Report on the Local ECCE Governance
Data (LEGD) collected from the
Anganwadi Centres in three blocks
(Paterwar, Jaridih and Kasmar) of Bokaro
District, Jharkhand, 2018

Status of
Anganwadis
in Bokaro
District,
Jharkhand

Prajayatna

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Context

Early Childhood Care and Education in India

0 to 6 years of age is considered as formative years of life, and it is also a period of rapid growth and development. Growing scientific evidences confirms that there are critical stages in the development of the brain during this period which influence the pathways of physical and mental health, and behavior throughout the life cycle. Deficits during this stage of life have substantive and cumulative adverse effects on human development. Therefore creating an enabling environment (which will foster care, health, nutrition, play and early learning) at this stage of life can lead towards significant impact in the holistic development of the child.

The Government of India launched the Integrated Child Development Services (ICDS) in 1975 in recognition of the importance of early childhood care as the foundation of human development. The ICDS has expanded over the years and is now one of the world's largest and most unique outreach programmes responding to the challenge of meeting the holistic needs of a child. The primary goal of ICDS is to break the inter-generational cycle of malnutrition, reduce morbidity and mortality caused by nutritional deficiencies by providing the following six services as a package through the network of Anganwadis. Supplementary nutrition (SNP), Non-formal pre-Anganwadi education (PSE), Immunisation, Health checkup, Referral services, Nutrition and Health Education (NHE). The three services, viz. immunisation, health check-up and referral, are designed to be delivered through the primary health care infrastructure. While providing SNP, PSE and NHE are the primary tasks of the Anganwadi Centre, the responsibility of coordination with the health functionaries for provision of other services rests with the Anganwadi worker (AWW) who will be referred to as the Anganwadi teacher in the report.

A child attending a well functioning Anganwadi at an early age would significantly impact its future lifelong development. Therefore Anganwadis must be equipped enough to provide a stimulating and enriching environment towards catering to the physical and psycho-social development of the child. Making provisions for such an enabling environment will have a

major effect on the child attaining success in the primary education which again serves as the foundation for higher education.

But the lack of quality training for teachers and burdening them with many other health related responsibilities has prevented the Anganwadis from focusing on providing for quality care and learning in the centres. Prajayatna through its experiences realizes the importance of mentoring the teachers in creating a conducive care and learning environment and conducting learning activities for fostering all domains of development of the child attending the anganwadi center.

Prajayatna also focuses on building the capabilities of the local community to provide care for their children utilizing the knowledge that is existent within them. Attention is paid to promote them to play an active role in making the anganwadi a holistic development centre for the children belonging to their community.

Prajayatna and ECCE

Prajayatna, a national level organisation working on issues of education initiated its Early Childhood Care and Education (ECCE) intervention in the year 2000. This was initiated as a response to the problem of out of school children and child labour in low income areas in and around Bangalore Urban and Rural, as it was seen that in these areas, because of a lack of a proper learning environment and access to good quality ECCE facilities, a large number of older children were dropping out of school to take care of younger siblings. This was especially seen in low income areas where it was common for both parents to be working. As an attempt to solve this problem, the organisation worked to set up child care centres in these areas. The local community members were enrolled in the process to set up and manage these centres. Within a short span, 180 communities owned centres were established in low income areas of Bangalore Urban and Rural. Further to setting up these centres, the organisation developed processes to ensure the participation of community members, and to build capabilities of community based structures to manage these centres with little external support.

It was understood that the practices followed in the community run centres and the learning gained by the organisation from setting up and running these centres could benefit the larger system of the Government managed early child care facilities, which already had a wide network of child care centres across the state and was extensively working towards ensuring quality ECCE for each child.

This led Prajayatna to partner with the Department of Women and Child Development (DWCD) to work with Anganwadis across in Karnataka.

Working with Anganwadis in Jharkhand

Prajayatna in collaboration with DHFL and Samhita has initiated work with 465 anganwadi centres covering Paterwar, Kasmar and Jaridih blocks of Bokaro district since April 2018. Prajayatna is working towards the strengthening of the anganwadis through building the capacities of the various stakeholders in the ecosystem of the anganwadi in order to ensure better quality in the delivery of these services.

Early Childhood Care and Education in Jharkhand

It is estimated that children below six years of age, number about 3.8 million in Jharkhand.¹ Of these, it may be taken into consideration that 25% fall below the poverty line whose very survival and development are threatened by neglect and lack of essential child care services. And there are many more above the poverty line whose need for ECCE is only a little less acute. It can also be taken for a realistic consideration that 50% of this vulnerable segment receives some elements of child care services, but the quality of the child care services still has scope for improvement in terms of quality.

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¹ Department Of Women, Child Development & Social Security, http://socialwelfarejhar.gov.in/integrated-child-development-schemeicds

Local ECCE Governance Data

As a preliminary step towards facilitating community involvement and to improve decentralized governance of Anganwadis, it is important that all stakeholders — especially the ALMSCs have access to essential, relevant and recent information pertaining to their Anganwadis. Lack of information which in turn leads to lack of transparency and thereby accountability is one of the key reasons for the communities not interacting with the Anganwadi. Information on enrolment of all children including those with attendance, out of Anganwadi children, disability, learning levels of the children are all crucial information that the ALMSC should have to understand the various facets of the problems faced by the Anganwadis and initiate their engagement accordingly towards the development of the Anganwadis.

Enhancement of enrolment and attendance, bringing down the number of children dropping out of Anganwadi and improvement of learning levels of the children are the outcomes that the Anganwadis should be trying to achieve for the overall improvement of the Anganwadis. With the ALMSC being an important player in reaching these outcomes, it becomes imperative that they are aware of the status of the Anganwadis. The collection of information called Local ECCE Governance Data (LEGD) serves that purpose as it is the information that will support in the proper governance of the Anganwadi and provides key stakeholders with not only information about their Anganwadis but also covers basic and relevant information about the locality and Anganwadi surrounding.

This information forms the basis for initiating an engagement with local community and other key stakeholders at different levels of governance. This will enable not only the Anganwadi Level Monitoring and Support Committee (ALMSC) but support in enhancing the understanding of other stakeholders as well about the condition and status of the Anganwadis which will in turn help in bringing about changes within the Anganwadi and the system at large.

Through different interventions that utilize the information from the LEGD the following objective can be met:

- Eliciting community involvement and enhancing stakeholders' ability to articulate needs, issues and aspirations
- Support the process of prioritizing needs and issues and facilitating the process of decision making
- Inculcating practices of transparency and accountability amongst key stakeholders
- Giving a bird's view of the entire district which will help other stakeholders to understand the issues in a broader sense
- A baseline to measure the progress of the Anganwadis and thereby district.

The LEGD was collected from 463 out of 465 anganwadis in Paterwar, Kasmar and Jaridih blocks by the staff of Prajayatna.

Methodology

The LEGD process involved the following processes:

• Designing the tool - LEGD questionnaire

Prajayatna follows a standard format for the LEGD processes that has been designed through its experience of several years on working with communities and Anganwadis. This is suitably modified according to the contextual needs.

• Training of team members

The staff was trained on understanding the local context, the purpose of the LEGD process, understanding the format, eliciting information from appropriate stakeholders, verification of information, process of documentation and other procedures to be followed for completion of the process.

• Review of the information

The information from the first few Anganwadis from where the information was collected was reviewed and feedback given to the team members who were collecting the information. This helped them to correct themselves and ensure that the data they collected later was of good quality.

Conducting the LEGD data collection process

The actual process of collecting the information from Anganwadis was conducted and onsite support to team members who face issues during the collection was provided by the assigned coordinators.

Data entry

The data was entered in spread-sheets by the team members for consolidation and analysis

• Preparation of report

The data was consolidated and then analysed and a preliminary report made based on the observations. The report was produced in different formats depending on the platform/stakeholders being addressed.

Profile of Bokaro District

Location and geographical area

One of the 24 districts of Jharkhand, Bokaro is spread across 2,889 square kilo meters, in about 3.6 per cent of the state's total area. It shares its boundary with Dhanbad to the east, Ramgarh to the west and Giridih, Hazaribagh and Dhanbad to its north. The southern boundary of the district runs along Purulia district of West Bengal.

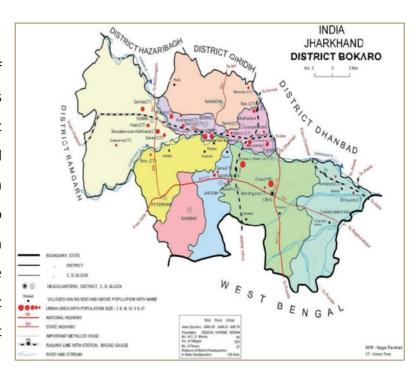


Figure 1. Source: District Census Handbook Bokaro

Administrative area

The Administrative headquarter of the Bokaro district is located at Bokaro Steel city. The district is divided into two sub-divisions – Chas and Bermo (Tenughat). Currently there are

nine administrative blocks. These include Bermo, Chandankiyari, Chandrapura, Gomia, Petarwar, Nawadih, Chas, Jaridih and Kasmar (See figure 1: Administrative map of Bokaro district). The district has two municipal areas/nagar parishads, Chas and Phusro. There are a total of 635 villages (of which 611 are inhabited), 249 Gram Panchayats and 27 towns in the district.

Demographic profile

As per Census of India 2011, the population of Bokaro district is about 20 lakhs – about 6.25 per cent of the state's total population – of which about 52 % is male and 48 % female. A decennial growth of nearly 16 % has been observed for the district's population in 2011 as compared to 2001 (See table 5: Population distribution). The demographic distribution also reveals that the district has a high concentration of people in urban/municipal areas which is about 48 per cent of the total population with the remaining 52 per cent living in rural areas of the district. The district is also densely populated with a population density of 715 per sq km, as compared to India's population density of 328 (Census, 2011) and only second to Dhanbad which is the most populated district in the state.

Data Analysis

The study was conducted in 463 Anganwadi Centres of 55 Gram Panchayats in Paterwar, Kasmar and Jaridih blocks of Bokaro district. The analysis of the information collected is given below:

1. Status of Anganwadi Centres and Gram Panchayat

The data collected from 463 Anganwadi Centres shows that the total number of children under 6 years age is 33141. All 138 AWCs of Jaridih block, 203 AWCs in Paterwar block and 122 AWCs in Kasmar block was covered. The Paterwar block with 23 Gram Panchayats has more number of AWCs with respect to the other two blocks. Also the number of children under 6 years age is more in Paterwar block. It can be seen in Table 1 that the overall ratio of boys and girls children in the concerned AWCs is almost 1:08 where boys are found to be more than the girls in Paterwar and Jaridih with only Kasmar having 1:1.

Table 1. Number of Gram Panchayats and AWC

	Gram					% age	
Blocks	Panchayat	AWC	Total no. of	f children (0)-6 years)		
			Boys	Girls	Total	Boys	Girls
						52	48
Paterwar	23	203	6782	6375	13157		
						53	47
Jaridih	17	138	5847	5156	11003		
						50	50
Kasmar	15	122	4533	4448	8981		
						52	48
Total	55	463	17162	15979	33141		

2. Caste-wise Status of Children

Across different sectors and spheres of activity, divisions across caste and ethnic lines have led to substantial inequalities in access to services and amenities. With this in mind, it is important to assess whether patterns in Anganwadis enrolment, attendance and learning outcomes vary across social categories.

The children from the Other Backward Caste category represent the largest sub-group in the study (41 %), followed by children from the Scheduled Tribe category 27 %. Also, the children from Scheduled Caste and minority group contribute 18 % and 9 % respectively. A much smaller proportion of children from General Caste background (3 %) and other community (3 %) have been observed in the study.

Table 2. Caste Category of children

Category	Total Children (0- 6 years)	%age
SC	5819	18
ST	8814	27
OBC	13640	41
GEN	1080	3
MIN	2842	9
Other	946	3
Total	33141	100

3. Children with disability

According to the data, there are 61 children (0.18%) having various forms of disabilities residing in the locality. Here it is to be noted that disabilities in many children are not diagnosed at an early age due to which the number of children identified in the anganwadis are found to be very less.

Table 3. Children with disability

	CWD		
Block	Boys	Girls	Total
Paterwar	11	10	21
Jaridih	18	13	31
Kasmar	6	3	09
Total	35	26	61

4. Enrolment of Children in Anganwadi

The study shows that the average enrolment per Anganwadi Centre surveyed was 93. Across the 463 Anganwadis in the project area, overall enrolment trends shows that out of 22696 children under 3 years of age, only 21156 (about 93 %) children were enrolled in Anganwadis. 1540 (7 %) children under 3 years of age were found to have been never enrolled. The percentage of enrolment in boys and girls is found to be 52 % and 48 % respectively (1:08) which is similar to the data of overall enrolment as well.

Table 4. Children enrolled in Anganwadis

		Children (0-3 years		Enrolled o	children 0-3	years		
Blocks	AWC	Boys	Girls	Total	Boys	Girls	Total	%ag	e
Peterwar	203	4599	4154	8753	4599	4154	8753	53	47
Jaridih	138	3910	3413	7323	3334	2969	6303	53	47
Kasmar	122	3362	3258	6620	3088	3012	6100	51	49
Total	463	11871	10825	22696	11021	10135	21156	52	48

5. Attendance of children in 3-6 years of age

Enrollment in the anganwadi and attending regularly is very important to help children get the best possible start in learning process. There is a strong link between attendance and learning achievements. Studies have shown that young children more regular to preschool education are more likely to perform better in the schooling education, and also avoid becoming victim of anti social behaviour and also can develop healthy habits.

The data shows that the attendance of children (65 %) in Kasmar block was better in comparison to Paterwar and Jaridih block. Jaridih with an average of 34 % attendance of children shows poor performance of Anganwadis. Overall data suggests that large numbers of Anganwadis have average attendance of 49 % only which means that less than half of the children enrolled are attending the Centres regularly. This is a very serious issue which needs to be resolved urgently.

Table 5. Attendance of children in AWC

Blocks	AWC	Total	children	Total attendance		% age	
		(3-6 years)		of	children		
				(3-6 year	s)		
		Boys	Girls	Boys	Girls	Boys	Girls
	203					52	50
Peterwar		2183	2221	1125	1110		
	138					37	32
Jaridih		1937	1743	713	563		
	122					65	66
Kasmar		1171	1190	764	781		
	463					49	48
Total		5291	5154	2602	2454		

6. Teacher dwelling in the local community

In the study it was observed that all Anganwadi teachers of Kasmar block are residing in the village of the anganwadi itself in all 122 Anganwadis whereas 191 (94 %) of the Anganwadi teachers are residing in the local village in Paterwar block and 132 (96 %) teachers are residing in the local village in Jaridih block. The teachers residing in the local community have an understanding of the village and the community and able to tackle issues according to the context. They are better able to build a relationship with the children and the women

which helps in reaching out to all the beneficiaries. This also to some extent resolves issues of opening the centre on time, bringing the children etc.

Table 6. Teacher dwelling in the local community

Block	AWC	Teachers resident in local community	%age
Peterwar	203	191	94
Jaridih	138	132	96
Kasmar	122	122	100
Total	463	445	

7. Status of infrastructure in AWC

The most important pre-condition for success of the ICDS programme is the adequacy of infrastructure of Anganwadi Centres. Their capacity to deliver the six designated services depends on whether the AWC have adequate infrastructure and resources to undertake the required activities. Since one of the main stakeholders of the scheme are young children, it is important that there is sufficient infrastructure to provide them with a safe, secure and child friendly environment.

An Anganwadi can deliver effective services when it functions independently. While analysing the data of AWC having their own buildings, it was found that out of 463 AWCs only 333 (72 %) Anganwadis had their own building. Besides, 108 (23 %) Anganwadis run in rented buildings while 24 (45 %) Anganwadis function in rent free buildings supported by the community (Table 5). Jaridih was found to be having the least number of its own buildings with only 62% of the anganwadis having their own and 30% and 8% in rented and rent free buildings. Rented often means that the teachers are running the Centre in their own houses due to lack of any other space. Rent free was any community building or space given for the anganwadi by the local community.

Table 7. Anganwadis with own building

Block	AWC	Status				%age	
				Rent			
		Government	Rented	Free	Government	Rented	Rent Free
Paterwar	203	150	45	9	74	22	4
Jaridih	138	85	41	12	62	30	8

Kasmar	122	98	22	3	80	18	2
Total	463	333	108	24	72	23	5

8. Condition of the building being utilised as Anganwadi

Repairs are required to be done in 343 Anganwadis of which 111 requires major repairs to be done such as the building having cracks in the wall which requires repair, there is leakage of water when it rains, patches in the flooring which requires repair so that children can sit properly, etc. 232 Anganwadis require minor repair like repairing of windows in their premises, fixing of doors, whitewashing, etc.

Table 8. Condition of building being used

		Bui	ldings requ	uire		%age	
Block	AWC	Major repair	Minor Repair	No need of repair	Major repair	Minor Repair	No need of repair
Paterwar	200	58	86	56	29	43	28
Jaridih	140	37	62	41	26	44	29
Kasmar	123	16	84	23	13	68	19
Total	463	111	232	120	24	50	26

9. Obstacles in running Anganwadis

Since Anganwadi is a village level programme for children below six years, the centre needs to be established in an easily accessible and safe area to protect them from any kind of harm. Although the buildings have been constructed after the consent of the community, many of the locations are not very conducive and safe for the children.

The table below show that out of 463 AWC, only 263 (56 %) Anganwadis have been operating without any obstacle. 80 AWC (17 %) are located near roads which is dangerous in terms of safety of the children while crossing the road. Similarly, there are 200 Anganwadis facing problems in one way or the other due to the location of their centres at improper places such as having an open well or pond nearby, garbage dump yard leading to health issues, high tension power cables etc.

Furthermore, one Anganwadi building at Kasmar block, constructed near the graveyard is operating from a rented house because parents are not willing to send their children to where the own building is located.

Table 9. Obstacles in running Anganwadis

Obstacles for running Anganwadis		ВІ	ocks	
Obstacles for running Anganwadis	Jaridih	Kasmar	Petarwar	Grand Total
Burial ground		1		1
Garbage dump yard	5	5	4	14
Garbage dump yard, High tension Power cables			1	1
Garbage dump yard, Open Well/Pond	1			1
High tension Power cables	1	1	4	6
Market	1		1	2
Market, Traffic/Roads, Mechanic shop	1			1
Open Well/Pond	7	7	8	22
Open Well/Pond, Others		1	1	2
Others	8	14	36	58
Religious Places	2	1	3	6
Religious Places, Open Well/Pond	1			1
Tea shop			1	1
Traffic/Roads	28	8	44	80
Traffic/Roads, Garbage dump yard	1			1
Traffic/Roads, Open Well/Pond			1	1
Wine Shops			2	2
Nothing	84	85	94	263
Grand Total	140	123	200	463

10. Status of basic facilities

It is essential that there is a conducive environment for the children in the anganwadi for which there need to be basic facilities available. Another important aspect is that since women are the main constituent group coming to the centre, such as the pregnant and lactating mothers, with the teacher and assistant teachers themselves being women, it is imperative that there are basic facilities like toilet, water, facilities for seating, clean and colourful room, kitchen, etc as this supports both the children and the women. For children such an environment stimulates learning for them. Data was collected on a number of indicators as mentioned above.

The study shows that out of 463 Anganwadis, only 289 (62 %) Anganwadis have drinking water facility. Of this Jaridih was found to have the least number of centres with water facility with 55% of the Centres only having the facility with Paterwar having the highest at 66%. Moving ahead to availability of toilet and its utility in Anganwadis, only 73 (16 %) Anganwadis have a usable toilet in which Jaridih has the lowest at 11% and Kasmar being

comparatively better off at 25%. In the context of Swacch Bharath, this becomes a very good indicator to show the status. Practices of using the toilet needs to be instilled in children from a young age for a behavioural change to occur. The lack of a toilet in the anganwadis show the lack of importance in the villages. While 278 AWC (60 %) had its own separate kitchen facility, 185 (40 %) Anganwadis lacked a separate kitchen facility. Cooking was either being done in the same room as where the children were sitting which was not a very safe practice or in some cases, they cooked outside of the Centre which again leads to the question of hygiene. Here once again, Jaridih has only 55% with a separate kitchen.

From Table 10 (b) it can be seen that 25% of the AWC have unhygienic conditions when it comes to preparation of food for the beneficiaries which include the children.

Table 10.a. Status of basic facilities

		Drinking		Usable		Separate	
Block	AWC	Water	% age	Toilet	% age	Kitchen	% age
Paterwar	204	134	66	27	13	130	64
Jaridih	138	76	55	15	11	76	55
Kasmar	123	79	64	31	25	72	59
Total	463	289	62	73	16	278	60

Table 10.b. Status of place of preparation of food for the children

Place for preparation of fresh food	Jaridih	Kasmar	Paterwar	Grand Total	%
Hygienic (Food materials, utensils, optimal storage place)	99	86	146	331	75
Unhygienic	30	34	44	108	25
Grand Total	129	120	190	439	100

Further in terms of store room, out of 463 Anganwadis, only 249 AWC (54 %) have a store room in their Anganwadis. Anganwadis in Paterwar have the highest facility for a storeroom with 66% and Jaridih having the lowest at 33% with Kasmar being better off than Jaridih with 55% of the centres having a separate storage room. In the table below, we can see that out of 463 Anganwadis, only 31 (7 %) Anganwadis have compound walls while 432 (93 %) Anganwadis do not have any. Here Jaridih is found to have 12% in comparison to Paterwar and Kasmar with 2 and 5% respectively. This might be due to the fact that the centres being

closer to the town have centres closer to the road which leads to the need of a compound for the safety of the children. The study further states that there were no playgrounds in 440 (95 %) Anganwadis. Only 23 (5 %) Anganwadis have a playground.

Table 10.c. Status of store room, boundary wall and playground in AWC

Block	AWC	Store Room	% age	Boundary	% age	Playground	% age
Paterwar	204	135	66	5	2	10	5
Jaridih	138	46	33	17	12	5	4
Kasmar	123	68	55	9	7	8	7
Total	463	249	54	31	7	23	5

11. Learning and Sports materials

Early childhood marks a critical period in the life of a child and can set the foundation for healthy development and life-long learning. Research shows that early childhood is the most critical period for brain development, and that experiences in the first years of life have more lasting impact on mental health and development than in any other phase of life. Play is not only a child's right — it also influences physical, socio-emotional and cognitive development.

In the study, we observed that out of 55 Gram Panchayats and 463 Anganwadis, only 315 (68 %) Anganwadis have learning materials for their children. Overall data shows that both Paterwar and Kasmar blocks have learning materials in 80 % of their Anganwadis whereas Jaridih has poor figures both in availability of learning materials and sports materials in its Anganwadis. Again Paterwar block with 103 (50 %) Anganwadis with sports materials is more favourable than Jaridih and Kasmar blocks. It was observed that out of 463 Anganwadis, only 169 (36 %) Anganwadis have sports materials.

Table 11. Status of learning and sports materials in Anganwadis

Block	AWC	LEARNING	%age	SPORTS	%age
		MATERIAL		MATERIAL	
Peterwar	204	167	82	103	50
Jaridih	138	49	36	36	26
Kasmar	123	99	80	30	24
Total	465	315	68	169	36

12. Health status

ICDS aims to provide nutritional and healthcare support for children under 6 years of age in order to reduce the incidence of mortality and malnutrition. In the AWC, the Anganwadi teachers advice mothers about good feeding practices. Also, according to the ICDS guidelines, Anganwadi teachers have to identify the severely malnourished children and supply them with double supplementary foods and ensure that they improve their nutritional level.

The implementation of the nutritional supplements is immensely important not only for providing some nutrition to malnourished children but to improve the enrolment and attendance of the children as well. The data shows that out of 23 Gram Panchayats, 5 Gram Panchayats with 47 Anganwadis have 100 % children in the normal category in their Centres.

Table 12.a. Health status of children in Anganwadis

	Total Children			%age		
Total Children	Normal	MAM	SAM	Normal	MAM	SAM
10060	9774	242	34	97.16	2.41	0.34

First aid box in Anganwadi

It is essential for the teachers to keep a first aid box with essential medicines to be able to handle any accident/incident. The data shows that out 463 AWC, only 6 AWC have first aid box with necessary medicines. It will be difficult for the teachers or any visiting person to assist in case of any emergency. It shows lack of responsibility among the Anganwadis and the government officials in terms of safety of the children.

Table 12.b. First aid box in Anganwadis

Block	AWC	First Aid box with necessary medicines	%age
Peterwar	200	04	2
Jaridih	140	01	1
Kasmar	123	01	1
Total	463	06	1

Supply of Supplementary Nutrition Food

The ICDS programme of the government has a holistic programme comprising of health, nutrition and education components for the children below six years age including pregnant women and lactating mothers. And so nutritious food is an essential requirement. The table below shows that out of 463 Anganwadis, only 177 AWC (38 %) are getting a regular supply of food for supplementary nutrition in the their centres. Almost 156 (33 %) Anganwadi centres had received their nutritional food between 30-60 days. 122 AWC (24 %) have no idea when they will get the food as their supply period is not fixed. At times, they get monthly and at times they get it once in three months.

Table 12.c.. Supply of supplementary nutrition food in Anganwadis

		S	Supply of nutrition food				% 6	age	
Block	AWC	Within 30 days	30-60 days	More than 60 days	Not regular	Within 30 days	30-60 days	More than 60 days	Not regular
Peterwar	200	83	94	13	10	42	47	7	5
Jaridih	140	30	27	72	11	21	19	51	8
Kasmar	123	58	35	27	3	47	28	22	2
Total	463	171	156	112	24	37	34	24	5

13. Status of visits by health officials

The primary objective of the Anganwadi is to ensure quality education and nutrition to children below 6 years. Therefore, it becomes essential for the health officials including ASHA workers, ANM, Medical Officer In-charge (MOIC) to periodically visit the Anganwadis to keep track of their health. Although, Sahiyas (ASHA workers) do celebrate Village Health Nutrition Day at Anganwadis, it is seen that the visits by MOIC is insignificant. They are able to make a total of 17 visits only in the last year. The District Health Officer was able to visit only 4 AWC in Paterwar.

Table 13. Visits of health officials in Anganwadis

Block	AWC	MOIC	DHO
Peterwar	200	08	4

Jaridih	140	06	0
Kasmar	123	03	0
Total	463	17	4

14. Status of visits by department officials (DWCD&SW)

ICDS is one of biggest programme for early childhood care and education in the world. Therefore, a strong mechanism is required for monitoring the Anganwadis and support it to ensure their smooth operation. This is possible through regular visits by the government officials including the Child Development Programme Officer, Assistant Child Development Programme Officer, Lady Supervisor etc from all levels. The data states that only 207 AWC (45 %) have been visited by the CDPO. Out of 463 AWC, the lady supervisors have visited 360 AWC (78 %) in the year 2017-18. The programme officer and deputy director have lesser visits than others. The lack of visits maybe due to a number of issues such as lack of staff in the Department, large coverage, etc and other systemic issues.

In such a situation, it is imperative that there is decentralisation of the governance of these centres where the community is part of the system bringing about more support for the Centres and greater accountability.

Table 14. Status of visits by department officials

Block	AWC	Supervisor	ACDPO	CDPO	Programme	Dy.
					Officer	Director
Peterwar	200	138	02	101	03	06
Jaridih	140	122	04	48	02	01
Kasmar	123	100	02	58	01	01
Total	463	360	04	207	06	08

15. Status of ALMSC and MATA Samiti

Effective functioning of Anganwadis depends on the proper supervision and monitoring by both the Department and also the community which is represented by the Anganwadi Level Monitoring and Supporting Committee (ALMSC) and MATA Samiti.

Although ALMSC and MATA Samitis have been supposedly formed in all Gram Panchayats of three blocks, in reality only 18 Gram Panchayats have ALMSC in all their Anganwadis. Overall, 296 (64 %) Anganwadis have ALMSCs. The ALMSCs are inactive in 167 (46 %)

Anganwadis. Kasmar block seems to be far better than Paterwar and Jaridih blocks. However, Jaridih is handicapped in monitoring and providing support to its Anganwadis. Jaridih with only 33 (24 %) ALMSC in Anganwadis, have failed to provide any kind of support to its Anganwadis.

Table 15.a. Status of ALMSC

Block	AWC	ALMSC Formed	%age	ALMSC Functioning	%age
Peterwar	203	153	75	39	19
Jaridih	138	33	24	1	1
Kasmar	122	110	89	50	41
Total	463	296	64	90	19

Furthermore, overall data shows that out of 463 Anganwadis, only 348 (75 %) Anganwadis have Matha Samitis while 44 (10 %) Matha Samitis are active. 115 (25 %) Anganwadis have no participation of Matha Samitis in any form in the planning and execution process of these centres. On analysis of block wise data, the performance of Jaridih block is unsatisfactory. It has only 63 Mata Samitis in 140 Anganwadis. Out of 63 Mata Samitis, only 5 are functioning. Similarly, Paterwar and Kasmar blocks have a fair number of Mata Samitis formed. However, only 15 (8 %) Mata Samitis in Paterwar and 24 (20 %) Mata Samitis in Kasmar are functional. The study states that all three blocks lacked supervision and monitoring in their Anganwadis.

Table 15.b. Status of Matha Samiti

Block	AWC	Matha Samiti		Matha Samiti	
		Formed	%age	Functioning	%age
Peterwar	203	166	82	15	7
Jaridih	138	63	46	5	4
Kasmar	122	119	98	24	20
Total	463	348	75	44	10

CONCLUSION

The overall consolidated picture that is highlighted through the data collection process clearly shows that there is substantial need for improvements in the anganwadis. There are critical aspects such as low attendance of children which need to be addressed on priority. The lack of basic essential requirements such as proper rooms and availability of basic essential facilities such as drinking water, electricity, toilets needs to be ensured on priority for each and every Centre. The lack of basic infrastructure in itself leads to children not being regular, dropping out, joining private schools, etc. There is a lack of a conducive environment for learning in the Centres which in turn has an effect on the morale of both children and teacher.

The role of the various stakeholders like the ALMSC and the MATA Samitis and the local self government becomes critical here to improve the condition of the Centres. With the large number of Centres and the variation in geography with some of the AWC located in the interiors, it becomes essential that there are structures at the local level for the better management of the AWC. The lack of visits and other monitoring mechanisms on the part of the Department further reiterates the importance of community ownership and decentralisation of governance of the AWC. Community participation can range from sending children to the Centre regularly, attending parents or committee meetings, monitoring anganwadi development initiatives, mobilisation of required resources, contributing towards the development of plans, etc., thereby leading to increased accountability and transparency.

It is also to be seen that the teachers need to be better equipped with skills to ensure learning and holistic development of the children in order to ensure that the community also see the advantages of the AWC. It is also important that the AWC are considered as dynamic learning centres and not just as feeding centres for the future development of our villages.