



**Govt. of Rajasthan**  
**Directorate of Medical Health & Family Welfare Services,**  
**State PC-PNDT Cell**  
**Swasthya Bhawan, Jaipur**

No. State PCPNDT Cell/HM/Online updation/2014/ 50

Date: 22/01/14

**U. O. Note**

**Sub:** - To online upload the Letter No. F.No.N.24026/65/2012-PNDT Government of India. Ministry of Health and Family Welfare (PNDT Section), dated 06.01.2014 on the site :www.rajswashya.nic.in regarding the Decentralization of PNDT-NGO Scheme.

With reference to the above cited subject, you are hereby requested to online upload the Letter No. F.No.N. 24026/65/2012-PNDT from Government of India. Ministry of Health and Family Welfare (PNDT Section), dated 06.01.2014 on the site : www.rajswashya.nic.in. regarding the Decentralization of PNDT-NGO Scheme and the details of guidelines for operationalization of the scheme by the States/UTs which is enclosed with this letter .

Attached:as mentioned above.

  
**Deputy Director RCH &  
Incharge State PCPNDT Cell  
Swasthya Bhawan, Jaipur**

✓CO-IT NRHM

No. State PCPNDT Cell/HM/2014/  
Date:

*Please upload on PCPNDT web page  
and email to all District CMHOs  
& District PCPNDT Coord.*

Stendra/Bhawani

*San*  
23/1/14

F. No. N.24026/65/2012-PNDT  
Government of India  
Ministry of Health and Family Welfare  
(PNDT Section)

Nirman Bhawan, New Delhi  
Dated 6<sup>th</sup> January, 2014

To  
The Mission Director (NRHM)  
All States/ UTs.

Subject: - Decentralisation of PNDT-NGO Scheme - regarding.


Sir/Madam,

With a view to further decentralize the activities under PNDT-NGO Scheme, Government of India has decided to discontinue the extant PNDT-NGO Scheme. It is, therefore, advised that the States/UTs are at liberty to propose schemes for enforcement of the PC&PNDT Act including grants to NGOs in their PIPs which would be duly appraised by NPCC within the available resource envelope. Respective States/UTs may incorporate the component in State PIP of NRHM-RCH Flexi-pool through FMR Code under NGO head for IEC related activity on gender and PC&PNDT.

2. The State/UT Govt. may select the district where the CSR is very low and may initiate the scheme in such districts.

3. Details of guidelines for operationalization of the Scheme by the States/UTs have been prepared and a copy of the same is enclosed. All the State/UTs are requested to disseminate the decision to all concerned including Civil Society members and to take appropriate follow up action to include funds requirement in PIP for 2014-15 onwards.

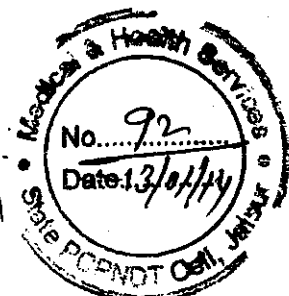
Yours faithfully,

  
(Dr. R. P. Meena)  
Director(PNDT)  
Tel: 011- 23063628

Enclosure: As above

Copy to:-

Nodal Officer (PNDT)  
All States/ UTs.



## DECENTRALIZATION OF NGO SCHEME UNDER PNDD

Trend of declining child sex ratio is not new in India. In post independent era, a need had been felt to address the issue which led to inception of PC & PNDD Act. The Act is being implemented in the country since its inception in 1994. The Civil societies and NGOs have been playing crucial role in fighting against the evil of sex selective abortions through generating awareness among communities.

Grant in Aid to NGOs for awareness generation through IEC on PC & PNDD Act has been a continued scheme since past Plan periods. It is a centrally sponsored scheme in which NGOs have been engaged through formal tendering process. Now it has been decided to decentralize the whole scheme and further, States/ UTs to be instructed to propose engagement of NGOs for IEC on PC & PNDD Act in State PIPs.

Due to availability of limited fund under the scheme, States/ UTs are to be selected based on the status of child sex ratio (as per Census- 2011).

- **10 States with lowest child ratio:**

1	Haryana	830
2	Punjab	846
3	Jammu & Kashmir	859
4	Delhi	866
5	Chandigarh	867
6	Rajasthan	883
7	Maharashtra	883
8	Gujarat	886
9	Uttarakhand	886
10	Himachal Pradesh	906

- **10 States recorded highest decline in Child Sex ratio:**

1	Jammu & Kashmir	941	859	-82
2	Dadra & Nagar Haveli	979	924	-55
3	Lakshdweep	959	908	-51
4	Maharashtra	913	883	-30
5	Rajasthan	909	883	-26
6	Manipur	957	934	-23
7	Uttarakhand	908	886	-22
8	Jharkhand	965	943	-22
9	Madhya Pradesh	932	912	-20
10	Nagaland	964	944	-20

## GUIDELINES FOR NGO SCHEME UNDER PNDD

Female foeticide/ infanticide had been prohibited through legislation in the pre-independence period; however the legislation sadly remained toothless with few or no convictions under the law. Certain provisions were also included in the Indian Penal Code, 1860 punishing causing of miscarriage and other like offences but unfortunately these provisions were rarely resorted to.

With the rise of pre-natal diagnostic techniques especially amniocentesis, the government in 1978 issued a directive banning the misuse of amniocentesis in government hospitals/laboratories. Thereafter due to the relentless efforts of activists, a law to prevent sex determination tests was passed in Maharashtra known as Maharashtra Regulation of Pre-natal Diagnostic Techniques Act, 1988. Finally after intensive public debate all over India the Parliament enacted the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act on 20<sup>th</sup> September 1994 (hereinafter referred to as the PNDD Act) to provide for the regulation of:

- the use of pre-natal diagnostic techniques for the purpose of detecting genetic or metabolic disorders or chromosomal abnormalities or certain congenital mal-formations or sex linked disorders;
- for the prevention of the misuse of such techniques for the purpose of pre-natal sex determination leading to female foeticide; and
- for matters connected there with or incidental thereto.

This Act came into force in 1996. By itself it is a comprehensive piece of legislation which defines the terms used therein, lays down when the use of pre-natal diagnostic techniques is prohibited and where it is regulated. It has provisions for bodies which are responsible for policy making under the Act and those which are responsible for the implementation of the Act.

### **Amendment in 1994:**

During the course of the implementation of the said Act, certain inadequacies and practical difficulties in the administration of the Act came to the notice of the Government. At the same time techniques have been developed to select the sex of the child before conception which may further the declining sex-ratio. After detailed deliberations, the PNDD Act has been amended with the amended Act having come into force with effect from. The main purpose has been to ban the use of sex-selection techniques before or after conception as well as the misuse of pre-natal diagnostic techniques for sex selective abortions and to regulate such techniques. To make this clear, the long title of the Act has been suitably amended to read: "An Act to provide for the prohibition of sex selection, before or after conception, and for regulation of pre-natal diagnostic techniques for the purposes of detecting abnormalities or metabolic disorders or chromosomal abnormalities or certain congenital malformations or sex-linked disorders and for the prevention of their misuse for sex determination leading to female foeticide and for matters connected therewith or incidental thereto." The title of the Act has also been suitably amended to reflect this and the title of the Act is now to read: "**The Pre-conception and Pre-natal Diagnostic Techniques(Prohibition of Sex Selection) Act (PC & PNDD Act)**".

Declining sex ratio in the country has been a matter of great concern for all. The PC & PNDT Act is being implemented through the Appropriate Authorities notified at State/ District/ Sub-District level. It is evident that Civil Societies and NGOs have played crucial roles in conception as well as implementation of the Act.

**Name of the scheme:** NGO-PNDT Scheme

**Operational area:** The scheme is to be implemented by NGOs at District level.

**Criteria for selection of District:**

- Districts having low child sex ratio in comparison to State average.
- Districts with steep declining trend in child sex ratio
- Districts with high rate of female infant mortality.
- Districts with high number of USG diagnostic centres.

**Type of project proposal to be considered under the scheme:** The NGOs may submit proposal in the following objective area to be implemented in close coordination with concerned Appropriate Authority.

- To spread awareness on declining child sex ratio and provisions of PC & PNDT Act.
- To conduct capacity building activities for public prosecutors, judiciary, PRIs and other key stakeholders.
- To conduct sting operations using decoy customers in close coordination with the Appropriate Authority.
- To follow up the ongoing court cases filed in the court, for violation of provisions of PC & PNDT Act, for speedy disposal.
- To break the chain of referrals (Doctors, ASHAs, Dias & other agents) for sex selective abortions.
- To increase accountability of Appropriate Authorities through social pressure and media advocacy.
- Any other proposal which may help in effective implementation of PC & PNDT Act in the District.

**Procedures and guidelines for submission of application:** NGOs applying under the NGO-PNDT Scheme must fulfil the following eligibility criteria. The criteria have been grouped into three sections viz. Registration, Experience and Assets. The fate of proposal would depend upon the cumulative score secured on all three sections.

**Registration:**

- The NGO should be registered under the Indian Society Act/ India Trust Act/ Indian Religious and Charitable Act/ Company Act or their State counterpart for not less than three years.
- NGO applying to work in other State, other than that of its registration, should have registered State specific chapters. Alternatively, branches affiliated to a national level federal/ organization can be registered with the parent body.

**Experience:**

- Proven experience in implementation of PC & PNDT Act or related projects dealing with issues of gender empowerment, for at least three years.
- NGO must have necessary human resource with adequate qualification and experience.
- NGOs blacklisted or placed under funding restriction by any Ministry or Department of Centre or State Government, are not eligible to apply under the Scheme.

**Assets:**

- NGO must have adequate infrastructure including office in the District where the scheme is supposed to be implemented.

**Guideline for application, selection, fund release and monitoring:**

- Complete proposal with adequate write with clearly defined indicators viz. objective, methodology and operational mechanism of implementation along with all supportive document to be submitted before deadline to the Office of Mission Director, NRHM/ State Appropriate Authority.
- The proposal must be submitted along with a duly signed recommendation letter from the State Appropriate Authority or the concerned District Appropriate Authority.
- An expert committee including officers of IEC Division of the State under the Chairmanship of Mission Director, NRHM/ State Appropriate Authority will evaluate the proposal and decision would be taken regarding fate of the submitted proposals based on the aforementioned indicators.
- The Chairman of the approving committee would process the recommendation further and subsequently inform the NGO about the approval or rejection after administrative and financial concurrence.

**Project duration:**

- NGO should clearly mention the time required for the implementation of approved proposal. The duration of the project should preferably be in the range of six months to two years.

**Funding pattern:**

- The scale of funding depends upon the nature of proposed interventions. However the individual proposal should not exceed Rs. 15 lakh (Rupees fifteen lakh only).

**Release of funds:**

- The flow of fund will be from State Health Society to the NGO. The funds may be released in three instalments; 60% on approval, and 20% after 3 to 6 months and remaining 20% after 9 to 18 months after satisfying the progress of the project.

### **Monitoring:**

- The NGO to submit progress reports (physical & financial) every quarter to Mission Director, NRHM/ State Appropriate Authority.
- The District Appropriate Authority to undertake random field visits to ensure the operational work of the NGO.
- The NGO to make presentation to Mission Director, NRHM/ State Appropriate Authority on its performance (physical & financial) so as to release the last instalment of 20% of the amount.

### **Performance indicators:**

- NGOs should clearly identify output and measurable indicators in the proposal.
- The project proposal should clearly indicate the TORs of the project and specific benchmarks against which progress of the project can be evaluated.

### **Reporting:**

- NGOs to submit quarterly progress report to the State Appropriate Authority.
- The Utilization Certificate (UC) against released fund to be submitted by the NGO to State Appropriate Authority.
- At the end, NGO to submit the project completion report to Mission Director, NRHM/ State Appropriate Authority. *The credible source of all statistical data quoted in the completion report should be clearly indicated.*
- *Any report which found to be not in true sense of actual activities carried out in the field, accounts for fraudulence which subsequently lead to legal action against the NGO.*