

GUJARAT FACTSHEET 2020



Picture Courtesy: CHETNA, Ahmedabad, Gujarat

DEVELOPED BY:



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OXFAM
India

THE SECRETARIAT OF NATIONAL COALITION OF CIVIL SOCIETY ORGANIZATIONS

BACKDROP

In India the civil society organizations have been experimenting and developing various community participation models but mostly its spread has been limited and operations remained in silos because of lack of platforms and alliances to highlight their works. Therefore, Oxfam India has set a national coalition for civil society organizations from 15 states in the country to bring certain macro-level changes that can help to achieve the envisaged health, nutrition and women's economic empowerment outcomes through a common platform. It is believed that this platform will give a collective voice to the people and has the capacity to negotiate and influence the state for the necessary integration of health, nutrition and gender under the government flagship programmes like NRLM, NHM, ICDS and others. Oxfam India acts as an interim Secretariat for this coalition at the national level to provide necessary support for its effective functioning. As the thematic areas of work of this coalition are being looked through the lens of gender discrimination and social inclusion, emphasis is being given on Dalits, Adivasis and Muslims communities.

As evidence generation is one of the key strategies for functioning of this coalition, Oxfam India intended to develop a state factsheet for each of the target states to highlight health, nutrition and women empowerment related issues of the state.

Only the important indicators related to health, nutrition and women empowerment have been included in this factsheet and presentation of segregated data is limited to only locations (rural & urban), caste categories (SC, ST, OBC & Others) and religious groups (Hindus & Muslims). As data for other religious categories are not available for all indicators for all sources, only two religious groups have been considered for the present analysis.

STATE AT A GLANCE

OVERALL POPULATION

INDIA **1,210,854,977**

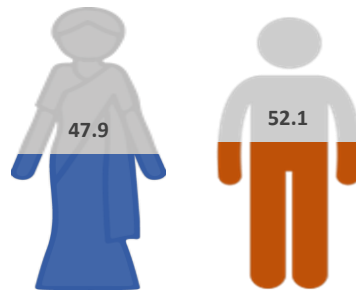
STATE **60,439,692**

(5.0%)

OF INDIA POPULATION

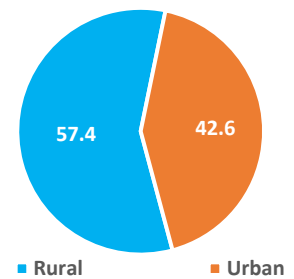
Source: Census 2011

STATE POPULATION BY SEX (%)



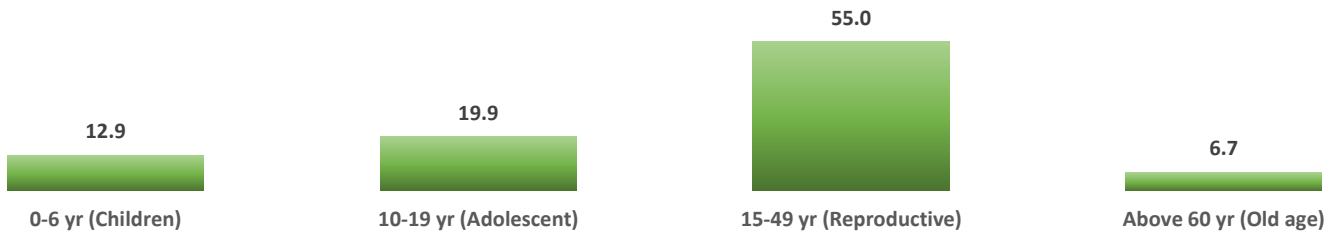
Source: Census 2011

STATE POPULATION BY LOCATION (%)



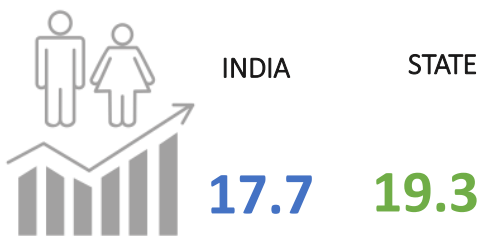
Source: Census 2011

STATE POPULATION BY AGE GROUP (%)



Source: Census 2011

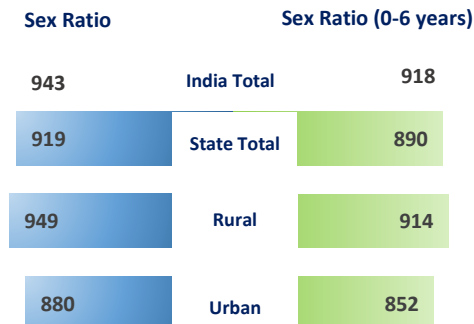
*DECADAL POPULATION GROWTH RATE



* Total population growth between 2001-2011

Source: Census 2011

SEX RATIO (FEMALES PER 1000 MALES)



Source: Census 2011

HEALTH INDEX (RANK)



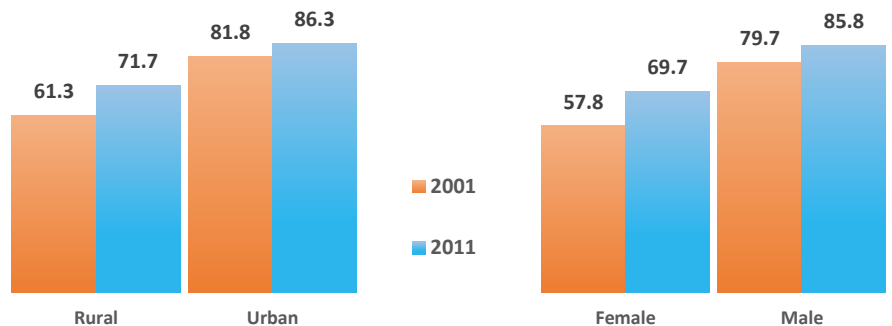
Source: Economic Survey 2019

OVERALL LITERACY RATE (%)

	2001	2011
INDIA	64.8	73.0
STATE	69.1	78.0

Source: Census

LITERACY RATE BY LOCATION AND SEX OUT OF STATE'S TOTAL LITERACY (%)



Source: Census

- Nearly 60% of Gujarat's population lives in rural areas.
- More than half of the state's population falls in the reproductive age-group.
- Gujarat's sex ratio and sex ratio at birth both fare poorly in comparison to national figures, with the urban areas being most critical.

MAIN WORKERS (%)

INDIA

75.2

OUT OF STATE'S TOTAL
MAIN WORKERS

58.3

41.7

STATE

82.2

Rural

Urban

Source: Census 2011

MARGINAL WORKERS (%)

INDIA

24.8

OUT OF STATE'S TOTAL
MARGINAL WORKERS

83.9

STATE

17.8

Rural

16.1

Urban

Source: Census 2011

ASPIRATIONAL DISTRICTS OF STATE WITH THEIR RANKS AS PER BASELINE* CONDUCTED IN 2018

Name of the Districts	Composite Rank	Health Rank	Education Rank	Agriculture Rank	Financial Inclusion Rank	Skill Development Rank	Basic Infrastructure Rank
Dohad	17	42	8	40	79	58	11
Narmada	18	33	16	36	27	82	12

Source: Niti Aayog



TOP 20 IN INDIA



BOTTOM 20 IN INDIA

*Total 115 districts have been identified as Aspirational Districts in India. But the ranks given in the table are based on the baseline conducted by NITI Aayog in 2018 for 101 Aspirational Districts only.

- While the main work force in Gujarat is more or less equally distributed in rural and urban areas, 84% of the marginal workers hail from rural agglomerations.

PROPORTION OF VULNERABLE POPULATION

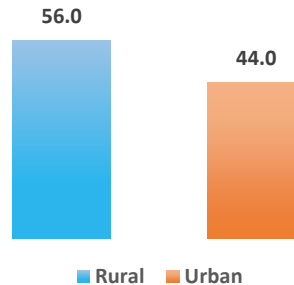
OVERALL SCHEDULE CASTE (SC) POPULATION

INDIA **201,378,372**

STATE **4,074,447**
(2.0%)

Out of India's SC population

SC POPULATION BY LOCATION (%)



SC POPULATION BY SEX (%)



Source: Census 2011

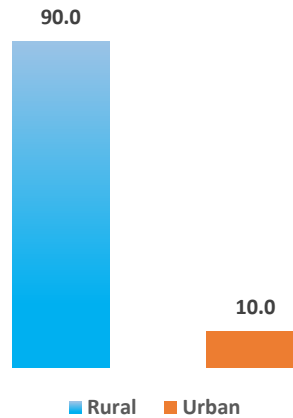
OVERALL SCHEDULE TRIBE (ST) POPULATION

INDIA **104,545,716**

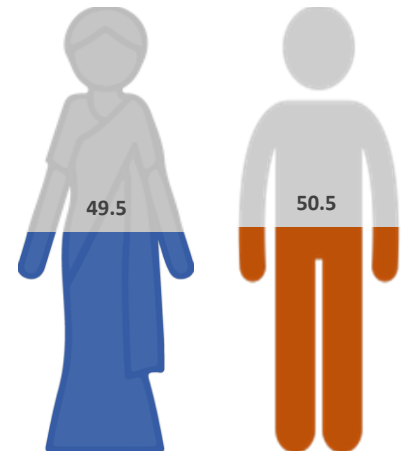
STATE **8,917,174**
(8.5%)

Out of India's ST population

ST POPULATION BY LOCATION (%)



ST POPULATION BY SEX (%)



Source: Census 2011

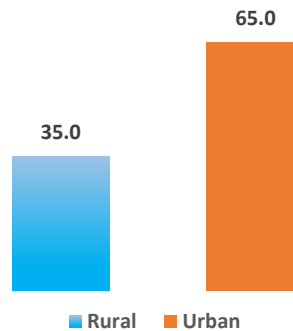
OVERALL MUSLIM POPULATION

INDIA **172,245,158**

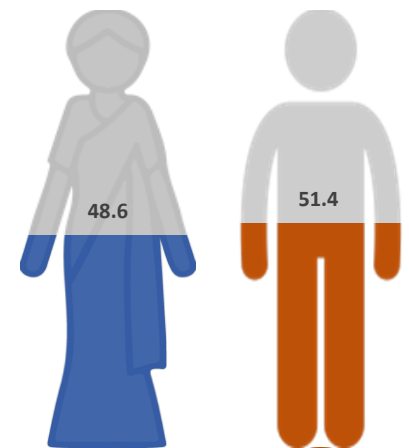
STATE **5,846,761**
(3.4%)

Out of India's Muslim population

MUSLIM POPULATION BY LOCATION (%)



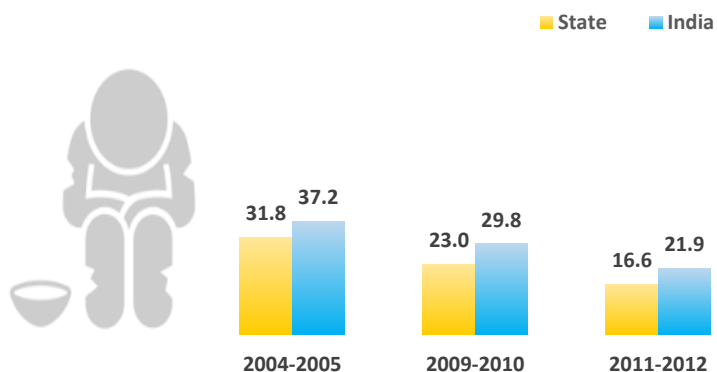
MUSLIM POPULATION BY SEX (%)



Source: Census 2011

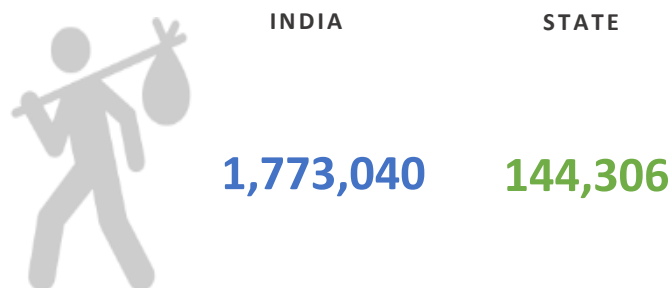
- The Scheduled tribe population is completely concentrated in the rural areas while Scheduled caste and Muslim population have an urban presence.

POPULATION LIVING BELOW POVERTY LINE (%)



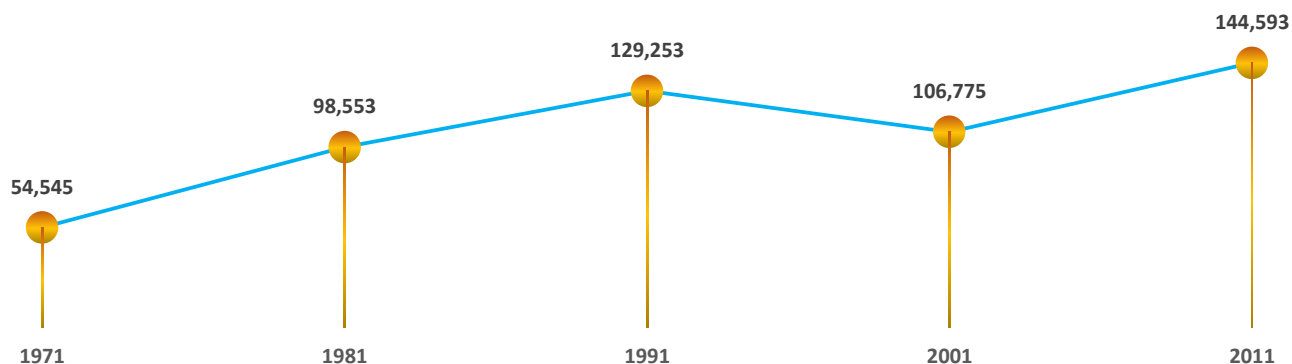
Source: Planning Commission (As Per Tendulkar Estimation)

HOUSELESS POPULATION (No.)



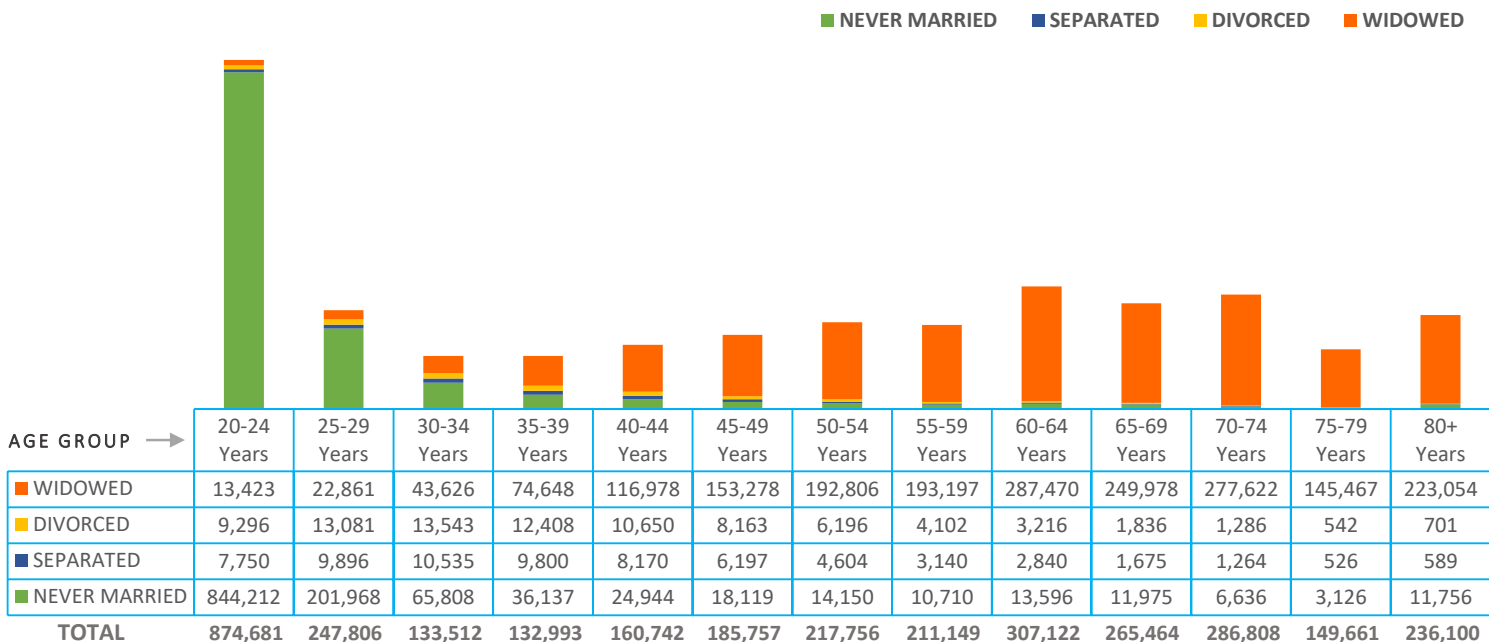
Source: Census 2011

NUMBER OF PARTICULARLY VULNERABLE TRIBAL GROUPS (No.)



Source: Statistical Profile Of Scheduled Tribes In India 2013

AGE-WISE DISTRIBUTION OF SINGLE WOMEN (No.)



Source: Census 2011

- The state has nearly halved its BPL population between 2005 to 2012
- Around 4% of the state's population is houseless.

PERSONS WITH DISABILITIES IN ALL AGE GROUP

INDIA'S TOTAL PERSON WITH
DISABILITIES

26,814,994

STATE'S TOTAL PERSON WITH
DISABILITIES

1,092,302
(4.1%)

OUT OF WHICH

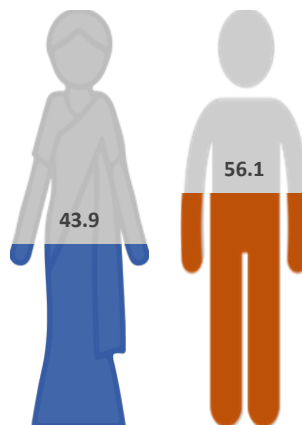
2,116,698

75,111
(3.5%)

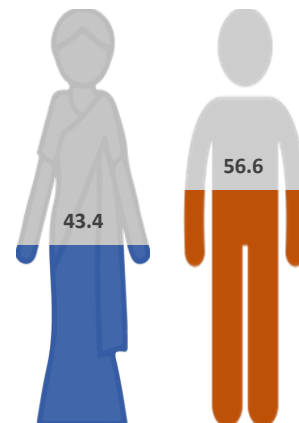
REPORTED MULTIPLE DISABILITIES

Source: Census 2011

PESONS WITH DISABILITIES OUT OF
STATE'S DISABILITIES (%)



PERSONS WITH MULTIPLE
DISABILITIES OUT OF STATE'S
MULTIPLE DISABILITIES (%)



CHILDREN (0-4 YEARS) WITH DISABILITIES

INDIA'S TOTAL CHILDREN (0-
4 YEARS) WITH DISABILITIES

1,291,637

STATE'S TOTAL CHILDREN
(0-4 YEARS) WITH
DISABILITIES

49920
(3.9%)

OUT OF WHICH

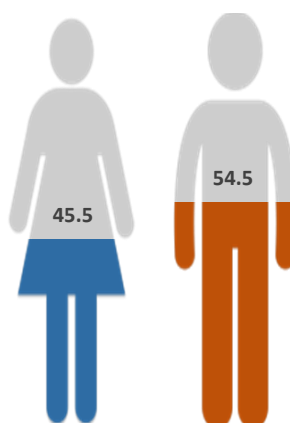
78,662

2810
(3.6%)

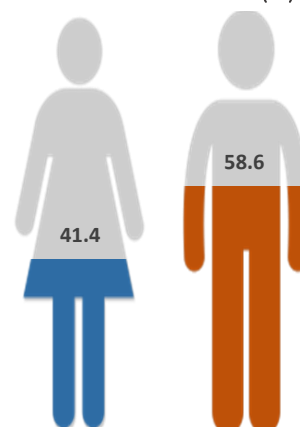
REPORTED MULTIPLE DISABILITIES

Source: Census 2011

PESONS WITH DISABILITIES OUT OF
STATE'S DISABILITIES (%)



PERSONS WITH MULTIPLE
DISABILITIES OUT OF STATE'S
MULTIPLE DISABILITIES (%)



CHILDREN (5-9 YEARS) WITH DISABILITIES

INDIA'S TOTAL CHILDREN (5-9
YEARS) WITH DISABILITIES

1,955,926

STATE'S TOTAL CHILDREN
(5-9 YEARS) WITH
DISABILITIES

77,504
(4.0%)

OUT OF WHICH

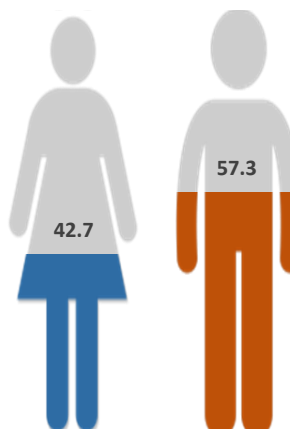
187,492

8,483
(4.5%)

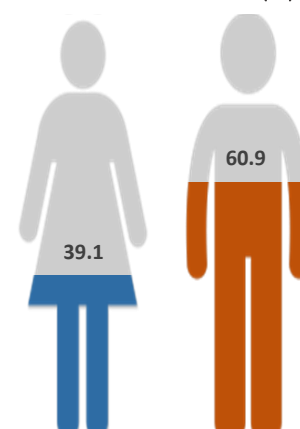
REPORTED MULTIPLE DISABILITIES

Source: Census 2011

PESONS WITH DISABILITIES OUT OF
STATE'S DISABILITIES (%)



PERSONS WITH MULTIPLE
DISABILITIES OUT OF STATE'S
MULTIPLE DISABILITIES (%)



- Gujarat has a higher prevalence of disabilities among its children.

HEALTH AND NUTRITION

MARRIAGE AND FERTILITY

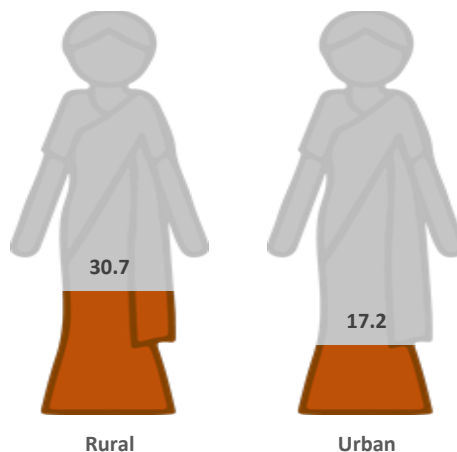
WOMEN 20-24 YEARS MARRIED BEFORE 18 YEARS (%)

INDIA

26.8

STATE

24.9



Source: NFHS 2015-2016

TOTAL FERTILITY RATE (%)

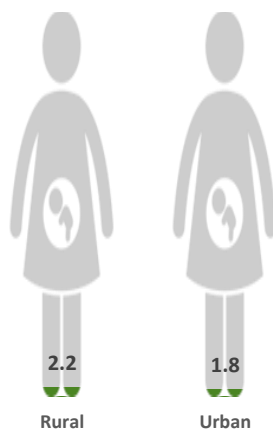
INDIA

2.2

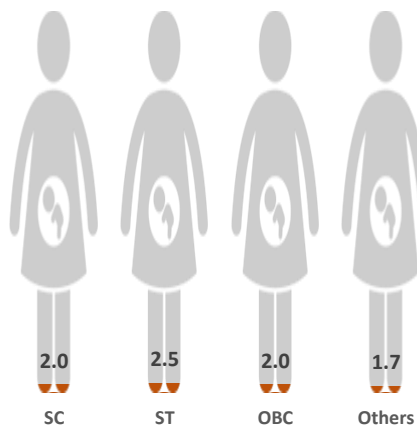
STATE

2.0

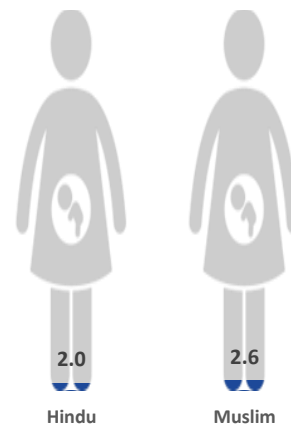
BY LOCATION



BY CASTE (%)



BY RELIGION



Source: NFHS 2015-2016

WOMEN 15-19 YEARS WHO WERE ALREADY MOTHERS OR PREGNANT (%)

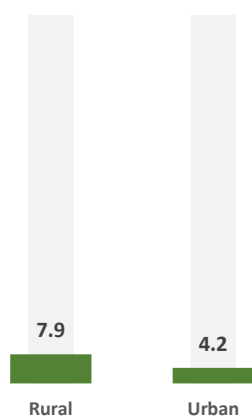
INDIA

7.9

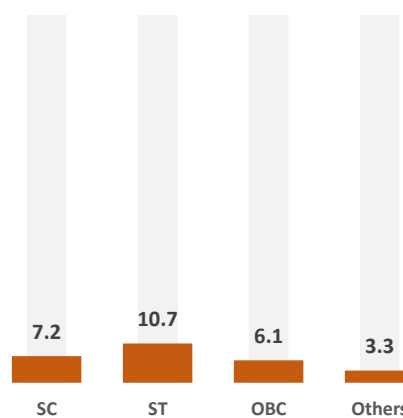
STATE

6.5

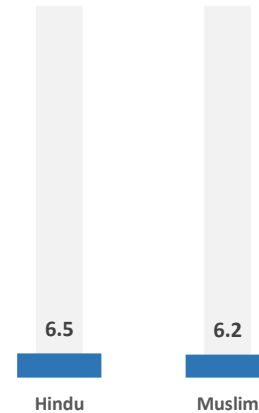
BY LOCATION



BY CASTE



BY RELIGION

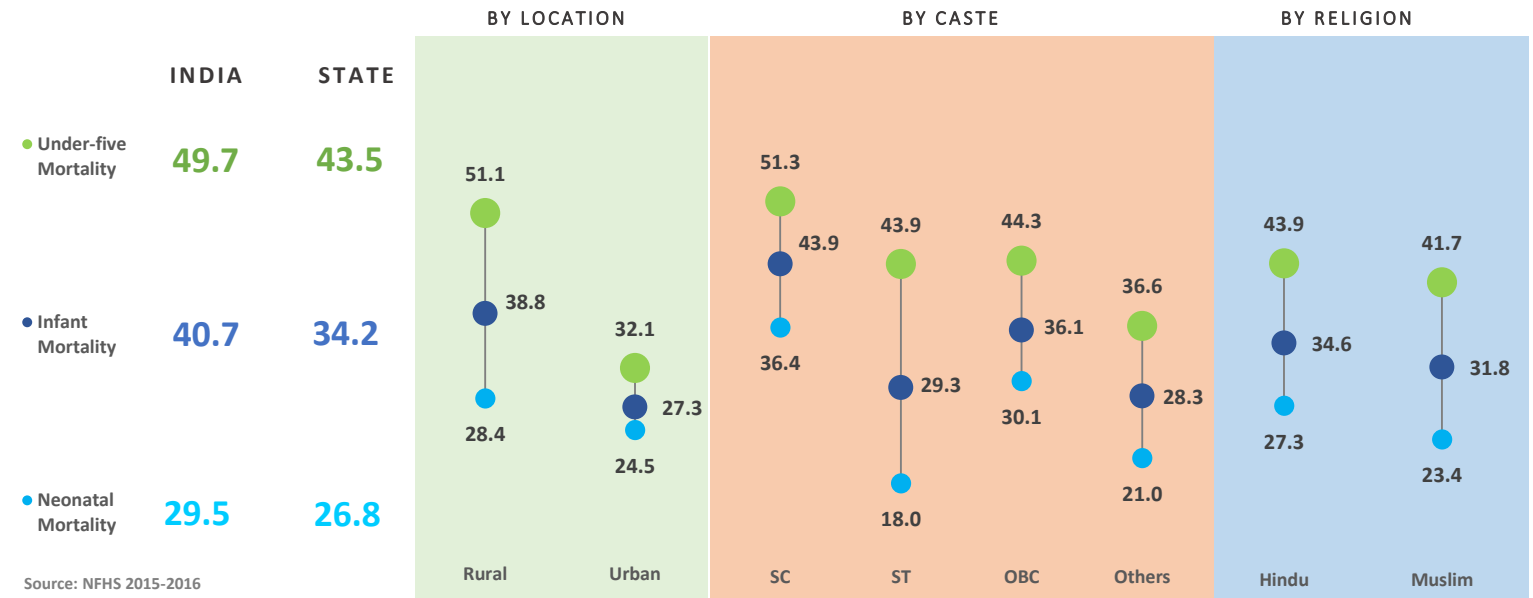


Source: NFHS 2015-2016

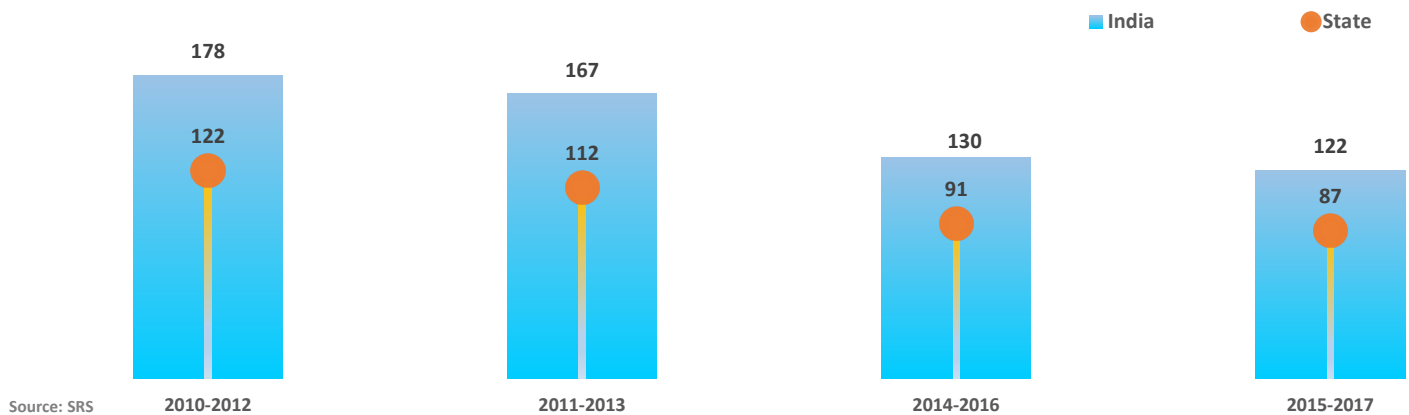
- Early marriage in rural areas and teen age pregnancy among the Scheduled Tribe population are two major concern areas of Gujarat.

MORTALITY

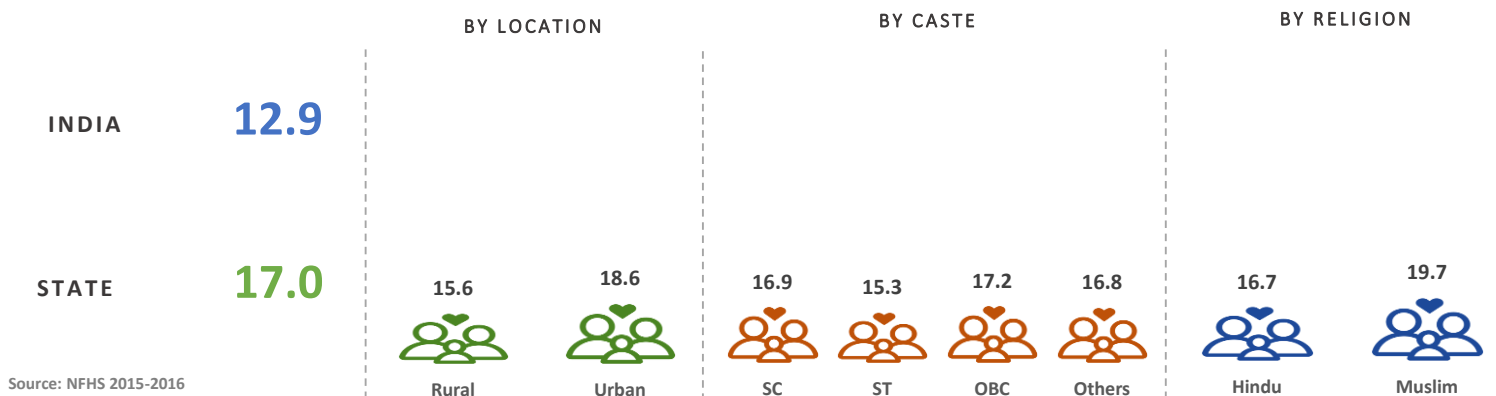
MORTALITY RATES (DEATHS PER 1000 LIVE BIRTHS)



MATERNAL MORTALITY RATE (MMR) (DEATHS PER 100,000 LIVE BIRTHS)



CURRENTLY MARRIED WOMEN AGED 15-49 WITH UNMET NEED * FOR FAMILY PLANNING (%)

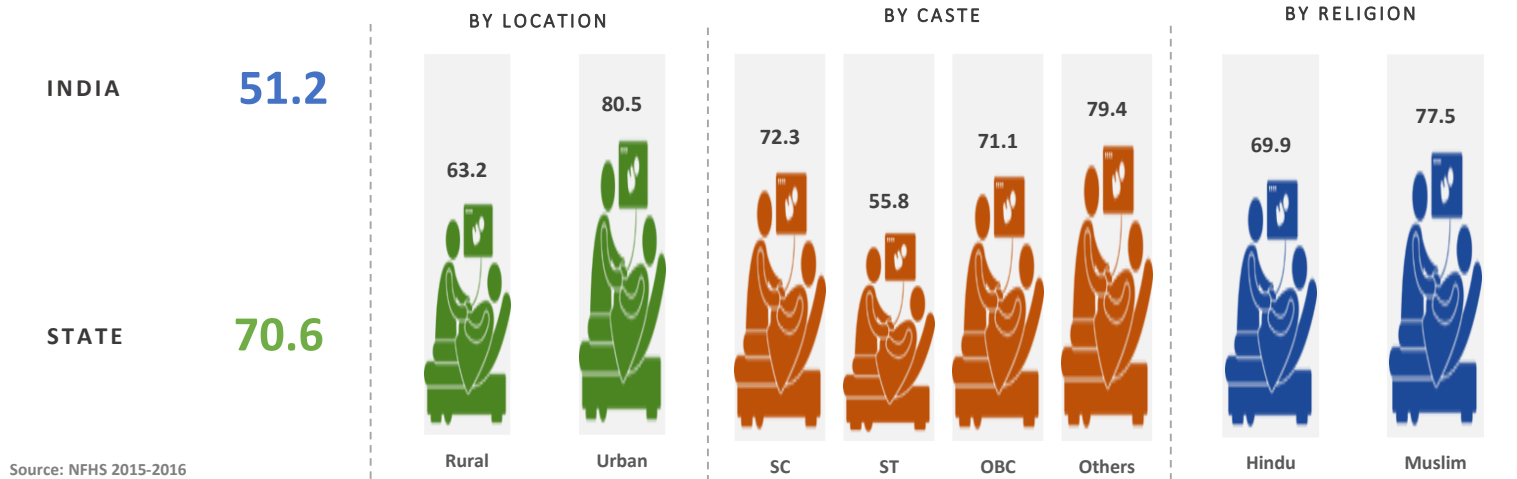


* Unmet need for family planning is defined as the percentage of currently married women who either want to space their next birth or stop childbearing entirely, but are not using contraception.

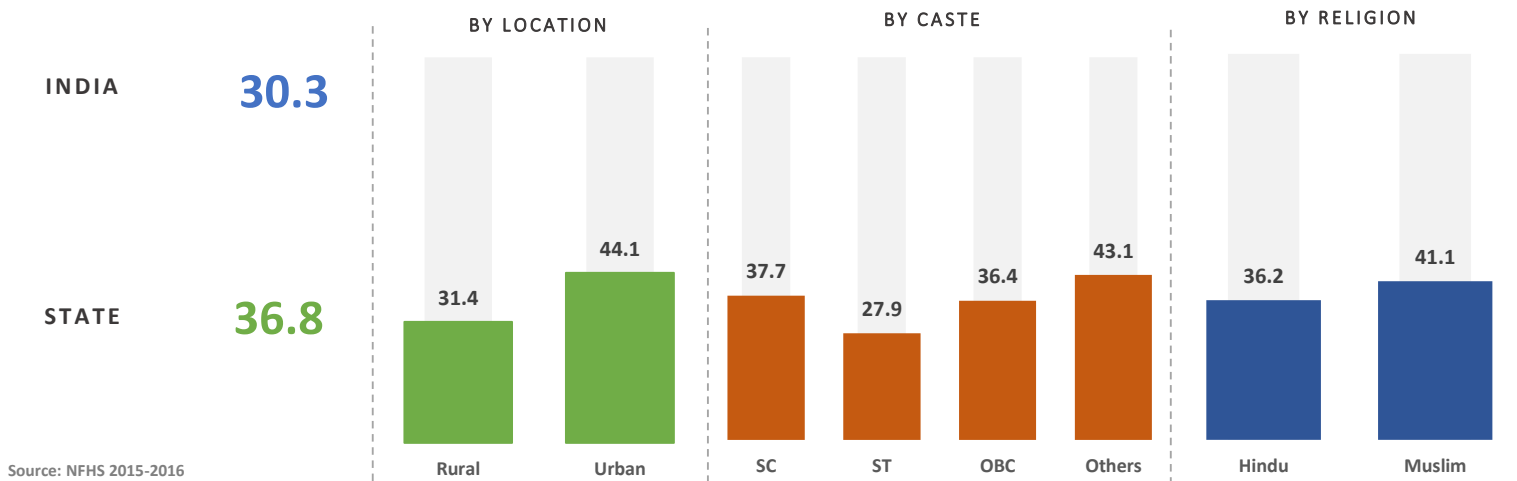
- Under 5 mortality rate is more of a cause of concern especially in rural areas and among Scheduled Caste population. However, neonatal and infant mortality rates are also high.
- Prevalence of high unmet need among Muslim women signifying poor access to contraceptive measures. Also need to remember that TFR is also high among Muslims in the state.

MATERNAL CARE

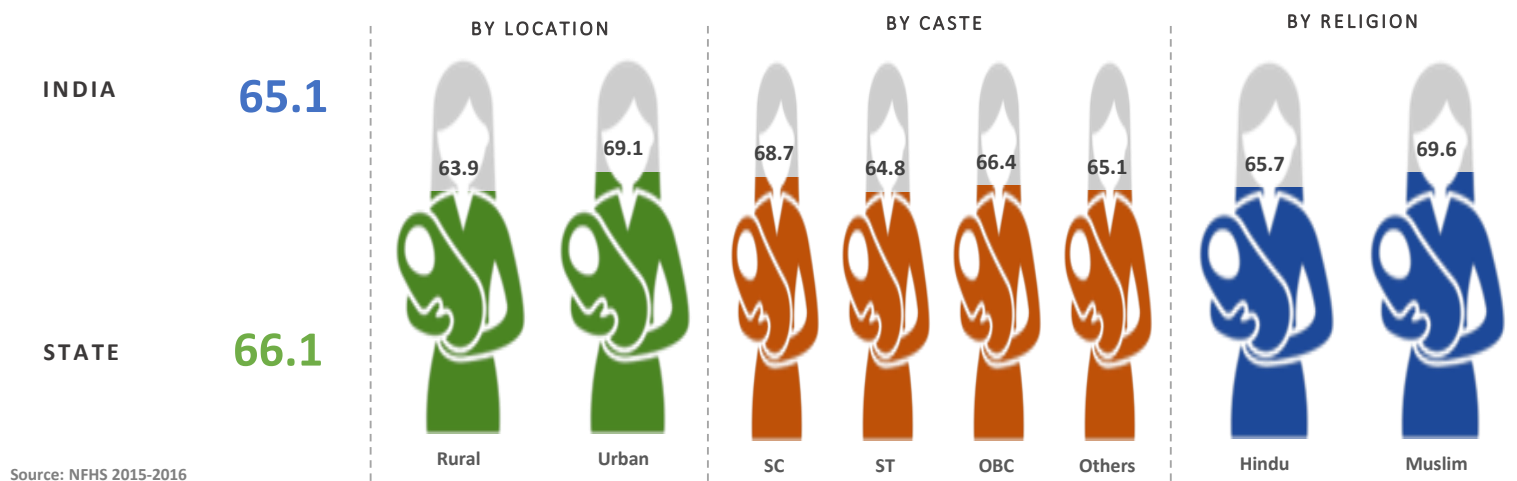
MOTHERS WHO HAD AT LEAST 4 ANTENATAL CARE VISITS (%)



MOTHERS WHO CONSUMED IFA FOR 100 DAYS OR MORE WHEN THEY WERE PREGNANT (%)



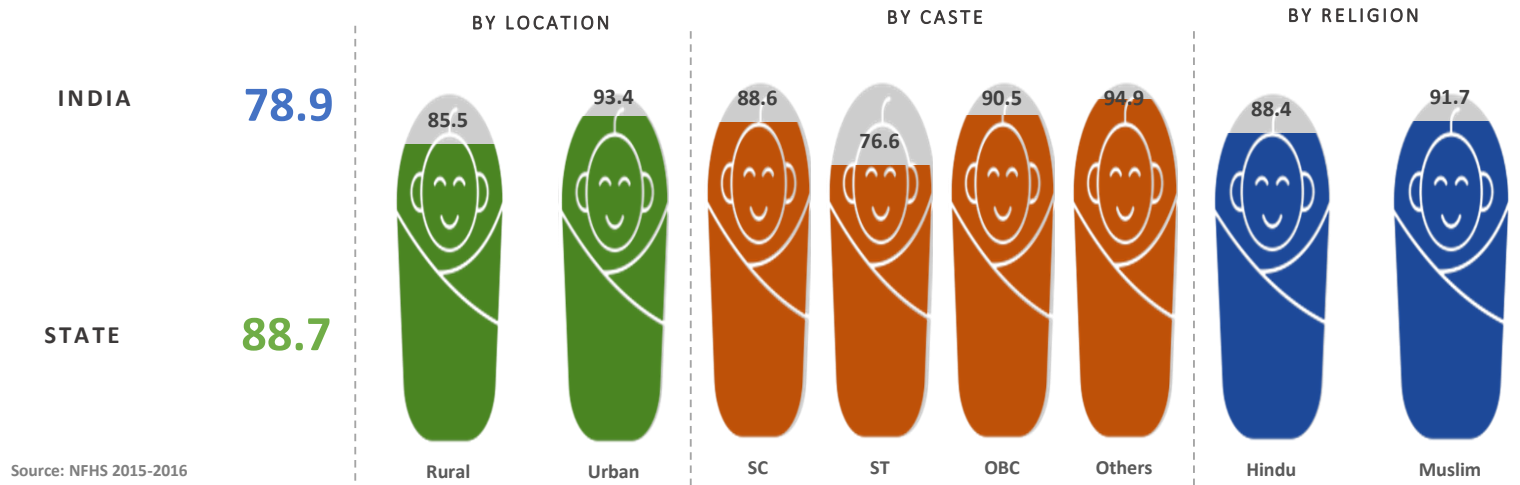
MOTHERS WHO RECEIVED POSTNATAL CARE FROM ANY SKILLED HEALTH PERSONNEL WITHIN 2 DAYS OF DELIVERY (%)



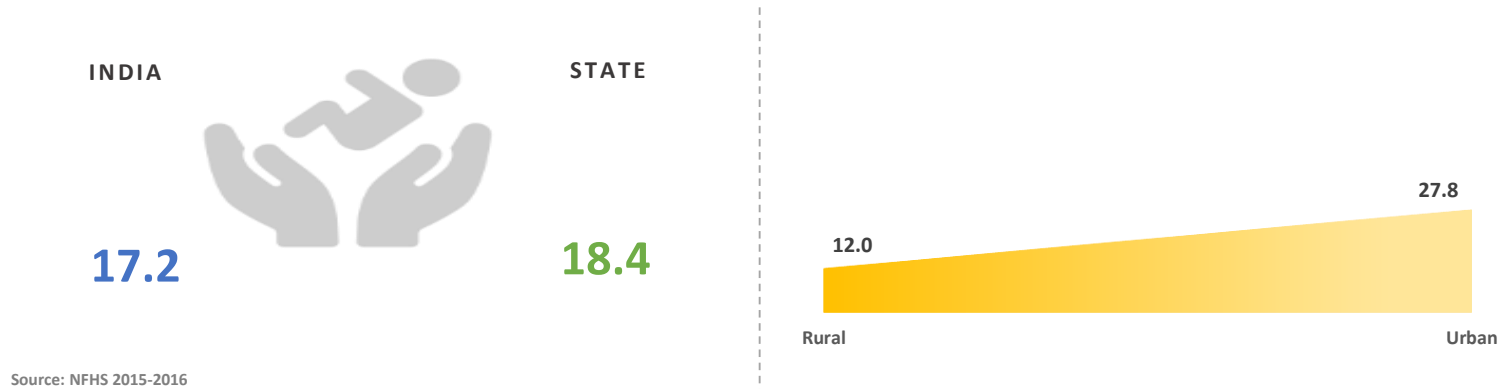
- The state shows low utilization of antenatal care services among Scheduled Tribe women and in rural areas.

DELIVERY CARE

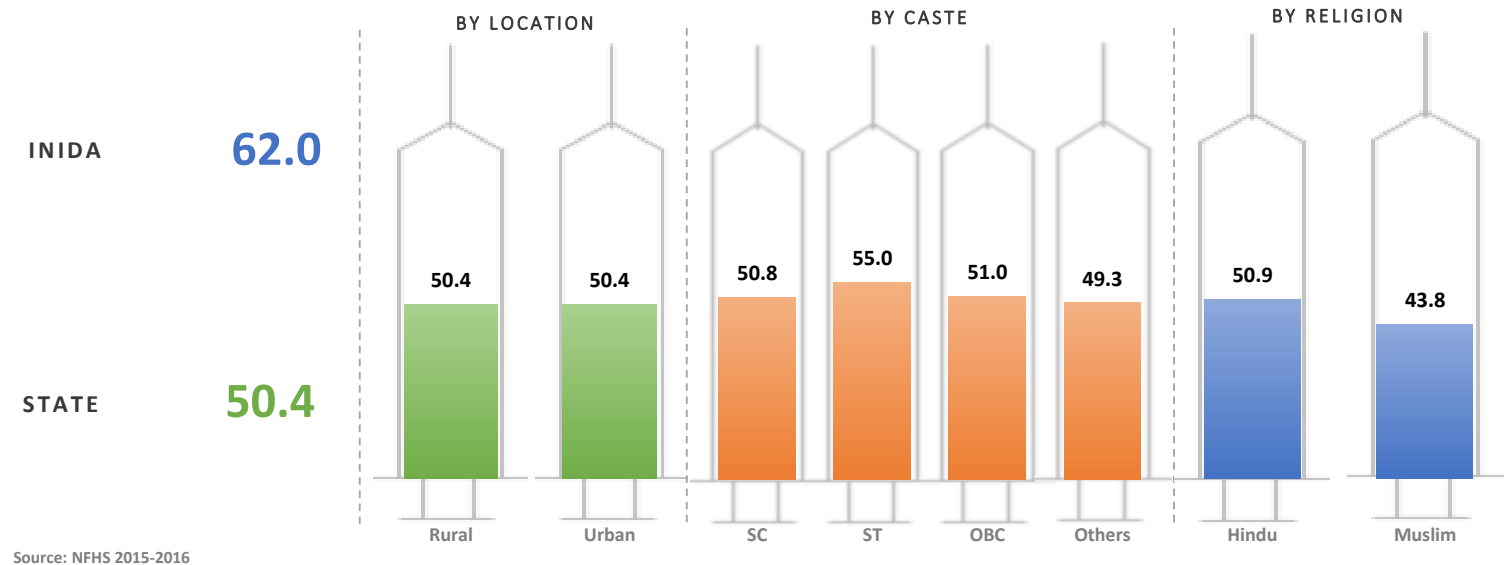
INSTITUTIONAL BIRTHS (%)



BIRTHS DELIVERED BY CAESAREAN SECTION (%)



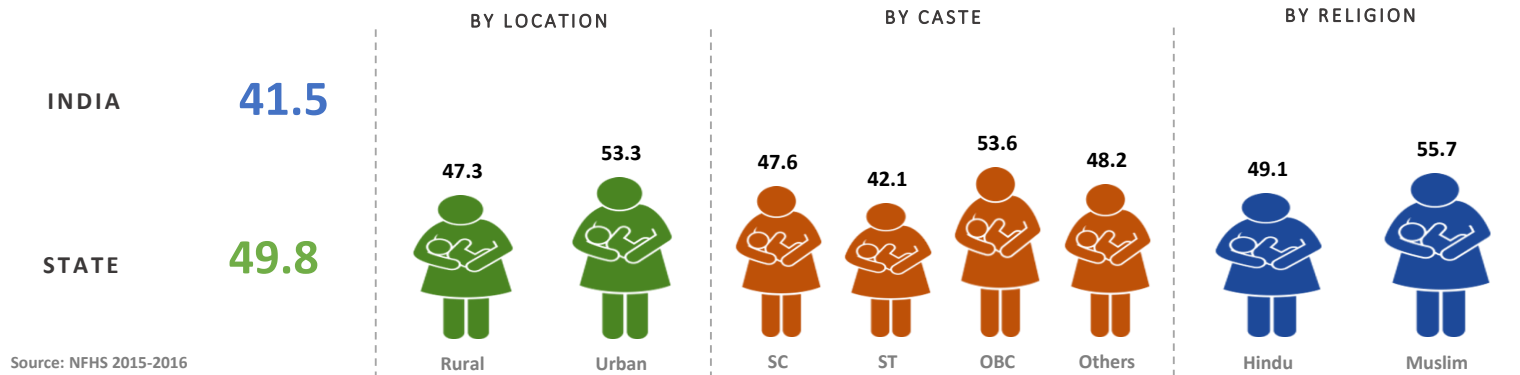
CHILDREN AGED 12-23 MONTHS FULLY IMMUNIZED (%)



- Immunization remains an area of concern, especially among the OBCs and the Muslim population.
- Also, its urban areas see a high surge in caesarian section deliveries.

CHILD FEEDING PRACTICES AND NUTRITIONAL STATUS

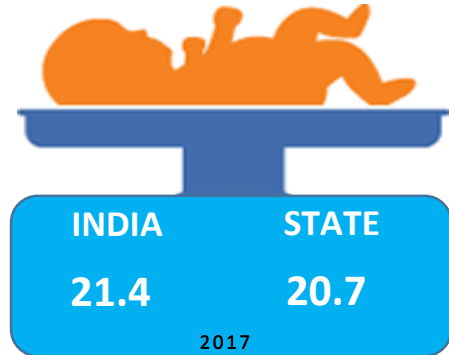
CHILDREN UNDER AGE OF 2 YEARS BREASTFED WITHIN ONE HOUR OF BIRTH (%)



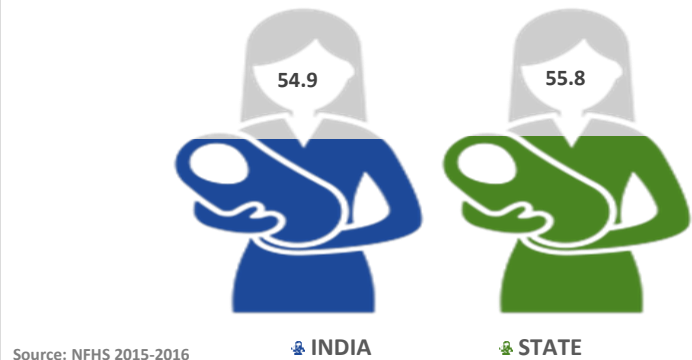
CHILDREN AGED 6-8 MONTHS RECEIVING SOLID OR SEMI-SOLID FOOD AND BREASTMILK (%)



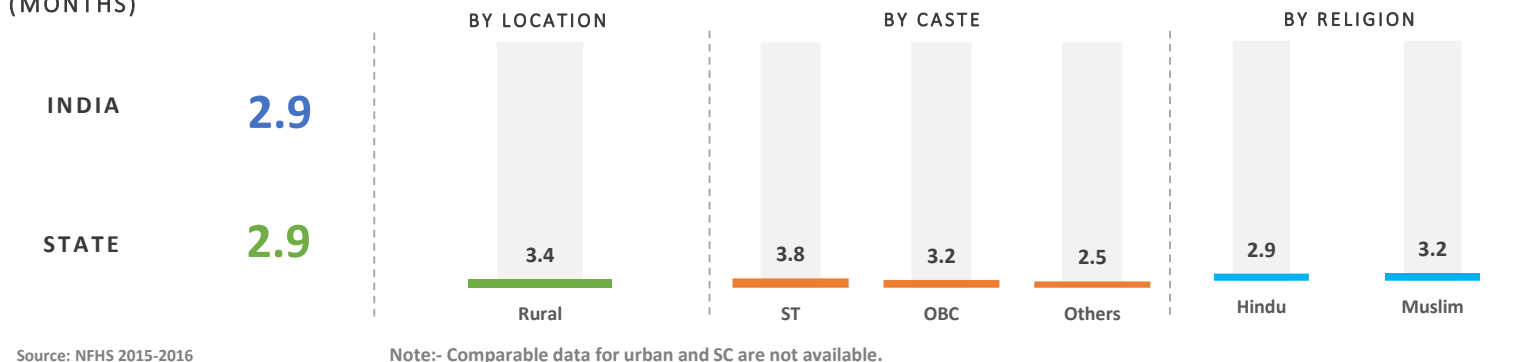
PREVALENCE OF LOW BIRTHWEIGHT (%)



CHILDREN UNDER AGE 6 MONTHS EXCLUSIVELY BREASTFED (%)



MEDIAN DURATION OF EXCLUSIVE BREASTFEEDING AMONG LAST-BORN CHILDREN BORN IN THE LAST THREE YEARS (MONTHS)



- Early initiation of breastfeeding is poor among the tribal population.

CHILDREN UNDER 5 YEARS WHO ARE UNDERWEIGHT (%)

BY LOCATION

BY CASTE

BY RELIGION

INDIA

35.7

STATE

39.3

44.2



32.0



51.6



39.8

34.7



Source: NFHS 2015-2016

CHILDREN UNDER 5 YEARS WHO ARE STUNTED (%)

BY LOCATION

BY CASTE

BY RELIGION

INDIA

38.4

STATE

38.5

42.9



31.7



47.5



38.6

37.0



Source: NFHS 2015-2016

CHILDREN UNDER 5 YEARS WHO ARE WASTED (%)

BY LOCATION

BY CASTE

BY RELIGION

INDIA

21.0

STATE

26.4

28.5



23.4



24.2

32.0

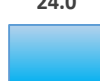
26.0

24.5



26.7

24.0



Source: NFHS 2015-2016

CHILDREN AGE 6-59 MONTHS WHO ARE ANAEMIC (<11.0 G/DL)(%)

BY LOCATION

BY CASTE

BY RELIGION

INDIA

58.5

STATE

62.6

64.6



59.5



65.5

56.7

66.4

58.7



62.5

63.3

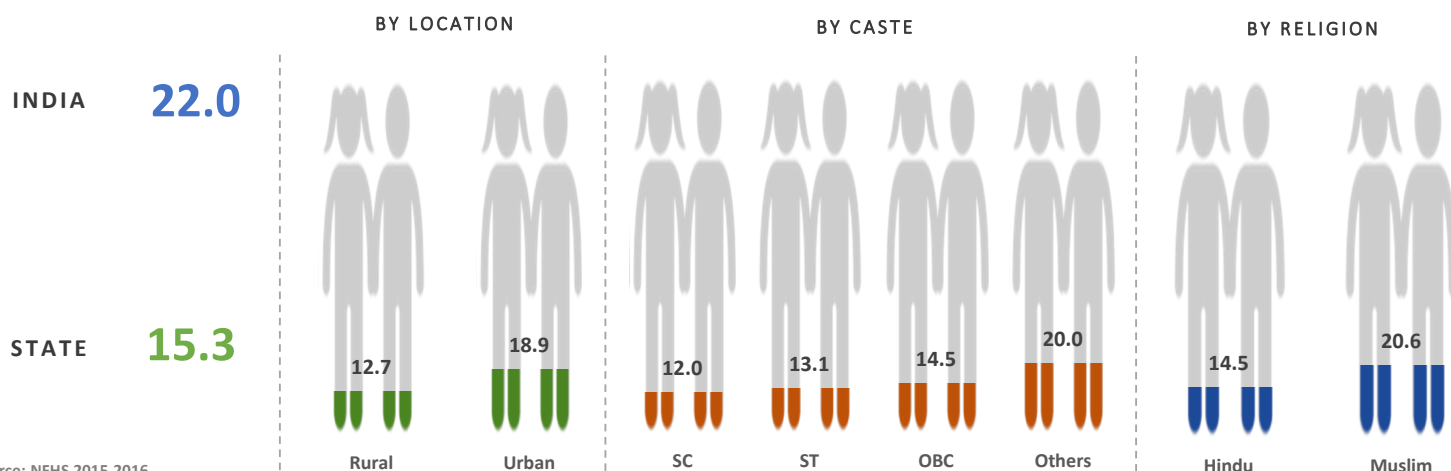


Source: NFHS 2015-2016

- High child malnutrition rates in the state, especially among is tribal population.
- Child anemia status is extremely worrisome.

DIETARY DIVERSITY PATTERN

6-23 MONTHS CHILDREN FED 4+ FOOD GROUPS IN PAST 24 HOURS (%)



Source: NFHS 2015-2016

6-23 MONTHS CHILDREN FED MINIMUM MEAL FREQUENCY IN PAST 24 HOURS (%)

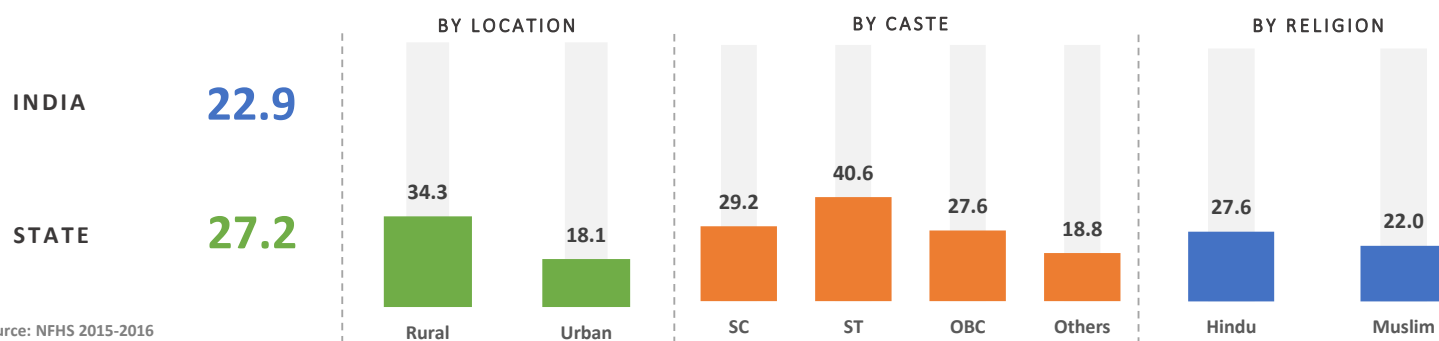


Source: NFHS 2015-2016

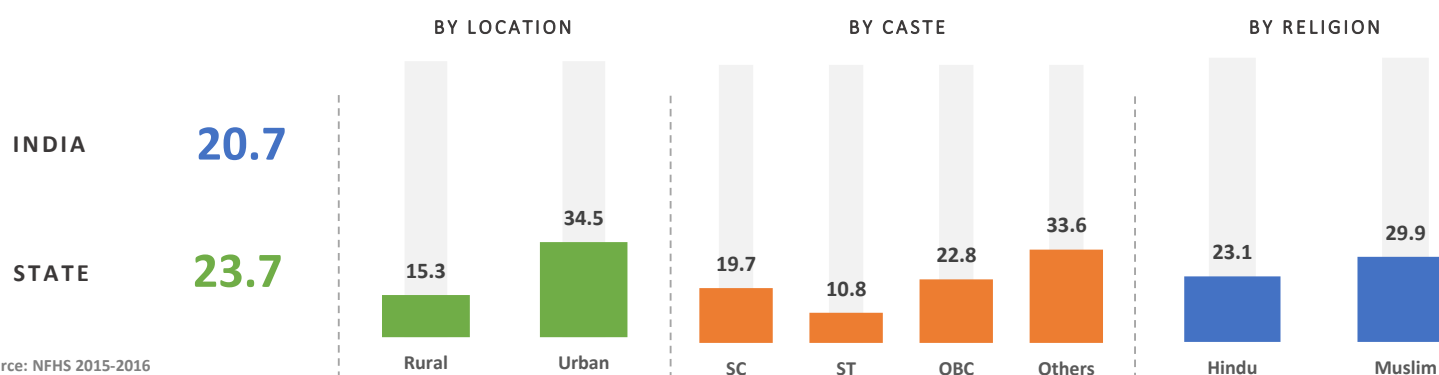
- The poor nutritional status of the children can be reconfirmed by the fact that their dietary diversity pattern is appallingly low, more so among its tribal population.

NUTRITIONAL STATUS OF WOMEN AND MEN

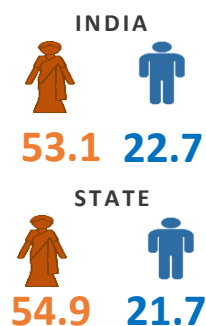
WOMEN WHOSE BODY MASS INDEX IS BELOW NORMAL (BMI < 18.5 KG/M²) (%)



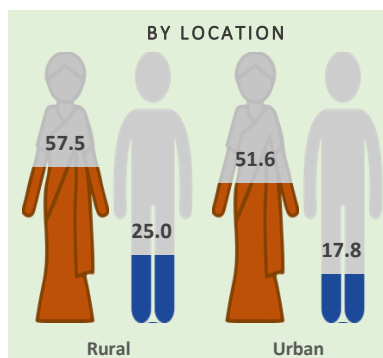
WOMEN WHO ARE OVERWEIGHT OR OBESE (BMI ≥ 25.0 KG/M²) (%)



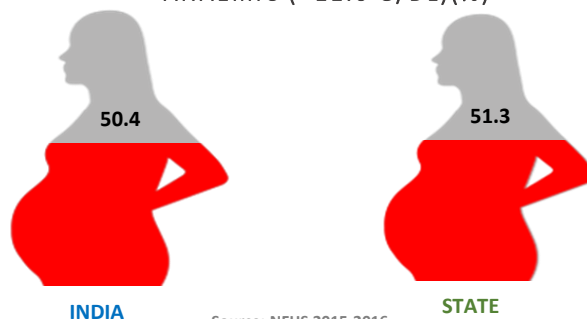
WOMEN AND MEN AGED 15-49 YEARS WHO ARE ANAEMIC (%)



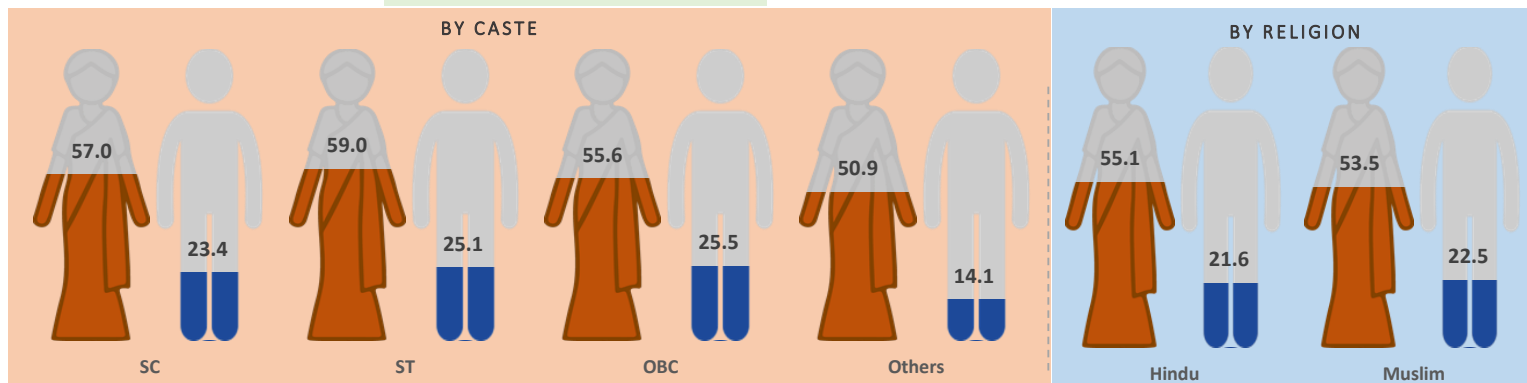
Source: NFHS 2015-2016



PREGNANT WOMEN AGED 15-49 YEARS WHO ARE ANAEMIC (<11.0 G/DL) (%)



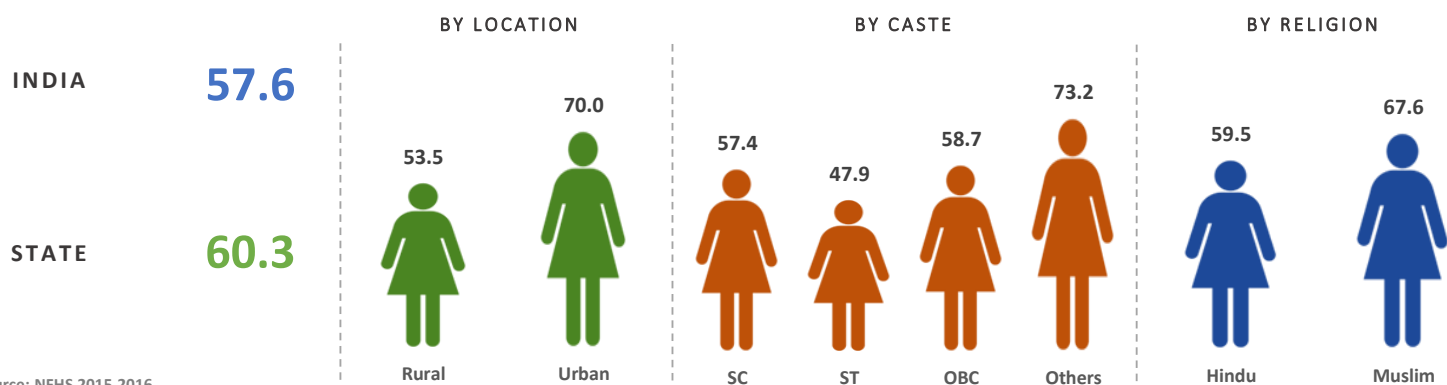
Source: NFHS 2015-2016



- Nutritional status is a matter of concern in the state, both among its children and adults. Gujarat has around 30% of women whose BMI is below normal, with Scheduled tribe and those in rural areas being more critical. On the other hand, obesity is a rising threat in the urban areas, being higher than both the state and country figures.
- Anaemia is a major concern both across the nation and state with around 50% of the women (pregnant and non-pregnant) with low haemoglobin count.

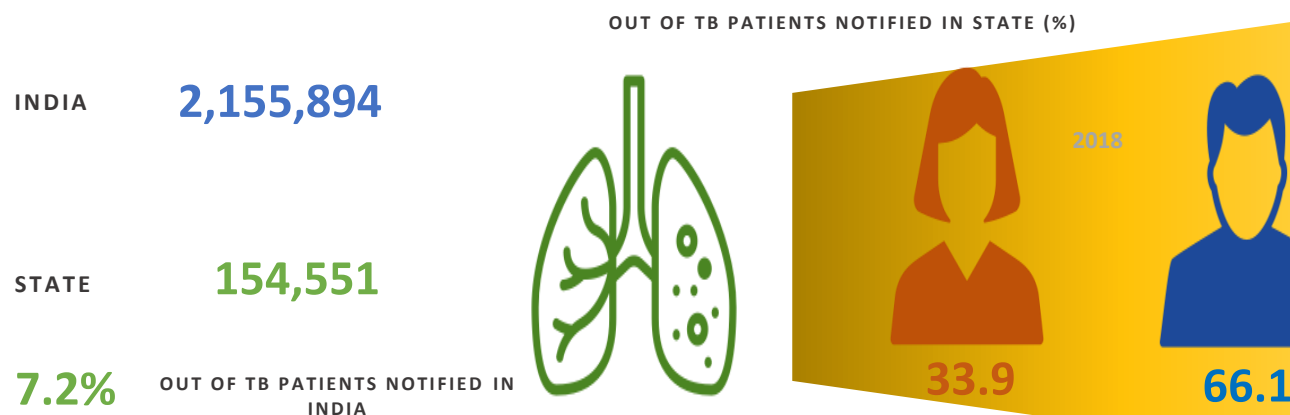
MENSTRUAL HYGIENE

WOMEN AGED 15-24 WHO USED HYGIENIC METHOD OF PROTECTION DURING MENSTRUATION (%)

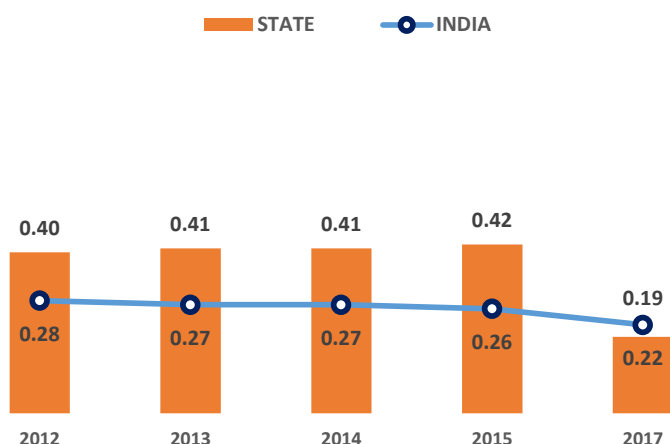


OTHER HEALTH ISSUES

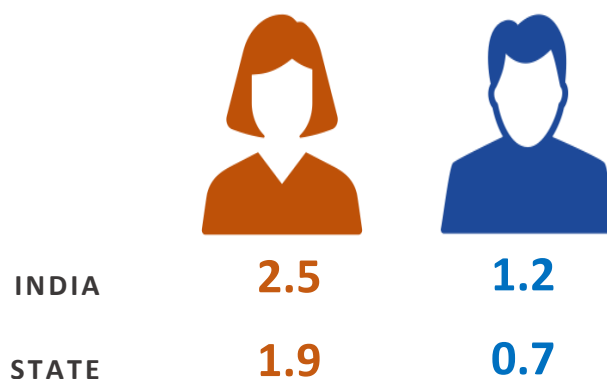
PERSONS SUFFERING FROM TUBERCULOSIS



PEOPLE (15-49 YEARS) LIVING WITH HIV/AIDS (%)



WOMEN & MEN AGED 15-49 YEARS WHO REPORTED SEXUALLY TRANSMITTED INFECTION (STI) IN THE PAST 12 MONTHS (%)



- Prevalence of unsafe menstrual practices is a major concern in the state with 40% having poor menstrual hygiene. This difference is particularly high among the tribal population.
- High prevalence of Tuberculosis among men is another concern.

HEALTH EXPENDITURES

GOVERNMENT HEALTH EXPENDITURE (%
OF TOTAL HEALTH EXPENDITURE)

OUT OF POCKET HEALTH EXPENDITURE (%
OF TOTAL HEALTH EXPENDITURE)

INDIA

30.6

60.6

STATE

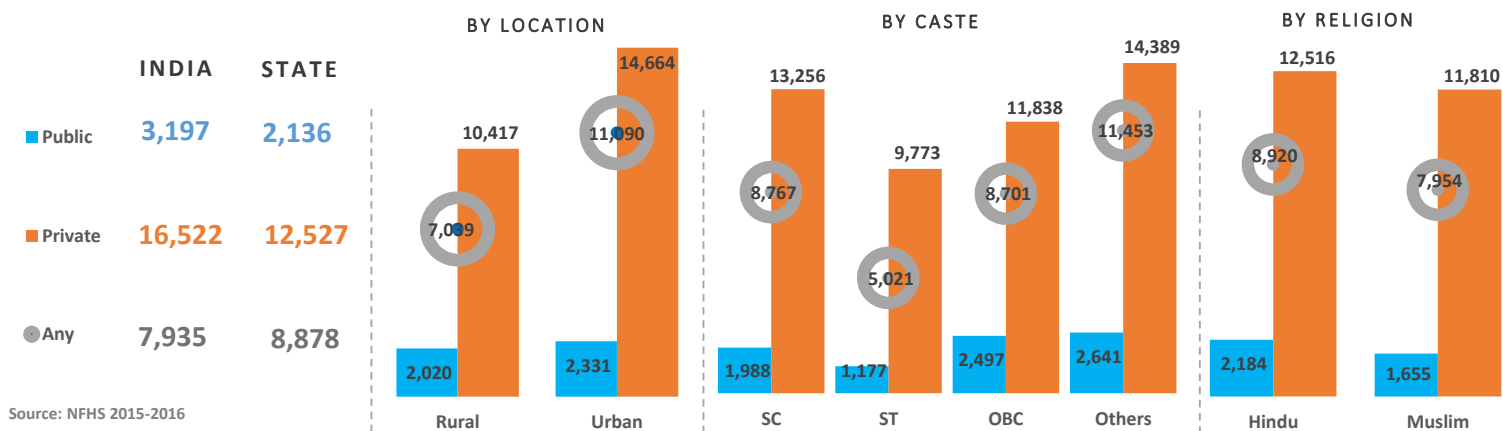
37.2

50.4



Source: National Health Accounts Estimates for India 2015-16

AVERAGE OUT OF POCKET EXPENDITURE PER DELIVERY IN PUBLIC, PRIVATE AND ANY HEALTH FACILITY (RUPEES)



Source: NFHS 2015-2016

- Government share in health expenditure is abysmal in both India and Gujarat, although Gujarat fares a little better than the country.
- With low government share in health expenditure, Gujarat shows high out of pocket expense (50%).

GOVERNMENT FLAGSHIP PROGRAMMES FOR HEALTH AND NUTRITION

NATIONAL HEALTH MISSION

The National Health Mission (NHM) encompasses its two Sub-Missions, the National Rural Health Mission (NRHM) and the National Urban Health Mission (NUHM). The main programmatic components include Health System Strengthening, Reproductive-Maternal- Neonatal-Child and Adolescent Health (RMNCH+A), and Communicable and Non-Communicable Diseases. The NHM envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs.

NHM has six financing components:

- (i) NRHM-RCH Flexipool,
- (ii) NUHM Flexipool,
- (iii) Flexible pool for Communicable disease,
- (iv) Flexible pool for Non communicable disease including Injury and Trauma,
- (v) Infrastructure Maintenance and
- (vi) Family Welfare Central Sector component.

INTEGRATED CHILD DEVELOPMENT

Integrated Child Development Services (ICDS) Scheme is one of the flagship programmes of the Government of India and represents one of the world's largest and unique programmes for early childhood care and development.

The beneficiaries under the Scheme are children in the age group of 0-6 years, pregnant women and lactating mothers. Objectives of the Scheme are:

1. To improve the nutritional and health status of children in the age-group 0-6 years;
2. To lay the foundation for proper psychological, physical and social development of the child;
3. To reduce the incidence of mortality, morbidity, malnutrition and school dropout;
4. To achieve effective co-ordination of policy and implementation amongst the various departments to promote child development;
5. To enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

POSHAN ABHIYAAN

The Prime Minister's Overarching Scheme for Holistic Nutrition (POSHAN) Abhiyaan or National Nutrition Mission is one of the India's flagship programmes to improve nutritional outcomes for children, adolescents, pregnant women and lactating mothers by leveraging technology, a targeted approach and convergence. It aims to build a people's movement (Jan Andolan) around malnutrition.

Key Strategies

For implementation of POSHAN Abhiyaan the mission adopts a four point strategy:

1. Inter-sectoral convergence for better service delivery
 2. Use of technology (ICT) for real time growth monitoring and tracking of women and children
 3. Intensified health and nutrition services for the first 1000 days
- Jan Andolan

SHORTFALL IN HEALTH FACILITIES IN RURAL AREAS (%)

(as on 1st July 2019)

	India	State
Sub Centres and HWC-SCs	23.0	Surplus
PHCs and HWC-PHCs	28.2	Surplus
CHCs	36.9	Surplus

Source: Rural Health Statistics 2019

SHORTFALL IN HUMAN RESOURCE IN RURAL AREAS (%)

	India	State
Anganwadi Workers	4.7	2.9
ASHA	Surplus	3.2
ANM at Sub Centres	2.8	5.8
ANM at PHCs	26.1	63.6
Doctors+ at PHCs	6.0	Surplus
Specialists at CHCs	81.8	91.9

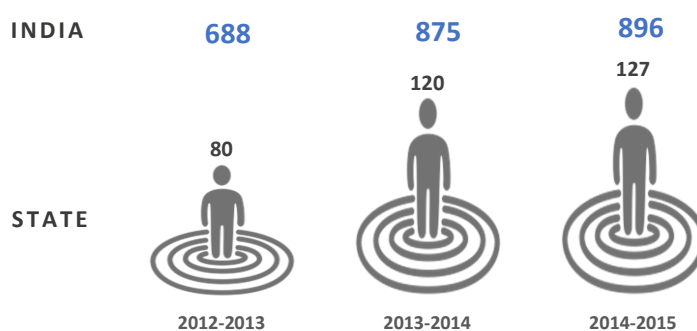
Source: Rural Health Statistics 2019

NUMBER OF AWCs



Source: Status report of ICDS as on 31st March 2015

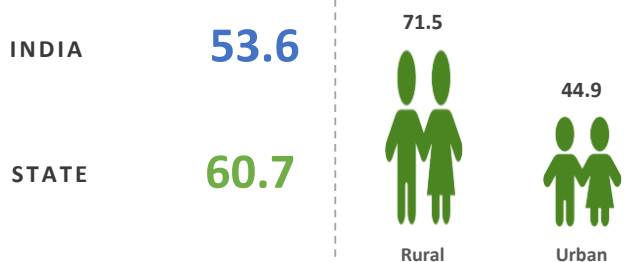
NUMBER OF NUTRITIONAL REHABILITATION CENTRES



Source: PIB 2012-13, 2013-14 & 2014-15

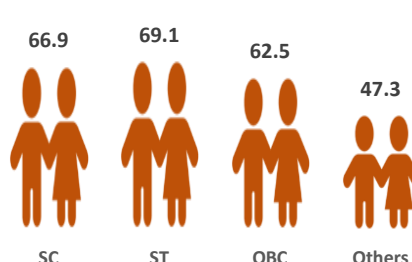
CHILDREN AGED 0-71 MONTHS WHO RECEIVED SERVICES FROM AN AWC (%)

BY LOCATION

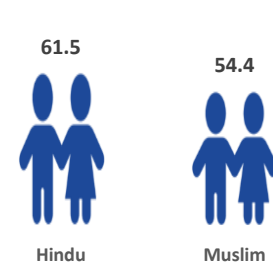


Source: NFHS 2015-16

BY CASTE

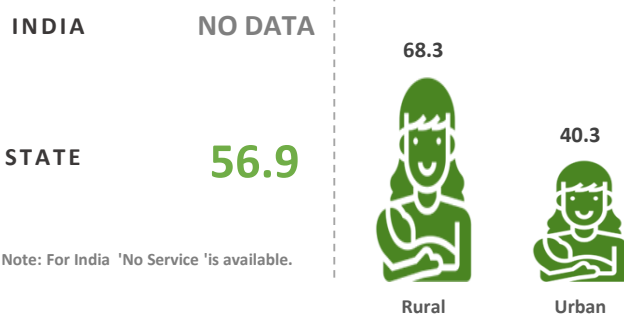


BY RELIGION



MOTHERS RECEIVED SERVICES FROM AN AWC DURING PREGNANCY (%)

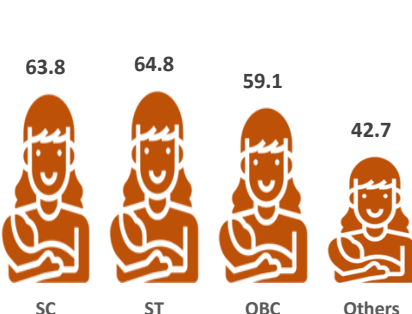
BY LOCATION



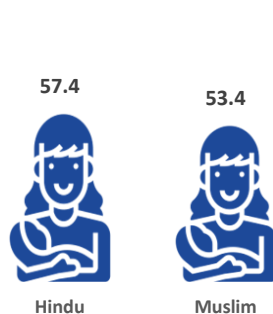
Note: For India 'No Service' is available.

Source: NFHS 2015-16

BY CASTE

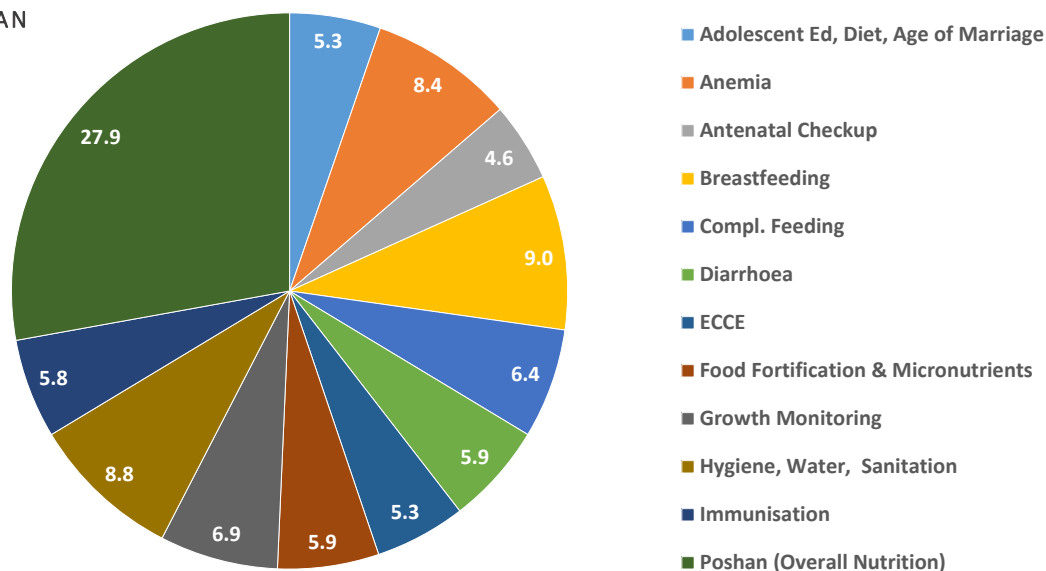


BY RELIGION



- There is huge shortfall of health workers in the state with the shortfall for specialists at CHCs as high as 92%.

THEMES-WISE ACTIVITIES IN POSHAN
MAAH (SEPTEMBER 2019)



Source: <http://dashboard.poshanabhiyaan.gov.in/janandolan/#/>

CONTRIBUTION OF ACTIVITIES IN POSHAN MAAH (SEPTEMBER 2019)

Activity type	State Value (%)	India Value (%)
Home Visits	87.9	14.4
Anemia Camp	0.8	1.5
CBE-Community Based Events (ICDS)	1.3	22.3
Community Radio Activities	0.2	0.3
Cooperative/Federation	0.2	0.2
Cycle Rally	0.8	0.3
DAY-NRLM SHG Meet	0.2	1.9
Defeat Diarrhoea Campaign (D2)	0.0	No Data
Farmer Club Meeting	0.2	0.2
Haat Bazaar Activities	0.3	0.4
Harvest Festival	0.1	0.2
Local Leader Meeting	0.2	0.5
Nukkad natak/Folk Shows	0.1	0.4
Other Activities	1.8	34.7
Panchayat Meeting	0.3	1.0
Poshan Mela	1.3	8.2
Poshan Rally	0.8	2.6
Poshan Walk	0.4	1.5
Poshan Workshop/Seminar	0.6	4.1
Prabhat Faree	0.3	1.1
Providing Water to the Toilets	0.1	0.3
Safe Drinking Water in Anganwadi Centres	0.3	0.7
Safe Drinking Water in Schools	0.1	0.2
School Based Activities	0.5	2.9
VHSND	0.7	No Data
Youth Group Meeting	0.4	No Data

Source: <http://dashboard.poshanabhiyaan.gov.in/janandolan/#/>

WOMEN EMPOWERMENT

FEMALE WORKERS (15-59 YEARS) POPULATION RATIO (%)

INDIA
23.8

STATE
21



Source: Annual Report PLFS 2017-18

FEMALE (15-59 YEARS) LABOUR FORCE PARTICIPATION RATE (%)

INDIA
25.3

STATE
22.0



Source: Annual Report PLFS 2017-18

FEMALE (15-59 YEARS) UNEMPLOYMENT RATE (%)

INDIA
6.0

STATE
4.3



Source: Annual Report PLFS 2017-18

WOMEN HEADED ESTABLISHMENTS

INDIA
8,050,819

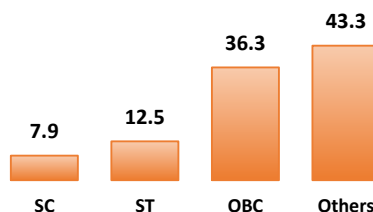
STATE
528,623

16.6% Out of India's Women Headed Establishments

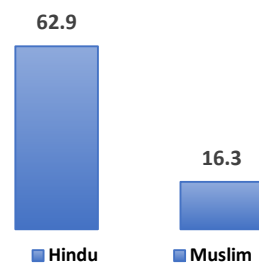
13.3% Out of State's Total Establishments -
Agriculture & Non-Agriculture

Source: All India Report of Sixth Economics Census 2016

BY CASTE



BY RELIGION



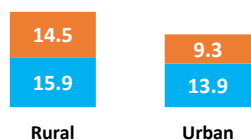
MEN AND WOMEN AGED 15-49 YEARS WHO WANT MORE SONS THAN DAUGHTERS (%)

INDIA **STATE**

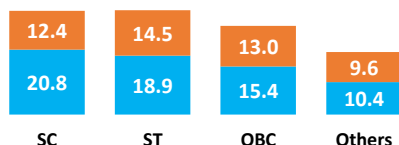
MALE **18.7** **15.0**

FEMALE **18.8** **12.2**

BY LOCATION



BY CASTE



BY RELIGION



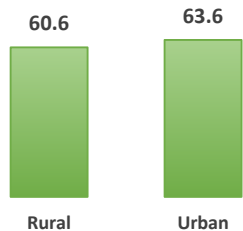
Source: NFHS 2015-2016

CURRENTLY MARRIED WOMEN WHO PARTICIPATE IN THREE DECISIONS* (%)

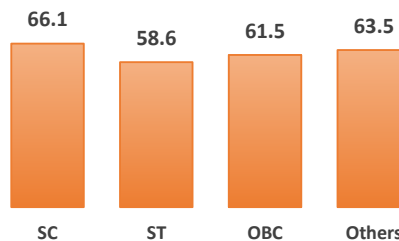
INDIA **63.0**

STATE **62**

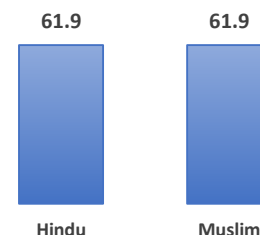
BY LOCATION



BY CASTE



BY RELIGION



* Three Decisions

Own health care
Making major household purchases
Visits to her family or relatives

Source: NFHS 2015-16

- The state has around 21% of women in its labour force. And this consists of both currently employed and unemployed women signifying the proportion of active employed women to be further less.
- Gujarat has 17% of women headed establishments in the country, but contribution of SC, ST and Muslim women were found to be least in this.

WOMEN WHO HAVE EXPERIENCED VIOLENCE DURING ANY PREGNANCY (%)

BY LOCATION

BY CASTE

BY RELIGION

INDIA

3.9

STATE

1.8

Source: NFHS 2015-16

3.0

Rural

0.4

Urban

2.1

SC

5.1

ST

1.1

OBC

1.3

Others

1.9

Hindu

1.7

Muslim

WOMEN WHO HAVE EVER EXPERIENCED EMOTIONAL, PHYSICAL OR SEXUAL VIOLENCE COMMITTED BY THEIR HUSBAND (%)

BY LOCATION

BY CASTE

BY RELIGION

INDIA

33.3

STATE

23.1

Source: NFHS 2015-16

28.8

Rural

16.0

Urban

26.4

SC

34.3

ST

23.0

OBC

16.4

Others

23.1

Hindu

23.3

Muslim

CRIMES AGAINST WOMEN (IPC + SLL) (No.)

INDIA (2018)

378,277

STATE (2018)

8,329

(2.2%)

OUT OF INDIA

Source: NCRB

10,854



2014

7,777



2015

8,532



2016

8,133



2017

8,329



2018

STATE RANK BASED ON CRIME RATE AGAINST WOMEN (RANK)



27

OUT OF 36 STATES & UTs

Source: NCRB 2016

DOWRY DEATHS REPORTED (No.)

INDIA (2018)

7,166

STATE (2018)

9

(0.1%)

OUT OF INDIA

Source: NCRB

12



2015

12



2016

9



2017

9



2018

WOMEN TRAFFICKING CASES REPORTED (No.)



10

OUT OF 854
IN INDIA

Source: NCRB 2018

FEMALE SUICIDE CASES (No.)

INDIA	42,391
STATE	2,583

Source: ADSI 2018

FOETICIDES & INFANTICIDES REPORTED (No.)

	INDIA	STATE
FOETICIDES	128	21
INFANTICIDES	56	2

Source: NCRB 2018

- The state has less incidence of violence against women than the country figure, however the rate is still in the rural areas and among the scheduled tribe population.

GOVERNMENT FLAGSHIP PROGRAMMES FOR WOMEN EMPOWERMENT

NATIONAL RURAL LIVELIHOOD MISSION

What is NRLM

Govt. of India established National Rural Livelihoods Mission (NRLM) in June 2010 to implement the new strategy of poverty alleviation woven around community based institutions.

Mission's primary objective is to reduce poverty by promoting diversified and gainful self-employment and wage employment opportunities for sustainable increase in incomes.

To achieve the desired goal of the mission, NRLM provides a combination of financial resource and technical assistance to states such that they could use the comprehensive livelihoods approach encompassing four inter-related tasks. These tasks are:

1. Mobilizing all rural, poor households into effective self-help groups (SHGs) and their federations;
2. Enhancing access of the rural poor to credit and other financial, technical and marketing services;
3. Building capacities and skills of the poor **for gainful and sustainable livelihoods; and**
4. Improving the delivery of social and economic support services to the poor.

BETI BACHAO BETI PADHAO

Beti Bachao, Beti Padhao is a campaign of the Government of India that aims to generate awareness and improve the efficiency of welfare services intended for girls in India.

The Overall Goal of the Beti Bachao Beti Padhao (BBBP) Scheme is to celebrate the girl child and enable her education. The objectives of the Scheme are as under:

- i. To prevent gender biased sex selective elimination
- ii. To ensure survival and protection of the girl child
- iii. To ensure education and participation of the girl child

Strategies employed to successfully carry out the scheme are:

1. Implement a sustained social mobilization and communication campaign to create equal value for the girl child and promote her education.
2. Place the issue of decline in child sex ratio/sex ratio at birth in public discourse, improvement of which would be an indicator for good governance.
3. Focus on gender critical districts and cities.

TOTAL SHGs FORMED



247,719

SHGs HAVING BANK ACCOUNT* (%)



98.7

SHGs HAVING CREDIT LINKED (%)



NO DATA

TOTAL VILLAGE ORGANIZATIONS FORMED



5,033

TOTAL CLUSTER LEVEL FEDERATIONS

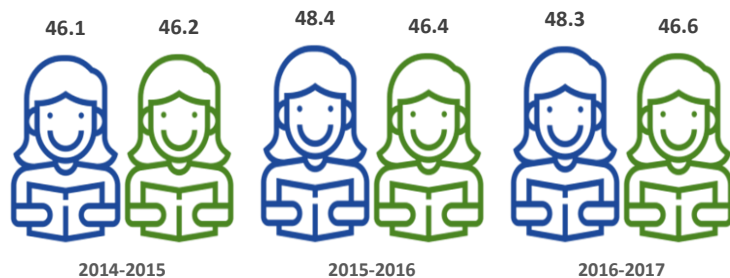


125

Source:- Website Of Deen Dayal Antyodaya Yojana - National Livelihoods Mission (NRLM), as on 4th May 2020

GIRLS ENROLMENT IN ELEMENTARY EDUCATION (%)

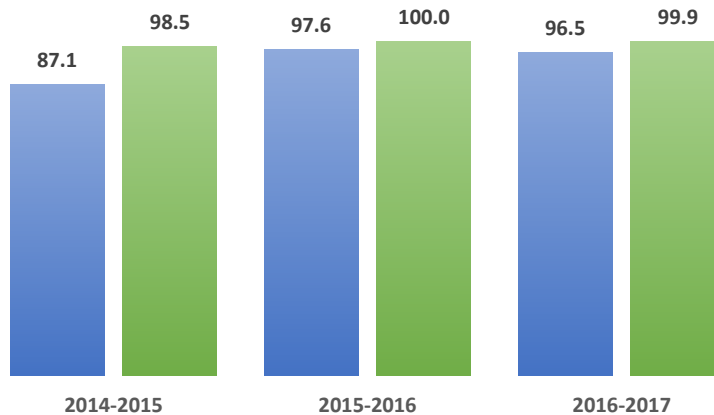
INDIA STATE



Source: U-Dise

SCHOOLS HAVING GIRL'S TOILET IN ELEMENTARY EDUCATION (%)

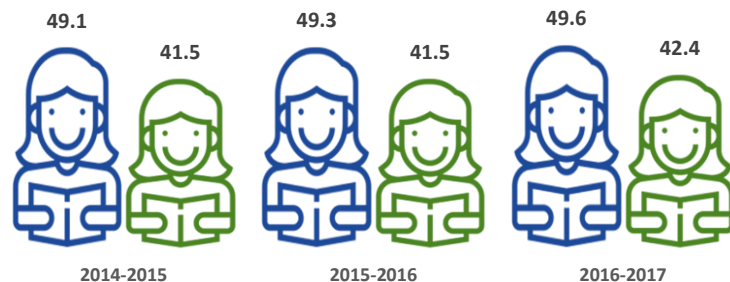
INDIA STATE



Source: U-Dise

GIRLS ENROLMENT IN SECONDARY EDUCATION (%)

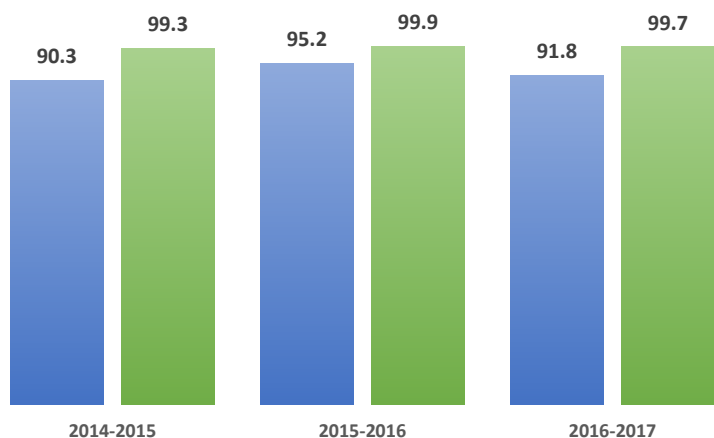
INDIA STATE



Source: U-Dise

SCHOOLS HAVING GIRL'S TOILET IN SECONDARY EDUCATION (%)

INDIA STATE



Source: U-Dise

- There has been almost no improvement in girls' enrolment in both elementary and secondary level for Gujarat as well as for the entire country since 2014 to 2017. However, toilets being one of the major contributors for improving girl's enrolment has also shown a decline for the state since 2016.