level of wages, stability of employment, social security of employees owing to the ‘temporary’ nature of employment. It also indicates preference by employers away from regular/formal employment to circumvent labour laws.

8.69 The multiplicity of labour laws and the difficulty in their compliance have been an impediment to the industrial development and employment generation. At present, there are 39 Central labour laws which have been broadly proposed to be grouped into four or five Labour Codes on functional basis with the enactment of special laws for small manufacturing units. In a major initiative for bringing compliance in the system, catalysing the need of job creation and to ensure ease of doing business while ensuring safety, health and social security of every worker, the Government has put forth a set of labour reform measures.

**Education sector**

8.70 An important concern that is often raised in the context of school education is low learning outcomes. This has been pointed out in several studies including ASER, 2014. While there have been
improvements in access and retention, the learning outcomes for a majority of children is still a cause of serious concern. Some of the underlying causes contributing to low quality of education in the primary sector are teacher absenteeism and the shortage of professionally qualified teachers.

8.71 Though the share of teacher component in total Sarva Shiksha Abhiyan (SSA) budget has been increasing over the years from 35 per cent in 2011-12 to 59 per cent in 2014-15, teacher absenteeism and the shortage of professionally qualified teachers remain an issue to be addressed. The components of SSA Budget 2014-15 are given in Figure 23.

8.72 An option to address teacher absenteeism that can be explored is biometric attendance of all teachers in primary schools for each scheduled class/lecture/session/distinct from the present system, where it is morning and evening to ostensibly record arrival and departures with little control on the activities during the working hours. A pilot project in one district of every State may be commenced for six months to be expanded to all districts in three years. Apart from the biometric attendance being regularly monitored by local communities and parents, it should also be put in public domain. This should be backed by adequate teaching aids, recorded lectures, etc. to fill in for absentee teachers. The scope of implementation should leave room for flexibility at the local level so the same do not end up as top driven ‘Model Schools’. The pilot of biometric attendance of teachers should be accompanied with an evaluation of learning outcomes.

Health for all

8.73 India’s health policy aims at an integrated approach which will provide accessible, affordable and equitable quality health care to the marginalized and vulnerable sections. The aim of good health and well-being for all as envisaged in the Sustainable Development Goal (SDG) 3, “Ensure healthy lives and promote well being for all at all ages” should be synchronized with India’s domestic targets to reap the benefits of the 'demographic dividend'.

8.74 Despite the challenges faced by the government in providing affordable health services to the population, there have been some notable achievements in the health sector. Life expectancy has doubled and infant mortality and crude death rates have reduced sharply. India’s total fertility rate (TFR) has been steadily declining and was 2.3 (rural 2.5 & urban 1.8) during 2014. Infant Mortality Rate (IMR) has declined to 37 per 1000 live births in 2015 from 44 in 2011. The challenge lies in addressing the huge gap between IMR in rural (41 per 1000 live births) and urban (25 per 1000 live births) areas.

8.75 The Maternal Mortality Ratio (MMR) declined from 301 maternal deaths per 100,000 live births during 2001-03 to 167 maternal deaths per 100,000 live births during 2011-13. There are wide regional disparities in MMR (Figure 24), with States like Assam,