent to the safe homes of NGOs (Bangladesh Country Report 2007).

Repatriation and Social Integration of Bangladeshi Children Involved in Camel Racing in UAE

Through lobby and advocacy by human rights organization, NGOs, civil society and the government of source countries, the UAE government finally banned the use of children younger than 14 years of age or below 45 kg as camel jockey since March 2005. As a result, huge number of children under 14 years of age or below 45 kg who had so long been used as camel jockeys were released from forced and harmful job. The government of Bangladesh, with the technical support of UNICEF and financial support of the government of the UAE, has taken necessary steps to repatriate and integrate the Bangladeshi children used as camel jockey within agreed time frame (Bangladesh Country Report 2007).

# TRAFFICKING OF NEPALESE WOMEN AND GIRLS

In South Asia, Nepal is in the top position in victim of global child and women trafficking. Every year about 10,000 Nepalese women are trafficked to India's four main cities, Mumbai, Kolkata, Delhi and Bangalore for bondage based commercial sex. About 6,000 Nepalese girls are trafficked to Hong Kong, Thailand and the South East Asian countries as far as away as Taiwan and about 7,000 Nepalese girls being trafficked to the Middle East. The 2009, Trafficking in Persons Report provided an estimate of 10,000 to 15,000 Nepali women and girls are trafficked to India each year (US Department of State 2009). The traffickers collect women and girls (whose age are between 9 and 16 years) from the isolated districts Sindhupalchowk, Makwanpur, Dhading and Kavre of Nepal where the populations are largely illiterate, poor and a highly infected of HIV (Prasai 2008). More than 200,000 Nepalese girls are involved in the Indian sex trade. A girl is bought for \$20 and later on sold or re-sold to Indian sex market agents for up to \$600, the price of the girl is increased based on her beauty, physique and the demand for her type of services (Nepal/India News 1997). In the brothels the girls often have to serve offering commercial sex to 15 to 25 customers daily against their will and they often have to work 14 to 18 hours a day for which they find nothing. Even these girls find no proper food and treatment. The victims are only abandoned when they become infected with HIV. In February 1996, total 218 Nepalese girls rescued by a Mumbai police raid, and 60-70% of them were found HIV positive. Many poor

Nepali men sell their young wives and daughters for \$150 each to the trafficking agents and some highly poor families even booked their daughters in advanced to the trafficking agents. Nepal has a unique cultural system known as 'Deukis' where by rich zamindars (feudalistic agricultural families) having no children through a legally married wife, procure young girls from poor rural Nepalese families and after initiating them into the household through the temple rites are taken as mistresses cum slave bonded laborers to produce offspring. Later on, as the girl gets to be over 30 years and grows older, she is forced into prostitution. These Nepalese women have no right to take any action against this oppression. Even the government of Nepal does not take steps to protect this illegal law, although this is a violation of human right. Global action is needed to halt these Nepalese women oppressions. In 2007 according to a UN report, there were nearly 30,000 deukis in Nepal compared to 1992, when there were 17,000 deuki girls according to Radhika Coomaraswamy (2002).

It has been stated by various Indian NGOs that the girls often were locked up, starved, beaten, and burnt with cigarettes for not complying with the brothel owner or the customers' needs. Sometimes girls are forced to take special training by showing pornographic films, tutorials in how to please customers, and adjust with repeated rapes. About 1,740 mile-long open border between India and Nepal affords easy commercial flexibility for sex transactions which also includes primarily trafficking of Nepalese women and girls. Sometimes victims are brought into destination countries, their passports are often confiscated (Miko and Park 2002).

#### TRAFFICKING WITHIN INDIA

In India in the third century girls born in poorer families had been offered by the parents to the service of the God and their religion and they have to dance and act as prostitute. In south India, they are known as *Devadas*' and in north India as *Mukhies*. During the Mughal Empire, the Muslim rulers brought these dancers to courtyards and recognized prostitution as a profession which flourished under royal patronage. After the downfall of the Mughal Empire, these dancing and singing girls turned into prostitution. The situation of dancing women worsened during the British regime. These dancing girls were termed *Nautch* girls and they were used to prostitution for both Indian customers and the refreshment of British troops (Joardar 1984).

The number of girls trafficked alarmingly in India from rural areas to urban cities of India like Mumbai, Kolkata and Delhi (United Nations Children's Fund, UNICEF 2003). Karnataka, Andhra Pradesh, Maharashtra, Tamil Nadu, and Uttar Pradesh are the high-supply zones for women in prostitution in India. Belgaum, Bijapur, and Kolhapur are some common districts from which women migrate to cities due to socio-economic forces or through an organized trafficking network. Goa is a famous tourist destination in west India; about 2,000 girls have been engaged in prostitution along the Baina beach for high income in Goa. The bordering districts of Maharashtra and Karnataka, known as the Devadasi Belt, have trafficking structures operating at various levels. Many of the *Devadasis* are found in brothels and dance bars of India who are dedicated into prostitution by their families in the name of the goddess *Yellamma* (Menon 1998).

Women born into a Bedia family remain unmarried and they engage in prostitution in order to provide for the economic needs of their natal family. This practice has been going on for many generations (Agrawal 2008). But the Indian government has not taken any strong step to ban this crime against women.

Eunuch Lane in Mumbai has more than 2,000 eunuchs (male prostitutes) in prostitution. As young boys, they are abandoned or sold by their families to sex rings and taken into the jungle, where a so-called 'priest' cuts off their genitals in a ceremony called *nirvana*. Due to societal

discrimination, they generally survive by begging and prostituting. There is a common belief among Indian men that they cannot contact HIV from eunuchs (Freidman 1996).

Kolkata is the center of prostitution employing over 10,000 prostitutes in the red light district of Sonaghachi. The girls from poorer Indian villages work as prostitutes here. The Bangladeshi girls are also trafficked here through gangs for the prostitution here (Gayen et al. 2004). According to International Organization for Migration's (IOM's) report for 2008 is that almost half of all migrants are women (49.6%), with only slightly more working in the developed than in the developing countries (IOM 2008).

The important host countries in Asia are Singapore, Malaysia and Thailand. There is a high proportion of migrants in the labor force of these countries, in Singapore (28%) and in Malaysia (16%). Many of the foreign workers in these countries are from Bangladesh and Pakistan. South Asia is another Asian region where there is a large concentration of migrant workers, refugees, illegal migrants and smuggled and trafficked people. Among the countries of the region, India and Pakistan together host a large number of such people (Battistella 2007).

#### **CONCLUSION**

In this paper we have discussed that trafficking activities are increasing both nationally and globally. A large number of women and children in Asia are victim of violation of basic human rights. The governments of Asian countries, NGOs, INGOs and Civil Society Organizations are working together to eliminate human trafficking from the society. The governments of all countries of the world will have to pass strict laws to punish the criminals such a way that this crime will abolish in future. Actually migration due to globalization increases human trafficking worldwide. We have shown that poverty, illiteracy, ignorance, social statuses are the main cause of trafficking of women and children. Campaigns on awareness about human trafficking should be building to those areas where migration rates are risky and high. Social workers will have to teach about bad effects of trafficking to the common people so that they may remain away from trafficking and migrate in legal way.

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