

PREAMBLE

The present study emerged as a result of the project, Monitoring and Evaluation of Social Components of Integrated Child Development Services (ICDS). The social components included; non-formal preschool education, health and nutrition education and community participation. The project was initiated by National Institute of Public Cooperation and Child Development (NIPCCD), New Delhi, with assistance from UNICEF and Ministry of Social Welfare. The project was started against the backdrop of the need to uncover the specific operational processes involved in the delivery of social components of ICDS by involving both the functionaries and the beneficiaries in the process of monitoring and evaluation. It was assumed that information thus gathered would report both on implementation and consumption of the services. Further, information obtained could be used to introduce modifications and follow up action at various levels of the programme to increase its efficacy.

The effort was to move beyond the existing reporting system in the ICDS programme. The specific information on health and nutrition components was already being collected through the monitoring done by All India Institute of Medical Sciences (AIIMS), New Delhi. But the systematic monitoring of social components had been an unexplored area. The reason being that the social components by the very nature of their complexity, do not lend themselves to precise measurement. In view of this, NIPCCD in collaboration with 14 academic institutions across the

country co-ordinated and implemented the project on Monitoring and Evaluation of social components of ICDS. The institutions included in the project were mainly faculties of Home Science and Social Work. The department of Human Development and Family Studies (HDFS), at the M.S. University of Baroda, was one of the institution involved in the study to monitor and evaluate the Baroda Urban ICDS block. The project in essence encompassed the following phases :

- o General monitoring of social components of ICDS
- o Indepth study of one of the social components (The Department of HDFS, at Baroda, studied the non-formal preschool education). This phase helped in identifying specific indicators for monitoring.
- o The last phase dealt with training the functionaries (Anganwadi workers and supervisors) on the indicators which emerged from the indepth study. The aim was to train them to be able to monitor social components of ICDS without the assistance of the academic institution.

General Monitoring of Social Components of ICDS

In the general monitoring phase a representative sample of 15 Anganwadis was selected from the block. These Anganwadis included an equal number of Anganwadi centres from urban slums, industrial slums and peripheral areas of Baroda city. Data with regard to organisation and implementation process of the social components was collected by observing the Anganwadi programme and the information was also obtained from the various levels of

functionaries and different categories of beneficiaries. The functionaries included Anganwadi workers, supervisors and the child development project officer. The beneficiaries included pregnant and lactating mothers, mothers of preschool children, women in the age of 15-45 years and community representatives. From each Anganwadi centre 70 respondents were selected and thus information was collected from a total of 1,050 subjects.

The general monitoring phase helped in identifying the inadequacies in the delivery of various services. Results highlighted that majority of Anganwadis (AWs) were located in unhygienic surroundings and space though available in most of the centres was not adequately utilized. The Anganwadi Worker (AWW) was considered the central and most important functionary as the effectiveness of the programme was dependent on her. AWWs educational level and training had a positive bearing on her performance and her abilities. Supervision was found to be inadequate in majority of the cases. However, AWW's who received support and guidance showed significant improvement in their performance. Health and nutrition education sessions were conducted less frequently. Furthermore, awareness among the beneficiaries regarding the programme was found to be low resulting in minimal community participation. The AWs were inadequately equipped with teaching aids and play materials. Formal teaching was emphasized more than play and other activities. Effective planning and implementation of preschool activities was found to be lacking (Sharma, 1987).

Therefore, the second phase of the project aimed at studying one of the social components in detail. The identified institutions selected the social component depending on their subject matter expertise. As mentioned earlier, the department of HDFPS, at Baroda, studied the non-formal preschool education component of ICDS. This component was also studied by three other institutions involved in the project.

Indepth Study of Non-formal, Preschool Education of ICDS

In the indepth phase, 15 AWs selected earlier were ranked on a continuum based on the assessment made through the Investigator's Observation Proforma (Appendix A). On the basis of the ranking, two AWs falling on the two extreme polarities, were selected as the highest and the lowest ranking AWs (HRA and LRA). From each of these AWs the list of beneficiaries registered was scrutinized and from each Anganwadi a sample of 30 preschool children in the age range of 3-5 1/2 years was drawn. Only those children who were regular attenders and attended a full day's programme were included in the study. Thus, a total of 60 children were drawn from the two AWs. A sample of 10 children with no preschool experience from each AW area was also drawn and thus 20 children with no preschool experience comprised the control group. The selection of the control group children was based on the availability, since only 10-12 children with no preschool experience could be located in the age range 3-6 years from respective AW area. The experimental and the control group children were matched as closely as possible on their socio-

economic status. Mothers of sample children and children with and without preschool experience (96 ICDS children and 95 children with no preschool experience) from first three grades of two primary schools were also included in the study.

The purpose of the indepth study was to compare the development of preschool sample with children who had no preschool experience. The awareness and involvement of mothers in their children's care and development was also compared. In addition, children with and without preschool experience were compared on the dimensions of academic performance and school adjustment, in first three grades of primary school.

The major findings indicated that there was a significant difference between the performance of ICDS children and children with no preschool experience on their developmental skills, which were in favour of the former. A similar trend was reported by all the other institutions who studied the non-formal preschool education component. (Anandalakshmy & Sharma, 1986; Sood, 1987; Tarapore, Deshpande & Pendse, 1986). The performance of ICDS children from HRA in the primary school was better than children with no preschool experience on dimensions of academic performance and school adjustment. But the picture for children from LRA was not clear. Furthermore, in the third grade, children with no preschool experience (from HRA area) were performing better than ICDS children (Mistry, Kaul & Dhar, 1986). But a parallel study in urban block of Delhi and tribal block of Pune found no noticeable difference in the performance of primary school

children with and without preschool experience (Anandalakshmy & Sharma, 1986; Tarapore, Deshpande & Pendse, 1986).

Monitoring Social Components on Identified Indicators

Indepth phase of the project also helped in delineating indicators for monitoring and evaluation. The monitoring proformas for AWWs, supervisors, community representatives and the academic institution were prepared on the basis of these indicators. Using these proformas, all the 100 AW centres of Baroda urban ICDS block were monitored, every three months for a period of 12 months. The functionaries were trained on What to monitor and How to monitor. The training was imparted through a series of workshops which focused on practical field level inputs, whereby the functionaries actually collected the monitoring information and then discussed its feasibility. The monitoring proformas served both as a guideline as well as a means for strengthening the social components of the programme. Thus, the emphasis during the workshops was laid on how to use the information collected for strengthening the specific social component viz; non-formal preschool education of ICDS.

The findings from the indepth phase of the project raised further research queries. It was assumed that inability to detect clear and consistent differences among primary school sample on the dimensions of academic performance was attributable to the fact that ICDS programme did not aim at inculcating formal educational skills in children. Therefore, a need was felt to trace the impact of ICDS on specific outcome measures like

readiness and school relevant behaviours. It was also ascertained that rather than studying children in later grades of primary school, if impact of ICDS preschool experience could be found till first grade of primary school it could be considered a positive outcome of programme. Moreover, if assessment could be made for the same sample at the preschool stage and at the beginning of grade one, it would further help in determining the extent to which impact is maintained.

In line with the above reasoning, the present study followed the preschool children studied during the indepth phase of the project. Children were followed upto first grade of primary school using the baseline data available on children's developmental skills; from the project. The present study was thus an outcome of a larger project on monitoring and evaluation.