

## **CHAPTER-6**

### **CONCLUSION AND SUGGESTIONS**

It may be concluded that in the district of Darjeeling the ICDS programme achieved its objectives somehow near to the desired level. The coverage is to be improved; the scheme was not in a position to provide Supplementary Nutrition (SN) to beneficiaries throughout the year. When SNP is not provided due to lack of nutrition items in the ICDS Centers, pre-schooling become a casualty, because many parents send their children to AWCs mainly for Supplementary Nutrition. The scheme could not help majority of the women to receive ante-natal care services and health education, as only a limited number of women were informed by AWWs about ante-natal care services, child immunization, management of diahorrea, methods of family planning, etc. The study also found that there was lack of coordination between various Departments engaged in implementation of the Scheme viz., Health, Rural Development, Education and Social Welfare. It was observed that lack of coordination was one of the major reasons for under performance of the ICDS. Another important reason for lackadaisical implementation of ICDS was non-availability of adequate supervisory staff. Based on the findings of the study, the following recommendations are made for improving the implementation of the programme: -

1. All vacant positions of the CDPOs and ACDPOs should be filled up at the earliest so that the scheme does not suffer any more. This will help in proper planning, implementation, supervision and monitoring of the scheme. All the departments must regularly coordinate and meet the expectations from each other department.
2. All vacant positions of the Supervisors should be filled up at the earliest so that supervision and monitoring is strengthened both in the urban and rural areas.
3. The Panchayats should be made functional in areas where these are non-functional. The AWWs should be selected on the basis of their merit and educational competence which will go a long way in delivering the AWCs services in effective and constructive manner. Further the AWWs should be relocated to the AWCs in their own areas of residence, which will help AWWs to do full justice with their occupational commitments as well as to their inevitable domestic commitments.

4. The capacities of the human resource working in the ICDS projects should be regularly improved as any compromise on this issue will affect the quality of performance. Regular orientation courses and trainings must be organized for them to increase job clarity, develop positive attitude and commitment. Enhancement in financial allocation for such training programmes should be considered.

5. Honorarium is a mark of respect for the work that AWWs and AWHs are doing. Periodic increase in the Honorariums must be made a permanent feature of the financial allocation processes.

6. There is a need to consider ways and means to improve the existing workspace and location of the AWCs, either by increasing the rent or encouraging communities to donate a required place or by constructing space. This will help in improving delivery of the services. There is a need to make adequate provision of material resources/infrastructure such as weighing scales/growth/immunization cards/Growth charts and registers at the AWCs. Efforts should be made to improve communication and coordination between authorities

implementing ICDS and functionaries of the Health Department, especially at the levels of the BMOs and depute one or more full time ANMs in each ICDS project from the Health Department. It would ensure regular health check-ups/ immunization of the registered beneficiaries at AWCs and give a practical shape to the referral services component of the ICDS scheme. There is need to educate the masses by way of organizing road/stage shows etc. in order to make community pro-active in coming forward of their own for their immunization, health check-ups, etc.

7. Adequate provision of resources such as weighing scales, growth charts and register will help in monitoring the growth of children. Further, more emphasis should be given in developing a focus on Mother's meetings and building their capacities and developing their mental capabilities in addition to introducing community based nutritional surveillances.

8. So far as early childhood care and pre-school education is concerned, there is a need to improve the

skills of the AWWs on the concepts and approaches of the joyful learning (play-way methods). Adequate provisions should be made for procuring of relevant teaching and learning aids. Provisions should also be made for suitable accommodation along with matting and heating provisions at each AWC. There is also a need to develop and strengthen coordination with the local primary schools. Their manpower may also be utilized to motivate the community.

High levels of child malnutrition in developing countries contribute to mortality and have long term consequences for children's cognitive development and earnings in adulthood. Recent impact evaluations show that many interventions have had an impact on children's anthropometric outcomes (height, weight, and birth weight), but there is no simple answer to the question "what works?" to address the problem. Similar interventions have widely differing results in various settings, owing to local context, the causes and severity of malnutrition, and the capacity for program implementation. Impact

evaluations of World Bank-supported programs, which are generally large-scale, complex interventions in low capacity settings, show equally variable results. The findings confirm that it should not be assumed that an intervention found effective in a randomized medical setting will have the same effects when implemented under field conditions. However, there are robust experimental and quasi-experimental methods for assessing impact under the difficult circumstances often found in field settings. The relevance and impact of nutrition impact evaluations could be enhanced by collecting data on service delivery, demand-side behavioral outcomes, and implementation processes to better understand the causal chain and what part of the chain is weak. It is also important to better understand the distribution of impacts, particularly among the poor, and to better document the costs and effectiveness of interventions.

- The relevance of impact evaluations for policy makers would be greatly enhanced if they documented both the effects and costs of nutrition programs and interventions.

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– A Quality Review, Department of Women and Child Development and Social Welfare, Government of West Bengal, paper presented at the 5th Kolkata Group workshop, organised by Pratichi Trust, UNICEF, Global Equity Initiative, Harvard University and Institute of Development Studies Kolkata, on Child Rights and Development at the Alipur Campus of Calcutta University, Kolkata, on 12-14, February 2007.