

CHAPTER-4

ICDS IN THE HILL AREAS OF

DARJEELING

INTRODUCTION & OVERALL DISCUSSION

There are 15 projects in the district of Darjeeling out of which 6 projects are in the plains. The name of the 9 projects which fall under the hill areas are

SUKHIAPOKHRI

RANGLI-RANGLIOT

DARJEELING –PULBAZAR

KALIMPONG-1 and KALIMPONG II

GARUBATHAN

KURSEONG

DARJEELING (U)

MIRIK

The structure of command of the ICDS bureaucracy at the District level was as follows: it was to be headed by a District Program Officer (DPO). The 12 (as 3 posts are lying vacant till July,2010) Child Development Project Officers (CDPO), who headed the program at the level of the Block, did reporting to the DPO. The CDPO was the head of the office, and supervised a clerical staff, which included an account clerk, another clerk who did other jobs, a peon, and a driver. The CDPO was responsible for overseeing the work of the 77 Supervisors,

the 3172 Anganwadi Workers in the Block, and their 3166 Helpers. The Anganwadi Workers were responsible for the day to-day functioning of Centers in villages, which especially targeted poor and low- caste women and children as beneficiaries. The Anganwadi Centers were supposed to operate every day from 9 a.m. to 1 p.m. Since it was not feasible for a single Anganwadi Worker to run a Center, take care of as many as 50 children, teach the children, cook food for them, supervise their medical care, and maintain the records, the Anganwadi Worker was provided with a "Helper". The Helper's duties included doing all the odd jobs associated with the Anganwadi, including rounding up the children to attend the Center, doing the cooking when the Centers were supplied with food, and cleaning.

The ICDS is fully financed by Govt. of India, except the nutrition component, which is expected to be met by State Governments. The main findings of the study are:

1. Integrated Child Development Services Scheme covers all the 15 ICDS blocks of Darjeeling. As of July 2010, a total of 3891 Anganwadi Centers (AWCs) were sanctioned in the district and out of which 3866 (99 percent) were operational. The

AWCs in the district have been established to provide Supplementary Nutrition (SNP), Nutrition and Health Education (NHE), Immunization, Health Check-ups, Referral Services and Non-formal Pre School Education (PSE).

2. As on July 2010 total number of 161980 eligible children (6-72 months age) were registered with various AWCs in the state and out of them 123434 had received the above mentioned services. Besides, a total number of 20982 pregnant women and lactating women were also enrolled at various AWCs across the district for supplementary nutrition, maternal care and health education.

3. Of the funds made available to the district for implementation during 2000- 2009 the district has utilized about 85 percent of these funds. The district

the expenditure under different heads showed that 88 percent of the total funds during 2000-09 were utilized Salary/Honorarium of the employees. Thus, just 12 percent of the funds were on non salary items.

4. The information collected from the office of the Directorates of Social Welfare regarding the procurement of various nutritional items during the last 9 years shows that all the nutritional items received by the directorates during 2000-09 were distributed among different projects which were utilized by them.

5. The ICDS is funded by CSS (Non Plan), State Plan (40% honorarium of the AWW and AWH) and District plan (Nutrition items) budgets. The authority for planning and budget formulation approval and release of funds was largely centralized at the Directorate level. This often resulted in procedural and systematic delays and insufficient allocation. The Child Development

Project Officers (CDPOs) were of the view that under this system, the demands/needs prepared at the project level do not get reflected in terms of allocation. Further, the timely release of funds has been affected by the delays in the submission of the utilization certificates. Purchase and procurement was centralized with the Central Purchase Committee. Centralized system did not allow flexibility and scope for increasing/decreasing ceilings.

6. Information collected regarding the availability of staff revealed that of the 15 sanctioned posts of CDPOs, only 12 were in position. Similarly, more than one-fourth of the Supervisors (87 out of 164) were vacant. However, most the positions of AWWs, AWHs and clerical positions were in position. *The vacant positions of CDPOs and Supervisors had adversely affected the implementation of scheme,* Which needs to be addressed.

7. So far as the recruitment of AWWs was concerned, the state government has recently framed a recruitment policy for filling up of the posts of AWWs. Earlier there was no clear-cut policy for the recruitment of the AWWs and in most of the cases, the selection of AWWs was based on political and other considerations. As a result the criteria of educational competence of AWWs were compromised. It is suggested that the task of recruitment of Supervisors should be assigned to Public Service Commission and new recruitment policy devised by the government for filling up the posts of AWWs should be strictly followed.

8. A regular and planned monitoring, supervision and support is essential for effective delivery of the AWC services with provisions of mid way corrections. But, due to inadequate supervisory staff, a supervisor has to supervise about 30-40 AWCs. This has resulted in improper monitoring and supervision of the AWCs. It is suggested that the

Panchayats, where ever they are functional, should be involved in the monitoring and supervision of the AWCs.

9. According to ICDS guidelines, the space for the AWC was to be donated by the community at a central location, preferably near to a primary school. It was rather one of the criteria that whosoever provided space was considered for the work of AWH. Consequently, both the quality of space and the locational aspects of the AWCs were compromised. It was observed that 26 percent of the AWCs were housed in pucca buildings, 51 percent in semi-pucca houses and another 23 percent have been accommodated in katcha houses, which constitute a perpetual apprehension of danger to the life of the children. Like-wise, other facilities such as separate storage space, kitchen and dinning and sufficient space for indoor and outdoor activities, toilet and washing facilities, ventilation and drinking water were also compromised. It was also found

that AWCs at large did not have enough space for outdoor activities and hence compromising the scope for children development. Hence, it is suggested that buildings should be constructed for all the AWCs and funds available under different Centrally Sponsored Schemes like SGRY could be devoted for the construction of AWC buildings.

10. The beneficiaries for the supplementary feeding were to be selected very carefully so as to ensure coverage of the neediest and the malnourished children below the age of 6 years, particularly those between the ages of 6 months to 3 years. It was observed that the selection of the beneficiaries was solely determined by the AWWs and they have not followed any standard criterion for the selection of the beneficiary households. Consequently, even children from the economically well off families were also enrolled at the AWCs, whereas those actually eligible were left out.

11. The data collected revealed that supplies received by the AWCs last for 3-4 months only. Once the supplies exhaust, the children stop coming to the AWCs and Centers virtually gets closed. Beneficiaries generally perceived AWCs as 'Dal Centers' and did not have a good image about these Centers. It is felt that the image of the AWCs can be improved by improving the knowledge, skills, support and the status of the AWWs.

12. The health check ups were not a regular feature of the AWCs primarily because of poor coordination between the ICDS functionaries and the Health Department. The Immunization records maintained by the AWCs showed that almost all the children registered with the AWCs had received all the recommended doses of vaccination. However, the information collected from the beneficiary

households revealed that only 79 percent of the children had received BCG, 82 percent had received all the three doses of DPT and Polio and 69 percent of the children had received Measles doses.

13. As per the provision of the ICDS revised guidelines, each and every AWC should have a medical kit. This medical kit should contain essential drugs and first aid items. But it was found that the medical kits were generally (provided once a year and the quantity of drugs and other items supplied to the AWCs last for one or two months. Consequently, these medical kits had proved to be of limited use.

14. AWWs were also supposed to give health education and help the eligible women to get ANC and PNC services. It was found that 35 percent of women were motivated by the AWWs to avail

antenatal services, 31 percent of the women received health education from the AWWs and another 29 percent were contacted by the AWWs for post natal services. Thus, AWWs played only a limited role in imparting family health education among women in Darjeeling.

15. The study found that weighing of the children was not being practiced as per ICDS mandate. Surprisingly, majority of the mothers did not know whether their children are regularly weighed at the AWCs or not, which probably indicates that weighing is not practiced regularly. It was observed that regular weighing and keeping records, focus on malnourished children, improving the skills of mothers on child and concept of community based nutritional surveillance still remained areas of serious concern.

16. Pre-school education is a very crucial component of the package of services envisaged

under ICDS as it seeks to lay the foundation for proper physical, psychological, cognitive and social development of the child. Though, the records available at the AWCs indicate that they impart PSE to all the enrolled children throughout the year, but it was found that the PSE was imparted only when the nutrition was available in the Centre. Further, there is a need to improve the skills of the AWWs on concepts and approaches of the joyful learning (play-way methods). Adequate provisions need to be made for procuring of relevant teaching and learning aids. Provisions need also to be made for suitable accommodation with matting and heating provisions at each of the AWCs. There is also a dire need to consider developing and strengthening coordination with the local primary schools to seek support and especially with the planning cell for monitoring purposes.

17. The system of maintaining of records at district ICDS offices was found to be very poor. The

information was not readily available and survey team had to face a lot of problems in collecting information from these offices. Though AWCs were maintaining information on a number of registers, but information pertaining to the attendance of the children and immunization was found to be grossly inaccurate in all the AWCs visited by the team. For example, some of the AWCs had marked all the children present on the day of our visit, despite the fact that only a few were present. Hence, there is ample scope to improve the record keeping at all levels. Reporting formats need to be simplified and workers be given adequate stationery to maintain records.

Nobel laureate Honourable Dr. Amartya Sen, sent a message from Kolkata to our honourable Prime Minister Dr. Manmohan Singh in 2008 asking him not to allow a proposal to serve biscuits and pre-packaged food to pre-school children. Sen also asked the PM to prevent the move to replace cooked food with packaged food as part of the mid-day meal scheme in elementary schools. The message followed

a meeting of the Kolkata Group chaired by Sen under the sponsorship of his Pratchi Trust and Harvard's Global Equity Initiative.

Table-2
Comparative Estimate of Child Mortality,
Between Darjeeling & W.B.
1981-91

Mortality Level	Census year	Darjeeling P	Darjeeling M	Darjeeling F	W.B P	W.B M	W.B F
q1	1981	89	94	89	95	103	57
	1991	58	55	62	62	75	51
q2	1981	84	88	81	102	106	98
	1991	65	62	67	81	79	83
q3	1981	93	97	88	111	113	110
	1991	71	69	74	86	86	85
q4	1981	99	101	96	124	123	125
	1991	75	72	78	94	94	92

Source: Census report 2001

The above table indicates that child mortality at age 1,2,3, and 5 both in 1981 and 1991 was lower in the district as compared to the state.

Table-3

Other fertility measures in Darjeeling

	DARJEELING	DARJEELING	W.B.	W.B.
Fertility Measures	1981	1991	1981	1991
G.F.R	134	117	153	122
G.M.F.R	202	169	185	158
T.F.R	4.2	3.5	4.3	3.6
T.M.F.R	6.4	5.7	5.7	5.1
C.B.R	34.2	29.8	34.7	29
No. of children ever born per woman in the age group 45-49	—	4.1	—	4.6
Mean age at marriage	—	18.8	—	17.2
Child woman ratio	—	61.1	—	71.1

Source: Census Report 2001

The objective of this study was to evaluate the functioning of the ICDS programme in Darjeeling. The findings of the study were based on the information collected from 12 AWCs, 6 each located in the sub-divisions of Darjeeling and Kalimpong. During the course of

survey, information was also collected from 80 beneficiary mothers, whose children were enrolled in the AWCs. Besides, information was collected from four Programme Officers and eight Child Development Project Officers in the four selected districts.

FINANCIAL PROGRESS

The ICDS is a Centrally Sponsored Scheme. While the Central Government bears the full cost of meeting the operational requirements, the state government provides funds for Supplementary Nutrition (SN) component. In addition to mobilizing domestic resources, significant contribution also comes from UN Agencies, bilateral donors and the World Bank. The expenditure for running the ICDS programme is currently met from three broad sources: viz., (a) funds provided by the Centre under `general ICDS which used to meet expenses on account of infrastructure, salaries and honorarium for ICDS staff, training, basic medical equipment including medicines, playschool learning kits etc. (b) allocations made by state governments to provide supplementary nutrition to beneficiaries and (c) funds provided under the Pradhan Mantri Gramodaya Yojana (PMGY) as additional central assistance, technically to be used to provide monthly take-home rations to children in the age group 0-3 years living below the poverty line and those who are in need of additional supplementary nutrition.

I tried my best to collect information about allocation and expenditure of funds under ICDS during the last ten years (2000-2009)

in the selected projects and for the district as a whole. Unfortunately, the information maintained by the offices of Programme Officer, was not maintained properly. In fact, information regarding the financial aspects pertaining to some years was either not available or partly available. In 2000-03, Salaries head accounted for 60 percent of the total expenditure and food supplementation constituted 33 percent of the total expenditure during 2005-07. Besides, 2 percent of the funds were utilized on rent and another 2 percent on transportation.

SUPPLEMENTARY NUTRITION

PROGRAMME (SNP)

As mentioned above, the ICDS covered all the Community Development Bloc the and as of July, 2010, there were 3891 sanctioned ICDS projects out of which 3866 were in operation of in the district.. However, efforts were on to make the remaining AWCs functional in the district. According to Programme Officers almost all the villages were covered under ICDS scheme. SNP scheme in 2010 was reaching out to 161983 children and 20982 pregnant and lactating women. The programme provided single ration of 300 calories and 10 grams of protein to children. Pregnant and lactating mothers also received an equivalent quantity, whereas the provision was 500 calories and 20 grams of protein. It was mentioned by the Programme Officers that financial constraints were limiting the provision of SN to all eligible children and women. The norms of expenditure per child on SNP was fixed many years ago, whereas the cost of supplies increased over this time, but there was not corresponding increase in the allocation on SNP per beneficiary.

PRE SCHOOL EDUCATION (PSE)

As per the provisions (in the ICDS guidelines), Rs. 500 is earmarked for the non-formal pre school material on an annual basis per AWC. The Programme Officer mentioned that such funds were not released regularly.

INFORMATION, EDUCATION, AND COMMUNICATION (IEC)

IEC is a key to mobilize and educate communities on the benefits of ICDS. However, there was no allocation or spending on this issue during 2000-02, although the scheme has a provision of Rs. 25,000 per year per project for the IEC. It was only in 2003 that IEC received some allocation and during 2005-06 and 2006-07 less than one percent (0.3 percent) of the total expenditure was incurred on IEC. Thus, against a provision of Rs. 25000 per project for IEC, only Rs. 11400 was spent on IEC by each project during 2006-07.

CONTINGENCIES

The ICDS guidelines provides for a contingency of Rs 2,000 per AWC and Rs. 91,000 per Project. However, it was noticed that project level contingencies were not allocated and utilized as per the guidelines. An amount of Rs 12,000 was allocated per project for meeting contingencies, irrespective of the number of the AWCs. From the year 2002-03 the Block level "contingency" and Anganwadi Centers "contingency" were combined under the budget head of "contingency " but the amount was further reduced. Contingencies accounted for about 1 percent of the total expenditure during 2000-02 and it slightly increased to 1.75 percent during 2006-07 (Table 5.2). The Programme Officer expressed that contingency amount was highly inadequate to run the scheme.

TRANSPORTATION AND POL

All the projects have been provided with vehicles under a special grant received from the UNICEF. As per the provision of the ICDS revised guidelines; Rs 50,000 per annum should be released to the projects for the POL and maintenance of vehicles. Transportation accounted for less than 4 percent of the total expenditure during 2010 lump sum and inappropriate amounts ranging from Rs. 25, 000 to Rs. 40,000 per year, varying from project to project were released affecting the mobility of the staff.

TRAINING

As envisaged in the guidelines, the capacities of the human resource at all levels were to be improved through training, refresher courses, seminars and workshops. However, it was found that during the last six years not much had been done to train the human resource under ICDS in the state. Programme Officers and CDPOs expressed that funds available for holding training and refresher courses at various levels were extremely insufficient. Thus, financial constraints had affected the capacity building of the human resource at various levels.

HONORARIUM

Presently the monthly honorarium of the Anganwadi Worker (AWW) is Rs 2800 and Anganwadi Helper (AWH) is Rs. 2000 including the rent of the house. The increment is one time after a gap of 5 -10 years. Due to the delay in the release of the funds, the honorarium was not paid to staff regularly. Programme Officers and Child Development Project Officers mentioned that with this nominal and irregular honorarium, there was insufficient financial motivation for the AWW and AWH to give a satisfactory performance.

EXISTING FINANCIAL PROCESS

ICDS is funded through CSS (Non Plan), State Plan (40% honorarium of the AWW and AWH) and District Plan (Nutrition items) budgets. Authority for approval and release of funds is centralized at the Directorate level. Even the planning and budget formulation is largely centralized. This has often resulted in insufficient allocation and procedural delays. Both the POs and the CDPOs mentioned that under this system the demands prepared at the project level did not get reflected in allocation. Further, release of the funds was also affected by the delays in the submission of the utilization certificates. Purchase and procurement has been decentralized with the District Purchase Committee. Centralized system did not allow flexibility and scope for increasing ceilings. The centralized system has largely proved ineffective with respect to at least timely supplies.

The CDPOs expressed that the financial procedure adopted under ICDS-III, were much better because under that system there were timely release of adequate funding under all budget heads as well

as timely supplies of the SNP material. Under ICDS-III even SNP days at AWC were 300 days in a year. Hence, in view of experiences of earlier phase and present phase, there is need to review the system in favour of more decentralization.

SUPPLIES

As mentioned above, the system for procurement of supplies under ICDS have been decentralized at the state level. There is a District level purchase committee which is responsible for the purchase and procurement of all SN items. The data collected from the office of the Programme Officers regarding the procurement of various items during the last three years preceding the field survey showed that all the nutritional items like Moong, Channa, Oil, Rice, Haldi, Salt and Sugar received by the Programme Officers during the period were distributed among different ICDS Projects .The supply is given by WBECSC; an undertaking of Govt. of West Bengal

NO. OF AWCS

The total number of sanctioned ICDS projects in the district in Jan 2000 was 956, but only 771 were functional. Now in July 2010 the nos. of sanctioned AWCs are 3891 out of which more than 99% are functioning. It is clear from the following table.

Table-4

Reach of ICDS in West Bengal regarding SNP& PSE, 2005

District	No.ofAWC	%Centre with SNP	% 0-6 children covered under SNP	% L & T mothers covered under SNP	% of AWC with PSE	% of 3-6 children covered both by SNP & PSE	Girls as % to total PSE coverage
Bankura	2796	55.83	55.3	40.5	99.07	90.55	49.5
Birbhum #	2404	56.32	31	35.8	100	135.49	50
Bardhaman	4749	80.69	54.1	51.8	96.65	96.65	49.7
Kolkata	1118	99.11	50.6	40.4	99.73	74.49	50.7
Koch-Bihar	1925	99.53	64.9	49	100	70.53	49.5
Darjeeling	1020	66.27	86.2	44	99.61	54.67	49.7
Hoogli	3152	95.75	62.8	35.6	99.97	82.7	50.5
Howrah	2366	89.64	66.1	69.2	99.87	77.89	50.4
Jalpaiguri	2404	84.9	49.6	37.6	98.75	72.04	51.1
Malda *	1905	101.84	57	66.8	107.87	94.54	49.2
Medinipur(E)	3546	77.02	58.4	37.3	97.46	69.83	51.1
Murshidabad	3941	68.16	40.7	37.2	99.7	94.26	50.6
Nadia	3141	93.62	45.5	46.8	99.84	91.37	50.6
Purulia	2424	90.76	70.7	73.9	99.92	95.84	50
U 24pargana	4395	68.19	47.5	34.4	99.66	80.43	50.3
U dinajpur	1578	81.81	52.6	41.8	99.18	82.91	49.2
D 24pargana	5115	74.43	50.2	44.9	99.9	77.32	49.7
D.Dinajpur	1277	84.03	49.9	51.1	100	82.84	50.4
Medinipur	4680	67.88	54.8	32	97.91	80.97	50.3
Total	53916	78.74	52.8	44.8	99.41	84.59	50.1

Computed from Annual Report,2005-06,Dept. of Social Welfare and Women and Child Development, Govt. of WB.

It is to be noted that the Number of children covered under PSE is greater than the number of children covered under SNP

@ No break up for children belonging to 3-6 years is available.

* Both the percentages of centres having SNP and PSE exceeded the actual number of operational centres!

Source: Pratichi Trust Report, 2009

Table-5

STAFF STRUCTURE

District wise vacancies in the Posts of AWWs & AWHs (March-2006):

Districts	Percentage of AWW vacant	Percentage of AWH vacant
Bankura*	18.7	18.4
Birbhum	25.1	24.6
Bardhaman	23.7	26.1
Kolkata	25.1	24.3
Koch Bihar	19.6	21.2
Darjeeling	44.3	46.2
Hoogly	31.1	30.7
Howrah	28.3	28.1
Jalpaiguri	32.2	35.1
Malda	32.4	31.6
Midnapur(E)	22.5	25.8
Murshidabad	32	36.5
Nadia	27.8	26.4
Purulia	19.3	17.9
24 Parganas(N)	36.5	40.2
U. Dinajpur	33.5	32.6
24 parganas(S)	23.2	22.6
D. Dinajpur	26.5	27
Midnapur(W)	18	17.3
West Bengal	27.2	27.8

Source: Pratichi Trust Report, 2009

According to the guidelines; the ICDS team comprises of an Anganwadi Helpers (AWHs) and an Anganwadi Worker (AWW) at the Anganwadi level and Supervisors, Helpers to the Supervisors and the Child Development Project Officers (CDPOs) at the project level. In larger rural and tribal projects, the Assistant Child Development

Project Officers (ACDPOs) are also part of the team. The AWW is responsible for organizing pre-school activities in the AWC for about 40 children in the age group 3-5 years, arranging supplementary nutrition feeding for the children in age group of 6 months to 5+ years expectant & the nursing mothers, providing health and nutrition education to the mothers, making home visits for the education of the parents, eliciting community support & participation, assisting the Primary Health Centre staff in the implementation of immunization, health check-up, referral services, family planning & health education programme, maintaining liaison with other institutions/agencies in her area. The AWW is assisted by a Helper, a local woman in organizing supplementary nutrition feeding and non-formal pre-school education programmes at the AWC. The Supervisors are responsible to supervise the working of AWCs through regular field visits. They are also supposed to help and guide the AWWs in developing community contacts, maintain liaison with Child Development Project Officer (CDPO) and assist him in various tasks of project administration and implementation, maintenance of records, registers, etc. The Medical Officers (MOs), Health Workers from nearby Primary Health Centres (PHCs) and Sub-Centres (SCs) form a team with ICDS functionaries to implement the ICDS programme.

Most of the important positions at the district and project level such as Programme Officer, CDPO and ACDPOs were existing. Out of 15 positions of CDPOs 12 were in position at the time of survey.. Similarly, only 47% supervisors (77 out of 164) were trying to perform 100% duties!. Out of 3891 sanctioned positions of AWWs 3172 were in position. Some of the ministerial positions were also vacant but one-third of the positions of Statistical Assistant and 10-20 percent positions of Section Officers, Head Assistants, Clerks and Orderlies were also vacant.

RECRUITMENT

The guidelines envisage that all AWWs should be local people residing in the same area where AWC is located. It was observed that these guidelines were followed, but since most the AWWs at the time of recruitment are young unmarried girls, however, once they get married, they migrated to the husband's village. The migration of the AWWs due to the marriage which resulted in the displacement of the AWWs. It was observed that some of the non-local AWWs used to commute to the centers from a distance of 5-50 kms. The CDPOs mentioned that most of the non-local Anganwadi workers belonged to highly rich and politically influential families. Under these circumstances, the CDPOs were not in a position to easily affect the accountability. The CDPOs also mentioned that AWWs got an honorarium of Rs. 1400 but had to spend around Rs. 300-400 on transportation. Besides, they consumed a lot of time on shuttling between their places of residence and places of postings. Consequently, it was not possible for them to do justice with their work.

So far as the recruitment of AWWs was concerned, the State Government had recently framed a recruitment policy for filling up of the posts of AWWs. However, earlier there was no clear-cut policy for the recruitment of the AWWs and in most of the cases, the selection of AWWs was mostly based on political and other considerations. Selection of AWHs was still based on political and other considerations. Regarding the educational status of the staff of the AWCs, it was observed that 60 percent of AWWs had completed high school and another 30 percent had completed a higher secondary examination (Table 5.5C). The percentage of AWWs who had a higher secondary education was highest in KURSEONG (50 percent) and lowest in GORUBATHAN (10 percent). As far as the AWHs were concerned, two-third (67 percent) were literate, 3 percent were matriculate and another 30 percent were under matric. Most of the AWHs in Gorubathan were illiterate; while half of the AWHs in Kurseong had completed middle schooling.

So far as the CDPOs were concerned, there were government guidelines that 50 percent of the posts would be filled in by State Public Service Commission through Combined Civil Services Examinations and remaining 50 percent through promotions. But in

practice, posts of CDPOs were filled in by State Public Service Commission, departmental promotions and even people on deputation from other departments. A very common perception of the functionaries (POs and CDPOs) was that rules were not always adhered to in filling up the posts of the CDPOs and quite often technical competency level was compromised. Stop gap arrangements / own pay and grade (OPG) charge was delegated to non-ICDS people to fill up CDPO ranks. Some CDPOs also mentioned that a number of people without sufficient orientation had joined CDPO positions on deputation from other departments, leading to frustration and demotivation amongst promotion aspirants.

TRAINING

The ICDS guidelines have sufficient provisions for various types of training for different staff members of the ICDS. These includes; two months training course at National Institute of Public Administration and Child Development (NIPACD), New Delhi for ACDPOs and CDPOs; 3 months training course for Supervisors at Rangli-Rangliot; for AWWs at AW Training Institute and 13 days training for the AWHs under project UDESHA at the individual project level. In addition to it, there was a provision for regular refresher training programmes for CDPOs at the state level. Information was collected regarding the training courses attended by the ICDS staff working in the selected districts. It was found that all the CDPOs and the Supervisors had attended the basic job on training courses. Besides, 73 percent of AWWs had also attended the basic ICDS training (Table 5.6). All the AWWs from Darjeeling and 90 percent in Kalimpong had participated in job on training courses, while only 20 percent of the AWWs of Gorubathan project had received such training. Refresher courses were attended by 68 percent of the interviewed AWWs. In Mirik 20 percent had participated in refresher courses as compared to more than 70 percent in other blocks. Though

majority of the AWWs had attended either basic training or refresher courses but it was found that 35 percent of them were not satisfied with these courses. All the AWWs who were not satisfied with the training imparted to them belonged to the two districts of Kashmir valley included in the study.

MONITORING, SUPERVISION AND SUPPORT

A regular and planned monitoring, supervision and support is essential for effective delivery of the ICDS with provisions of mid way corrections. As per the guidelines envisaged under ICDS, the Supervisors are supposed to visit regularly each of the AWCs – at-least one visit every month to each AWC to support the AWWs with constructive approach to build their capacities and confidence. But due to inadequate supervisory staff in position, Supervisors had a huge workload. While one Supervisor was supposed to supervise the activities of 20 AWCs, but in practice a Supervisor sometimes had to supervise the activities of more than 60 AWCs. As a result, even if he/she spend one day of quality time at each of the AWC, chances are that the next visit to the same centre would be after 3 months only. The data collected during the survey suggested that the Supervisors and CDPOs did not uniformly visit all the Centers within their jurisdiction (Table 5.7). It was found that Supervisors had not visited 28 percent of the AWC's in the last three months, while 42 percent of the AWCs

were visited by the Supervisors 1-3 times and another 30 percent of the AWCs were visited by them more than three times during the same period. Supervision was found to be the weakest in Rangli-Rangliot while 70 percent of the AWCs were not at all visited by the Supervisor during the last 3 months and in Kurseong all the AWCs were visited at least once by the Supervisors during the reference period. The mean number of visits made by ICDS Supervisors to the selected AWCs during the last three months worked out to be 2.5.. All the AWWs were asked to report the nature of support they got from Supervisors. Multiple responses were received. It was mentioned by 15 percent of the AWWs (mostly from Kalimpong) that Supervisors did not help/guide them at all. Sixty percent of the AWWs reported that the Supervisors enquires about supply of SN, 40 percent monitored other supplies, 48 percent guided them in the preparation of growth charts, and again 83 percent of AWWs reported that Supervisor helped them in record keeping. Thus, Supervisors not only monitored the activities of the AWCs but also provided supportive services to AWWs.

The CDPO as the leader and co-ordinator of the ICDS team has to supervise and guide the work of the Supervisors and the AWWs through periodical field visits and staff meetings. He has also to make

necessary arrangements for obtaining, transporting, storing and distributing various supplies. The CDPO has to maintain liaison with block level medical staff, PHC/health staff and other project level functionaries and organisations. He is also required to act as the Convenor or Secretary of the Block/project level co-ordination committee. The CDPO also has to make efforts for obtaining local community's involvement and participation in implementing ICDS programme. He is responsible for preparing and despatching periodical reports to the concerned higher officials. The success of the working of the AWCs depends upon the effective Supervision of the supervisory staff and convergence with other schemes of related departments.

It was, however, observed that the CDPOs did not visit all the centers regularly. Among the selected AWCs, the CDPOs had not visited 55 percent of the AWCs in the state during the last three months (Table 5.7), and 3 AWC were visited three or more times by the CDPOs. Once again, supervision by CDPOs was found to be the poorest in Gorubathan. Nine out of 10 AWCs in Rangli-Rangliot had not been visited at all by the CDPOs during the last three months. There is, therefore, a need to make it mandatory for the CDPOs to

make regular visits to all the AWCs on some rationale than on selective basis.

Space was provided by the AWHs. It was rather one of the criteria that whosoever provide space would be considered for the work of AWH. Consequently, both the quality of space and the locational aspects of the AWCs were compromised. Besides, there was no provision of rent for AWC in the district. Without rent, one cannot expect an appropriate space. Usually, it was seen that AWHs devote those room to the AWCs which were in poor condition. Regarding the status of the building for running of AWC, it was observed that only 28 percent of the AWCs were housed in pucca buildings while 45 percent of the AWCs were housed in semi-pucca houses and another 28 percent were in katcha houses which constitute a perpetual apprehension of danger to the life of the children. In Gorubathan and Matigara 40-50 percent of the selected AWCs were located in katcha buildings while in Darjeeling 70 percent were located in semi-pacca houses.

Kitchen is an integral part of the AWCs. However, 82 percent AWCs covered under the study had no separate space for cooking purpose as cooking for AWCs was done in the AWHs personal

kitchen. In Mirik none of the AWCs had a separate kitchen. Other issues such as separate storage space, dining and sufficient space for indoor and outdoor activities were also compromised. This was established by the fact that only 38 percent of the AWCs had separate space for storage, 55 percent had separate outdoor space for recreation and 53 percent had some sort of space for indoor activity.

Due to lack of separate storage facilities in about 38 percent of the AWCs covered under the study reveals that many a times storage of various items such as utensils and records in addition to the personal belongings of the AWH occupies the main room pushing beneficiaries to a corner. Most areas of the districts included in the study witness low temperature during the winter. Delivery of services requires the beneficiaries to sit in the Centre for up-to 4 hours a day. The study found that 25 percent of the AWCs had no arrangement for heating. Consequently, the children got exposed to severe cold and viral infections like fever, cold etc.

Preparation of food were generally clean in almost 95 percent of the AWCs studied. All the AWCs who had containers for storage of water were also found to be very clean.

LOCATION

As per guidelines, the AWCs should be located at a central place and most preferably close to a primary school. It was noticed that this guideline was rarely been followed, because AWCs did not have independent buildings and the AWHs had provided the accommodation facility free of rent. The study found that the selection of AWH was influenced by political interference. Hence, in some cases (18 percent), it resulted in the location of the AWC at a place, which was at a considerable distance from the centre of the village. 30 percent were not located at a central place.

Any service of the kind of the ICDS should inform its target beneficiary of the services it delivers and its responsibilities, ideally on a sign board outside its premises to increase the awareness of community. It was found that the sign boards establishing the presence of the AWCs were not fixed in 38 percent of AWCs at the time of survey." It is not a mere accident that in none of the surveyed mixed-caste villages was the ICDS centre located in the dalit or adivasi hamlet. The decision to locate not just the ICDS centre, but also other more valued institutions and services in the upper caste so-called

‘main’ village, is influenced by the upper caste and class and politically powerful groups in the village”.

Source: SOCIAL EXCLUSION IN ICDS: A sociological whodunit?

A Research Study by Harsh Mander & M. Kumaran.

OTHER MATERIAL RESOURCES AT

THE AWC

For efficient and effective functioning the AWC needs a minimum level of basic infrastructure and equipments viz. table, chair, weighing scale, cooking vessels, serving utensils and mats, etc. The survey team observed that basic equipments and learning aids were mostly available in the AWCs. Majority of the AWCs had adequate weighing scales, cooking utensils, vessels for storing food items and posters and charts. But toys/models were found to be available in only 33 percent of the AWCS. Furniture and furnishing items like chairs, tables/low wooden choki, Almirah/box and mats were inadequate in most of the centers. Medicine kits, Bathroom equipment and utensils for serving were either not available or were inadequate (if available) in most of the AWCs. Kalimpong 2 had shortage of furniture, weighing machines, utensils for serving, medicine kits, learning aids and sanitary items. While Gorubathan was also facing the shortage of furniture items, toys and sanitary items; Pulbazar had inadequate furniture, learning aids, medicine kits and sanitary items.

COMMUNICATION

Timely and regular communication among staff within the department was essential to make the programme coherent and effective. Similarly, inter-departmental communication was also essential for effective coordination among the departments. Though telephone facilities were available in all the district offices but such a facility was not available in any of the Project. Almost all of the CDPOs considered communication facilities to be less than satisfactory. Hence, there was a need to provide telephone facilities to all the project offices.

Monthly meetings are another mode of communication between the POs, CDPOs, officials of other departments and AWWs is. Regular monthly meetings take place at the district and Project level for the purpose of coordination between different departments. However, action points agreed in such meetings were not always followed up. Thus, while coordination mechanism was in place at the district and project level but it largely remained ineffective for want of timely action by concerned departments. Monthly meetings of the AWWs

take place regularly at the project office. AWWs submit the monthly progress reports in the monthly meeting and CDPOs and Supervisors interact with the AWWs. But most of the AWWs pointed out that these meetings had become a formality and did not serve any purpose. Thus, there was a need to make these meetings more interactive and meaningful.

MAINTENANCE OF RECORDS

During the field survey, the team was instructed to observe to verify the maintenance of records, registers and other activities of the AWCs. The information collected revealed that the information contained in the live registers and records pertaining to supply and distribution of Supplementary Nutrition was accurate in 84 percent of AWCs. Such a percentage varied between 80 percent in Darjeeling and Kalimpong-2 to 90 percent in Kurseong projects. But information pertaining to the attendance of the children was found to be grossly inaccurate in all the AWCs visited by the team. For example some of the AWCs had marked all the children present for all the working days in the month of survey, despite the fact that the month had not yet ended.

The AWCs are supposed to remain open for about 4 hours a day. During this period, the Centre has to perform a number of activities. Therefore, the information was collected from the AWWs regarding the average time spent on each activity every day. The data presented in showed that, mean time spent on preparation of the SN was 43 minutes, on serving food and feeding of the children per day

was 44 minutes, mean time spent on cleaning the utensils was 21 minutes and on PSE was 53 minutes by the AWCs. Further, mean time spent per day on updating records was 36 minutes by each AWC. The average time spent on various activities varied greatly between the districts but the average time an AWC remained open was almost the same in all the projects. Thus, as per the information provided by the AWWs, the AWCs function for a period of about four hours. But the information collected from the most of the respondents revealed that the AWWs usually open AWC at around 11' O clock and the helpers also start preparation of SN at around 11. O clock. The SN was served at around 12' O clock and after this children go back to their homes. Thus, the AWCs were open for about 2 hours only.

The AWWs reported that AWCs usually remain closed only during the holidays. However, information gathered from the mothers of the beneficiaries revealed that AWCs did not function regularly. They mentioned that once the nutrition material exhausted, the parents stop sending their children to AWCs and AWWs consequently prefer to come a bit late and leave early.

MOBILIZATION OF COMMUNITY SUPPORT

In order to enhance the outreach of the ICDS services, particularly to the disadvantaged groups and ensure their better utilization, the AWWs were expected to mobilize support from the community. The AWW was expected to create a demand of the services by generating awareness on services provided under the ICDS programme and its importance. The demand could be created only if the eligible children were selected and enrolled at the AWCs.

The beneficiaries for the supplementary feeding were to be selected very carefully so as to ensure coverage of the neediest and the malnourished children of the age of 6 months to 3 years. At the time of survey, the practice was to provide SNP to 20 children, 3 pregnant women and 2 nursing mothers from amongst all the BPL families. The selection of these 25 beneficiaries was solely determined by the AWW and no standard criterion was being followed for the selection of the beneficiaries. Consequently, even children from the economically well off families had also been enrolled at the AWC. Though the AWWs mentioned that only the children belonging to the poor families, landless families or economically and socially weaker sections were

enrolled for Supplementary Nutrition, but each AWW had his own criterion of defining poverty. The beneficiary mothers also mentioned that the poverty criterion was not always followed to select the children for providing SN, instead, mostly the selection depended more on the location of the AWCs and the personal contacts of the AWH and AWW.

The age-wise distribution of the surveyed children at the time of registration at AWC showed that all the children were registered in the AWCs when they were less than 72 months of age group.

The study also found that a large number of AWWs, have not mobilized any effective support for the ICDS. The AWWs are supposed to visit the households and sensitize them about the objectives of the AWCs and motivate them to participate in the functioning of the AWCs. But it was found that AWWs were hesitant to involve the community in the functioning of the AWCs because they apprehended that they (community members) would unnecessarily interfere in their working. Parents of the children, on the other hand mentioned that they were willing to provide their full support to the AWWs in the smooth functioning of the AWCs but the problem was

that the AWWs had never encouraged such participation. Therefore, the community members were not even aware of the full range of services available at the AWCs.

Another issue related to the creation of the demand for services was the inadequate and irregular supplies to the AWCs. Most of the respondents opined that once the supplies exhausted, the AWCs virtually close down and they stop sending their children to the AWCs. Thus, the larger proportion of the community generally perceived the AWCs only as “Khicuri Centers”, providing only Supplementary Nutrition.

It was observed that the reasons for such a situation were: (a) low level of commitment and skills of the AWWs towards their job, (b) non local AWW, affects sincere/serious effort on their part, (c) insufficient level of support received by the AWWs from the Supervisors, who had to supervise a large number of AWCs to cover, (d) irregular supply of nutrition, (e) lack of the IEC material and (f) low status and profile of the AWC as perceived by the communities as well as the AWWs themselves in comparison to other employees of the department.