



# Monitoring and Supervision of Anganwadi Centres and ICDS Projects 2016- 2017



**Central Monitoring Unit (CMU)**

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ADI	:	Average Daily Intake
AG	:	Adolescent Girls
ANM	:	Auxillary Nurse Midwife
AP	:	Andhra Pradesh
AS	:	Assam
AWC	:	Anganwadi Centre
AWW	:	Anganwadi Worker
AWH	:	Anganwadi Helper
CMU	:	Central Monitoring Unit
CDPO	:	Child Development Project Officer
DPO	:	District Programme Officer
DW	:	Drinking Water
ECCE	:	Early Childhood Care and Education
GOI	:	Government of India
GM	:	Growth Monitoring
GJ	:	Gujarat
HP	:	Himachal Pradesh
HCM	:	Hot Cooked Meal
JTC	:	Job Training Course
ICDS	:	Integrated Child Development Services
IEC	:	Information, Education and Communication
IFA	:	Iron Folic Acid
IMR	:	Infant Mortality Rate
J&K	:	Jammu and Kashmir
KN	:	Karnataka
KSY	:	Kishori Shankti Yojana
LHV	:	Lady Health Visitor
ME	:	Monitoring and Evaluation
MO	:	Medical Officer
MOU	:	Memorandum of Understanding
MP	:	Madhya Pradesh
MS	:	Morning Snacks

MSDP	:	Multi Sectoral Development Programme
MWCD	:	Ministry of Women and Child Development
MN	:	Manipur
NGO	:	Non Governmental Organization
NG	:	Nagaland
NFPSE	:	Non Formal Pre School Education
NHED	:	Nutrition and Health Education
NPC	:	National Policy for Children
NRHM	:	National Rural Health Mission
NIPCCD	:	National Institute of Public Cooperation and Child Development
PB	:	Punjab
PG	:	Post Graduate
PSE	:	Pre School Education
PHC	:	Primary Health Centre
PRI	:	Panchayati Raj Institutions
Raj	:	Rajasthan
RTE	:	Ready To Eat
RDA	:	Recommended Dietary Allowance
SHG	:	Self Help Group
SS	:	Senior Secondary
SN	:	Supplementary Nutrition
SNP	:	Supplementary Nutrition Programme
SSA	:	Sarva Shiksha Abhiyan
TN	:	Tamil Nadu
TLM	:	Teaching Learning Material
UT	:	Union Territory
UP	:	Uttar Pradesh
WB	:	West Bengal
WFP	:	World Food Programme
WHO	:	World Health Organization

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## Executive Summary



## Executive Summary

Umbrella ICDS is seen as major innovative effort in building comprehensive integrated services for children, mothers and Adolescent Girls. The monitoring and supervision of the programme has been recognized as one of the essential requirements for effective functioning of the scheme. Keeping in view the importance of the monitoring, MWCD has taken many steps to revamp the MIS under this scheme. A comprehensive Monitoring and Evaluation system has already been evolved by MWCD, GOI for monitoring the projects through a regular monthly feedback from each project. National Informatics Centre (NIC), Delhi has developed web-enabled data entry system for use across all States/UTs for entry of revamped reporting formats at State/UT level through Rapid Reporting System before revamped AW-MPR can be uploaded for a particular AWC.

A central Monitoring Unit of ICDS was created in NIPCCD in the year 2008 to capture the qualitative assessment of the Anganwadi Services Scheme under Umbrella ICDS, with the broader objectives to;

- Determine the strategy to be adopted to develop effective monitoring mechanism at all levels;
- Study convergence of services provided under other schemes ;
- Analyze the services delivered under the ICDS at all levels;
- Identify the bottlenecks/problems of the scheme and initiate action for corrective measures;
- Test the accuracy of the data received at the national level;
- Prepare detailed recommendations for improving the efficiency and effectiveness of the scheme;
- Document some of the Best Practices at the state level, and,

The present monitoring report analyzes the relevant data of the Anganwadi Services received from consultants, CMU staff and Officials for 311 ICDS Projects and 1575 Anganwadi Centers located across 25 States of the country. The consultants, Staff of CMU and officials were instructed to visit only those ICDS Projects where IMR, Malnutrition and other social indicators concerning early childhood development were poor as per district/State data records. Before visiting the ICDS Project/AWC, each Consultant was asked to acquire comprehensive and accurate information about the functioning of the ICDS project in which they were visiting so as to make qualitative and quantitative assessment of the sub schemes like Anganwadi services under Umbrella ICDS correctly.

The data were gathered by using Monitoring Proforma of ICDS Project (CDPO) and Observation schedule for AWCs. With the help of both of these schedules, such required data was gathered on Profile of ICDS Functionaries (Training Status in terms of Job , Refresher , Induction and other Training Inputs Filled Up Posts and Vacancy Position of ICDS Supervisors, AWWs, AWHs and other support Staff ), Supplies Status, Medicine Kit, PSE Kit , Weighing Scales , NHed Kit ,Records and Registers etc), Nutritional Grades of Children (As per New WHO Child Growth Standards), Supervision Visits by CDPOs and Supervisors (Frequency of Supervision Visits , Supervision Methods ,Supervision Planning ), Perceived Weaknesses and Strengths of AWWs and ICDS Supervisors, Status of

Community Participation ( Involvement of Local Groups ( Mahila Mandals and SHGs) and Members of PRIs, Organisation of Continuing Education Sessions , Service Delivery Status- Pre School Education (Programme Planning ,Organisation of PSE activities, Preparation of Low Cost TLM Availability/Supply of PSE Kit, NHED ( NHED kit, Methods and techniques of NHED, Topics covered in NHED) , Supplementary Nutrition( Type of SN, Quality and Quantity of SN, Acceptability of SN, Interruption of SN, availability of Weighing Scales and Growth Charts, Proficiency of AWW in Plotting, determining Age and Counseling Session) ,Coverage of Immunization, Health Check Up( Coverage and Frequency) , Referral Services( referral slips ), Status of Information, Education and Communication (IEC), Discharging Additional Tasks by ICDS Functionaries ,Innovations and Best Practices and Problems and Suggestions for quality improvement in ICDS.

Apart from sending both of these monitoring proformas in original to NIPCCD, CMU, the concerned consultants also prepared a detailed report about the ICDS project visited by them and a separate write up in terms of qualitative assessment on different aspects of the programme for qualitative assessment point of view.

The data was tabulated on excel sheet for its analysis. Apart from using statistical measures such as frequencies, percentages, averages, ranges, coefficient of variation, person's product moment correlation, the data have also been presented graphically and with the use of maps to show the regional disparities. The analysis of regional and state based data has also been presented separately for each geographical region (northern, eastern, north eastern, western, southern, central regions) and has been collated in such a way so as to provide a comprehensive picture of implementation status of Anganwadi Services across the country.

## Findings

- **Infrastructure**

More than three fourth (79.17%) of AWCs was located in Pucca buildings. Only one-tenth (9.65%) of AWCs were located in semi Pucca buildings and 8.51 per cent AWCs were located in Kutcha Building rest of the AWCs were found running in either Open space or hut.

So far as the location of AWCs was concerned, the percentage of AWCs located in premises of primary school and in the buildings provided by community free of rent was 10.16 and 8.19 per cent respectively. Less than two third (63.43%) of AWCs were located in the buildings either Own or provided by State Government or constructed by the State Government utilizing the provisions available in various other schemes. Less than one fifth (17.02%) of AWCs were running in rented buildings including AWW's and AWH's house.

The availability of adequate outdoor and indoor space (both) was reported from 60.19 per cent of the AWCs respectively. A good number (40.32%) of AWCs were yet to be provided the availability of functional toilets. Similarly, 53.46 per cent of AWCs were yet to be provided the availability of separate storage space. Though, 50.79 per cent of AWCs have the availability of separate cooking space. About three fourth (75.49%) of the AWCs were located at the place which was easily accessible to the community.

## Personal Profile and Training Status



Twenty Seven per cent of the AWWs were educated up to metric level and 27.03 per cent of AWWs were educated up to senior secondary level. About 30.58 per cent of AWWs were having graduates and Post Graduate degree.

So far as the appointment status of ICDS functionaries were concerned, it has been found that only two AWWs positions of visited AWCs and 26.18 per cent of ICDS Supervisors posts were lying vacant. It was found that 83.03 per cent of AWWs were belonging to the same area/locality where they were operating AWC.

Training status of Anganwadi Services functionaries shows that 95.04 per cent of AWWs, 78.15 per cent of ICDS Supervisors and 67.59 per cent of CDPOs have received job training. Refresher training has been received by 73.17 per cent of AWWs, 60.96 per cent of Supervisors and 47.43 per cent of CDPOs.

### Service Delivery Status

- **Supplementary Nutrition**

Take Home Ration (THR) to the children of 6 months to three years was being distributed in little less than three fourth (72.83%) of AWCs visited. 75.87 per cent of the total selected AWCs were distributing HCF and 78.92 per cent of the AWCs were distributing Morning Snacks to children 3 to 6 years of age. Milk, Seasonal Fruits and Egg etc was found distributed as Morning snacks along with other Ready to Eat foods in the visited AWCs. More than half (52.76%) of the total selected AWCs were distributing THR to the pregnant and lactating mothers as recommended in the ICDS guidelines issued by MWCD, GOI.

Acceptability of supplementary nutrition by ICDS beneficiaries has been reported in majority (88.25%) of the AWCs. The quality of supplementary nutrition being distributed in 85.46 per cent of the AWCs has been rated as good by CMU consultants. It was also found that the required quantity of supplementary nutrition as envisaged in ICDS guidelines is being distributed in substantial (83.75%) number of the AWCs.

In sizeable number (69.21%) of AWCs, there has been no interruption in distribution of supplementary nutrition to ICDS beneficiaries during the last six months. In those AWCs which were having interruption the main reason of interruption has been reported as the shortage of supply (82.17%) followed by Lack of Fund in 22.73 per cent of the AWCs and due to transport problem in 0.70 per cent of the AWCs.

Utensils for serving of supplementary nutrition were adequately available in little more than three fourth (75.81%) of AWCs. Unlike low availability of adequate utensils for serving of supplementary nutrition, more than three fourth (77.27%) of AWCs have adequate availability of utensils for cooking of supplementary nutrition.

- **Growth Monitoring and Promotion**

In the year of 2010-11, a new variable regarding availability of New WHO Child Growth Standards in ICDS was added in the CMU data capture format. Data in this respect reveals the availability of New WHO Child Growth standards charts in substantial number (85.33%) of AWCs. The availability of Salter's scale has been reported in almost half (49.60%) of total AWCs followed by availability of weighing machines in 41.59 per cent of AWCs. The availability of Weighing Pan has been reported from even less than one fifth (16.38%) of AWCs.

The observation of CMU consultant's shows that less than three fourth (74%) of AWWs were able to accurately plot the weight on the New WHO Child Grow charts. The status of organization of Counseling Sessions based on Growth Monitoring shows that 73.94 per cent of AWWs organize counseling sessions with mothers on growth monitoring. Correct Interpretation of the plotted weight was done by 71.77 per cent of the AWWs to the care givers.

- **Nutrition and Health Education**

NHEd component of ICDS aims at enhancing knowledge and awareness of the target mothers and Adolescent Girls to handle problems like health, under nutrition etc which are so common in disadvantaged families. Nutrition and Health Education was organised by AWWs in most (86.60%) of the AWCs. About two third (67.30%) of the sessions were organised on Immunisation, followed by Nutrition and Health care of the Infants in 65.69 per cent of the AWCs.

- **Health Related Services**

The data on health check-up shows that health check-up of all children were being carried out on monthly basis in 43.75 per cent of the visited AWCs. About 85 per cent of the AWCs covered Health check up of children on Weekly, monthly, Quaterly, Six monthly, Annually and unplanned basis.

IFA Supplementation was carried out in 76.40 per cent and Deworming Tablets distributed 55.12 per cent of the AWCs to the Adolescent Girls.

The availability and maintenance of MCP card have been observed in 70.03 per cent of AWCs located across 25 States respectively. It was also observed that 72.32 per cent of the AWCs refer needy beneficiaries to the Health Centres.

- **Non Formal Pre School Education**

It has been observed that altogether about three fourth (75.86%) of children of the total population (3-6 years) were enrolled in for availing pre-school education inputs under ICDS. The enrollment data also shows that more than half (58.60%) of enrolled children were attending pre-school education activities at the AWCs.

The availability of adequate PSE teaching learning aids has been observed in less than three fourth (73.78%) of AWCs. The findings of the study further reveals that 41.78% of AWWs have prepared the low cost teaching and learning material used in conducting preschool education sessions. The Supply of PSE kit has been reported in less than three fourth (68.83%) of AWCs visited. Availability of Time table to carry out Pre School Education was observed in 73.84 per cent of the AWCs.

## Community Mobilization and Information, Education and Communication

In 59.81 per cent of the visited AWCs Community Participation was observed. Most (83.47%) of the AWCs were celebrating World Breast Feeding Week and National Nutrition Week and more than three fourth (79.62%) of AWCs were organizing the Village Health and Nutrition Day. It has been reported that organization of Sneh Shivar was observed in only 22.19 per cent of the ICDS Projects.

## Comprehensive and Continuous Monitoring and Supportive Supervision

While more than half (53.05%) of CDPOs were using check list as one of the monitoring tool, 56.59 per cent of CDPOs were using MPR as one of the monitoring tool. It

has further been reported that CDPOs from 70.42 per cent of ICDS projects were providing guidance to the AWWs by giving Demonstration Sessions for providing guidance during their supervision visits of AWCs. Most discussed topic was WHO Growth charts (83.11%), followed by New Record and Registers (72.15%). The supply/availability of MPR forms and New Records and Registers has been reported in 70.42 per cent and 93.89 per cent of ICDS Projects.

- **Additional Tasks to ICDS Functionary**

Fifty Six point two three per cent of the CDPOs were observed getting additional task apart from Anganwadi scheme in the work like deputation in election duties, engagements in implementation of other welfare programmes (like Old age pension scheme/Old age homes etc.) of the respective State Governments, in Health department works etc.



**Strengthening Monitoring  
of Anganwadi Services  
through Central  
Monitoring Unit**

The children are our precious resources. The development of any nation on social index and economic prosperity largely depends on the physical, mental and social well-being of this most supremely important asset as enumerated in National Policy on Children, 1974 and subsequently reaffirmed by its updated version in National Policy on Children 2013<sup>1</sup>, developed in harmony of Child Development approaches under 12<sup>th</sup> Five Year Plan. The policy further lays down that the State should provide adequate services to children both before and after birth and through the period of growth so as to ensure their survival and development. The policy resolution also enjoins on the State that it should progressively increase the scope of its minimum basic services (like comprehensive health inputs, supplementary nutrition services for preventing deficiencies in children, expectant and nursing mothers, nutrition education of mothers and non-formal education to pre-school children) so that within a reasonable time, all children in the country are provided conditions for their optimal growth.

As a follow-up of these measures contained in the National Policy Resolution, the **Integrated Child Development Services**, popularly known as ICDS was evolved in 1975 now **renamed as <sup>2</sup>Umbrella ICDS** by Government of India with the major objectives of:

- **Improving** the nutritional and health status of children in the age group 0-6 years;
- **Laying** the foundation for proper psychological, physical and social development of the child;
- **Reducing** the incidence of mortality, morbidity, malnutrition, and school dropout;
- **Achieving** effective coordination of policy and implementation amongst the various departments to promote child development; and
- **Enhancing** the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

The basic premise of the programme revolves around the common consensus among educationists, researchers and practitioners that early childhood education and care are inseparable issues and must be considered as one. Based upon this fundamental assumption, the basic inputs under ICDS programme include delivery of integrated package of minimum basic services - health care (immunisation, referrals, health check-ups, nutrition and health education), nutritional supplementation and early childhood education (stimulation activities for children of 0-3 years and non-formal pre-school activities for children 3-6 years) so as to benefit the children from pre-natal stage to the age of six years and to pregnant and lactating mothers. The concept of providing a package of services is based primarily on the consideration that the overall impact would be much larger if the different services are provided in an integrated manner.

Sub Scheme of Umbrella ICDS, is Anganwadi Services, it therefore, takes a holistic view of the development of the child and attempts to improve his/her both pre- and post-natal environment. Accordingly, besides children in the formative years (0-6 years), women between 15-45 years of age are also covered by the programme, as these are child-bearing years in the life of a women and her nutritional and health status has a bearing on the development of the child. Further, in order to better address the concern for women and for girl child, interventions have also been designed for adolescent girls seeking to break the inter-generational cycle of

<sup>1</sup> National Policy on Children, 2013 adopted by Government of India on 26<sup>th</sup> April, 2013

<sup>2</sup> MWCD Letter number::F.No.CD-II-14/2/2017-CD-II, Dated: 08/12/2017

nutritional disadvantage. The adolescent girls therefore have also been brought under the ambit of Umbrella ICDS services.

### Monitoring of Anganwadi Services and Scheme for Adolescent Girls

Anganwadi Services is one of the largest programme in the world to comprehensively cater to the developmental needs of children below 6 years of age in a holistic manner. The programme has expanded tremendously during the past one decade. In view of the expanding universal coverage of programme, it needs a strong and comprehensive MIS.

Keeping in view the importance of the monitoring, MWCD has taken many steps and revamped the MIS under this scheme. A comprehensive Monitoring and Evaluation system has already been evolved by MWCD, GOI for monitoring the projects through a regular monthly feedback from each project. The main components of this information system are: monthly progress reports from the Anganwadi Worker to the CDPO through Supervisors; to the State Government/ Union Territory Administration and ICDS Control Room located in MWCD, GOI in new MIS format.

Apart from such monitoring based on monthly progress reports, Five-Tier Monitoring and Review Mechanism has also been put in place. The five-tier monitoring process involves monitoring at Central, State, District, Block and AWCs level.

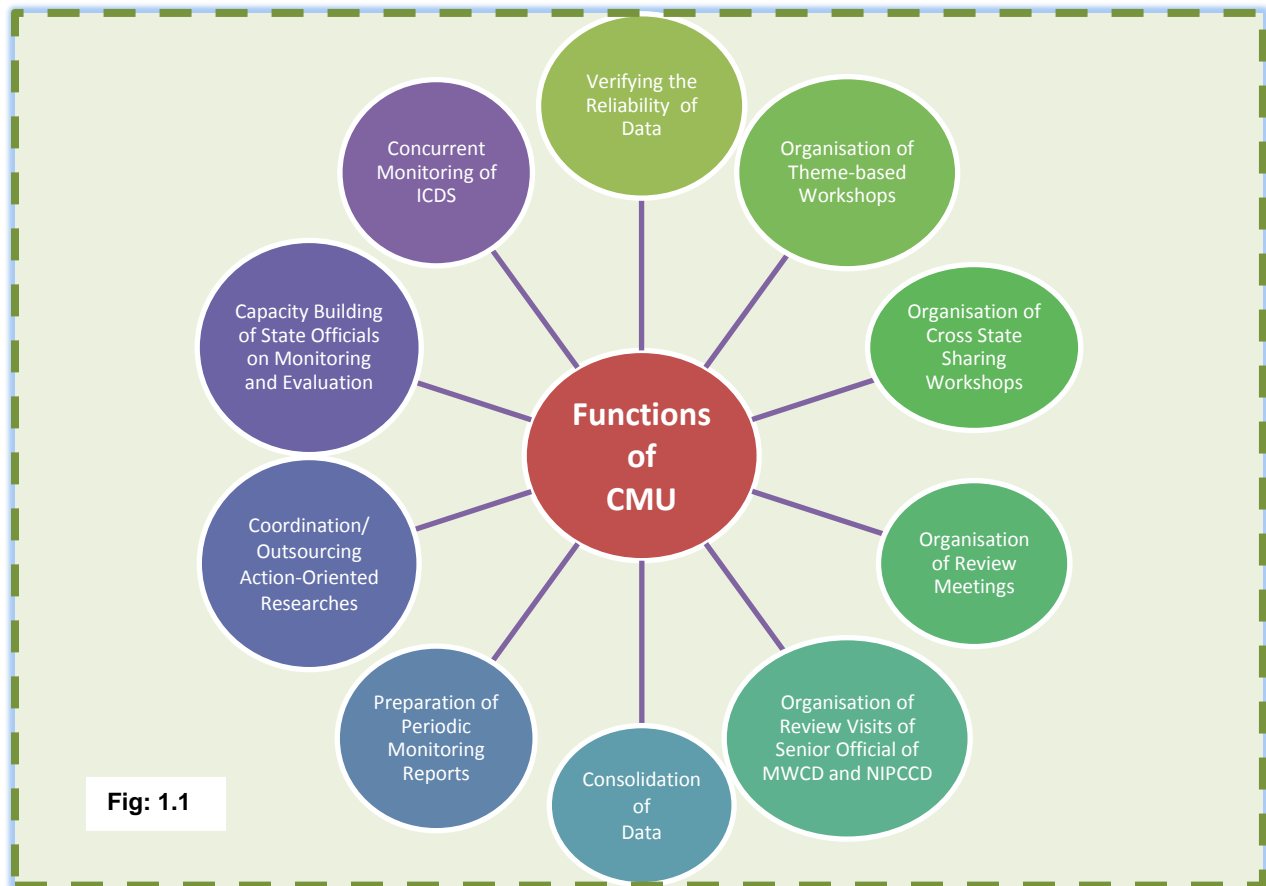
In view of above, it was being felt that besides MPR, QPR and APR system of monitoring, there is a need to design a monitoring system of Sub Scheme of Umbrella ICDS, which may assess the quality of the service delivery system through multiple ways including taking care of responses of stakeholders too. Moreover, it was also felt that though, Anganwadi service programme, which is a flagship programme for taking care of holistic development of the child, has sustained for over Four decades and has been successful in many ways. However, it has not yet succeeded in making significant dent in prevalence of underweight among children. As the existing monitoring system of ICDS was not found adequate for capturing all aspects of implementation of ICDS especially the qualitative assessment of the scheme, a Central Monitoring Unit of ICDS was created in NIPCCD in the year of 2008.

#### Major Objects of CMU

- Study convergence of services provided under other schemes;
- Analyse the service delivered under the ICDS at all levels;
- Identify the bottlenecks/problems of the scheme and initiate action for corrective measures;
- Prepare detailed recommendations for improving the efficiency and effectiveness of the scheme;
- Document some of the Best Practices at the state level; and
- Identify the strengths and weaknesses of the already existing monitoring system.

The broader functions as assigned to CMU mentioned below:





### Major Contribution of CMU

- ✓ The national evaluation of ICDS was first conducted in the year 1992 by NIPCCD and subsequently it was conducted again in the year of 2000 by NCAER. The national evaluation of ICDS was again conducted in the year of 2005 by NIPCCD and in the year of 2010 by NCAER. Overall, there was a time gap of at least five years between two subsequent national level concurrent evaluations of ICDS. The efforts put in by CMU of ICDS has drastically reduced the time lag in availability of such ICDS monitoring data, which is now down from almost 5 years to about six months interval at the national level.
- ✓ The CMU of ICDS captures the monitoring data of ICDS on comprehensive set of indicators encompassing all possible inputs, process and output/outcome variables. These include six core components: Infrastructure, Personal Profile of ICDS Functionaries, Training Status of ICDS Functionaries, Service Delivery, Services to Adolescent Girls, Community Mobilisation and Information, Education and Communication, Continuous and Comprehensive Monitoring and Supportive Supervision, Innovations and Best Practices etc.
- ✓ As part of CMU of ICDS activities, preparation and submission of concurrent evaluation of ICDS has been made a frequent and regular feature.
- ✓ The CMU ensures two-way flow of information. Based on the monitoring data available with CMU of ICDS, the State-specific comments (both quantitative and qualitative) on implementation of ICDS are being shared with the concerned State Government /UT Administration at regular intervals.

- ✓ The monitoring data available with CMU of ICDS is continuously providing help to policy makers, programme implementers, programme managers and ICDS trainers for not only taking corrective measures but also in imparting training and /or orienting ICDS functionaries and programme managers.
- ✓ The CMU monitoring data, which has provided the basic statistics on all possible vital indicators of ICDS implementation, has provided basic information for finalising the restructuring and strengthening document of ICDS for the Twelfth Five-Year Plan.
- ✓ The CMU data is also being widely used for discussing performance of various States and UTs in ICDS implementation during National/State level Review Meetings/ Supervision Missions convened by MWCD, GOI.
- ✓ It has now become a regular feature to share the CMU data with MWCD at frequent intervals.
- ✓ Besides serving as storehouse of quantitative information and analytical reports about ICDS implementation in various States/UTs, CMU also provides qualitative data about AWCs and ICDS Projects incorporating best practices and innovations.
- ✓ Carrying out research on various aspects of ICDS is a regular feature of CMU. Some of the research projects carried out by CMU include “Evaluation of ICDS Projects being run by NGOs” and “A quick appraisal of ICDS awareness in National Capital Region”. The consultants of CMU have also been involved in various other studies. These include “Evaluation of Wheat Based Nutrition programme” and “Involvement of ASHA in ICDS” etc.

Here it is also pertinent to note that CMU has not only expanded its Umbrella ICDS monitoring coverage continuously but has also either added new monitoring indicators or modified old monitoring indicators depending upon the monitoring requirements of Umbrella ICDS. Some of these monitoring indicators are availability of new WHO Child Growth Standards, enrollment and actual attendance of children in PSE sessions, distribution of THR, Nutritional Grade according to new WHO Growth Charts, follow-up of referral services, beneficiaries responses about NHED sessions, type of community support, observance of special days (like Breastfeeding day and Nutrition week, village health and nutrition day etc.) and suggestions of AWWs for effective implementation of ICDS.

### The Present Report

The CMU unit has received the data from 311 ICDS Projects (list attached in Annexure I) and 1575 AWCs till March 2017 as per details given in **Table 1.2**.

**Table 1.2: Number of ICDS Projects and AWCs**

States	No of ICDS Projects	Total No. of AWCs
Andhra Pradesh	18	90
Arunachal Pradesh	8	40
Assam	16	80
Chhattisgarh	16	75
Delhi	1	5
Gujarat	18	90
Haryana	2	10
Himachal Pradesh	14	45
Karnataka	10	50
Kerala	14	70

Madhya Pradesh	23	103
Maharashtra	14	54
Meghalaya	8	45
Mizoram	3	15
Odisha	3	15
Punjab	17	102
Pudducherry	8	43
Rajasthan	13	60
Sikkim	15	70
Tamil Nadu	6	90
Telangana	7	35
Tripura	5	25
Uttar Pradesh	42	219
Uttarakhand	17	85
West Bengal	13	59
<b>Total</b>	<b>311</b>	<b>1575</b>

The consultants working in selected institutions were instructed to visit preferably those ICDS Projects where IMR, Malnutrition and other social indicators concerning early childhood development were poor as per District/State data records. Besides, each Consultant was asked to acquire comprehensive and accurate information about the functioning of the ICDS Project in which they were visiting so as to make qualitative and quantitative assessment of ICDS correctly.

### Data Gathering Instruments

The consultants working in select Institutions were given two monitoring proformas developed by CMU, NIPCCD. The consultants were required to fill the CDPO proformas after taking their interview and proformas of AWWs after observing the activities of the AWC and by conducting interviews of the concerned AWW. With the help of both of these schedules, the required data was gathered on the broad indicators as listed in **Table 1.3**.

**Table 1.3: List of Monitoring Indicators**

Core Component	Indicator
<b>Infrastructure</b>	<ul style="list-style-type: none"> <li>• Type of Building of AWC</li> <li>• Ownership of Building</li> <li>• Availability and adequacy of Outdoor Space</li> <li>• Availability and adequacy of Indoor Space</li> <li>• Availability of Kitchen</li> <li>• Availability of Storage Space</li> <li>• Availability and Working Condition of Toilets</li> <li>• Source of Drinking Water</li> </ul>
<b>Personal Profile of ICDS Functionaries (AWW, Supervisor and CDPO)</b>	<ul style="list-style-type: none"> <li>• Educational Background of AWW, Supervisor and CDPO</li> <li>• Local Area Belongingness</li> <li>• Mode of Recruitment of CDPO</li> <li>• Status of Filled Up Posts of ICDS Functionaries</li> <li>• Engagements of ICDS functionaries in Non-ICDS Tasks</li> </ul>

<b>Training Status of ICDS Functionaries</b>	<ul style="list-style-type: none"> <li>• Status of Job Training of ICDS Functionaries (AWW, Supervisor and CDPO)</li> <li>• Status of Refresher Training of ICDS Functionaries (AWW, Supervisor and CDPO)</li> </ul>
<b>Delivery of Services</b>	
<ul style="list-style-type: none"> <li>• <b>Supplementary Nutrition</b></li> </ul>	<ul style="list-style-type: none"> <li>• Type of Supplementary Nutrition Food Supply (HCF, RTE, Both, THR)</li> <li>• Acceptability of Food</li> <li>• Quality of Supplementary Nutrition</li> <li>• Quantity of Supplementary Nutrition</li> <li>• Interruption in Supplementary Nutrition</li> <li>• Reasons of Interruption</li> <li>• Community Support for Supplementary Nutrition</li> <li>• Availability and Adequacy of Utensils</li> <li>• Recording and Reporting System</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Growth Monitoring and Promotion</b></li> </ul>	<ul style="list-style-type: none"> <li>• Availability of Growth Monitoring Charts</li> <li>• Availability and Type of Weighing Scales</li> <li>• Accuracy in Plotting on Growth Charts</li> <li>• Correct Determination of Age of Children</li> <li>• Organisation of Counselling Sessions</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Non-Formal Pre-School Education</b></li> </ul>	<ul style="list-style-type: none"> <li>• Number of Children enrolled for PSE</li> <li>• Number of Children Attending PSE</li> <li>• Number of Children Actually Present on the Day of visit</li> <li>• Programme Planning by AWW</li> <li>• Methods of PSE</li> <li>• Availability of PSE Material</li> <li>• Role of Helper in PSE</li> <li>• Preparation of Low Cost Teaching Learning Material</li> <li>• Supply of PSE Kit</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Health Check-Up</b></li> </ul>	<ul style="list-style-type: none"> <li>• Health Check-Up Status of Children</li> <li>• Maintenance of Mother and Child Protection Cards</li> <li>• Supply of Medicine Kit</li> <li>• IFA and Deworming Tablet Distribution to AGs</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Immunization</b></li> </ul>	<ul style="list-style-type: none"> <li>• Immunisation Status of Children</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Referrals</b></li> </ul>	<ul style="list-style-type: none"> <li>• AWCs referred needy beneficiaries to Health Centres</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Nutrition and Health Education</b></li> </ul>	<ul style="list-style-type: none"> <li>• Organisation of NHED Sessions</li> <li>• Topics Covered in NHED Sessions</li> </ul>
<b>Maintenance of Records and Registers</b>	<ul style="list-style-type: none"> <li>• Maintenance of Records and Registers</li> </ul>
<b>Community Mobilisation and Information, Education and Communication</b>	<ul style="list-style-type: none"> <li>• Involvement of Community</li> <li>• Organisation of IEC Activities</li> <li>• Organisation of Advocacy and Awareness Camps</li> <li>• Observance of Special Days (Breast Feeding Day/VHND Day etc.)</li> </ul>
<b>Continuous and Comprehensive Monitoring and Supportive Supervision</b>	<ul style="list-style-type: none"> <li>• Use of Different Monitoring Tools (Check List, MPR Forms, Observations, Interview)</li> <li>• Frequency of Monitoring Visits</li> <li>• Performance Assessment Tools of AWW</li> </ul>

- Methods adopted for Supportive Supervision and Providing Guidance

Apart from sending both of these ICDS monitoring proformas in original to NIPCCD, CMU, and the concerned consultants also prepared a detailed report about the ICDS project visited by them and a separate write up in terms of qualitative assessment on different aspects of the programme for qualitative assessment point of view.

The list of monitoring indicators as used in ICDS concurrent evaluation is quite comprehensive and depicts a true picture of ICDS implementation.

### Data Collection

Blended mix of both quantitative and qualitative data on indicators listed above was collected by consultants working in selected and lead institutions located across the country.

### Ensuring Data Quality

Several measures were taken to generate and collect the reliable and good quality data. Various ICDS monitoring indicators, as presented in **Table 1.3**, were finalized in consultation with policy makers, practitioners, officials and trainers of ICDS and ICDS consultants working in selected and lead Institutions located across the country.

#### Data Quality

##### Measures taken

- Preparation of detailed guidelines
- Preparation of pre-coded Schedules
- Orientation of Consultants
- Editing to detect errors and omissions in entries of the schedules

The consultants were also given orientation training by faculty members of CMU about purpose and objectives of the monitoring, AWC observation techniques and interviewing ICDS functionaries. The consultants were requested to ensure that the data is consistent and there are no missing values. Feedback on data quality was also provided by CMU officials to consultants, as and when needed, which has also helped in improving the quality and consistency of data. It was made mandatory to all consultants to share the monitoring reports with concerned ICDS Project and State officials about the major outcomes of the monitoring visits. Guidelines developed by CMU, NIPCCD helped the consultants in filling the data on the data capture formats. Despite best efforts, some inconsistencies and missing data are observed while coding

the data at the national level of CMU, NIPCCD.

Raw data as presented in the document or used for calculating indicators are essentially based on data provided by consultants working in select and lead institutions. Thus the accuracy and truthfulness of the data rest with them. NIPCCD has only provided professional support for coding, analysis, interpretation of data and generating and disseminating the report findings.

### Data Analysis

The formats of the data were prepared in such a way that the data could be used in variety of ways for subsequent analysis. The data base was created project wise with an

intention to optimally utilise the valuable empirical information for other purposes as well. The data were disaggregated at the State and Project level.

**Summarizing the Data**

The data was tabulated on excel sheets for its analysis. The data have also been presented graphically and with the use of maps to show the regional disparities. The analysis of regional and state-based data has also been presented separately for each geographical region (northern, eastern, North East, western, southern, central region and UTs) and has been collated in such a way so as to provide a comprehensive picture of implementation status of ICDS across the country.



## Infrastructure of AWCs

**Chapter-2**  
**Infrastructure of AWCs**

In the present chapter, an attempt has been made to analyse various input indicators of Infrastructure in terms of type of building, distance of AWC from beneficiaries’ habitat, condition of surroundings, availability of safe drinking water, toilet facilities, indoor/outdoor space provisions, availability of cooking area etc. These facilities have important bearing on the delivery of services and overall well- being of women and children.

**Type of Building**

For the effective implementation of Anganwadi Scheme Programme, the development of a suitable infrastructure in the form of Pucca anganwadi building is an essential requirement. The location of Anganwadi Centers in Pucca buildings not only provides a distinct identity to the AWC in the community but also save the beneficiaries of ICDS from vagaries of weather. The data have been gathered about the type (kutchha, Pucca, Semi Pucca and No infrastructure available) of building in which the AWCs were located. The data so collected is presented in **Table 2.1**.



**Table 2.1: Type of Building**

States	Total No. of AWCs	Pucca		Kutchha		Semi Pucca	
		No. of AWCs	%	No. of AWCs	%	No. of AWCs	%
Andhra Pradesh	90	58	64.44	11	12.22	6	6.67
Arunachal Pradesh	40	9	22.50	4	10.00	27	67.50
Assam	80	55	68.75	7	8.75	15	18.75
Chhattisgarh	75	61	81.33	6	8.00	8	10.67
Delhi	5	3	60.00	0	0.00	2	40.00
Gujarat	90	75	83.33	7	7.78	5	5.56
Haryana	10	9	90.00	0	0.00	1	10.00
Himachal Pradesh	45	31	68.89	11	24.44	3	6.67
Karnataka	50	42	84.00	4	8.00	4	8.00
Kerala	70	52	74.29	5	7.14	0	0.00
Madhya Pradesh	103	78	75.73	6	5.83	19	18.45
Maharashtra	54	50	92.59	2	3.70	2	3.70
Meghalaya	45	43	95.56	1	2.22	1	2.22
Mizoram	15	14	93.33	0	0.00	1	6.67
Odisha	15	15	100.00	0	0.00	0	0.00
Punjab	102	89	87.25	5	4.90	7	6.86
Pudducherry	43	40	93.02	2	4.65	0	0.00
Rajasthan	60	51	85.00	6	10.00	3	5.00
Sikkim	70	53	75.71	16	22.86	1	1.43



Tamil Nadu	90	56	62.22	27	30.00	6	6.67
Telangana	35	22	62.86	11	31.43	2	5.71
Tripura	25	23	92.00	1	4.00	1	4.00
Uttar Pradesh	219	204	93.15	6	2.74	9	4.11
Uttarakhand	85	71	83.53	10	11.76	1	1.18
West Bengal	59	43	72.88	4	6.78	10	16.95
<b>Total</b>	<b>1575</b>	<b>1247</b>	<b>79.17</b>	<b>152</b>	<b>9.65</b>	<b>134</b>	<b>8.51</b>

\*Note: Total may not come to hundred percent as some of the AWCs were running in open space/huts

Information on type of building as presented in **Table 2.1** shows that a little more than three fourth (79.17%) of AWCs was located in Pucca buildings. All (100%) the AWCs were located in Pucca buildings in the state of Odisha. Sizeable number (90% and above) of AWCs were located in the States of Meghalaya (95.56%), Mizoram (93.33%), Uttar Pradesh (93.15%), Puducherry (93.02%), Maharashtra (92.59%), Tripura (92%) and Haryana (90%). Less than one-tenth (8.15%) of AWCs were located in semi pucca buildings. In the States of Arunachal Pradesh and Delhi had 67.50 percent and 40 percent of AWCs were located in semi-pucca buildings respectively. 9.65 per cent of AWCs were found located in Kutcha buildings. More number of such centers were from the States of Telangana (31.43%), Tamil Nadu (30%), Sikkim (22.86%), Himachal Pradesh (24.44%). No infrastructure was available for 2.60 per cent of AWCs.

### Building Status

One of the instrumentalities for achieving the objectives of ICDS is establishment of close linkages between the primary schools and the AWCs. As per structural guidelines of ICDS, the AWC needs to be co- located in the premises of primary school so as to smoothen the process of transition of children from AWC to Primary School and thus reducing the incidence of school drop outs. Rental provision is also available under ICDS guidelines if AWC is running in rented building. Government of India also provides necessary budgetary support of rupees one lack per AWC per year to one lack AWCs under convergence with MGNREGA for construction of AWCs. Local community contribution either in cash, labour, or building material is also envisaged so as to make the AWC a permanent community asset, free from all encumbrances and its ability to run without interruption. Data in this regard are presented in **Table 2.2**

**Table 2.2: Building Status - Own Building / Building Provided by State Government**

States	Total No. of AWCs	No. of AWCs in Own building/ Building Provided by State Government	%	No. of AWCs in School Building	%	No. of AWCs in Community/ Panchayat building without rent	%	No. of AWCs in Rented Building	%	No. of AWCs in AWWs own house	%	No. of AWCs in AWHs house	%
Andhra Pradesh	90	44	48.89	9	10	4	4.44	33	36.67	0	0	0	0
Arunachal Pradesh	40	35	87.50	1	2.5	0	0.00	0	0.00	2	5	2	5
Assam	80	43	53.75	12	15	5	6.25	2	2.50	15	18.75	0	0
Chhattisgarh	75	59	78.67	3	4	3	4.00	10	13.33	0	0	0	0
Delhi	5	3	60.00	2	40	0	0.00	0	0.00	0	0	0	0
Gujarat	90	79	87.78	2	2.22	3	3.33	4	4.44	0	0	2	2.22
Haryana	10	1	10.00	2	20	4	40.00	3	30.00	0	0	0	0
Himachal Pradesh	45	12	26.67	8	17.78	13	28.89	13	28.89	0	0	0	0
Karnataka	50	42	84.00	2	4	4	8.00	1	2.00	1	2	0	0
Kerala	70	47	67.14	2	2.86	3	4.29	15	21.43	1	1.43	0	0
Madhya Pradesh	103	57	55.34	9	8.74	7	6.80	26	25.24	4	3.88	0	0
Maharashtra	54	49	90.74	0	0	3	5.56	1	1.85	1	1.85	0	0
Meghalaya	45	44	97.78	1	2.22	0	0.00	0	0.00	0	0	0	0
Mizoram	15	13	86.67	2	13.33	0	0.00	0	0.00	0	0	0	0
Odisha	15	15	100.00	0	0	0	0.00	0	0.00	0	0	0	0
Punjab	102	35	34.31	22	21.57	29	28.43	14	13.73	0	0	0	0
Pudducherry	43	42	97.67	1	2.33	0	0.00	0	0.00	0	0	0	0
Rajasthan	60	24	40.00	6	10	7	11.67	21	35.00	2	3.33	0	0
Sikkim	70	39	55.71	1	1.43	2	2.86	24	34.29	2	2.86	0	0
Tamil Nadu	90	81	90.00	3	3.33	2	2.22	2	2.22	0	0	1	1.11
Telangana	35	19	54.29	0	0	5	14.29	8	22.86	3	8.57	0	0
Tripura	25	24	96.00	1	4	0	0.00	0	0.00	0	0	0	0
Uttar Pradesh	219	144	65.75	53	24.20	11	5.02	8	3.65	3	1.37	0	0
Uttarakhand	85	22	25.88	10	11.76	15	17.65	33	38.82	5	5.88	0	0
West Bengal	59	27	45.76	8	13.56	9	15.25	5	8.47	0	0	1	1.69
<b>Total</b>	<b>1575</b>	<b>999</b>	<b>63.43</b>	<b>160</b>	<b>10.16</b>	<b>129</b>	<b>8.19</b>	<b>223</b>	<b>14.16</b>	<b>39</b>	<b>2.48</b>	<b>6</b>	<b>0.38</b>

The average of all study states as presented in **Table 2.2** reveals that 63.43 per cent of AWCs were located in the buildings either provided by State Government or constructed by the State Government utilising the provisions under various other schemes, such as MPLADs, MLALADs, BRGF, RIDF, MGNREGA, Tribal Affairs, MSDP of Multi Sectorial Development Programme, SSA, Finance Commission, Additional Central assistance under State plan, Integrated Action Plan for Left Wing Extremism (LWE) districts etc. 100 per cent of AWCs in the state of Odisha run either in buildings provided by State Government or their Own building followed by Meghalaya (97.78%), Puducherry (97.67%), Tripura (96%), Maharashtra (90.74%) and Tamil Nadu (90%) .

Percentage of AWCs located in premises of primary school was about one tenth (10.16%). Except for the States of Uttar Pradesh (24.20%), Punjab (21.57%), and Haryana (20%) all other states had below 20 percent of AWCs located in premises of primary schools.

AWCs running in building provided by the community was very low (8.19 %). The highest numbers of such AWCs were from the States of Haryana (40%) followed by in the states of Himachal Pradesh & Punjab (little more than 80%).

32.86 percent of AWCs were running in rented buildings, out of which 2.48 per cent of AWCs were running from AWWs house and 0.38 per cent from AWH's house. About 38.82 per cent of AWCs from the state of Uttarakhand was found running in rented buildings. On the other hand 18.75 per cent of the AWCs were functioning from AWW's house in the state of Assam.

No AWCs from the states of Maghalaya, Mizoram, Odisha, Puducherry and Tripura were found running in rented building or AWW's or AWH's house.

### Availability of Indoor and Outdoor Space

Needless to mention, every AWC should have indoor space where children can not only move around but can also work in small groups, in pairs and in circle depending upon the activity. While children are doing the activities in a group, the AWW should be able to move around and interact with them by giving them individual attention. Similarly, availability of outdoor play offers unparalleled opportunities for the children to grow, to enhance their motor skills, allows them to explore their surroundings, to discover and to learn eventually. The outdoor area of AWC should be utilized for organizing free play, structured games, physical exercises, multimedia activities and the like. The data as obtained on availability and adequacy of indoor and outdoor space is presented in



**Table 2.3**

**Table 2.3: Number of AWCs having adequate Indoor and Outdoor Space\***

States	Total No. of AWCs	AWCs having only adequate Indoor space for activities		AWCs having only adequate Outdoor play space		AWCs having adequate Indoor and Outdoor play space	
		No.	%	No.	%	No.	%
Andhra Pradesh	90	3	3.33	2	2.22	60	66.67
Arunachal Pradesh	40	9	22.50	8	20.00	13	32.50
Assam	80	10	12.50	15	18.75	38	47.50

Chhattisgarh	75	10	13.33	8	10.67	48	64.00
Delhi	5	3	60.00	1	20.00	0	0.00
Gujarat	90	2	2.22	9	10.00	64	71.11
Haryana	10	1	10.00	0	0.00	9	90.00
Himachal Pradesh	45	1	2.22	1	2.22	18	40.00
Karnataka	50	1	2.00	11	22.00	27	54.00
Kerala	70	0	0.00	0	0.00	61	87.14
Madhya Pradesh	103	14	13.59	10	9.71	62	60.19
Maharashtra	54	12	22.22	2	3.70	28	51.85
Meghalaya	45	6	13.33	9	20.00	25	55.56
Mizoram	15	0	0.00	2	13.33	10	66.67
Odisha	15	0	0.00	0	0.00	13	86.67
Punjab	102	28	27.45	4	3.92	40	39.22
Pudducherry	43	0	0.00	0	0.00	29	67.44
Rajasthan	60	0	0.00	2	3.33	23	38.33
Sikkim	70	1	1.43	2	2.86	22	31.43
Tamil Nadu	90	0	0.00	0	0.00	69	76.67
Telangana	35	3	8.57	2	5.71	22	62.86
Tripura	25	0	0.00	3	12.00	15	60.00
Uttar Pradesh	219	5	2.28	13	5.94	167	76.26
Uttarakhand	85	2	2.35	0	0.00	53	62.35
West Bengal	59	6	10.17	2	3.39	32	54.24
<b>Total</b>	<b>1575</b>	<b>117</b>	<b>7.43</b>	<b>106</b>	<b>6.73</b>	<b>948</b>	<b>60.19</b>

\*Note: Total may not come to the 100% because some were running in open spaces and also due to no responses.

It is evident from **Table 2.3** that availability of adequate indoor and outdoor space for organizing Pre School Education was observed in 60.19 per cent of the visited AWCs. Most (80% and above) of the AWCs from the States of Haryana (90%), Kerala (87.14%) and Odisha (86.67%) were having adequate indoor as well as outdoor spaces. In the NCT of Delhi not a single visited AWC were having adequate Indoor and outdoor (both) space, mostly (80%) they were lacking in outdoor space.

One hundred Seventeen AWCs out of 1575 AWCs were found having only adequate indoor space and 106 AWCs were having only adequate outdoor spaces.



**Drinking Water**

Providing safe drinking water is of utmost importance for small children who are prone to infectious diseases. For providing drinking water facility in AWCs, Rs 10,000/- per AWC for 20,000 AWCs per annum was approved by MWCD GOI. **Table 2.4** summarises the status and provision of safe drinking water.


**Table 2.4: Sources of Drinking Water\***

States	Total No. of AWCs	Hand Pump Available at AWC Campus	%		Well /Pond	%		Tap Water	*Multiple Responses		
			Hand Pump Available near- by AWC			Well /Pond	Tap Water		*Any Other		
Andhra Pradesh	90	25	27.78	7	7.78	8	8.89	43	47.78	5	5.56
Arunachal Pradesh	40	3	7.50	14	35.00	4	10.00	19	47.50	0	0.00
Assam	80	21	26.25	37	46.25	9	11.25	12	15.00	1	1.25
Chhattisgarh	75	25	33.33	35	46.67	4	5.33	11	14.67	0	0.00
Delhi	5	0	0.00	1	20.00	0	0.00	4	80.00	0	0.00
Gujarat	90	8	8.89	6	6.67	4	4.44	71	78.89	0	0.00
Haryana	10	0	0.00	0	0.00	0	0.00	10	100.00	0	0.00
Himachal Pradesh	45	2	4.44	6	13.33	0	0.00	36	80.00	1	2.22
Karnataka	50	2	4.00	11	22.00	1	2.00	36	72.00	0	0.00
Kerala	70	8	11.43	4	5.71	14	20.00	38	54.29	4	5.71
Madhya Pradesh	103	19	18.45	36	34.95	13	12.62	31	30.10	0	0.00
Maharashtra	54	5	9.26	12	22.22	10	18.52	27	50.00	0	0.00
Meghalaya	45	4	8.89	15	33.33	17	37.78	9	20.00	0	0.00
Mizoram	15	0	0.00	1	6.67	0	0.00	14	93.33	0	0.00
Odisha	15	8	53.33	5	33.33	0	0.00	2	13.33	0	0.00
Punjab	102	20	19.61	8	7.84	3	2.94	70	68.63	2	1.96
Puducherry	43	0	0.00	2	4.65	0	0.00	38	88.37	3	6.98
Rajasthan	60	7	11.67	6	10.00	8	13.33	33	55.00	4	6.67
Sikkim	70	1	1.43	5	7.14	0	0.00	47	67.14	18	25.71
Tamil Nadu	90	11	12.22	7	7.78	8	8.89	62	68.89	2	2.22
Telangana	35	2	5.71	2	5.71	1	2.86	30	85.71	0	0.00
Tripura	25	3	12.00	6	24.00	3	12.00	13	52.00	0	0.00
Uttar Pradesh	219	142	64.84	58	26.48	1	0.46	11	5.02	5	2.28
Uttarakhand	85	22	25.88	18	21.18	7	8.24	38	44.71	0	0.00
West Bengal	59	34	57.63	11	18.64	0	0.00	12	20.34	2	3.39
<b>Total</b>	<b>1575</b>	<b>372</b>	<b>23.62</b>	<b>313</b>	<b>19.87</b>	<b>115</b>	<b>7.30</b>	<b>717</b>	<b>45.52</b>	<b>47</b>	<b>2.98</b>

\*Note: Any other; Neighborhood, Own home etc

The data on type of drinking water facility as presented in **Table 2.4** reveals that the maximum number of visited AWC i.e. 45.52 per cent were using Tap water as a source of drinking, as compared to 23.62 per cent, 19.87 per cent and 7.30 0.88 per cent who were using Hand Pump in AWC campus, Hand pump outside the AWC campus and Well/Tube well/ Pond / River respectively for drinking water. Only 2.98 per cent of visited AWCs were using another sources to bring drinking water (for eg: AWW’s house or neighbours house etc.). No drinking water facility was found in eight visited AWCs from the states of Andhra Pradesh (1 AWC), Madhya Pradesh (3 AWCs), Uttar Pradesh (3 AWCs) and West Bengal (1 AWC) respectively.

### Sanitation

Individual health and hygiene inter alia, dependent on adequate availability of drinking water and proper/adequate sanitation. There is, therefore, a direct relationship between water, sanitation and health. Improper disposal of human excreta and improper environmental sanitation have been major causes of many diseases in developing countries including India. Prevailing high infant mortality rate is also largely attributed to poor sanitation. In order to change the behavior of children from very early stage of life, it is essential that AWCs are used as a platform for behavior change of the children as well as mothers attending the AWCs. MWCD vide its letter no F.No.CD-II GOI dated 8<sup>th</sup> December 2017 has approved Rs12000/-per AWC for construction of toilets in 70,000/- Government AWC building per annum and it has emphasized that states should first construct Toilets in AWCs existing in High Burden Districts. The usable toilet facility condition was noted for all the centres and has been represented in the **Figure 2. 5**.



**Table 2.5: Number of AWCs having availability of Usable Toilet Facility\***

States	Total No. of AWCs	Available		Available but not usable		Not Available	
		No. of AWCs	%	No. of AWCs	%	No. of AWCs	%
Andhra Pradesh	90	40	44.44	13	14.44	37	41.11
Arunachal Pradesh	40	9	22.50	1	2.50	30	75.00
Assam	80	27	33.75	0	0.00	53	66.25
Chhattisgarh	75	39	52.00	7	9.33	29	38.67
Delhi	5	5	100.00	0	0.00	0	0.00
Gujarat	90	68	75.56	11	12.22	11	12.22
Haryana	10	10	100.00	0	0.00	0	0.00
Himachal Pradesh	45	37	82.22	2	4.44	6	13.33
Karnataka	50	36	72.00	10	20.00	4	8.00
Kerala	70	56	80.00	8	11.43	6	8.57
Madhya Pradesh	103	78	75.73	8	7.77	17	16.50
Maharashtra	54	30	55.56	10	18.52	14	25.93
Meghalaya	45	27	60.00	4	8.89	14	31.11
Mizoram	15	13	86.67	0	0.00	1	6.67
Odisha	15	4	26.67	0	0.00	11	73.33
Punjab	102	58	56.86	11	10.78	33	32.35
Pudducherry	43	30	69.77	4	9.30	9	20.93
Rajasthan	60	41	68.33	2	3.33	17	28.33
Sikkim	70	60	85.71	2	2.86	8	11.43

Tamil Nadu	90	80	88.89	1	1.11	9	10.00
Telangana	35	17	48.57	6	17.14	12	34.29
Tripura	25	18	72.00	2	8.00	5	20.00
Uttar Pradesh	219	77	35.16	28	12.79	112	51.14
Uttarakhand	85	53	62.35	6	7.06	26	30.59
West Bengal	59	27	45.76	5	8.47	27	45.76
<b>Total</b>	<b>1575</b>	<b>940</b>	<b>59.68</b>	<b>141</b>	<b>8.95</b>	<b>491</b>	<b>31.17</b>

It can be observed from **Table 2.5** that 59.68 per cent of AWCs had availability of usable toilet facility. The state specific percentage of AWCs having availability of toilets reveals that in the state of Haryana and NCT of Delhi all the visited AWCs were having availability of usable toilet facility. In the states of Arunachal Pradesh, Odisha, Assam and Uttar Pradesh there is a need to build Toilets as there was no toilet facility found in 75 per cent, 73.33 per cent, 66.25 per cent and 51.14 per cent of the visited AWCs.

### Separate Space for Storage of Food items

The 'Take Home Ration' and the raw material for cooking of supplementary nutrition are being supplied to the AWCs in bulk at the regular intervals. It has to be stored in AWCs. Similarly, hot cooked food has to be prepared in the AWCs. The data showing availability of adequate space for storing and cooking of supplementary nutrition is presented in **Table-2.6**.

**Table 2.6: Number of AWCs having Separate Space for Storage\***

States	Total No. of AWCs	No. of AWCs having Space for Storage	%
Andhra Pradesh	90	54	60
Arunachal Pradesh	40	17	42.5
Assam	80	28	35
Chhattisgarh	75	56	74.67
Delhi	5	0	0
Gujarat	90	49	54.44
Haryana	10	8	80
Himachal Pradesh	45	5	11.11
Karnataka	50	41	82
Kerala	70	52	74.29
Madhya Pradesh	103	56	54.37
Maharashtra	54	17	31.48
Meghalaya	45	41	91.11
Mizoram	15	13	86.67
Odisha	15	9	60
Punjab	102	17	16.67
Pudducherry	43	30	69.77
Rajasthan	60	20	33.33
Sikkim	70	20	28.57
Tamil Nadu	90	80	88.89
Telangana	35	18	51.43
Tripura	25	22	88
Uttar Pradesh	219	31	14.16
Uttarakhand	85	24	28.24

West Bengal	59	25	42.37
<b>Total</b>	<b>1575</b>	<b>733</b>	<b>46.54</b>

\*Note: Total may not come to hundred per cent because there is no sufficient storage space

It is revealed from **Table 2.6** that the less than half (46.54%) of AWCs had availability of Separate space for storage. The percentage of AWCs having separate space for storage was high (above 70%) in only four States namely Meghalaya (91.11%), Tamil Nadu (88.89%), Mizoram (86.67%), Haryana (80%), Chhattisgarh (74.67%) and Karnataka (74.29%). It can further be observed that the states with the least number of separate storage space were Punjab (16.67%), Uttar Pradesh (14.16%) and Himachal Pradesh (11.11%). No storage space was found in any of the visited AWCs in the NCT of Delhi.

### Availability of Cooking Space (Separate Kitchen)

Data in this regard are presented in **Table 2.7**.

**Table 2.7: Number of AWCs having availability of Separate Kitchen**

States	Total No. of AWCs	No. of AWCs having Separate Kitchen	%
Andhra Pradesh	90	56	62.22
Arunachal Pradesh	40	13	32.50
Assam	80	27	33.75
Chhattisgarh	75	67	89.33
Delhi	5	0	0.00
Gujarat	90	76	84.44
Haryana	10	4	40.00
Himachal Pradesh	45	12	26.67
Karnataka	50	42	84.00
Kerala	70	61	87.14
Madhya Pradesh	103	51	49.51
Maharashtra	54	29	53.70
Meghalaya	45	30	66.67
Mizoram	15	12	80.00
Odisha	15	10	66.67
Punjab	102	19	18.63
Pudducherry	43	28	65.12
Rajasthan	60	13	21.67
Sikkim	70	44	62.86
Tamil Nadu	90	79	87.78
Telangana	35	13	37.14
Tripura	25	23	92.00
Uttar Pradesh	219	37	16.89
Uttarakhand	85	25	29.41
West Bengal	59	29	49.15
<b>Total</b>	<b>1575</b>	<b>800</b>	<b>50.79</b>

It is revealed from **Table 2.7** that more than half (50.79%) of AWCs had availability of adequate cooking space. The availability of separate cooking space was highest in Tripura (92 %) and lowest in the State of Uttar Pradesh (16.89%).



### Location of Anganwadi Centres Accessibility to the Children

Accessibility to the Anganwadi Centres in terms of distance from the beneficiary's habitat, Cleanliness of surroundings, availability of amenities, type of structure and provision of indoor and outdoor space were few aspects studied to assess status of physical set up. Anganwadi were considered safe in being situated in environments which posed little or no danger to children from traffic, pollution and accidents, etc.

**Table 2.8: Accessibility of AWCs for the Children**

States	Total No. of AWCs	Accessibility to Community	
		No.	%
Andhra Pradesh	90	77	85.56
Arunachal Pradesh	40	32	80.00
Assam	80	70	87.50
Chhattisgarh	75	55	73.33
Delhi	5	5	100.00
Gujarat	90	81	90.00
Haryana	10	10	100.00
Himachal Pradesh	45	27	60.00
Karnataka	50	48	96.00
Kerala	70	44	62.86
Madhya Pradesh	103	74	71.84
Maharashtra	54	12	22.22
Meghalaya	45	33	73.33
Mizoram	15	15	100.00
Odisha	15	14	93.33
Punjab	102	97	95.10
Puducherry	43	33	76.74
Rajasthan	60	32	53.33
Sikkim	70	50	71.43
Tamil Nadu	90	33	36.67
Telangana	35	33	94.29
Tripura	25	24	96.00
Uttar Pradesh	219	180	82.19
Uttarakhand	85	75	88.24
West Bengal	59	35	59.32
<b>Total</b>	<b>1575</b>	<b>1189</b>	<b>75.49</b>

Distance of AWC from the village and community can be observed from **Table 2.8**, as a little more than three fourth (75.49%) of the AWCs were found within village and easily accessible to the community. All the visited AWCs (100%) from the states of Haryana, Mizoram and NCT of Delhi, the location was found accessible. The states of Maharashtra and Tamil Nadu show that

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only 22.22 per cent and 36.67 per cent of the visited AWCs were located within village or in such area which was easily accessible to the children.





# **Personal Profile and Training Status of Anganwadi Services Functionaries**

**Chapter - 3**  
**Personal Profile and Training Status of ICDS Functionaries**

Background information relating to variables like educational background, training status etc. has a direct bearing on their efficacy to implement ICDS at the ground level. This chapter attempts to analyse the same.

### Educational Background of AWWs

As per schematic pattern of ICDS, an AWW should be matriculate. Educational background of AWW receives much significance, especially when she is expected to carry out multidimensional tasks, either directly or indirectly related with ICDS, within stipulated time frame. Data in this regard are presented in **Table 3.1**.

**Table 3.1: Educational Background of AWWs\***

State/UT	No of AWWs in Position	Under Matric	%	Metric	%	10+2	%	Graduate and above	%
Andhra Pradesh	90	6	6.67	31	34.44	24	26.67	29	32.22
Arunachal Pradesh	40	25	62.50	7	17.50	8	20.00	0	0.00
Assam	80	11	13.75	34	42.50	16	20.00	15	18.75
Chhattisgarh	75	12	16.00	11	14.67	28	37.33	21	28.00
Delhi	5	0	0.00	0	0.00	1	20.00	4	80.00
Gujarat	90	17	18.89	18	20.00	28	31.11	24	26.67
Haryana	10	3	30.00	2	20.00	4	40.00	0	0.00
Himachal Pradesh	45	2	4.44	13	28.89	16	35.56	14	31.11
Karnataka	50	3	6.00	26	52.00	16	32.00	2	4.00
Kerala	70	1	1.43	39	55.71	22	31.43	6	8.57
Madhya Pradesh	103	4	3.88	12	11.65	26	25.24	60	58.25
Maharashtra	54	2	3.70	16	29.63	22	40.74	13	24.07
Meghalaya	45	20	44.44	9	20.00	13	28.89	1	2.22
Mizoram	15	6	40.00	8	53.33	1	6.67	0	0.00
Odisha	15	2	13.33	5	33.33	1	6.67	6	40.00
Punjab	102	1	0.98	28	27.45	32	31.37	40	39.22
Pudducherry	43	0	0.00	13	30.23	16	37.21	13	30.23
Rajasthan	60	20	33.33	12	20.00	7	11.67	21	35.00
Sikkim	70	23	32.86	8	11.43	19	27.14	19	27.14
Tamil Nadu	90	14	15.56	50	55.56	19	21.11	5	5.56
Telangana	35	4	11.43	9	25.71	10	28.57	11	31.43
Tripura	25	8	32.00	14	56.00	1	4.00	1	4.00
Uttar Pradesh	219	13	5.94	26	11.87	62	28.31	113	51.60
Uttarakhand	83	3	3.61	10	12.05	16	19.28	54	65.06
West Bengal	59	8	13.56	24	40.68	17	28.81	8	13.56
<b>Total</b>	<b>1573</b>	<b>208</b>	<b>13.22</b>	<b>425</b>	<b>27.02</b>	<b>425</b>	<b>27.02</b>	<b>481</b>	<b>30.58</b>

\*Note: Total may not come to the hundred per cent because rest of AWWs were illiterate or no responses.



It is observed from **Table 3.1** that 27.02 per cent of AWWs were matriculate or 10+2 passed (each). About 30.58 per cent were Graduates or postgraduates. There were 13.22 per cent of AWWs below matric. Eighty per cent of the AWWs from the NCT of Delhi were found qualified as graduate or Post graduate followed by AWWs from Uttarakhand (65.06%), Madhya Pradesh (58.25%) and Uttar Pradesh (51.60%).

### Local Area Belongingness of AWWs

While detailing out various essentialities to become AWW, it has been mentioned in the ICDS scheme that AWW has to be selected from within the village local community so that she should not only be familiar with the social norms prevailing in the area but can also devote much of her time at the AWC without carrying anxiety of travelling. Data pertaining to this regard are presented in **Table 3.2**.

**Table 3.2: Number of AWWs belonging to the same village/Local Area**

States	No of AWCs	No of AWWs in Position	No. of AWWs belonging to the same village/Local Area	%
Andhra Pradesh	60	60	55	91.67
Arunachal Pradesh	35	35	27	77.14
Assam	80	80	64	80.00
Chhattisgarh	70	70	66	94.29
Delhi	5	5	0	0.00
Gujarat	75	75	60	80.00
Haryana	10	10	10	100.00
Himachal Pradesh	5	5	5	100.00
Karnataka	45	45	36	80.00
Madhya Pradesh	103	103	92	89.32
Maharashtra	54	54	9	16.67
Meghalaya	45	45	41	91.11
Mizoram	10	10	9	90.00
Odisha	10	10	9	90.00
Punjab	87	87	81	93.10
Rajasthan	20	20	19	95.00
Sikkim	10	10	10	100.00
Telangana	35	35	35	100.00
Tripura	10	10	9	90.00
Uttar Pradesh	200	200	167	83.50
Uttarakhand	15	13	12	92.31
West Bengal	20	20	16	80.00
<b>Total</b>	<b>1004</b>	<b>1002</b>	<b>832</b>	<b>83.03</b>

It is evident from **Table 3.2** that 83.03 per cent of AWWs belong to the same area/locality where they were operating AWC, only around 17 per cent of AWWs do not belong to Local Area. All the AWWs from the States of Haryana, Himachal Pradesh, Sikkim and Telengana belonged to the Local Area. Only 16.67 per cent of AWWs belong to the same locality where AWCs exist in the state of Maharashtra. No AWWs in the NCT of Delhi were found residing in the same locality.

### Appointment Status and Training of ICDS Functionaries



For effective implementation of ICDS programme, the sanctioned number of posts of ICDS functionaries needs to be filled up. Under Comprehensive Training Strategy of ICDS, all categories of ICDS functionaries (CDPOs, ACDPOs, Supervisors and AWWs) are required to undergo Job Training Course (JTC) with the broad objectives to make them understand their role in implementation of the scheme and to enable them to develop appropriate skills necessary for implementation of various activities and services planned under the scheme. Training of ICDS functionaries aims at strengthening their capabilities

not only to organise the ICDS activities effectively but also to understand the expectations of beneficiaries and to work with community to improve child care and behavioural practices. Adequate provisions have been made in ICDS for training of grass root functionaries. Besides job training, each ICDS functionary is also required to undergo refresher training once in two years – so as to enhance and sharpen their capacities by imparting new knowledge and skills to improve their efficiency for realizing the ICDS objectives and goals. The broad objectives of the refresher course includes sharing of experiences in implementing ICDS Programme; making the ICDS functionaries aware about recent developments and guidelines in ICDS and to update their knowledge in various core areas of early childhood care and education. Data with regard to training status of ICDS functionaries are presented in **Table 3.3 to Table 3.5**.

**Table 3.3: Number of AWWs received Job and Refresher Training**

State/UT	NO of AWWs in Position	No. of AWWs received Job Training	%	No. of AWWs received Refresher Training	%
Andhra Pradesh	90	89	98.89	77	85.56
Arunachal Pradesh	40	33	82.50	23	57.50
Assam	80	75	93.75	36	45.00
Chhattisgarh	75	73	97.33	58	77.33
Delhi	5	5	100.00	2	40.00
Gujarat	90	81	90.00	69	76.67
Haryana	10	10	100.00	7	70.00
Himachal Pradesh	45	40	88.89	26	57.78

Karnataka	50	50	100.00	43	86.00
Kerala	70	70	100.00	54	77.14
Madhya Pradesh	103	94	91.26	79	76.70
Maharashtra	54	50	92.59	41	75.93
Meghalaya	45	43	95.56	43	95.56
Mizoram	15	11	73.33	6	40.00
Odisha	15	15	100.00	14	93.33
Punjab	102	102	100.00	84	82.35
Puducherry	43	36	83.72	29	67.44
Rajasthan	60	60	100.00	50	83.33
Sikkim	70	67	95.71	57	81.43
Tamil Nadu	90	87	96.67	64	71.11
Telangana	35	35	100.00	31	88.57
Tripura	25	25	100.00	8	32.00
Uttar Pradesh	219	215	98.17	180	82.19
Uttarakhand	83	70	84.34	42	50.60
West Bengal	59	59	100.00	28	47.46
<b>Total</b>	<b>1573</b>	<b>1495</b>	<b>95.04</b>	<b>1151</b>	<b>73.17</b>

It is evident from **Table 3.3** that 4.96 per cent of AWWs positions were lying vacant. As far as Job Training is concerned majority (95.04%) of AWWs of visited AWCs were Job trained. State-specific data shows that all (100%) AWWs in the states of Haryana, Karnataka, Kerala, Odisha, Punjab, Rajasthan, Telangana, Tripura, West Bengal and NCT of Delhi had received JTC. Less than three fourth (73.33%) of AWWs from the state of Mizoram were Job trained.

Only 26.83 per cent of AWWs had received refresher training. State-specific data shows that the states like Meghalaya and Odisha majority (above 90%) of the AWWs were found Refresher Trained. Less than half of the AWWs from the states of West Bengal (47.46%), Mizoram & NCT of Delhi (40% each) and Tripura (32%) have received Refresher training. The data on **supervisors** Position receiving job and refresher training is depicted below in **Table 3.4**

**Table 3.4: Number of Supervisors in Position, received Job and Refresher Training**

State/UT	NO of ICDS Projects	Post sanctioned	No. of Supervisors in Position	%	No. of Supervisors received Job Training	%	No. of Supervisors received Refresher Training	%
Andhra Pradesh	18	159	110	69.18	83	75.45	47	42.73
Arunachal Pradesh	8	30	19	63.33	10	52.63	5	26.32
Assam	16	127	117	92.13	62	52.99	26	22.22
Chhattisgarh	16	144	132	91.67	117	88.64	94	71.21
Delhi	1	4	3	75.00	1	33.33	1	33.33
Gujarat	18	112	98	87.50	77	78.57	71	72.45

Haryana	2	12	12	100.00	12	100.00	8	66.67
Himachal Pradesh	14	87	47	54.02	27	57.45	27	57.45
Karnataka	10	90	36	40.00	36	100.00	35	97.22
Kerala	14	65	55	84.62	44	80.00	14	25.45
Madhya Pradesh	23	131	123	93.89	62	50.41	42	34.15
Maharashtra	14	95	82	86.32	78	95.12	75	91.46
Meghalaya	8	42	42	100.00	39	92.86	30	71.43
Mizoram	3	10	7	70.00	7	100.00	5	71.43
Odisha	3	31	22	70.97	22	100.00	21	95.45
Punjab	17	108	87	80.56	67	77.01	54	62.07
Pudducherry	8	50	8	16.00	6	75.00	6	75.00
Rajasthan	13	95	71	74.74	51	71.83	47	66.20
Sikkim	15	63	62	98.41	50	80.65	43	69.35
Tamil Nadu	6	15	10	66.67	6	60.00	2	20.00
Telangana	7	71	53	74.65	51	96.23	35	66.04
Tripura	5	26	19	73.08	6	31.58	10	52.63
Uttar Pradesh	42	335	211	62.99	206	97.63	177	83.89
Uttarakhand	17	139	128	92.09	83	64.84	51	39.84
West Bengal	13	160	57	35.63	56	98.25	56	98.25
<b>Total</b>	<b>311</b>	<b>2201</b>	<b>1611</b>	<b>73.19</b>	<b>1259</b>	<b>78.15</b>	<b>982</b>	<b>60.96</b>

It is evident from the above **Table** that more than one fourth (26.81%) of Supervisor's posts were lying vacant across the country. Many posts of ICDS Supervisors were lying vacant in the States of Puducherry (84%), West Bengal (64.37%) and Karnataka (60%). 100 per cent posts were filled in the visited ICDS Projects of the states of Haryana and Meghalaya.

As per the above table 78.15 per cent of ICDS Supervisors had already received job training and 60.96 per cent received refresher training. All the supervisors from the states of Haryana, Karnataka, Mizoram and Odisha are Job trained. Supervisors from the state of Tripura and NCT of Delhi needs to be Job trained as only 31.58 per cent and 33.33 per cent were found Job trained. If we see the state specific data of the visited projects it shows that in the states like Tamil Nadu, Kerala, Arunachal Pradesh, and NCT of Delhi most of the supervisors 80 per cent, 74.55 per cent, 73.68 per cent and 66.67 per cent are yet to receive refresher training.

**The Child Development Project Officer** at the block level is the principal executive functionary. An important responsibility of CDPO is to supervise and guide other functionaries of ICDS (Supervisors and AWWs). CDPOs also gives supportive inputs to resolve day to day problems and impact continuing training to upgrade the skills of the functionaries along with other responsibilities. The data related to the position of CDPOs and their training status is depicted below in **Table 3.5**.

**Table 3.5: Number of CDPOs in Position, received Job and Refresher Training**

State/UT	CDPOs post Sanctioned	No. of CDPO's in Position	%	No. of CDPOs received Job Training	%	No. of CDPOs received Refresher Training	%
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Andhra Pradesh	18	17	94.44	14	82.35	6	35.29
Arunachal Pradesh	8	8	100	8	100.00	7	87.50
Assam	16	14	87.5	12	85.71	9	64.29
Chhattisgarh	16	13	81.25	7	53.85	5	38.46
Delhi	1	1	100	0	0.00	0	0.00
Gujarat	18	13	72.22	7	53.85	5	38.46
Haryana	2	2	100.00	1	50.00	1	50.00
Himachal Pradesh	14	13	92.86	13	100.00	10	76.92
Karnataka	10	6	60.00	4	66.67	4	66.67
Kerala	14	13	92.86	9	69.23	5	38.46
Madhya Pradesh	23	20	86.96	8	40.00	3	15.00
Maharashtra	14	3	21.43	3	100.00	1	33.33
Meghalaya	8	8	100.00	8	100.00	6	75.00
Mizoram	3	2	66.67	1	50.00	1	50.00
Odisha	3	3	100.00	2	66.67	0	0.00
Punjab	17	16	94.12	9	56.25	6	37.50
Pudducherry	8	8	100.00	5	62.50	7	87.50
Rajasthan	13	8	61.54	2	25.00	0	0.00
Sikkim	15	15	100.00	13	86.67	9	60.00
Tamil Nadu	6	6	100.00	2	33.33	2	33.33
Telangana	7	7	100.00	7	100.00	5	71.43
Tripura	5	5	100.00	5	100.00	5	100.00
Uttar Pradesh	42	28	66.67	18	64.29	14	50.00
Uttarakhand	17	13	76.47	4	30.77	4	30.77
West Bengal	13	11	84.62	9	81.82	5	45.45
<b>Total</b>	<b>311</b>	<b>253</b>	<b>81.35</b>	<b>171</b>	<b>67.59</b>	<b>120</b>	<b>47.43</b>

It is evident from **Table 3.5** that 81.35 per cent of CDPOs were found in position. All the CDPOs in the visited projects of the states of Haryana, Meghalaya, Odisha, Puducherry, Sikkim, Tamil Nadu, Telangana and Tripira were in position. In the state of Maharashtra only three out of fourteen sanctioned CDPOs were in position and five posts of CDPOs were temporarily given to others. Status of receiving Job training of the CDPOs shows that all the CDPOs were Job trained in the states of Himachal Pradesh, Maharashtra, Meghalaya, Telangana. In the state of Tripura all the CDPOs of visited Projects were found in position and all of them were Job Trained as well as Refresher Trained. In comparison to Job training only 47.43 per cent of the CDPOs recieved refresher training.

# Anganwadi Services

## Service Delivery

### Status



The present chapter assesses the extent to which the package of services under Umbrella ICDS is delivered to benefit various target groups.

### Supplementary Nutrition:

A package of various Nutrition services is being provided through Anganwadi Services. One of the objectives of this scheme is to combat malnutrition among children under 6 years, pregnant women, Lactating mothers and adolescent girls. Supplementary Nutrition equivalent to 500 calories and 12-15 gram protein is provided to normal children under 6 years and 800 calories and 20-25 gram protein to severely underweight children under 6 years. Pregnant women, Lactating mothers and adolescent girls are given Supplementary Nutrition meeting 600 calories and 18-20 gram protein. These feeding norms have also been endorsed by the Supreme Court in order dated 22.04.2009. Supplementary nutrition is given for 300 days in a year at a revised cost norms (MWCD letter dated 08.12.2017) of Rs. 8.00 per beneficiary per day for normal children and Rs. 9.50 per beneficiary per day for pregnant/nursing mothers/adolescent girls and Rs. 12.00 to severely malnourished children.

### Beneficiaries Availing Supplementary Nutrition:

**Table 4.1: Children 6 months to 3 Years Availing Supplementary Nutrition**

States	No. of AWCs	Total No. of Children	Number of Children Registered		Number of Children Actual Availing	
			N	%	N	%
Andhra Pradesh	90	3455	3260	94.36	3209	98.44
Arunachal Pradesh	40	523	471	90.06	469	99.58
Assam	80	1782	1657	92.99	1481	89.38
Chhattisgarh	75	2417	2376	98.30	2269	95.50
Delhi	5	182	133	73.08	124	93.23
Gujarat	90	3873	3819	98.61	3129	81.93
Haryana	10	500	360	72.00	159	44.17
Himachal Pradesh	45	940	869	92.45	777	89.41
Karnataka	50	1592	1457	91.52	1457	100.00
Kerala	70	3056	1796	58.77	1647	91.70
Madhya Pradesh	103	5920	5481	92.58	4791	87.41
Maharashtra	54	1272	1128	88.68	1038	92.02
Meghalaya	45	1779	1718	96.57	1585	92.26
Mizoram	15	667	644	96.55	604	93.79
Odisha	15	409	407	99.51	405	99.51
Punjab	102	3695	3197	86.52	1903	59.52
Pudducherry	43	1746	1296	74.23	1296	100.00
Rajasthan	60	2566	2194	85.50	2002	91.25
Sikkim	70	1642	1088	66.26	1031	94.76
Tamil Nadu	90	3118	3009	96.50	2958	98.31
Telangana	35	2164	1694	78.28	1564	92.33

Tripura	25	399	399	100.00	397	99.50
Uttar Pradesh	219	16471	15732	95.51	14200	90.26
Uttarakhand	85	2949	2764	93.73	2611	94.46
West Bengal	59	3358	3333	99.26	2880	86.41
Total	1575	66475	60282	90.68	53986	89.56

It is evident from **table 4.1** that 90.68 per cent of the children (6 months to 3 years) were registered and out of those registered 89.56 per cent were availing the supplementary nutrition programme (SNP). All (100%) the registered children from the states of Karnataka, and Pudducherry were observed availing SN. In rest of the visited AWCs from different states except Haryana (44.17%) and Punjab (59.51%) majority (80% and above) of children (6 months to 3 years) were found availing SNP.

**Table 4.2: Number of Children in age group of Children 3 Years to 6 years availing Supplementary Nutrition**

States	No. of AWCs	Total No. of Children	Number of Children Registered for SN		Number of Children Actual Availing SN	
			N	%	N	%
Andhra Pradesh	90	2868	2260	78.80	1898	83.98
Arunachal Pradesh	40	628	476	75.80	453	95.17
Assam	80	2344	1825	77.86	1544	84.60
Chhattisgarh	75	2380	1912	80.34	1381	72.23
Delhi	5	154	139	90.26	84	60.43
Gujarat	90	3928	3810	97.00	3217	84.44
Haryana	10	645	645	100.00	166	25.74
Himachal Pradesh	45	907	617	68.03	468	75.85
Karnataka	50	1275	911	71.45	887	97.37
Kerala	70	4039	2018	49.96	1837	91.03
Madhya Pradesh	103	6771	5936	87.67	3611	60.83
Maharashtra	54	1636	1437	87.84	1397	97.22
Meghalaya	45	2042	1821	89.18	1345	73.86
Mizoram	15	640	399	62.34	343	85.96
Odisha	15	505	451	89.31	389	86.25
Punjab	102	4353	2509	57.64	1196	47.67
Pudducherry	43	1343	216	16.08	58	26.85
Rajasthan	60	3313	1530	46.18	1245	81.37
Sikkim	70	1837	759	41.32	717	94.47
Tamil Nadu	90	3060	2399	78.40	2367	98.67
Telangana	35	2199	822	37.38	640	77.86
Tripura	25	566	517	91.34	500	96.71
Uttar Pradesh	219	16442	13985	85.06	9167	65.55
Uttarakhand	85	1703	1478	86.79	1331	90.05
West Bengal	59	4283	4125	96.31	3102	75.20
Total	1575	69861	52997	75.86	39343	74.24

The **Table 4.2** reveals that about three fourth (75.86%) of children (3-6 years) were registered under SNP and out of those registered only less than three fourth (74,24%) of the children were availing supplementary nutrition. As data shows that non of the visited AWCs All the registered children were found availing SN and there is a need for improvement.

**Table 4.3: Supplementary Nutrition Availed by Pregnant Women**

States	No. of AWCs	Total No. of Pregnant Women	Number of Pregnant Women registered		Number of Pregnant Women Availing	
			N	%	N	%
Andhra Pradesh	90	809	783	96.79	765	97.70
Arunachal Pradesh	40	72	68	94.44	67	98.53
Assam	80	318	317	99.69	299	94.32
Chhattisgarh	75	468	465	99.36	439	94.41
Delhi	5	35	32	91.43	28	87.50
Gujarat	90	927	923	99.57	867	93.93
Haryana	10	96	89	92.71	48	53.93
Himachal Pradesh	45	146	140	95.89	130	92.86
Karnataka	50	379	355	93.67	345	97.18
Kerala	70	632	422	66.77	350	82.94
Madhya Pradesh	103	1166	1144	98.11	1010	88.29
Maharashtra	54	320	307	95.94	290	94.46
Meghalaya	45	325	323	99.38	320	99.07
Mizoram	15	106	106	100.00	106	100.00
Odisha	15	95	95	100.00	95	100.00
Punjab	102	698	675	96.70	470	69.63
Pudducherry	43	342	297	86.84	289	97.31
Rajasthan	60	683	563	82.43	508	90.23
Sikkim	70	204	203	99.51	193	95.07
Tamil Nadu	90	840	831	98.93	801	96.39
Telangana	35	444	363	81.76	302	83.20
Tripura	25	94	94	100.00	94	100.00
Uttar Pradesh	219	3272	3150	96.27	2927	92.92
Uttarakhand	85	1220	584	47.87	521	89.21
West Bengal	59	752	733	97.47	615	83.90
<b>Total</b>	<b>1575</b>	<b>14443</b>	<b>13062</b>	<b>90.44</b>	<b>11879</b>	<b>90.94</b>

The data as contained in **Table 4.3** shows that out of 13062 registered 11897 (90.94%) of pregnant women were actually availing SNP. All (100%) Pregnant women in the area were registered in AWCs and also availing SN from the states of Mizoram, Odisha and Tripura. More than 80 per cent and above registered Pregnant women were found availing SN in majority of AWCs in most of the states. Only in the states of Haryana and Punjab 53.93 per cent and 69.63 per cent of registered women were observed availing SN.

**Table 4.4: Supplementary Nutrition Availed by Lactating Mothers**

States	No. of AWCs	Total No. of Lactating mothers	Number of Lactating mothers registered		Number of Lactating mothers Availing	
			N	%	N	%



Andhra Pradesh	90	763	747	97.90	723	96.79
Arunachal Pradesh	40	97	93	95.88	88	94.62
Assam	80	341	340	99.71	313	92.06
Chhattisgarh	75	532	528	99.25	520	98.48
Delhi	5	38	32	84.21	28	87.50
Gujarat	90	892	888	99.55	831	93.58
Haryana	10	79	74	93.67	48	64.86
Himachal Pradesh	45	152	150	98.68	140	93.33
Karnataka	50	427	408	95.55	408	100.00
Kerala	70	588	343	58.33	299	87.17
Madhya Pradesh	103	1105	1071	96.92	940	87.77
Maharashtra	54	322	295	91.61	291	98.64
Meghalaya	45	349	349	100.00	346	99.14
Mizoram	15	147	147	100.00	147	100.00
Odisha	15	85	85	100.00	85	100.00
Punjab	102	689	652	94.63	463	71.01
Pudducherry	43	355	315	88.73	314	99.68
Rajasthan	60	657	545	82.95	517	94.86
Sikkim	70	288	278	96.53	261	93.88
Tamil Nadu	90	626	621	99.20	614	98.87
Telangana	35	406	320	78.82	259	80.94
Tripura	25	83	83	100.00	83	100.00
Uttar Pradesh	219	3396	3297	97.08	3072	93.18
Uttarakhand	85	607	605	99.67	564	93.22
West Bengal	59	717	714	99.58	602	84.31
<b>Total</b>	<b>1575</b>	<b>13741</b>	<b>12980</b>	<b>94.46</b>	<b>11956</b>	<b>92.11</b>

It is evident from **table 4.4** that majority (92.11%) of the registered lactating mothers were found availing SNP. Though 93.67 per cent of lactating mothers were registered in the state of Haryana, however, out of those registered only 64.86 per cent was availing supplementary nutrition needs attention. In the state of Mizoram, Odisha and Tripura all the lactating mothers registered as well as availing SN. In the states of Haryana and Punjab only 64.86 per cent and 71.01 per cent of registered Lactating mothers were found availing SNP, so the lactating mothers may also needs encouragement by the AWWs in these states.

**Table 4.5: AWCs Distributing THR to Children 6 Months-3 Years**

States	No. of AWCs	No. of AWCs providing	
		THR	%
Andhra Pradesh	90	90	100
Arunachal Pradesh	40	10	25
Assam	80	0	0
Chhattisgarh	75	60	80
Delhi	5	5	100
Gujarat	90	88	97.78
Haryana	10	0	0.00
Himachal Pradesh	45	44	97.78
Karnataka	50	49	98.00

Kerala	70	70	100.00
Madhya Pradesh	103	93	90.29
Maharashtra	54	34	62.96
Meghalaya	45	43	95.56
Mizoram	15	10	66.67
Odisha	15	14	93.33
Punjab	102	0	0.00
Pudducherry	43	43	100.00
Rajasthan	60	53	88.33
Sikkim	70	45	64.29
Tamil Nadu	90	84	93.33
Telangana	35	35	100.00
Tripura	25	0	0.00
Uttar Pradesh	219	213	97.26
Uttarakhand	85	80	94.12
West Bengal	59	21	35.59
<b>Total</b>	<b>1575</b>	<b>1147</b>	<b>72.83</b>

Note: Rest of the AWCs either distributing HCF or Morning Snacks or there was an interruption in SN

The data as contained in above table depicts the status of supplementary nutrition being distributed to the children of six months to three years, in the form of Take Home Ration (THR) as per MWCD GOI guidelines. THR was being distributed in less than three fourth (72.83%) of AWCs located across the country. All of the AWCs (100%) in the States of Andhra Pradesh, Delhi, Kerala, Puducherry and Telangana were found distributing THR to the children of 6 months to 3 years. In rest of the states it was found that AWCs were either distributing HCF or Morning snacks or there was no SN for the children of this age group due to interruption in supply of THR.

**Table 4.6: AWCs Distributing Supplementary Nutrition (Morning Snacks) to Children 3 -6 years**

States	Total No. of AWCs	Morning Snacks		HCM	
		No. of AWCs	%	No. of AWCs	%
Andhra Pradesh	90	86	95.56	89	98.89
Arunachal Pradesh	40	15	37.50	35	87.50
Assam	80	38	47.50	42	52.50
Chhattisgarh	75	72	96.00	75	100.00
Delhi	5	5	100.00	5	100.00
Gujarat	90	90	100.00	90	100.00
Haryana	10	10	100.00	10	100.00
Himachal Pradesh	45	24	53.33	40	88.89
Karnataka	50	50	100.00	50	100.00
Kerala	70	70	100.00	70	100.00
Madhya Pradesh	103	67	65.05	68	66.02
Maharashtra	54	34	62.96	34	62.96
Meghalaya	45	31	68.89	40	88.89
Mizoram	15	15	100.00	14	93.33
Odisha	15	14	93.33	14	93.33
Punjab	102	87	85.29	90	88.24
Pudducherry	43	42	97.67	42	97.67
Rajasthan	60	42	70.00	60	100.00
Sikkim	70	55	78.57	46	65.71

Tamil Nadu	90	9	10.00	74	82.22
Telangana	35	35	100.00	35	100.00
Tripura	25	23	92.00	22	88.00
Uttar Pradesh	219	206	94.06	40	18.26
Uttarakhand	85	75	88.24	77	90.59
West Bengal	59	48	81.36	33	55.93
<b>Total</b>	<b>1575</b>	<b>1243</b>	<b>78.92</b>	<b>1195</b>	<b>75.87</b>

It is evident from **Table 4.6** that 78.92 per cent of AWCs were distributing morning snacks and 75.87 per cent of the visited AWCs were found distributing HCF to the children 3- 6 years of age. All (100%) the states of Gujarat, Haryana, Karnataka, Kerala, Telangana and NCT of Delhi were found distributing MS and HCF to the children. Some states were observed distributing Milk, Egg, Seasonal Fruits etc in the form of Morning snacks.

**Table 4.7: AWCs Distributing THR to Pregnant & Nursing Mothers**

States	Total No. of AWCs	Pregnant and Nursing Mothers	
		THR	%
Andhra Pradesh	90	53	58.89
Arunachal Pradesh	40	2	5.00
Assam	80	19	23.75
Chhattisgarh	75	64	85.33
Delhi	5	0	0.00
Gujarat	90	90	100.00
Haryana	10	0	0.00
Himachal Pradesh	45	28	62.22
Karnataka	50	49	98.00
Kerala	70	0	0.00
Madhya Pradesh	103	89	86.41
Maharashtra	54	34	62.96
Meghalaya	45	36	80.00
Mizoram	15	8	53.33
Odisha	15	14	93.33
Punjab	102	10	9.80
Pudducherry	43	0	0.00
Rajasthan	60	40	66.67
Sikkim	70	48	68.57
Tamil Nadu	90	2	2.22
Telangana	35	0	0.00
Tripura	25	0	0.00
Uttar Pradesh	219	176	80.37
Uttarakhand	85	69	81.18
West Bengal	59	0	0.00
<b>Total</b>	<b>1575</b>	<b>831</b>	<b>52.76</b>

The data as contained in **Table 4.7** shows that only 52.76 per cent of the total selected AWCs were distributing THR to the pregnant and nursing mothers as



recommended in the ICDS guidelines issued by MWCD, GOI. Though all AWCs (100%) from the State of Gujarat were found distributing THR to the Pregnant and Lactating mothers. None of the AWCs from the states of Haryana, Kerala, Puducherry, Telangana and Tripura were found distributing THR to the P & L mothers. Those AWCs were found distributing either Ready to eat food or HCF to the P & L mothers. In rest of the AWCs due to interruption no SN was being distributed to the beneficiaries.

#### Interruption in Distribution of Supplementary Nutrition:

As per norms, supplementary nutrition has to be delivered 300 days in a year. CDPOs were asked to report the interruption of supplementary food. This was counter checked with available records. The data in this regard are presented in **Table 4.8**:

**Table 4.8: Interruption in Supplementary Nutrition in Last 6 Months**

States/UTs	Total No. of AWCs	AWCs having Interruption in Supplementary Nutrition	
		No.	%
Andhra Pradesh	90	16	17.78
Arunachal Pradesh	40	15	37.50
Assam	80	55	68.75
Chhattisgarh	75	11	14.67
Delhi	5	0	0.00
Gujarat	90	39	43.33
Haryana	10	5	50.00
Himachal Pradesh	45	13	28.89
Karnataka	50	5	10.00
Kerala	70	8	11.43
Madhya Pradesh	103	12	11.65
Maharashtra	54	13	24.07
Meghalaya	45	4	8.89
Mizoram	15	1	6.67
Odisha	15	3	20.00
Punjab	102	44	43.14
Pudducherry	43	6	13.95
Rajasthan	60	20	33.33
Sikkim	70	47	67.14
Tamil Nadu	90	20	22.22
Telangana	35	14	40.00
Tripura	25	0	0.00
Uttar Pradesh	219	90	41.10
Uttarakhand	85	38	44.71
West Bengal	59	6	10.17
<b>Total</b>	<b>1575</b>	<b>485</b>	<b>30.79</b>

The data on interruption of supplementary nutrition as presented in **Table 4.8** reveals that no interruption was found in more than two third (69.21%) of the AWCs during past six months in the distribution of supplementary nutrition. The highest interruption was found in the States of Assam (68.75%) followed by Sikkim (67.14%). No interruption in distribution of

supplementary nutrition was observed in any of the AWCs located in the State of Tripura and NCT of Delhi as well.

**Table 4.9: Causes of Interruption in delivery of Supplementary Nutrition**

Multiple Answer

AWCs Having Interruption	Shortage of supply	Lack of Fund	Transport Problem	*Any Other	AWW do not Know the Reason
30.79%	82.17%	22.73%	0.70%	5.59%	1.21%

\*Note: Any Other = (AWW's Strike, Polio Programme , AWH in Sick leave, Rain & Flood, Gas cylinder, Shortage , School Closed etc), Rest no Response

The above data depicts the causes of interruption in supplementary nutrition. The reasons for cause are shortage of supply in majority (82.17%) followed by Lack of funds (22.73%) of the AWCs. All the AWCs in the State of Assam, Sikkim, Punjab, Puducherry, Rajasthan, Telangana, Uttar Pradesh, Uttarakhand and West Bengal were having interruption in distribution of SN due to shortage of supply. In the States of Uttarakhand (78.79%) and West Bengal (80%) the reason for disruption was also lack of fund in most of the AWCs. Other reasons like Rain and flood, absence of staff, AWWs strike, helper on sick leave, Gas cylinder shortage etc. were observed in 5.59 per cent of the AWCs mostly in the states of Andhra Pradesh, Chhattisgarh, Pudducherry and Rajasthan etc.

#### Acceptability, Quantity and Quality of Supplementary Nutrition at AWCs:

The food supplements under ICDS needs to be palatable and acceptable to mothers and children. It has to be nutritious and low cost. Recipes need to be simple and should have minimum number of ingredients. AWWs were asked to give a feedback on the acceptability of food items of supplementary nutrition to the community.

**Table 4.10: Acceptability of Supplementary Nutrition by Beneficiaries of ICDS**

States/UTs	Total No. of AWCs	No. of AWCs having acceptability of SN	%
Andhra Pradesh	90	86	95.56
Arunachal Pradesh	40	36	90.00
Assam	80	48	60.00
Chhattisgarh	75	66	88.00
Delhi	5	5	100.00
Gujarat	90	85	94.44
Haryana	10	9	90.00
Himachal Pradesh	45	42	93.33
Karnataka	50	46	92.00
Kerala	70	67	95.71
Madhya Pradesh	103	98	95.15
Maharashtra	54	48	88.89
Meghalaya	45	41	91.11

Mizoram	15	15	100.00
Odisha	15	14	93.33
Punjab	102	95	93.14
Pudducherry	43	39	90.70
Rajasthan	60	55	91.67
Sikkim	70	70	100.00
Tamil Nadu	90	85	94.44
Telangana	35	35	100.00
Tripura	25	25	100.00
Uttar Pradesh	219	149	68.04
Uttarakhand	85	76	89.41
West Bengal	59	55	93.22
<b>Total</b>	<b>1575</b>	<b>1390</b>	<b>88.25</b>

The data concerning observations of CMU consultants on quality and quantity of supplementary nutrition being distributed in AWCs are presented in **Table 4.11**

**Table 4.11: Quality and Quantity of Supplementary Nutrition Distributed to the Beneficiaries in AWCs**

States/UTs	Total No. of AWCs	No. of AWCs providing good quality of SN	%	No. of AWCs providing adequate quantity of SN	%
Andhra Pradesh	90	87	96.67	83	92.22
Arunachal Pradesh	40	33	82.50	30	75.00
Assam	80	45	56.25	36	45.00
Chhattisgarh	75	65	86.67	62	82.67
Delhi	5	5	100.00	5	100.00
Gujarat	90	86	95.56	79	87.78
Haryana	10	10	100.00	7	70.00
Himachal Pradesh	45	19	42.22	22	48.89
Karnataka	50	47	94.00	44	88.00
Kerala	70	68	97.14	62	88.57
Madhya Pradesh	103	98	95.15	88	85.44
Maharashtra	54	48	88.89	39	72.22
Meghalaya	45	38	84.44	43	95.56
Mizoram	15	15	100.00	15	100.00
Odisha	15	14	93.33	14	93.33
Punjab	102	90	88.24	80	78.43
Pudducherry	43	39	90.70	37	86.05
Rajasthan	60	55	91.67	51	85.00
Sikkim	70	70	100.00	69	98.57
Tamil Nadu	90	85	94.44	78	86.67
Telangana	35	33	94.29	34	97.14

Tripura	25	25	100.00	24	96.00
Uttar Pradesh	219	144	65.75	191	87.21
Uttarakhand	85	72	84.71	70	82.35
West Bengal	59	55	93.22	56	94.92
Total	1575	1346	85.46	1319	83.75

As evident from **Table 4.10 and 4.11** acceptability of supplementary nutrition by ICDS beneficiaries had been reported in majority (88.25%) of the AWCs. Good Quality of SN in 85.46 per cent and adequate quantity in 83.75 per cent of the AWCs as reported by beneficiaries. It was found out that all the visited AWCs from the state of Mizoram and NCT of Delhi were distribution adequate quantity of good quality food which was acceptable to all the beneficiaries. In the states like Tripura and Sikkim all the visited AWCs were being distributing good quality of SN and that was acceptable to all the beneficiaries. As per the data, in the states of Assam and Himachal Pradesh there is a need to check the quality and quantity of supplementary nutrition because only less than half of the AWCs were found distributing good quality of SN in adequate quantity to the beneficiaries.

**Table 4.12: Availability of Utensils for Cooking and Serving of Supplementary Nutrition**

States	Total No. of AWCs	No. of AWCs having adequate availability of utensils for cooking	%	No. of AWCs having adequate availability of utensils for serving SN	%
Andhra Pradesh	90	83	92.22	74	82.22
Arunachal Pradesh	40	34	85.00	38	95.00
Assam	80	69	86.25	69	86.25
Chhattisgarh	75	66	88.00	56	74.67
Delhi	5	0	0.00	4	80.00
Gujarat	90	73	81.11	69	76.67
Haryana	10	8	80.00	8	80.00
Himachal Pradesh	45	37	82.22	36	80.00
Karnataka	50	45	90.00	44	88.00
Kerala	70	66	94.29	64	91.43
Madhya Pradesh	103	30	29.13	65	63.11
Maharashtra	54	37	68.52	39	72.22
Meghalaya	45	40	88.89	30	66.67
Mizoram	15	14	93.33	14	93.33
Odisha	15	14	93.33	14	93.33
Punjab	102	95	93.14	88	86.27
Pudducherry	43	29	67.44	24	55.81
Rajasthan	60	40	66.67	49	81.67
Sikkim	70	64	91.43	66	94.29
TN	90	81	90.00	83	92.22
Telangana	35	19	54.29	29	82.86
Tripura	25	25	100.00	25	100.00
Uttar Pradesh	219	133	60.73	104	47.49

Uttarakhand	85	62	72.94	65	76.47
West Bengal	59	53	89.83	37	62.71
<b>Total</b>	<b>1575</b>	<b>1217</b>	<b>77.27</b>	<b>1194</b>	<b>75.81</b>

It is evident from the **above Table 4.12** that the availability of adequate utensils for cooking and Serving of SN was found in all (100%) the AWCs in the State of Tripura. Data shows that more than three fourth (75.81%) of the AWCs were having adequate quantity of utensils for distributing SN to the children 3-6 years of age. The availability of serving utensils were found in less than half (47.49%) of the visited AWCs.

Adequate quantity of serving utensils must be ensured by all the State government in their AWCs.

### Growth Monitoring & Growth Promotion in AWCs

Growth Monitoring and promotion of children from birth to five years is one of the important components of the ICDS programme. Weight for age has been adopted as the method for assessment and improvement of nutritional status of children under the ICDS programme.

Children below six years of age have to be enlisted for supplementary nutrition on the basis of measuring weight for age. The Ministry of Women and Child Development and the Ministry of Health & Family Welfare have jointly introduced New WHO Child Growth Standards in the country for monitoring growth of children using the ICDS scheme with effect from 15 August 2008. The weight of the children has to be plotted on the growth charts so as to classify them under different nourishment zones. The data about availability of New WHO Child Growth charts are presented below.

**Table 4.13: a : Availability of Growth Charts**

States/UTs	Total No. of AWCs	No. of AWCs having availability of New WHO Child Growth Standards	%
Andhra Pradesh	90	82	91.11
Arunachal Pradesh	40	24	60.00
Assam	80	71	88.75
Chhattisgarh	75	64	85.33
Delhi	5	5	100.00
Gujarat	90	80	88.89
Haryana	10	10	100.00
Himachal Pradesh	45	45	100.00
Karnataka	50	47	94.00
Kerala	70	57	81.43
Madhya Pradesh	103	101	98.06
Maharashtra	54	54	100.00
Meghalaya	45	41	91.11
Mizoram	15	15	100.00
Odisha	15	14	93.33
Punjab	102	77	75.49
Pudducherry	43	30	69.77
Rajasthan	60	39	65.00
Sikkim	70	57	81.43

Tamil Nadu	90	79	87.78
Telangana	35	33	94.29
Tripura	25	25	100.00
Uttar Pradesh	219	167	76.26
Uttarakhand	85	68	80.00
West Bengal	59	59	100.00
Total	1575	1344	85.33

**Table 4.13:a:** reveals that the availability of New WHO Child Growth standards charts was not found in most (85.33%) of the visited AWCs. Though, all AWCs (100%) in the States of Haryana, Himachal Pradesh, Mizoram, Tripura, West Bengal and NCT of Delhi were having availability of New WHO Child Growth standards charts.

Majority of AWCs (more than 90%) in the state of Madhya Pradesh (98.06%), Telangana (94.29%), Karnataka (94%), Odisha (93.33%) and Andhra Pradesh & Meghalaya (91.11%) each were found having availability of New WHO Child Growth standards charts, however, the availability of New WHO Child Growth standards charts was found in only 60 per cent of the visited AWCs in the State of Arunachal Pradesh.

### Availability of Weighing Machines

The two types of scales being used in ICDS for weighing children are the 'Bar scale' and the 'Salter or Dial type scale'. Weighing Machines are also used in AWCs to weigh children as well as pregnant women and Lactating mothers. Weighing Pans are also used to weigh small infants.

**Table 4.13: b: Availability of Weighing Machines\***

States	Total No. of AWCs	Types of Weighing Scale											
		Infant Weighing				Children Weighing						If Scales not available	
		Salter		Weighing Pan		Bar Scale		Weighing Machine (E)		MUCA Tape		Any Other	
		N	%	N	%	N	%	N	%	N	%	N	%
Andhra Pradesh	60	50	83.33	11	18.33	5	8.33	23	38.33	7	11.67	2	3.33
Arunachal Pradesh	35	24	68.57	3	8.57	0	0.00	1	2.86	0	0.00	0	0.00
Assam	80	19	23.75	7	8.75	3	3.75	17	21.25	2	2.50	2	2.50
Chhattisgarh	70	58	82.86	13	18.57	16	22.86	48	68.57	29	41.43	0	0.00
Delhi	5	1	20.00	0	0.00	0	0.00	4	80.00	0	0.00	0	0.00
Gujarat	75	61	81.33	30	40.00	2	2.67	57	76.00	31	41.33	0	0.00
Haryana	10	10	100.00	0	0.00	0	0.00	3	30.00	0	0.00	0	0.00
Himachal Pradesh	5	3	60.00	0	0.00	0	0.00	2	40.00	0	0.00	0	0.00
Karnataka	45	44	97.78	5	11.11	0	0.00	20	44.44	5	11.11	0	0.00
Madhya Pradesh	103	99	96.12	21	20.39	0	0.00	23	22.33	54	52.43	0	0.00
Maharashtra	54	34	62.96	5	9.26	0	0.00	2	3.70	4	7.41	0	0.00
Meghalaya	45	22	48.89	19	42.22	5	11.11	26	57.78	0	0.00	0	0.00
Mizoram	10	1	10.00	0	0.00	0	0.00	7	70.00	0	0.00	0	0.00
Odisha	10	9	90.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Punjab	87	27	31.03	19	21.84	2	2.30	60	68.97	2	2.30	1	1.15

Multiple Answer



Rajasthan	20	13	65.00	5	25.00	0	0.00	5	25.00	0	0.00	0	0.00
Sikkim	15	7	46.67	0	0.00	0	0.00	3	20.00	0	0.00	0	0.00
Tamil Nadu	90	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Telangana	35	30	85.71	1	2.86	0	0.00	3	8.57	1	2.86	0	0.00
Tripura	10	3	30.00	0	0.00	0	0.00	7	70.00	0	0.00	0	0.00
Uttar Pradesh	200	16	8.00	26	13.00	0	0.00	143	71.50	0	0.00	0	0.00
Uttarakhand	15	14	93.33	1	6.67	0	0.00	5	33.33	0	0.00	0	0.00
West Bengal	44	24	54.55	18	40.91	7	15.91	8	18.18	11	25.00	1	2.27
<b>Total</b>	<b>1123</b>	<b>557</b>	<b>49.60</b>	<b>184</b>	<b>16.38</b>	<b>40</b>	<b>3.56</b>	<b>467</b>	<b>41.59</b>	<b>146</b>	<b>13.00</b>	<b>6</b>	<b>0.53</b>

\*Note: The AWCs are 1123 because of the data received in new revised format

The above data shows that about half (49.60%) of AWCs were using Salter Scale to weigh infants. Weighing Pan was used in only less than one fifth (16.38%) of the AWCs. Availability of functional Adult weighing machines were found in 41.59 per cent of the AWCs as well as MUCA tape was available at 13 per cent and Bar scale in 3.56 per cent of the visited AWCs. All the visited AWCs from the State of Haryana followed by 97.78 per cent, 96.12 per cent, 93.33 per cent and 90 per cent of the AWCs from the states of Karnataka, Madhya Pradesh, Uttarakhand and Odisha were having availability of Salter scales. All the states should be equipped with functional weighing scales so that Growth monitoring of children should be done properly and on time.

#### Accuracy in Weighing and Plotting

The CMU consultants during data collection observed the Growth Monitoring Skills of AWW. The skills related to weighing and plotting were observed on five dimensions i.e. correct method of weighing, correct reading of weight, correctly filling of growth charts, correct plotting and correct interpretation. Similarly, skills related to interpretation and counseling were observed on criterion of classifying the children, explaining the weight to the mothers, advising mothers, referring for extra care and enrolment for double ration. organization of counseling sessions based on the growth monitoring, the AWW has to advise the mothers on appropriate actions depending upon the age of the child, the duration of no weight gain or weight loss and various possible causes of growth faltering of the child.

**Table 4.14: AWWs having Adequate Skills of Weighing Children Accurately on Growth Chart**

States	Total No of AWWs	Weighing Children Accurately		Plotting weight of children Accurately		Interpreting Properly		organising Counselling Sessions	
		No. of AWWs	%	No. of AWWs	%	No. of AWWs	%	No. of AWWs	%
Andhra Pradesh	90	87	96.67	79	87.78	78	86.67	81	90
Arunachal Pradesh	40	25	62.50	13	32.50	11	27.50	10	25
Assam	80	69	86.25	59	73.75	60	75.00	44	55
Chhattisgarh	75	65	86.67	41	54.67	45	60.00	54	72
Delhi	5	5	100.00	5	100.00	4	80.00	5	100
Gujarat	90	88	97.78	80	88.89	83	92.22	79	87.78
Haryana	10	10	100.00	10	100.00	10	100.00	8	80.00
Himachal Pradesh	45	23	51.11	16	35.56	17	37.78	27	60.00
Karnataka	50	46	92.00	46	92.00	46	92.00	45	90.00
Kerala	70	67	95.71	63	90.00	63	90.00	66	94.29
Madhya Pradesh	103	100	97.09	91	88.35	85	82.52	83	80.58

Maharashtra	54	54	100.00	52	96.30	50	92.59	48	88.89
Meghalaya	45	37	82.22	33	73.33	31	68.89	30	66.67
Mizoram	15	14	93.33	13	86.67	13	86.67	11	73.33
Odisha	15	13	86.67	13	86.67	13	86.67	9	60.00
Punjab	102	73	71.57	71	69.61	67	65.69	73	71.57
Pudducherry	43	29	67.44	28	65.12	28	65.12	26	60.47
Rajasthan	60	47	78.33	43	71.67	40	66.67	40	66.67
Sikkim	70	56	80.00	53	75.71	53	75.71	48	68.57
Tamil Nadu	90	86	95.56	69	76.67	74	82.22	80	88.89
Telangana	35	23	65.71	21	60.00	17	48.57	22	62.86
Tripura	25	21	84.00	20	80.00	18	72.00	14	56.00
Uttar Pradesh	219	167	76.26	120	54.79	133	60.73	107	48.86
Uttarakhand	83	72	86.75	71	85.54	68	81.93	67	80.72
West Bengal	59	50	84.75	54	91.53	56	94.92	52	88.14
<b>Total</b>	<b>1573</b>	<b>1327</b>	<b>84.36</b>	<b>1164</b>	<b>74.00</b>	<b>1163</b>	<b>73.94</b>	<b>1129</b>	<b>71.77</b>

The above table depicts that 84.36 per cent of AWWs were skilled in weighing children accurately, little less than three fourth (74%) were found skilled in plotting correct weight of children on New WHO child growth chart. 73.94 per cent of the AWW were skilled in counselling and 71.77 per cent were interpreting the weight of children accurately. Less than 70 per cent of the AWWs were unable to weigh, plot and council the weight of children in the states of Himachal Pradesh, Arunachal Pradesh and Telangana needs skill training on this New WHO Child Growth Standards Charts.

#### **ECCD & Non Formal Pre-School Education:**

Non formal Pre School Education component of ICDS is a very crucial component of package of services as it is directed towards providing and ensuring a natural, joyful and stimulating environment with emphasis on necessary inputs for optimal growth and development. This early learning component of ICDS is a significant input for providing a sound foundation for lifelong learning and development. The pre-school education component was assessed on the basis of programme planning, attendance of children, availability of facilities in the form of aids and materials, availability of PSE kit etc.

**Table 4.15: No. of Children Enrolled for Pre-School Education**

States/UTs	Total No. of AWCs	Total Population of Children 3-6 Years in AWC Area	Enrolment for PSE		Attendance PSE	
			N	%	N	%
Andhra Pradesh	90	2868	2260	78.80	1512	66.90
Arunachal Pradesh	40	628	476	75.80	385	80.88
Assam	80	2344	1825	77.86	1534	84.05
Chhattisgarh	75	2380	1912	80.34	1299	67.94
Delhi	5	154	139	90.26	68	48.92
Gujarat	90	3928	3810	97.00	2302	60.42
Haryana	10	645	645	100.00	165	25.58
Himachal Pradesh	45	907	617	68.03	351	56.89
Karnataka	50	1275	911	71.45	721	79.14



Kerala	70	4039	2018	49.96	1296	64.22
Madhya Pradesh	103	6771	5936	87.67	2898	48.82
Maharashtra	54	1636	1437	87.84	929	64.65
Meghalaya	45	2042	1821	89.18	888	48.76
Mizoram	15	640	399	62.34	313	78.45
Odisha	15	505	451	89.31	341	75.61
Punjab	102	4353	2509	57.64	1258	50.14
Pudducherry	43	1343	216	16.08	58	26.85
Rajasthan	60	3313	1530	46.18	818	53.46
Sikkim	70	1837	759	41.32	591	77.87
Tamil Nadu	90	3060	2399	78.40	2408	100.38
Telangana	35	2199	822	37.38	636	77.37
Tripura	25	566	517	91.34	410	79.30
Uttar Pradesh	219	16442	13985	85.06	6785	48.52
Uttarakhand	85	1703	1478	86.79	1311	88.70
West Bengal	59	4283	4125	96.31	1779	43.13
<b>Total</b>	<b>1575</b>	<b>69861</b>	<b>52997</b>	<b>75.86</b>	<b>31056</b>	<b>58.60</b>

The **table 4.15** depicts that more than three fourth (75.86%) of the children were enrolled for Pre-School Education. Out of total enrolled only 58.60 per cent of children 3-6 years were found attending. The enrolment and attendance of the children were very less in the state of Puducherry. In the states of Haryana (25.58%), West Bengal (43.13%), Uttar Pradesh (48.52%), Meghalaya (48.76%) and in NCT of Delhi (48.92%) less than half of the pre school children were attending PSE. The AWWs, therefore need to make efforts to strengthen PSE component and offer activities which are stimulating and interesting to attract children so that they come willingly and stay during the PSE timing.

- **Availability of Materials and Kit:**

Adequate quantity of relevant materials, kits and Handbook is required to conduct pre school activities at AWCs. The data related to the availability of time table, materials like chart, posters, PSE kit and Hand book at AWCs are presented in this table 4.16.

**Table 4.16: Availability of ECCE Materials at AWCs**

States	AWCs	Availability of ECCE Materials at AWCs							
		Time Table	%	Adequate and appropriate PSE Materials	%	Adequate and appropriate PSE Kit	%	Hand Book for AWW	%
Andhra Pradesh	90	74	82.22	80	88.89	84	93.33	79	87.78
Arunachal Pradesh	40	21	52.50	23	57.50	20	50.00	0	0.00
Assam	80	55	68.75	54	67.50	58	72.50	4	5.00
Chhattisgarh	75	56	74.67	51	68.00	32	42.67	22	29.33
Delhi	5	5	100.00	5	100.00	5	100.00	0	0.00
Gujarat	90	69	76.67	79	87.78	71	78.89	47	52.22
Haryana	10	8	80.00	8	80.00	9	90.00	0	0.00

Himachal Pradesh	45	42	93.33	40	88.89	36	80.00	17	37.78
Karnataka	50	48	96.00	50	100.00	49	98.00	39	78.00
Kerala	70	67	95.71	64	91.43	65	92.86	58	82.86
Madhya Pradesh	103	67	65.05	70	67.96	59	57.28	42	40.78
Maharashtra	54	41	75.93	34	62.96	29	53.70	38	70.37
Meghalaya	45	36	80.00	35	77.78	32	71.11	1	2.22
Mizoram	15	12	80.00	14	93.33	14	93.33	2	13.33
Odisha	15	15	100.00	14	93.33	13	86.67	9	60.00
Punjab	102	70	68.63	72	70.59	66	64.71	51	50.00
Pudducherry	43	9	20.93	24	55.81	22	51.16	5	11.63
Rajasthan	60	59	98.33	45	75.00	41	68.33	46	76.67
Sikkim	70	58	82.86	54	77.14	48	68.57	11	15.71
Tamil Nadu	90	86	95.56	82	91.11	80	88.89	85	94.44
Telangana	35	35	100.00	33	94.29	29	82.86	29	82.86
Tripura	25	14	56.00	19	76.00	19	76.00	1	4.00
Uttar Pradesh	219	118	53.88	116	52.97	114	52.05	144	65.75
Uttarakhand	85	57	67.06	52	61.18	44	51.76	29	34.12
West Bengal	59	41	69.49	44	74.58	45	76.27	21	35.59
<b>Total</b>	<b>1575</b>	<b>1163</b>	<b>73.84</b>	<b>1162</b>	<b>73.78</b>	<b>1084</b>	<b>68.83</b>	<b>780</b>	<b>49.52</b>

As per the data depicts in above table, it shows that in 73.84 per cent of visited AWCs Time table for conducting PSE was observed. 73.78 per cent of the AWCs were having adequate and appropriate availability of PSE Materials and 68.83 per cent of AWCs PRE school Education Kit for 3-6 year children as well as only less than half (49.52%) were having Hand Book for AWW to conduct Pre School Education. All the visited AWCs from the NCT of Delhi were having availability of PSE Kit, time table, Materials to carry PSE and the Hand Book in sufficient amount. All the states should take step to equip all their AWCs with adequate and appropriate materials and Kits on time for smooth running of Pre School Education at AWCs.

- **Preparation of Low Cost TLM**

The materials and equipment to be used in Anganwadi for non-formal pre-school activities needs to be of indigenous origin, designed and made by the Anganwadi workers or local artisans, and should be inexpensive. Dependency upon non-indigenous play equipment's should be minimised and emphasis should be on the improvisation of materials from local resources. Anganwadi workers should play a leading role in designing and making of these materials. Materials like sand, clay, seeds, leaves, twigs, water etc. have immense possibilities. Slides, sandpits, resting frames, crayon and brush, drawings and paintings, paper cuttings, beads etc. have been found to be more popular with pre-school children than sophisticated dolls, toys and other equipment. The traditional festival dolls and folk toys have a great deal of educational possibilities but have largely remained untapped so far. Similarly, picture books are of great interest and importance to young children. They develop reading interests in children and facilitate their language development.



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Taking nature walks for children is a good way to observe nature .It helps them learn science and understand the world around them. The children learn a lot on the walk and have a lot of fun while doing it.

Data in this regard are presented in **Table 4.17**.

**Table 4.17: AWWs Preparing Low Cost Teaching Learning Material \***

States/UTs	Total No. of AWCs	No. of AWWs using low cost Teaching Learning Material	%	No. of AWW Conducted Nature Walk For Children	%
Andhra Pradesh	90	70	77.78	39	43.33
Arunachal Pradesh	40	3	7.50	1	2.50
Assam	80	23	28.75	11	13.75
Chhattisgarh	75	38	50.67	4	5.33
Delhi	5	4	80.00	0	0.00
Gujarat	90	46	51.11	11	12.22
Haryana	10	8	80.00	0	0.00
Himachal Pradesh	45	14	31.11	0	0.00
Karnataka	50	26	52.00	7	14.00
Kerala	70	49	70.00	0	0.00
Madhya Pradesh	103	28	27.18	12	11.65
Maharashtra	54	29	53.70	35	64.81
Meghalaya	45	13	28.89	4	8.89
Mizoram	15	4	26.67	0	0.00
Odisha	15	8	53.33	10	66.67
Punjab	102	47	46.08	4	3.92
Pudducherry	43	5	11.63	0	0.00
Rajasthan	60	29	48.33	0	0.00
Sikkim	70	45	64.29	1	1.43
Tamil Nadu	90	57	63.33	58	64.44
Telangana	35	33	94.29	10	28.57
Tripura	25	1	4.00	1	4.00
Uttar Pradesh	219	41	18.72	12	5.48
Uttarakhand	85	21	24.71	0	0.00
West Bengal	59	16	27.12	17	28.81
<b>Total</b>	<b>1575</b>	<b>658</b>	<b>41.78</b>	<b>237</b>	<b>15.05</b>

\*Note: In rest of the AWCs, low cost Teaching Learning was not being prepared by AWWs

The average of all study states reveals that only 41.78% of AWWs have prepared the lowcost teaching and learning material for use in conducting pre-school education sessions. The state specific observations shows that in the state of Jharkhand, Sikkim and Goa most (80% and above) the AWCs reported for preparation of low cost material, followed by Andhra Pradesh (77.78%) and Kerala (70%) of the AWCs were



preparing low cost TLM. On the other hand, few AWWs from the States of Tripura (4%), Assam (7.50%), Puducherry (11.63%) and Uttar Pradesh (18.72%) were preparing the low cost teaching learning material for the use of teaching children.

Nature walk was organised for children by AWWs in only 15.05 per cent of the AWCs. Two third AWCs from the state of Odisha were organised Nature Walk for the Pre School children followed by Maharashtra (64.81%). AWWs should be encouraged to take children for Nature Walk.

- **Awareness and Organisation of ECCE Day by AWWs**

As per MWCD Office Order no 1-6/2013 –ECCE dated 5th August, 2013, the fixed Monthly ECCE Day is to be organized once every month at the AWC. The organization of fixed Monthly ECCE Day provides a platform for interface between the Anganwadi Worker and the parents/community. The Fixed Monthly ECCE Day also facilitates involvement of parents and community in the early childhood care and education of children and establish the partnerships for optimum development of the young child. All the children attending the Anganwadi Centre, and preferably all other children in the age group of 0-6 years in the community and their parents have to participate in the Fixed Monthly ECCE Day. The data showing awareness of AWWs on organization of ECCE Day and celebrating ECCE day in AWCS located in high burden districts are presented in **Table 4.18**.

**Table 4.18: AWWs Awareness and Organisation of ECCE DAY**

States/UTs	Total No. of AWWs	No of AWW aware of ECCE Day	%	No of AWW Celebrated ECCE Day	%
Andhra Pradesh	90	88	97.78	87	98.86
Arunachal Pradesh	40	16	40.00	11	68.75
Assam	80	60	75.00	56	93.33
Chhattisgarh	75	61	81.33	60	98.36
Delhi	5	5	100.00	4	80.00
Gujarat	90	63	70.00	61	96.83
Haryana	10	9	90.00	9	100.00
Himachal Pradesh	45	43	95.56	43	100.00
Karnataka	50	50	100.00	47	94.00
Kerala	70	58	82.86	57	98.28
Madhya Pradesh	103	86	83.50	69	80.23
Maharashtra	54	38	70.37	33	86.84
Meghalaya	45	36	80.00	26	72.22
Mizoram	15	11	73.33	8	72.73
Odisha	15	15	100.00	9	60.00
Punjab	102	51	50.00	39	76.47
Puducherry	43	12	27.91	7	58.33
Rajasthan	60	46	76.67	40	86.96
Sikkim	70	58	82.86	42	72.41
Tamil Nadu	90	80	88.89	77	96.25
Telangana	35	35	100.00	28	80.00
Tripura	25	23	92.00	12	52.17

Uttar Pradesh	219	150	68.49	98	65.33
Uttarakhand	83	74	89.16	62	83.78
West Bengal	59	28	47.46	22	78.57
<b>Total</b>	<b>1573</b>	<b>1196</b>	<b>76.03</b>	<b>1016</b>	<b>84.95</b>

As per the above table, it shows that majority (84.95%) of the AWWs were found celebrating ECCE day. All the AWWs from the visited AWCs of the states of Karnataka, Odisha, Telengana and NCT of Delhi were aware of ECCE day. All those AWWs from the states of Haryana and Himachal Pradesh were found celebrating ECCE Day.

### Nutrition and Health Education :

The nutrition and health education component of ICDS scheme aims at effective communication of certain basic health and nutrition messages with a view to enhancing the mother's awareness of the child's needs and her capacity to look after these within the family environment. The frequent organisation of such successful health and nutrition education sessions at regular intervals can bring greater and lasting returns in terms of improved health and nutritional status of women and children. Further a relatively small investment in this vital service can lead to saving much larger investment in supplementary feeding and health services. The status of NHEd was measured by finding out the availability of NHEd material, types of messages imparted in NHEd sessions, methods adopted for conducting NHEd sessions etc.

**Table 4.19:a: NHEd Sessions Conducted in AWCs**

States/UTs	Total No. of AWCs	No. of AWCs having adequate availability of NHEd Material	%
Andhra Pradesh	90	88	97.78
Arunachal Pradesh	40	27	67.50
Assam	80	52	65.00
Chhattisgarh	75	67	89.33
Delhi	5	5	100.00
Gujarat	90	81	90.00
Haryana	10	10	100.00
Himachal Pradesh	45	41	91.11
Karnataka	50	47	94.00
Kerala	70	62	88.57
Madhya Pradesh	103	94	91.26
Maharashtra	54	48	88.89
Meghalaya	45	42	93.33
Mizoram	15	8	53.33
Odisha	15	14	93.33
Punjab	102	88	86.27
Pudducherry	43	35	81.40
Rajasthan	60	54	90.00
Sikkim	70	59	84.29
Tamil Nadu	90	74	82.22
Telangana	35	34	97.14

Tripura	25	14	56.00
Uttar Pradesh	219	183	83.56
Uttarakhand	85	82	96.47
West Bengal	59	55	93.22
Total	1575	1364	86.60

**Table 4.19** shows that 86.60 per cent of AWCs were being organized NHEd sessions. All the AWCs from the state of Haryana and NCT of Delhi was organized NHEd sessions. Less than 60 per cent (53.33%) of the visited AWCs were found organizing NHEd sessions for the beneficiaries.

- **Topics Covered in NHEd**

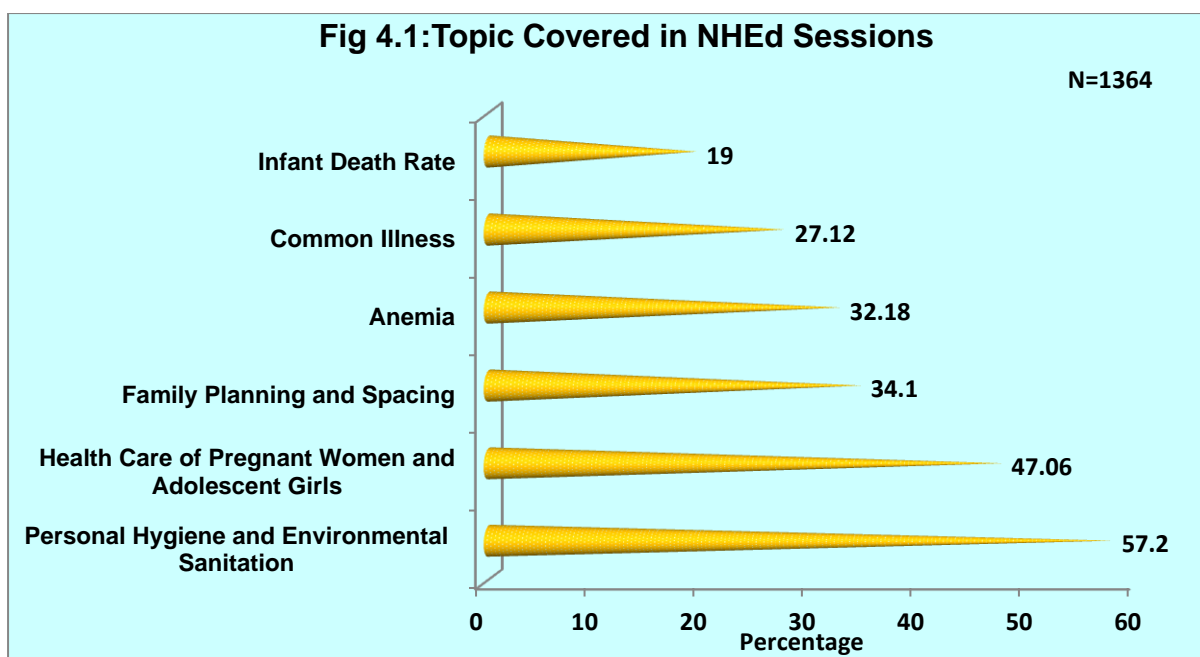
Functionaries were asked about topics covered during NHEd sessions. Data in this regard are presented in **Table 4.20**

**Table 4.20 Themes/Topics of NHEd Sessions  
(Multiple Responses)\*  
(N=1364)**

Topics Covered	No. of AWCs	%
Nutrition and Health care of Infants	896	65.69
Immunisation	918	67.30
Personal Hygiene and Environmental Sanitation	780	57.20
ICDS Services	556	40.76
Health Care of Pregnant Women and Adolescent Girls	642	47.06
Infant Death Rate	259	19
Family Planning and Spacing	465	34.10
Anemia	439	32.18
Balance Diet and Use of Green Leafy Vegetable	802	58.79
Importance of Vitamins and Minerals	213	15.61
Common Illness	370	27.12
Any Other	166	12.17

\*Note: Totals may not come to hundred per cent because of multiple responses

It is evident from **Table 4.20** that in large number of AWCs, the focus of NHEd has been reported in the area of immunization (67.30%) followed by nutrition and health care of infants/children (65.69%), Balance diet and Use of Green Leafy vegetables (58.79%), personal hygiene/sanitation/environmental hygiene (57.20%), health care of pregnant women (47.06%) and ICDS services (40.76%). The NHEd areas which have been reported of receiving comparatively lesser attention are Family Planning (34.10%), Anemia (32.18%), Common illness (27.12%), Importance of Vitamin and Minerals (15.61%), infant mortality rate/female foeticide (19%) and Other reasons were 12.17 per cent only.



### Referral Services:

Beneficiaries identified during health check-up and growth monitoring with acute medical problems in need of prompt medical attention, are provided referral services through ICDS scheme. An early detection of disabilities and timely diagnosis of many childhood diseases can prevent childhood morbidity and any other handicaps (Sharma, 1989). The need for referral services might arise to those pregnant mothers and children who are at risk zone. Not only this, pregnant mothers and children with problems requiring specialised treatment have to be referred for medical care of an appropriate standard by the use of referral slips. The data pertaining to the availability of referral slips in AWCs are presented in Table 4.21.

**Table 4.21: AWCs Refer Beneficiaries**

States	AWCs	No. of AWCs Referred Beneficiaries	%
Andhra Pradesh	90	82	91.11
Arunachal Pradesh	40	7	17.50
Assam	80	35	43.75
Chhattisgarh	75	73	97.33
Delhi	5	5	100.00
Gujarat	90	78	86.67
Haryana	10	9	90.00
Himachal Pradesh	45	9	20.00
Karnataka	50	44	88.00
Kerala	70	61	87.14
Madhya Pradesh	103	83	80.58
Maharashtra	54	49	90.74
Meghalaya	45	34	75.56
Mizoram	15	5	33.33
Odisha	15	12	80.00
Punjab	102	84	82.35
Pudducherry	43	33	76.74

Rajasthan	60	49	81.67
Sikkim	70	39	55.71
Tamil Nadu	90	88	97.78
Telangana	35	35	100.00
Tripura	25	12	48.00
Uttar Pradesh	219	120	54.79
Uttarakhand	85	55	64.71
West Bengal	59	38	64.41
<b>Total</b>	<b>1575</b>	<b>1139</b>	<b>72.32</b>

**Table 4.21** shows that less than three fourth (72.32%) of AWCs referred needy beneficiaries to the Health Centres. In the state of Telengana and NCT of Delhi all the AWCs were found referring needy beneficiaries to the Health Centres. Less than 50 per cent of the AWCs from the states of Himachal Pradesh (20%), Mizoram (33.33%), Assam (43.75%) and Tripura (48%) were found referring to the beneficiaries to the Health Centres.

#### Availability of Medicine Kit at AWCs:

**Table 4.22: Availability of Medicine Kit at AWCs**

States	AWCs	Availability of Medicine Kit at AWCs	%
Andhra Pradesh	90	42	46.67
Arunachal Pradesh	40	14	35.00
Assam	80	5	6.25
Chhattisgarh	75	1	1.33
Delhi	5	3	60.00
Gujarat	90	74	82.22
Haryana	10	6	60.00
Himachal Pradesh	45	12	26.67
Karnataka	50	48	96.00
Kerala	70	28	40.00
Madhya Pradesh	103	55	53.40
Maharashtra	54	15	27.78
Meghalaya	45	7	15.56
Mizoram	15	11	73.33
Odisha	15	0	0.00
Punjab	102	71	69.61
Pudducherry	43	27	62.79
Rajasthan	60	45	75.00
Sikkim	70	14	20.00
Tamil Nadu	90	84	93.33
Telangana	35	19	54.29
Tripura	25	0	0.00
Uttar Pradesh	219	107	48.86
Uttarakhand	85	68	80.00
West Bengal	59	56	94.92
<b>Total</b>	<b>1575</b>	<b>812</b>	<b>51.56</b>



It was observed from the Table 4.22 that availability of medicine kit in visited AWCs was observed only in 51.56 per cent. Majority (90% and above) of visited AWCs from the states of Karnataka (96%), West Bengal (94.92%) and Tamil Nadu (93.33%) were having availability of medicine kit. Non of the AWCs from the states of Odisha and Tripura were found medicine kit available. It was observed that in those visited AWCs medicine kits were last supplied in the year 2014.

#### Availability and Maintenance of Mother and Child Protection Cards at AWCs:

It is important to keep correct records of children's vaccination. The date of child immunisation has to be properly maintained on health cards. The required entries have to be made by medical/Para medical staff administering the immunisation. The data in this regard are presented in **Table 4.23**.

**Table 4.23: Availability and Maintaining Mother and Child Protection Cards at AWCs\***

States/UTs	Total No. of AWCs	Availability of MCP Card	
		N	%
Andhra Pradesh	90	81	90
Arunachal Pradesh	40	34	85
Assam	80	80	100.00
Chhattisgarh	75	35	46.67
Delhi	5	5	100.00
Gujarat	90	59	65.56
Haryana	10	9	90.00
Himachal Pradesh	45	18	40.00
Karnataka	50	10	20.00
Kerala	70	55	78.57
Madhya Pradesh	103	75	72.82
Maharashtra	54	53	98.15
Meghalaya	45	33	73.33
Mizoram	15	14	93.33
Odisha	15	15	100.00
Punjab	102	39	38.24
Pudducherry	43	8	18.60
Rajasthan	60	52	86.67
Sikkim	70	41	58.57
Tamil Nadu	90	73	81.11
Telangana	35	34	97.14
Tripura	25	25	100.00
Uttar Pradesh	219	153	69.86
Uttarakhand	85	77	90.59
West Bengal	59	25	42.37
<b>Total</b>	<b>1575</b>	<b>1103</b>	<b>70.03</b>

\*Note: In rest of the AWCs, MCP cards were being available with Health Department Functionaries.

The availability and maintenance of MCP cards of children has been reported in 70.03 per cent of AWCs located across 25 States. All (100%) the visited AWCs from the



states of Assam, Tripura, Odisha and NCT of Delhi were observed having availability of MCP card and maintained as well.

### Health Check-Up:

Health Check-up includes ante-natal care of expectant mothers, post natal care of nursing mothers and care of new born and care of children under six years of age. The entire population of expectant and nursing mothers and children less than six years of age of the ICDS project area has to be covered under this service. Thus, regularity of conducting health check-up of beneficiaries is an important aspect of implementing health services.

- **Place of Immunisation of Children**

The status of immunisation of Children is presented in **Table 4.24**.

**Table 4.24: Health Centres at which Beneficiaries received Immunisation**

States/UTs	Total No. of AWCs	Sub Centres	%	PHC	%	AWC	%	Other*	%
Andhra Pradesh	90	9	10	2	2.22	63	70	16	17.78
Arunachal Pradesh	40	4	10	17	42.50	3	7.5	0	0.00
Assam	80	23	28.75	15	18.75	21	26.25	7	8.75
Chhattisgarh	75	12	16	6	8.00	46	61.33	11	14.67
Delhi	5	1	20	3	60.00	5	100.00	0	0.00
Gujarat	90	28	31.11	6	6.67	46	51.11	10	11.11
Haryana	10	0	0.00	1	10.00	8	80.00	1	10.00
Himachal Pradesh	45	13	28.89	17	37.78	3	6.67	9	20.00
Karnataka	50	17	34.00	12	24.00	18	36.00	4	8.00
Kerala	70	11	15.71	30	42.86	16	22.86	1	1.43
Madhya Pradesh	103	6	5.83	26	25.24	56	54.37	4	3.88
Maharashtra	54	20	37.04	3	5.56	31	57.41	0	0.00
Meghalaya	45	19	42.22	11	24.44	5	11.11	8	17.78
Mizoram	15	12	80.00	2	13.33	0	0.00	4	26.67
Odisha	15	5	33.33	0	0.00	7	46.67	2	13.33
Punjab	102	27	26.47	17	16.67	46	45.10	13	12.75
Pudducherry	43	5	11.63	27	62.79	3	6.98	2	4.65
Rajasthan	60	7	11.67	5	8.33	45	75.00	1	1.67
Sikkim	70	15	21.43	10	14.29	2	2.86	9	12.86
Tamil Nadu	90	27	30.00	7	7.78	54	60.00	0	0.00
Telangana	35	11	31.43	7	20.00	10	28.57	12	34.29
Tripura	25	14	56.00	6	24.00	5	20.00	0	0.00
Uttar Pradesh	219	20	9.13	12	5.48	166	75.80	12	5.48
Uttarakhand	85	19	22.35	10	11.76	37	43.53	14	16.47
West Bengal	59	44	74.58	0	0.00	13	22.03	2	3.39
<b>Total</b>	<b>1575</b>	<b>369</b>	<b>23.43</b>	<b>252</b>	<b>16.00</b>	<b>709</b>	<b>45.02</b>	<b>142</b>	<b>9.02</b>

\*Note: Other places; Temple, another AWC, Panchayat Building, Community Centre, Arogya Kendra, ASHA's Home, Gurudwara etc.



The data on status of immunisation of children shows that 45.02 per cent of the children were immunized at AWCs, followed by Sub centre 23.43 per cent , PHC 16 per cent and at other places 9.02 per cent respectively.



**Table 4.25: Status of frequency of Health Check up of Children**

States/UTs	Total No. of AWCs	Monthly		Quarterl		Six Monthly		Unplanned		Never During last six months	
		No.	%	No.	%	No.	%	No.	%	No.	%
Andhra Pradesh	90	78	86.67	8	8.89	2	2.22	0	0	0	0
Arunachal Pradesh	40	20	50.00	16	40.00	0	0.00	1	2.5	3	7.5
Assam	80	45	56.25	16	20.00	0	0.00	10	12.5	6	7.5
Chhattisgarh	75	67	89.33	1	1.33	2	2.67	3	4	0	0
Delhi	5	1	20.00	3	60.00	0	0.00	1	20	0	0
Gujarat	90	32	35.56	19	21.11	25	27.78	6	6.67	4	4.44
Haryana	10	3	30.00	4	40.00	3	30.00	0	0.00	0	0.00
Himachal Pradesh	45	9	20.00	8	17.78	5	11.11	10	22.22	0	0.00
Karnataka	50	9	18.00	37	74.00	1	2.00	1	2.00	2	4.00
Kerala	70	36	51.43	11	15.71	3	4.29	8	11.43	12	17.14
Madhya Pradesh	103	37	35.92	15	14.56	26	25.24	13	12.62	7	6.80
Maharashtra	54	5	9.26	34	62.96	12	22.22	3	5.56	0	0.00
Meghalaya	45	29	64.44	9	20.00	0	0.00	3	6.67	2	4.44
Mizoram	15	14	93.33	1	6.67	0	0.00	0	0.00	0	0.00
Odisha	15	15	100.00	0	0.00	0	0.00	0	0.00	0	0.00
Punjab	102	26	25.49	25	24.51	40	39.22	2	1.96	1	0.98
Pudducherry	43	15	34.88	3	6.98	6	13.95	5	11.63	0	0.00
Rajasthan	60	56	93.33	2	3.33	9	15.00	0	0.00	0	0.00
Sikkim	70	13	18.57	6	8.57	1	1.43	4	5.71	1	1.43
Tamil Nadu	90	45	50.00	19	21.11	3	3.33	0	0.00	0	0.00
Telangana	35	32	91.43	3	8.57	5	14.29	0	0.00	0	0.00
Tripura	25	15	60.00	10	40.00	0	0.00	0	0.00	0	0.00
Uttar Pradesh	219	23	10.50	8	3.65	106	48.40	37	16.89	27	12.33
Uttarakhand	85	39	45.88	8	9.41	31	36.47	5	5.88	1	1.18
West Bengal	59	25	42.37	10	16.95	9	15.25	14	23.73	2	3.39
<b>Total</b>	<b>1575</b>	<b>689</b>	<b>43.75</b>	<b>276</b>	<b>17.52</b>	<b>289</b>	<b>18.35</b>	<b>85</b>	<b>5.40</b>	<b>53</b>	<b>3.37</b>



The data on status of organization of health check-up of children attending Anganwadi Centers as presented in **Table 4.25** shows that health check-up of all children are being carried out in around 85 per cent of AWCs taken in the study. Health check up was being done in monthly basis in 43.75 per cent of the AWCs followed by 18.35 per cent of AWCs six monthly and 17.52 per cent on Quarterly basis. Some AWCs from the States of Gujarat and Puducherry were also conducting Health check up for the children on Annual basis.

### AWCs Providing Services to Adolescent Girls

Adolescent Girls forms an important segment of the society. There are 8.3 crores of Adolescent Girls in the age group of 11-18 years, which comes around 16.75 per cent of country's population. About one third of these AGs are underweight. In order to address the issues related to adolescence, particularly the health and nutrition gaps, provision has been made in ICDS for their IFA supplementation and deworming and for strengthening their other life skills. Data in this regard are presented in **Table 4.26**

**Table 4.26.\*AWCs Providing Services to Adolescent Girls**

States/UTs	Total No. of AWCs	Services to AGs			
		IFA Tablets Distributed	%	Deworming Tablets Distributed	%
Andhra Pradesh	60	53	88.33	55	91.67
Arunachal Pradesh	35	31	88.57	9	25.71
Assam	80	69	86.25	13	16.25
Chhattisgarh	70	66	94.29	55	78.57
Delhi	5	5	100.00	5	100.00
Gujarat	75	75	100.00	64	85.33
Haryana	10	5	50.00	5	50.00
Himachal Pradesh	5	5	100.00	5	100.00
Karnataka	45	44	97.78	42	93.33
Madhya Pradesh	103	95	92.23	87	84.47
Maharashtra	54	18	33.33	18	33.33
Meghalaya	45	37	82.22	12	26.67
Mizoram	10	10	100.00	4	40.00
Odisha	10	9	90.00	9	90.00
Punjab	87	66	75.86	55	63.22
Rajasthan	20	20	100.00	11	55.00
Sikkim	15	10	66.67	5	33.33
Telangana	35	32	91.43	31	88.57
Tripura	10	10	100.00	4	40.00
Uttar Pradesh	200	176	88.00	112	56.00
Uttarakhand	15	11	73.33	9	60.00
West Bengal	44	11	25.00	9	20.45
<b>Total</b>	<b>1123</b>	<b>858</b>	<b>76.40</b>	<b>619</b>	<b>55.12</b>

\*Note: this table is made on the data from new proforma

The above data depicts that all (100%) the AWCs from the state of Himachal Pradesh and NCT of Delhi were found distributing IFA and Deworming Tablets to AGs. As per data All (100%) of the visited AWCs from the states of Gujarat, Mizoram and Rajasthan were distributing IFA tablets to the AGs. Few AWCs in the state of West Bengal were distributing IFA (25%) and Deworming (20.45%) Tablets to the Adolescent Girls.



# Community Mobilization and Information, Education and Communication



**Chapter- 5**

**Information, Education, Communication and Community Mobilization**

Anganwadi Scheme of Umbrella ICDS is basically a community based programme and its success depends on active Panchayat and community participation. The most significant feature of ICDS is to improve the capabilities of the parents to take care of the child and thus involve the community by encouraging self-help in improving the quality of life and wellbeing of the child and family. ICDS has been envisaged and conceptualized as a community based programme. It calls for community participation in its process of implementation by utilizing local resources. The need for involvement of community in monitoring and participation in day to day activities of ICDS has been always felt and desired in order to build an accountability mechanism for delivery of services and availability of supplies at AWC level. MWCD, GOI has instructed all State Governments/UT Administrations to involve community in day-to-day functioning / monitoring of the AWCs, monthly observance of Village Health and Nutrition Days (VHNDs) and ECCE, construction of AWCs and its maintenance, community mobilization by motivating people to participate in ICDS service delivery etc. Data with respect to involvement of Community in Implementation of ICDS are presented in **Table 5.1**.

**Table 5.1: Involvement of Community in Implementation of ICDS**

States	No of AWCs	No. of AWCs having Involvement of Community	%
Andhra Pradesh	90	73	81.11
Arunachal Pradesh	40	19	47.50
Assam	80	54	67.50
Chhattisgarh	75	57	76.00
Delhi	5	5	100.00
Gujarat	90	66	73.33
Haryana	10	5	50.00
Himachal Pradesh	45	10	22.22
Karnataka	50	40	80.00
Kerala	70	57	81.43
Madhya Pradesh	103	30	29.13
Maharashtra	54	22	40.74
Meghalaya	45	28	62.22
Mizoram	15	15	100.00
Odisha	15	5	33.33
Punjab	102	74	72.55
Pudducherry	43	29	67.44
Rajasthan	60	20	33.33
Sikkim	70	43	61.43
Tamil Nadu	90	88	97.78
Telangana	35	23	65.71
Tripura	25	24	96.00
Uttar Pradesh	219	50	22.83
Uttarakhand	85	64	75.29
West Bengal	59	41	69.49
<b>Total</b>	<b>1575</b>	<b>942</b>	<b>59.81</b>

The involvement of community was found in 59.81 percent of the visited AWCs. As per the data it is clear that State of Mizoram and NCT of Delhi shows 100 per cent involvement of community in implementation of Anganwadi Services Scheme. Though



## Chapter – 5 Monitoring Visits to Anganwadi Centres and ICDS Projects (2016-17) – A Report

community involvement in various activities of Anganwadi Services Scheme was found in substantial number of AWCs in the States of Tamil Nadu (97.78%), Tripura (96%) Kerala (81.43%), Andhra Pradesh (81.11%) and Karnataka (80%), however, such involvement was not found in the States of Himachal Pradesh (22.22%), Uttar Pradesh (22.83%), Odisha & Rajasthan (33.33%) and Maharashtra (40.74%).



**Table 5.2: Efforts Made by AWW to Involve Community in the implementation of Anganwadi Services Programme**

States	No of AWCs	No. of AWW made an effort to involve Community in the Implementation of Anganwadi Services Programme	%
Andhra Pradesh	90	87	96.67
Arunachal Pradesh	40	27	67.50
Assam	80	63	78.75
Chhattisgarh	75	73	97.33
Delhi	5	5	100.00
Gujarat	90	87	96.67
Haryana	10	10	100.00
Himachal Pradesh	45	10	22.22
Karnataka	50	47	94.00
Kerala	70	59	84.29
Madhya Pradesh	103	84	81.55
Maharashtra	54	34	62.96
Meghalaya	45	36	80.00
Mizoram	15	15	100.00
Odisha	15	13	86.67
Punjab	102	96	94.12
Pudducherry	43	32	74.42
Rajasthan	60	48	80.00
Sikkim	70	55	78.57
Tamil Nadu	90	60	66.67
Telangana	35	35	100.00
Tripura	25	25	100.00
Uttar Pradesh	219	128	58.45
Uttarakhand	85	72	84.71
West Bengal	59	53	89.83
<b>Total</b>	<b>1575</b>	<b>1254</b>	<b>79.62</b>

The data from the above table reflects that 79.62 percent of AWWs made efforts (like Home visit, Counseling, Organize competition, VHND etc.) to involve the community in implementation of ICDS programme. The AWWs of states of Haryana, Mizoram, Telangana



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Tripura and NCT of Delhi, were being making comprehensive efforts to involve the community in implementation of Anganwadi Service programme. The AWWs of the states of Himachal Pradesh (22.22%) and Uttar Pradesh (58.45%) have made least efforts to involve the community.

### Information, Education and Communication (IEC)

Information, Education and Communication (IEC) activities constitute a major component under the ICDS Scheme aimed at sustainable behaviour and attitudinal change of the society for holistic development of young children. The activities for implementation under IEC may include; home visits, holding small group meetings, village level camps, *annaprasan* ceremonies etc., project and district level seminars/meetings, regular nutrition and health education sessions with Mahila Mandals, Mother's groups, distribution and use of slides, flash cards, flip charts/books, flannel graph, publication of periodical newsletters, posters, hand bills, hoardings, newspaper advertisements, audio visual media, folk media, puppet shows, songs, yatra, electronic media, latest techniques of propagation via satellite communication etc. The impact of IEC activities are very positive and essential for proper working of AWCs, the impacts of these activities are shown in Reduction of severe and moderate malnutrition among children, Improved Nutrition and Health status of antenatal and postnatal mother, Awareness generation has been increased among the adolescent girls in the components of Nutrition, Health, Life skills education and empowerment as a whole, Community Participation has been augmented manifold. Area Specific, Need-Based IEC activities are also important and should be organized at AWCs for the betterment of the children as well as community. Data in this regard are presented in **Table 5.3**.

**Table 5.3: ICDS Projects Organizing IEC Activities**

States	No. of ICDS Projects	IEC Activities	%	Celebration of Breast Feeding Week/ Nutrition Week/ Nutrition Exhibition	%
Andhra Pradesh	18	17	94.44	13	76.47
Arunachal Pradesh	8	6	75.00	6	100.00
Assam	16	7	43.75	7	100.00
Chhattisgarh	16	16	100.00	8	50.00
Delhi	1	1	100.00	1	100.00
Gujarat	18	14	77.78	14	100.00
Haryana	2	2	100.00	2	100.00
Himachal Pradesh	14	14	100.00	10	71.43
Karnataka	10	7	70.00	6	85.71
Kerala	14	14	100.00	13	92.86
Madhya Pradesh	23	20	86.96	19	95.00
Maharashtra	14	7	50.00	2	28.57
Meghalaya	8	5	62.50	5	100.00
Mizoram	3	1	33.33	1	100.00
Odisha	3	3	100.00	3	100.00
Punjab	17	15	88.24	15	100.00
Pudducherry	8	3	37.50	3	100.00



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Rajasthan	13	10	76.92	9	90.00
Sikkim	15	11	73.33	11	100.00
Tamil Nadu	6	6	100.00	4	66.67
Telangana	7	7	100.00	3	42.86
Tripura	5	5	100.00	5	100.00
Uttar Pradesh	42	25	59.52	17	68.00
Uttarakhand	17	11	64.71	10	90.91
West Bengal	13	9	69.23	9	100.00
<b>Total</b>	<b>311</b>	<b>236</b>	<b>75.88</b>	<b>197</b>	<b>83.47</b>

The data reveals very encouraging situation as almost 75.88 percent of ICDS Projects were found of organizing IEC activities. The data as presented in **Table 5.3** shows that though all ICDS projects (100%) located in the States of Chhattisgarh, Haryana, Himachal Pradesh, Kerala, Odisha, Tamil Nadu, Telangana, Tripura and NCT of Delhi, were found organizing IEC activities, the states of Assam (43.75%), Pudducherry (37.50%) and Mizoram (33.33%) were found organizing less IEC activities.

Breastfeeding is an important child survival intervention. Breastfeeding within an hour of birth could prevent 20% of newborn deaths. Infants who are not breastfed are 15 times more likely to die from pneumonia and 11 times more likely to die from diarrhoea than children who are exclusively breastfed, which are two leading causes of death in children under-five years of age. The impact of breastfeeding on reduction of neonatal mortality and infant mortality, it is imperative that efforts should be intensified to improve optimal breastfeeding practices (early initiation of breastfeeding within one hour, exclusive breastfeeding for the first six months, and continued breastfeeding for at least two years).

In order to promote the breast feeding, World Breast Feeding Week is celebrated in all AWCs from 1-7 August every year. Similarly, National Nutrition Week is observed in all AWCs from 1-7 September every year. Data in this regard are presented in **Table 5.3**. The above table depicts that significant (83.47%) numbers of ICDS projects were found



Celebrating Breast Feeding week and Nutrition week. All ICDS Projects (100%) located in the States of Arunachal Pradesh, Assam, , Gujarat, Haryana, Meghalay, Mizoram, Odisha, Punjab, Pudducherry, Sikkim, Tripura, West Bengal and NCT of Delhi were found celebrating Breast feeding week & Nutrition week.



### Organization of Village Health and Nutrition Day (VHND)

The VHND is to be organised once in every month (preferably on Wednesdays and for those villages that have been left out, on any other day of the same month) at the AWC in the village. VHND is also to be seen as a platform for interfacing between the community and the health system. On the appointed day, ASHAs, AWWs, and other will mobilize the villagers, especially women and children, to assemble at the nearest AWC. The ANM and other health personnel should be present on time; otherwise the villagers will be reluctant to attend the following monthly VHND. On the VHND, the villagers can interact freely with the health personnel and obtain basic services and information. They can also learn about the preventive and promotive aspects of health care, which will encourage them to seek health care at proper facilities. The VHSC comprising the ASHA, the AWW, the ANM, and the PRI representatives, if fully involved in organizing the event, can bring about dramatic changes in the way that people perceive health and health care practices. VHND, if organised regularly and effectively, can bring about the much needed behavioural changes in the community, and can also induce health-seeking behaviour in the community leading to better health outcomes. Data in this regard are presented in **Table 5.4**.

**Table 5.4: ICDS Projects organizing Village Health & Nutrition days (VHND)**

States	No. of ICDS Projects	Organising Village Health & Nutrition days	%
Andhra Pradesh	18	18	100
Arunachal Pradesh	8	6	75
Assam	16	12	75
Chhattisgarh	16	16	100
Delhi	1	1	100
Gujarat	18	15	83.33
Haryana	2	2	100
Himachal Pradesh	14	13	92.86
Karnataka	10	10	100
Kerala	14	13	92.86
Madhya Pradesh	23	22	95.65
Maharashtra	14	7	50
Meghalaya	8	8	100
Mizoram	3	3	100
Odisha	3	3	100
Punjab	17	16	94.12
Pudducherry	8	7	87.5
Rajasthan	13	12	92.31
Sikkim	15	14	93.33
Tamil Nadu	6	6	100
Telangana	7	7	100
Tripura	5	4	80
Uttar Pradesh	42	41	97.62
Uttarakhand	17	16	94.12
West Bengal	13	11	84.62
<b>Total</b>	<b>311</b>	<b>283</b>	<b>91.00</b>

The data of the above Table 5.4 depicts that 91 percent of ICDS projects were organizing village health and nutrition day. The data is also showing that though all ICDS projects (100%) located in the States of Andhra Pradesh, Chhattisgarh, Haryana, Karnataka, Meghalaya, Mizoram, Odisha, Tamil Nadu, Telangana and NCT of Delhi, were found organizing VHND, however, much attention needs to be paid in the States of Maharashtra where only half (50%) of the AWCs were organizing such activities.



**Organisation of Sneh Shivir**

During the SNEHA SHIVIRs the Anganwadi workers with the help of community volunteers, mothers groups and SHGs facilitate a-learning-by doing technique for mothers and caregivers of moderate and severe underweight children. Nutrition Counselling and Child Care sessions organized at cluster level helps caregivers and mothers practice new cooking, feeding, hygiene, health and caring behaviors shown to be successful for rehabilitating underweight children. The selected practices would come from both public health accepted behaviors and from the positive practices seen in the homes of healthy children living in the same milieu and belong to similar socio economic group. The SNEHA SHIVIRs promotes behavior change and empowers caregivers to take responsibility for nutritional rehabilitation of their children using local knowledge and resources and peer learning at 12 day sessions followed by 18 days home based practices



During the 12 days, children are fed additional high calorie local foods, provided under ICDS and from contribution of care givers and community. During 12 days, children regain appetite and visible changes are seen as also indicated by gain in weight, a gain of 200-400 gms is expected. The 12 day session is followed by 18 day home based care during which the practices learnt at the sessions are followed at home. During these 18 days Anganwadi workers closely monitor these children through home visits, a further weight gain is expected if the practices are followed. During this process of rehabilitation the mothers imbibe the practices thoroughly so that they can sustain the rehabilitation and prevent under nutrition in other siblings. There is also a ripple effect which leads to an improvement in care practices in other families. Data in this regard are presented in **Table 5.5**.

**Table 5.5: ICDS Projects Organizing Sneh Shivir**

States	No. of ICDS Projects	No. of ICDS Projects initiated Sneha Shivir	%
Andhra Pradesh	18	1	5.56
Arunachal Pradesh	8	0	0.00
Assam	16	4	25.00
Chhattisgarh	16	12	75.00
Delhi	1	0	0.00
Gujarat	18	3	16.67
Haryana	2	0	0.00
Himachal Pradesh	14	2	14.29
Karnataka	10	3	30.00
Kerala	14	3	21.43
Madhya Pradesh	23	13	56.52
Maharashtra	14	1	7.14
Meghalaya	8	0	0.00
Mizoram	3	0	0.00
Odisha	3	0	0.00
Punjab	17	3	17.65
Pudducherry	8	0	0.00
Rajasthan	13	7	53.85
Sikkim	15	2	13.33
Tamil Nadu	6	0	0.00
Telangana	7	0	0.00

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<b>Tripura</b>	<b>5</b>	<b>2</b>	<b>40.00</b>
<b>Uttar Pradesh</b>	<b>42</b>	<b>7</b>	<b>16.67</b>
<b>Uttarakhand</b>	<b>17</b>	<b>4</b>	<b>23.53</b>
<b>West Bengal</b>	<b>13</b>	<b>3</b>	<b>23.08</b>
<b>Total</b>	<b>311</b>	<b>69</b>	<b>22.19</b>

The above Table 5.5 shows that only 22.19 percent of ICDS projects organised the Sneh Shivar. Though organisation of such event was reported from ICDS Projects in the States of Chhattisgarh (75%) and Madhya Pradesh (56.52%), however, such activity was found totally missing in all ICDS Projects visited by consultants of the States of Arunachal Pradesh, Haryana, Meghalaya, Mizoram, Odisha, Pudducherry, Tamil Nadu, Telangana. and NCT of Delhi.



# Continuous and Comprehensive Monitoring and Supportive Supervision



## Chapter - 6

### Continuous and Comprehensive Monitoring and Supportive Supervision

Continuous and Comprehensive Monitoring and Supportive Supervision are a process for continuous review of flow of inputs and outcome of outputs. The process helps in introducing mid - course corrections, wherever and whenever necessary. In the present chapter, an attempt has been made to analyze the data on supportive supervision and monitoring mechanism being adopted in ICDS projects monitored.

#### Monitoring Methods of AWCs

In the administrative set up of ICDS, the CDPO has a vital role to play. In order to provide a constant support and back up to the AWWs, the CDPOs are required to monitor the functioning of the AWCs adopting different monitoring tools/methods. The data pertaining to use of different monitoring tools by CDPOs are presented in **Table-6.1**

**Table 6.1: Monitoring Methods of AWCs by CDPOs**

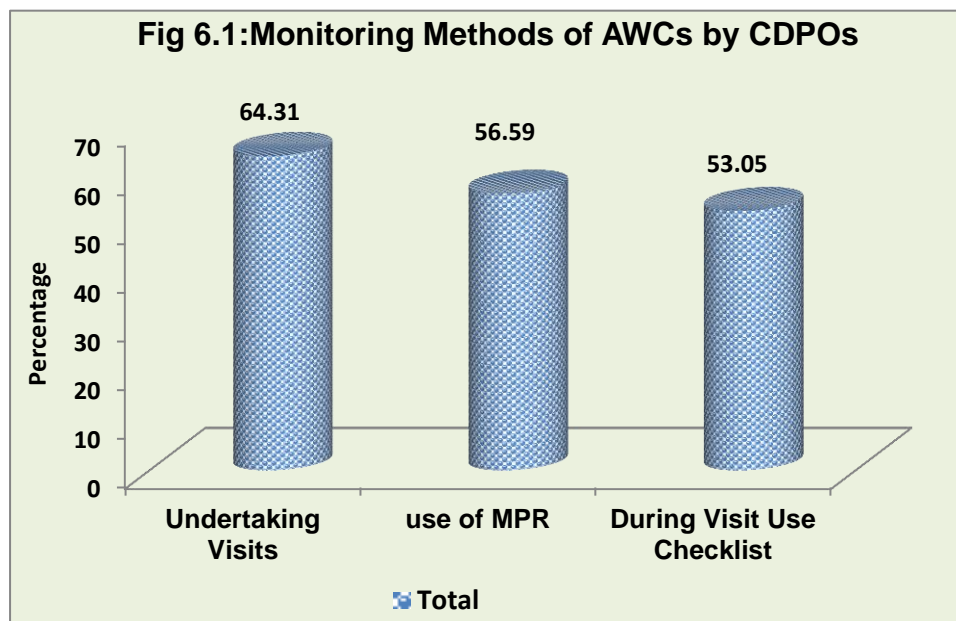
States	No. of ICDS Projects	Undertaking Visits		During Visit Use Checklist		use of MPR	
		No. of ICDS Projects	%	No. of ICDS Projects	%	No. of ICDS Projects	%
Andhra Pradesh	18	11	61.11	11	61.11	6	33.33
Arunachal Pradesh	8	8	100.00	4	50.00	7	87.50
Assam	16	7	43.75	4	25.00	2	12.50
Chhattisgarh	16	14	87.50	7	43.75	12	75.00
Delhi	1	1	100.00	0	0.00	1	100.00
Gujarat	18	14	77.78	11	61.11	10	55.56
Haryana	2	2	100.00	2	100.00	2	100.00
Himachal Pradesh	14	11	78.57	5	35.71	6	42.86
Karnataka	10	8	80.00	5	50.00	9	90.00
Kerala	14	10	71.43	13	92.86	10	71.43
Madhya Pradesh	23	21	91.30	13	56.52	14	60.87
Maharashtra	14	12	85.71	3	21.43	7	50.00
Meghalaya	8	8	100.00	1	12.50	4	50.00
Mizoram	3	3	100.00	3	100.00	2	66.67
Odisha	3	3	100.00	2	66.67	2	66.67
Punjab	17	13	76.47	11	64.71	9	52.94
Pudducherry	8	4	50.00	1	12.50	2	25.00
Rajasthan	13	11	84.62	8	61.54	10	76.92
Sikkim	15	10	66.67	13	86.67	9	60.00
Tamil Nadu	6	6	100.00	5	83.33	6	100.00
Telangana	7	6	85.71	7	100.00	4	57.14
Tripura	5	3	60.00	4	80.00	3	60.00
Uttar Pradesh	42	16	38.10	18	42.86	19	45.24
Uttarakhand	17	5	29.41	5	29.41	10	58.82
West Bengal	13	11	84.62	9	69.23	10	76.92
<b>Total</b>	<b>311</b>	<b>200</b>	<b>64.31</b>	<b>165</b>	<b>53.05</b>	<b>176</b>	<b>56.59</b>

The data in **Table 6.1** shows that more than two third (64.31%) of CDPOs were adopting only personal visits of AWCs as one of the monitoring methods. All CDPOs (100%) from the states of Arunachal Pradesh and Meghalaya adopt, only personal visit of AWCs as one of the



monitoring method; however, in the states of Haryana and Mizoram all (100%) of the CDPOs from the visited projects were monitoring the AWCs by personally visiting and through check list. Further in the state of Tamil Nadu and NCT of Delhi it was observed that all (100%) the CDPOs were visiting AWCs for monitoring and also through checking the MPR of the AWCs.

It has also observed that CDPOs of the 29.41 per cent of the visited ICDS Projects were found visiting AWCs to monitor them and also the same percentage were using check list to monitor the AWCs.



### Methods of Supervision

In ICDS, CDPO is an important and key functionary whose dynamisms and skills determine the pace of the programme. He /She is required to adopt various innovative methods of guiding the AWWs so that they can perform their tasks much effectively. Data in this regard are presented in **Table 6.2**.

Table 6.2:a: Method of Providing Guidance

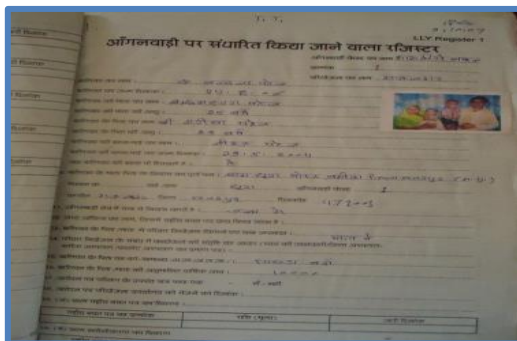
\*Multiple Responses

States	No. of ICDS Projects visited	Providing Guidance to AWW by Demonstration		Demonstration sessions organized by the CDPOs during the last three months on following components.					
		No. of ICDS Projects	%	WHO Growth Chart	%	New ECCE curriculum	%	New revised records & registers	%
Andhra Pradesh	18	17	94.44	11	64.71	16	94.12	14	82.35
Arunachal Pradesh	8	6	75.00	5	83.33	3	50.00	4	66.67
Assam	16	7	43.75	6	85.71	5	71.43	2	28.57
Chhattisgarh	16	14	87.50	10	71.43	4	28.57	11	78.57
Delhi	1	1	100.00	0	0.00	1	100.00	0	0.00
Gujarat	18	13	72.22	11	84.62	7	53.85	10	76.92





Haryana	2	2	100.00	2	100.00	2	100.00	2	100.00
Himachal Pradesh	14	11	78.57	10	90.91	7	63.64	9	81.82
Karnataka	10	6	60.00	5	83.33	2	33.33	4	66.67
Kerala	14	14	100.00	12	85.71	11	78.57	6	42.86
Madhya Pradesh	23	15	65.22	13	86.67	4	26.67	5	33.33
Maharashtra	14	7	50.00	5	71.43	3	42.86	5	71.43
Meghalaya	8	4	50.00	4	100.00	4	100.00	4	100.00
Mizoram	3	2	66.67	1	50.00	2	100.00	2	100.00
Odisha	3	3	100.00	2	66.67	1	33.33	3	100.00
Punjab	17	14	82.35	10	71.43	7	50.00	11	78.57
Pudducherry	8	1	12.50	1	100.00	0	0.00	1	100.00
Rajasthan	13	11	84.62	6	54.55	10	90.91	7	63.64
Sikkim	15	13	86.67	13	100.00	6	46.15	11	84.62
Tamil Nadu	6	5	83.33	5	100.00	5	100.00	5	100.00
Telangana	7	7	100.00	7	100.00	3	42.86	5	71.43
Tripura	5	5	100.00	5	100.00	5	100.00	4	80.00
Uttar Pradesh	42	19	45.24	18	94.74	7	36.84	16	84.21
Uttarakhand	17	13	76.47	12	92.31	7	53.85	9	69.23
West Bengal	13	9	69.23	8	88.89	9	100.00	8	88.89
<b>Total</b>	<b>311</b>	<b>219</b>	<b>70.42</b>	<b>182</b>	<b>83.11</b>	<b>131</b>	<b>59.82</b>	<b>158</b>	<b>72.15</b>



The data as presented in **Table 6.2** reveals that only 70.42 percent of CDPOs were providing guidance to the AWWs by **taking demonstration sessions** and making suggestions during their supervision visits to AWCs. CDPOs from all (100%) the visited projects in the States of Haryana, Kerala, Odisha, Telangana, Tripura and NCT of Delhi had been providing guidance by giving taking demonstration sessions during their supervision visits to AWCs.

In most (83.11%) of the ICDS Projects demonstration sessions were organized on New WHO Child Growth Charts. In all (100%) of the visited Projects from the states of Haryana, Meghalaya, Puducherry, Sikkim, Tamil Nadu, Telangana and Tripura demonstration sessions were organized by CDPOs on New WHO Child Growth Charts.

Though, demonstration on New ECCE Curriculum was organized in 59.82 per cent of the ICDS Projects by the CDPOs, however, CDPOs from all (100%) the ICDS Projects from the states of Haryana, Meghalaya, Mizoram, Sikkim, Tamil Nadu, Tripura, Uttarakhand and NCT of Delhi were found organizing demonstration sessions on this topic.

Ministry of Women and Child Development, GOI, introduced new Eleven Records and Registers to keep the data at AWCs. On this component CDPOs from less than three fourth

(72.15%) of the ICDS projects were observed organizing demonstrating on New Revised Records and Registers. CDPOs from all (100%) the ICDS Projects Haryana, Meghalaya, Mizoram, Odisha, Puducherry and Sikkim were found organizing demonstrating on New Revised Records and Registers

**Table 6.2:b: Method of Providing Guidance**

States	No. of ICDS Projects visited	Providing Guidance to AWW by Demonstration		Demonstration sessions organized by the CDPOs during the last three months on following components.					
		No. of ICDS Projects	%	New revised MPRs	%	Community participation	%	Use of MCP card	%
Andhra Pradesh	18	17	94.44	13	76.47	13	76.47	9	52.94
Arunachal Pradesh	8	6	75.00	3	50.00	1	16.67	2	33.33
Assam	16	7	43.75	3	42.86	1	14.29	0	0.00
Chhattisgarh	16	14	87.50	8	57.14	6	42.86	1	7.14
Delhi	1	1	100.00	1	100.00	1	100.00	0	0.00
Gujarat	18	13	72.22	10	76.92	8	61.54	5	38.46
Haryana	2	2	100.00	2	100.00	2	100.00	0	0.00
Himachal Pradesh	14	11	78.57	6	54.55	5	45.45	6	54.55
Karnataka	10	6	60.00	3	50.00	3	50.00	2	33.33
Kerala	14	14	100.00	7	50.00	8	57.14	8	57.14
Madhya Pradesh	23	15	65.22	7	46.67	5	33.33	4	26.67
Maharashtra	14	7	50.00	6	85.71	5	71.43	3	42.86
Meghalaya	8	4	50.00	3	75.00	3	75.00	3	75.00
Mizoram	3	2	66.67	2	100.00	1	50.00	1	50.00
Odisha	3	3	100.00	3	100.00	0	0.00	3	100.00
Punjab	17	14	82.35	8	57.14	8	57.14	7	50.00
Puducherry	8	1	12.50	0	0.00	1	100.00	0	0.00
Rajasthan	13	11	84.62	5	45.45	4	36.36	3	27.27
Sikkim	15	13	86.67	9	69.23	10	76.92	5	38.46
Tamil Nadu	6	5	83.33	5	100.00	4	80.00	1	20.00
Telangana	7	7	100.00	6	85.71	5	71.43	2	28.57
Tripura	5	5	100.00	3	60.00	3	60.00	2	40.00
Uttar Pradesh	42	19	45.24	12	63.16	6	31.58	8	42.11
Uttarakhand	17	13	76.47	10	76.92	8	61.54	10	76.92
West Bengal	13	9	69.23	9	100.00	5	55.56	5	55.56
<b>Total</b>	<b>311</b>	<b>219</b>	<b>70.42</b>	<b>144</b>	<b>65.75</b>	<b>116</b>	<b>52.97</b>	<b>90</b>	<b>41.10</b>

CDPOs from the ICDS Projects were also found organizing Demonstration sessions on the Topics New revised MPR (65.75%), Community Participation (52.97%) and USE of Mother and Child Protection Card (41.10%) for the AWWs.

Importance of Community involvement in day to day activities of AWCs and to generate awareness among them were discussed by demonstration method to the AWWs in all the ICDS Projects in the states of Haryana, Puducherry and NCT of Delhi respectively. CDPOs of the other visited ICDS projects should also be encouraged to organize such sessions.



Table 6.2:c: Method of Providing Guidance

States	No. of ICDS Projects visited	Providing Guidance to AWW by Demonstration		Demonstration sessions organized by the CDPOs during the last three months on following components.					
		No. of ICDS Projects	%	Use of Kishori cards	%	Use of SABLA Kit	%	Any other	%
Andhra Pradesh	18	17	94.44	3	17.65	1	5.88	0	0
Arunachal Pradesh	8	6	75.00	3	50.00	2	33.33	0	0
Assam	16	7	43.75	1	14.29	1	14.29	0	0
Chhattisgarh	16	14	87.50	2	14.29	3	21.43	3	21.42
Delhi	1	1	100.00	0	0.00	0	0.00	0	0
Gujarat	18	13	72.22	2	15.38	5	38.46	2	15.38
Haryana	2	2	100.00	0	0.00	0	0.00	0	0
Himachal Pradesh	14	11	78.57	1	9.09	1	9.09	0	0
Karnataka	10	6	60.00	4	66.67	4	66.67	1	16.67
Kerala	14	14	100.00	2	14.29	2	14.29	1	7.14
Madhya Pradesh	23	15	65.22	3	20.00	0	0.00	0	0
Maharashtra	14	7	50.00	2	28.57	1	14.29	2	28.57
Meghalaya	8	4	50.00	0	0.00	0	0.00	0	0
Mizoram	3	2	66.67	1	50.00	1	50.00	0	0
Odisha	3	3	100.00	1	33.33	1	33.33	0	0
Punjab	17	14	82.35	0	0.00	0	0.00	1	7.143
Pudducherry	8	1	12.50	0	0.00	0	0.00	1	100
Rajasthan	13	11	84.62	2	18.18	2	18.18	2	18.18
Sikkim	15	13	86.67	6	46.15	5	38.46	0	0
Tamil Nadu	6	5	83.33	1	20.00	1	20.00	0	0
Telangana	7	7	100.00	2	28.57	0	0.00	1	14.28
Tripura	5	5	100.00	1	20.00	1	20.00	0	0
Uttar Pradesh	42	19	45.24	0	0.00	0	0.00	1	5.26
Uttarakhand	17	13	76.47	8	61.54	6	46.15	5	38.46
West Bengal	13	9	69.23	2	22.22	1	11.11	3	33.33
Total	311	219	70.42	47	21.46	38	17.35	23	10.50

One of the sub- Scheme of Umbrella ICDS is “Scheme for Adolescent Girls “implementation of the scheme uses the platform of AWCs for implementation. The scheme for Empowerment of Adolescent Girls (SABLA) was introduced on Pilot basis in the country on selected Districts only. The demonstration sessions organized by CDPOs on topics like Use of Kishori Card (21.46%), Use of SABLA Kit (17.35%) and other topics (10.50%) in the ICDS Projects where the scheme was introduced,



### Availability of MPR Forms

A well-defined Monitoring Information System has already been introduced in ICDS through tapping the data by the use of monthly progress reports. These reports have to be filled up by AWW and have to be passed on to the concerned CDPO through circle Supervisors. The CDPO is required to send these reports to the concerned State Government/UT Administration with a copy to the control room of ICDS located in MWCD, GOI. Data regarding availability of this MPR Performa's are presented in **Table 6.3**.

**Table 6.3: Availability of MPR Forms**

States	No. of ICDS Projects	No. of ICDS Projects where MPR Forms are Available	%
Andhra Pradesh	18	15	83.33
Arunachal Pradesh	8	5	62.50
Assam	16	11	68.75
Chhattisgarh	16	15	93.75
Delhi	1	1	100.00
Gujarat	18	16	88.89
Haryana	2	2	100.00
Himachal Pradesh	14	10	71.43
Karnataka	10	6	60.00
Kerala	14	13	92.86
Madhya Pradesh	23	17	73.91
Maharashtra	14	14	100.00
Meghalaya	8	2	25.00
Mizoram	3	1	33.33
Odisha	3	2	66.67
Punjab	17	6	35.29
Pudducherry	8	3	37.50
Rajasthan	13	10	76.92
Sikkim	15	10	66.67
Tamil Nadu	6	5	83.33
Telangana	7	3	42.86
Tripura	5	2	40.00
Uttar Pradesh	42	24	57.14
Uttarakhand	17	11	64.71
West Bengal	13	12	92.31
<b>Total</b>	<b>311</b>	<b>219</b>	<b>70.42</b>

It is revealed from **Table 6.3** that the supply/availability of MPR forms has been reported in 70.42 per cent of ICDS Projects. All ICDS projects (100%) located in the States of Haryana, Maharashtra and NCT of Delhi reported of availability of MPR forms in the AWCs. Availability of MPR forms were lowest in the states of Meghalaya (25%) followed by one third (33.33%) of the visited ICDS Projects in the state of Mizoram, 35.29 per cent in Punjab and 37.50 per cent in the visited ICDS Projects of Puducherry.



**Additional Tasks to ICDS Functionaries**

Apart from Anganwadi Scheme tasks, it has been frequently reported by ICDS functionaries that they have to discharge many other tasks not related with Anganwadi Scheme. Data in this regard are presented in **Table 6.4**.

**Table 6.4: Additional Tasks/ Assignments as Reported by CDPOs**

States	No. of ICDS Projects	Total No. of CDPOs	Additional Tasks	%
Andhra Pradesh	18	18	3	16.67
Arunachal Pradesh	8	8	3	37.50
Assam	16	15	3	20.00
Chhattisgarh	16	13	11	84.62
Delhi	1	1	0	0.00
Gujarat	18	18	13	72.22
Haryana	2	2	1	50.00
Himachal Pradesh	14	14	7	50.00
Karnataka	10	10	8	80.00
Kerala	14	12	8	66.67
Madhya Pradesh	23	22	11	50.00
Maharashtra	14	14	8	57.14
Meghalaya	8	8	2	25.00
Mizoram	3	3	1	33.33
Odisha	3	3	3	100.00
Punjab	17	16	15	93.75
Pudducherry	8	8	4	50.00
Rajasthan	13	12	4	33.33
Sikkim	15	14	9	64.29
Tamil Nadu	6	6	3	50.00
Telangana	7	7	1	14.29
Tripura	5	5	4	80.00
Uttar Pradesh	42	41	23	56.10
Uttarakhand	17	14	11	78.57
West Bengal	13	13	11	84.62
<b>Total</b>	<b>311</b>	<b>297</b>	<b>167</b>	<b>56.23</b>

As data from Table 6.4 depicts that more than half (56.23%) of the CDPOs of the visited ICDS Projects were given additional task not related with Anganwadi Scheme, like – Old age pension scheme/Old age homes (welfare Programmes), additional charges, work of Health Department etc. All the CDPOs informed from the state of Odisha that they have been given additional work besides work related to Anganwadi Scheme. In NCT of Delhi none of the CDPO were given additional task.



**Awareness on Five-tier monitoring system**

In the context of the Universalization of ICDS with focus on improved quality in delivery of services and strengthening and restructuring of ICDS, a 5-tier monitoring and review mechanism is put in place at the central level and up to the AWC level. **Table 6.5** shows the data regarding the awareness of the CDPOs about the Five-tier monitoring system in ICDS Projects.

**Table 6.5: CDPO Awareness Level in Five Tier Monitoring System**

States	No. of ICDS Projects	*Total No. of CDPOs	%	No. of CDPOs aware about Five Tier Monitoring System	%
Andhra Pradesh	18	18	100	10	55.56
Arunachal Pradesh	8	8	100	4	50.00
Assam	16	15	93.75	7	46.67
Chhattisgarh	16	13	81.25	10	76.92
Delhi	1	1	100	1	100.00
Gujarat	18	18	100	1	5.56
Haryana	2	2	100	0	0.00
Himachal Pradesh	14	14	100	9	64.29
Karnataka	10	10	100	7	70.00
Kerala	14	12	85.71	11	91.67
Madhya Pradesh	23	22	95.65	11	50.00
Maharashtra	14	14	100	1	7.14
Meghalaya	8	8	100	6	75.00
Mizoram	3	3	100	2	66.67
Odisha	3	3	100	2	66.67
Punjab	17	16	94.12	13	81.25
Pudducherry	8	8	100	2	25.00
Rajasthan	13	12	92.31	6	50.00
Sikkim	15	14	93.33	3	21.43
Tamil Nadu	6	6	100	5	83.33
Telangana	7	7	100	5	71.43
Tripura	5	5	100	4	80.00
Uttar Pradesh	42	41	97.62	19	46.34
Uttarakhand	17	14	82.35	2	14.29
West Bengal	13	13	100	10	76.92
<b>Total</b>	<b>311</b>	<b>297</b>	<b>95.50</b>	<b>151</b>	<b>50.84</b>

\*Note: CDPO in position included In Charge CDPOs and CDPOs in Deputation also

It is evident from the above **Table 6.5** that only 50.84 per cent of CDPOs were found aware of Five-tier monitoring system of ICDS. In state of Chhattisgarh all the CDPOs (100%) were found aware of Five-tier monitoring system, whereas in state of Haryana none of the CDPO was reported to be aware of Five-tier monitoring system followed by 5.56 per cent of the CDPO in the state of Gujarat.



### Availability of Revised Records & Registers

The Data in this regard was shown in the table below.

**Table 6.6: Availability of Record and Register used by AWW**

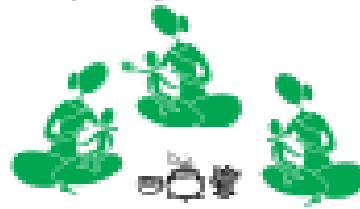
States	No. of ICDS Projects	Total No. of CDPOs	Do you check Record and Register at AWCs	%
Andhra Pradesh	18	18	18	100
Arunachal Pradesh	8	8	8	100
Assam	16	15	14	87.5
Chhattisgarh	16	13	13	81.25
Delhi	1	1	1	100
Gujarat	18	18	18	100
Haryana	2	2	2	100
Himachal Pradesh	14	14	14	100
Karnataka	10	10	10	100
Kerala	14	12	12	85.71
Madhya Pradesh	23	22	23	100
Maharashtra	14	14	13	92.86
Meghalaya	8	8	8	100
Mizoram	3	3	2	66.67
Odisha	3	3	3	100
Punjab	17	16	16	94.12
Pudducherry	8	8	7	87.5
Rajasthan	13	12	11	84.62
Sikkim	15	14	14	93.33
Tamil Nadu	6	6	5	83.33
Telangana	7	7	7	100
Tripura	5	5	5	100
Uttar Pradesh	42	41	41	97.62
Uttarakhand	17	14	14	82.35
West Bengal	13	13	13	100
<b>Total</b>	<b>311</b>	<b>297</b>	<b>292</b>	<b>93.89</b>

It was found from the above **Table 6.6** that majority (93.89%) of the ICDS projects have received revised records and registers. Though, all ICDS projects (100%) in the states of Andhra Pradesh, Arunachal Pradesh, Gujarat, Haryana, Himachal Pradesh, Karnataka, Madhya Pradesh, Meghalaya, Odisha, Telangana, Tripura and NCT of Delhi have received such revised records and registers, however, availability of New Records and Registers were found in only two third of the visited Projects in the state of Mizoram.

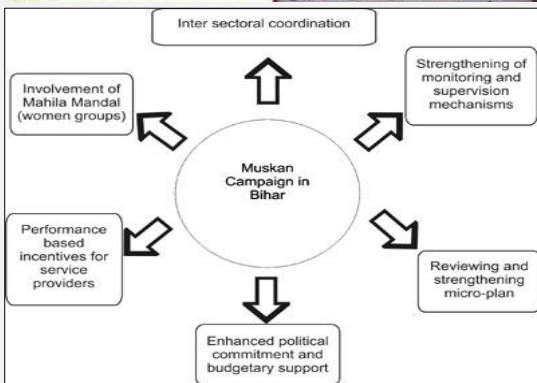
# Conclusion and Recommendations



Monthly Celebration of Annaprasad Day in Anganwadi Centres



Flood Day, Flood Plans, Flood Ties Strategy of ICBI to improve Complimentary feeding practices in Gujarat





- There is a need to upgrade the Physical infrastructural facilities of AWCs. AWCs running in Open space, Kutcha building and Semi Pucca structures need to be progressively replaced by Pucca building.
- Taps should be installed in AWCs where drinking water facilities were not available. Toilet facility must be made available in All the AWCs.
- For smooth functioning of the scheme vacant posts of functionaries should be filled and State Government must ensure that no additional task should be given.
- There is a need to finish the backlog in Refresher training of the functionaries.
- Irregular supplies of adequate materials, Kits (PSE & Medical), Growth Charts, weighing machines etc. are one of the major problems in implementation of this scheme. The State Govt. should take appropriate measures to ensure timely supply of these.
- Distribution of Supplementary Nutrition for 300 days in a year should be followed strictly.
- Health check up of all children must be ensured.
- Effective ways of augmenting participation of community needs to be evolved. AWWs should be skilled enough to make the community aware and involve them in day to day activities of the AWC. CDPOs and Supervisors should take appropriate steps in this regard.
- More CDPOs should adopt Demonstration method for supervision instead of giving instructions to the AWWs.
- Monitoring of AWCs by the functionaries and Officials should be done as per the MWCD GOI guidelines.

**LIST OF THE ICDS PROJECTS**

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
1	Andhra Pradesh	Srikawlam	Gara Rural ICDS Project
2		Vishakapatnam	Ananthgiri Tribal ICDS Project
3		Kurnool	Banaganapalli
4		Vizianagaram	ICDS Project Parvathipuram
5		srikawlam	Gara rural icds project
6		Vishakapatnam	Ananthgiri Tribal ICDS Project
7		Kurnool	Banaganapalli ICDS Project
8		Krishna	Nuzuid ICDS Project
9		SPSR Nellore	Gudur Urban ICDS Project
10		Prakasam	Ongole (U) ICDS Project
11		YSR District Kadapa	Rayachoty ICDS Project
12		Ananthapur	Kayandurg ICDS Project
13		Chittoor	Pulicherla ICDS Project
14		Kadapa	Kadapa (Urban) ICDS Project
15		Sri Kakulam	Rajam ICDS Project
16		Gantur	75 Tyallur ICDS Project
17		Vizianagaram	Cheepurupalli ICDS Project
18		Sri Potti Sceramulu Nellore	Sullurupeta ICDS Project
19	Arunachal Pradesh	siang	Rumgang ICDS Project
20		siang	Monigong ICDS project
21		West kameng	NEFRA ICDS Project
22		siang ( former east siang)	Pangin ICDS Project
23		West kameng district	Buragaon ICDS project
24		Tirap	Namsang ICDS project ,Deomali
25		Tirap	Khonsa ICDS project
26		Namsai	Lekang ICDS Project
27	Assam	Karbi Anglong	Lumbajong ICDS Project,Manja
28		Cachar	Banskandi icds project cachar
29		karbi Anglong	Howraghat ICDS Project
30		Nagaon	Jugijan ICDS Project
31		Nagaon	Brahampur ICDS Project
32		karbi Anglong	Howraghat ICDS Project
33		Nagaon	Jugijan ICDS Project
34		Nagaon	Brahampur ICDS Project
35		Cachar	Banskandi icds project cachar
36		Baska	Goresular ICDS Project

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
37		Dibrugarh	Lahoal ICDS Project
38		Sirasagar	Gaurisagar ICDS queject,
39		Chirang	Borabazar ICDS Project
40		Udalguri	Rowta ICDS Project
41		Dima Hasano	Jatinga Valley ICDS Project Mahur
42		Dima Hasano District	Diyung vally ICDS Project
43	Chhanttisgarh	Baloda bajar	kasdol ICDS Project
44		Baloda bajar	Saja ICDS Project
45		Baloda bajar	Dallirajhara ICDS Project
46		Dhantari	Rural ICDS Project ,Dhantari
47		Mahasamund	Basna ICDS Project
48		Bastar	Bastanar ICDS Project
49		Kondagaon	Pharasgaon ICDS Project
50		Bijapur	Bhairamgarh ICDS Project
51		Koriya	Baihunthpur ICDS Project
52		Chhuru (Tribal )	Chhuru (Tribal) ICDS Project
53		Balrampur	Kusmi ICDS Project
54		Mungeli	Lormi -I ICDS Project
55		Kawardha	Kawardha(rural ) ICDS Project
56		Surajpur	Pratappur ICDS Project
57		Jashpur	Jashpur Naqar Tribal ICDS Project
58		Raigarh	Kharsia ICDS Project
59	Delhi	North Delhi	Timarpur ICDS Project
60	Gujarat	Junagadh	Vanthali (rural ) ICDS Project
61		Gri Somnath	Sutlapada ICDS Project
62		Junagadh	Keshod Rural ICDS Project
63		Botad	ICDS Botad I ICDS Project
64		Botad	ICDS Gadhada ICDS Project
65		Bhavnagar	Bhavnagar rural ICDS Project
66		Dahod	Dahod ICDS Project
67		Mahisagar	Kadama ICDS Project
68		Aravalli	Megharej ICDS Project
69		Ahmedabad	ICDS Bavla ICDS Project
70		Ahmedabad	ICDS Dhandhuka ICDS Project
71		Amreli	Jafarabad ICDS Project
72		Amreli	Amreli Rural ICDS Project
73		Amreli	Dhari ICDS Project
74		Devbhumi Dwarka	Dwarka ICDS Project

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
75		Jamnagar	Dhrol ICDS Project
76		Devbhumi Dwarka (Jamnagar )	Bhanvad ICDS Project
77		Botad	Barwala ICDS Project
78	Haryana	Gurgaon	Gurgaon (rural) 1 ICDS Project
79		Gurgaon	Gurgaon (urban 2) ICDS Project
80	Himachal Pradesh	Una	Amle ICDS Project
81		kangra	Lambagoan ICDS Project
82		Bilaspur	Sader ICDS Project
83		UNA	Haroli ICDS Project
84		Mandi	Drang ICDS Project
85		Hamirpur	Nadaun ICDS Project
86		kangra	Baijnath ICDS Project
87		Shimla	Mashobra ICDS Project
88		Mandi	Gohar ICDS Project
89		Mandi	Janjehli ICDS Project
90		Mandi	Dharpur ICDS Project
91		Kangra	Fathepur ICDS Project
92		Kangra	Magrota Sarian ICDS Project
93		Kangra	Banjar ICDS Project
94	Karnataka	Hassan	Channa Raya Patna ICDS Project
95		Hassan	Belur ICDS Project
96		Dharwad	Hubli-Dharwad (U) ICDS Project
97		Chickamagular	Kadur ICDS Project
98		Chickamagular	Mudigere ICDS Project
99		Chikmagaluru	Srinageri ICDS Project
100		Hassan	ALURU ICDS Project
101		Mandya	Nagamangala ICDS Project
102		Hassan	Arakalgud ICDS Project
103		Hassan	Holenarasipura ICDS Project
104	Kerala	Ernakulam	Ernakulam ICDS Project
105		Palakkad	Kollengode ICDS Project
106		Kozhikode	Urban 1 Kozhikode ICDS Project
107		Kozhikode	Kozhikode II Urban ICDS Project
108		Malappuram	Mankada ICDS Project
109		Malappuram	Malappuram(Rural) ICDS Project
110		Ernakulam	Kothamangalam ICDS Project
111		Ernakulam	Vytila-3 ICDS Project
112		Thrissur	Ollukkara ICDS Project

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
113		Thrissur	Irinjalakkuda ICDS Project
114		Idukki	Adimali ICDS Project
115		Idukki	Devikulam ICDS Project
116		Ernakulam	Alangadu ICDS Project
117		Ernakulam	ICDS Project
118	Madhya Pradesh	Indore	Indore gramin-2 ICDS Project
119		Ratlam	Jawra( Rurl) ICDS Project
120		Bhopal	Moha Park ICDS Project
121		Shajapur	Shajapur (Rural) ICDS Project
122		Burhanpur	Burhanpur Rural ICDS Project
123		Indore	Indore ICDS Project 4 (urban)
124		Indore	Depalpur- 2 ICDS Project
125		Ratlam	Ratlam Rural ICDS Project
126		Ujjain	Ujjain Rural ICDS Project
127		Guna	Aaron ICDS Project
128		Dhar	Dhar Urban ICDS Project
129		Indore	MHOW Cant. ICDS Project
130		Mandsaur	Mandsaur, Malhargarh ICDS Project
131		Khargone (West Nimar), Kasrawad	Kasrawad ICDS Project
132		Burhanpur (Rural & Tribal)	Nepanagar ICDS Project
133		Morena	Porsa ICDS Project
134		shirpuri	khaniadaina ICDS Project
135		indore	Indore gramin-2 ICDS Project
136		Ratlam	Jawra( Rurl) ICDS Project
137		Bhopal	Moha Park ICDS Project
138		Rajgarh	knjner ICDS Project
139	Rajgarh	Begumgunj icds project	
140	Umeria	Umeria-1 ICDS Project	
141	Maharashtra	Wardha	ICDS Project Ashti
142		Wardha	ICDS Project Wardha Rural
143		Wardha	ICDS Project Kharanja
144		Yavatmal	ICDS Project Babhulgaon
145		Yavatmal	ICDS Project KALAMB
146		Yavatmal	ICDS Project Ralegaon
147		Beel	Majalgaon ICDS Project
148		Buldhana	Khansgaon ICDS Project
149		Jalgaon	I.C.D.S Chopda-2 ICDS Project
150		Sangli	Shirala ICDS Project

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
151		Nandurbar	Dhadgaon ICDS Project
152		Amaravati	Anjangaon(Surji) ICDS Project
153		Amaravati	Achalpur, Kandoli ICDS Project
154		Amaravati	Dharni ICDS Project
155	Meghalaya	West jaintia hills district	Ancarem ICDS Project
156		West jaintia hills district	laskein ICDS Project
157		West Garo hills	Dagenggre ICDS Project
158		West jaintia hills district	Ancarem ICDS Project
159		West jaintia hills district	laskein ICDS Project
160		West Garo hills	Dagenggre ICDS Project
161		West Khasi Hills	Nongstoin ICDS Project
162		Ri -Bhoi	Umden Khasi Village AWC
163	Mizoram	Lunglei	Lunglei ICDS Project
164		Kolasib district	Bilkhawthur ICDS Project
165		Mamit	ZawlnumI AWC , 5 ICDS Project
166	Odisha	Puri	Brahmagiri ICDS Project
167		Boudh	Boudh Rural ICDS Project
168		Koraput	Dasamantpur ICDS Project
169	Puducherry	Pondicherry	Project V ICDS Project
170		Pondicherry	Project IV, Muthialpet
171		Pondicherry	Project-I ICDS Project
172		Pondicherry	Project-III ICDS Project
173		Punduchery	ICDS Project 5 ICDS Project
174		punducherry	project 3- Ariyankuppam
175		punducherry	I C D S Project 1 Villianur
176		punducherry	ICDS Project 5(MUTHIALPET)
177	Punjab	Mohali	Majri ICDS Project
178		Fategarh Saheb	Amloh ICDS Project
179		Fategarh Saheb	Sirhind ICDS Project
180		Fategarh Saheb	Khamano ICDS Project
181		S.A.S Nagar Mohali	Dera Bassi ICDS Project
182		S.A.S Nagar Mohali	Majri ICDS Project
183		Faridkot	Faridkot ICDS Project
184		Sangrur	Andama ICDS Project
185		Sangrur	Dhuri ICDS Project
186		sangrur	Bhawanigarh ICDS Project
187		S A S Nagar Mohali	kharar ICDS Project
188		Ropar	Morinda ICDS Project
189		Amritsar	Majitha ICDS Project
190	Mansa	Mnsa Rural ICDS Project	

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
191		SBS Nagar	Balachaur ICDS Project
192		Kapurthala	ICDS (rural) in Nadala
193		Balnala	Balnala ICDS Project
194	Rajasthan	Jodhpur	Mandor ICDS Project
195		Jodhpur	Luni ICDS Project
196		Jaipur	ICDS Project Kotputali
197		Jaipur	Chomu ICDS Project
198		Jaisalmer	Pokaran ICDS Project
199		Jaipur	Sangana ICDS Project
200		Jaipur	Sanganer City ICDS Project
201		Barmer	Barmer City ICDS Project
202		Sirohi	(2)sirohi 0811706 ICDS Project
203		Dansa	Dansa Rural ICDS Project
204		Chittorgarh	Gangrar ICDS Project
205		Rajsamand	Kumbhalqarh ICDS project
206		Jhunjhunu	Nawalgarh ICDS Project
207		Sikkim	South (NAMCHI)
208	East		Rongli Rural ICDS Project
209	East		Urban Slum ICDS Project
210	East		Gangtok Rural ICDS Project
211	South District,Namchi		Jorethang Rural ICDS Project
212	North		Dzone Tribal ICDS Project
213	East		Gangtok wear ICDS Project
214	East		Urban Project,Gantok ICDS Project
215	west		Soreng Rural ICDS Project
216	East district		Singtam Rural ICDS Project
217	South		Namchi Rural ICDS Project
218	Namchi South		Jorethang ICDS Project
219	Gyalshing (west)		Rural ICDS Project
220	West Khasi Hills		Gyalsing ICDS Project
221	East Sikkim	Soreng ICDS Project	
222	Tamil Nadu	Theni	Bodinaya Kanuv ICDS Project
223		Theni	Cumbum ICDS Project
224		Theni	Theni ICDS Project
225		Coimbatore	Annur ICDS Project
226		Coimbatore	Madukkarai ICDS Project
227	Coimbatore	Sulthanpet ICDS Project	
228	Telangana	Nizamabad	ICDS Bheemagal ICDS Project

S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
229		Ranga Reddy	Sherelingam Pally ICDS Project
230		Medaic	Narayankhed ICDS Project
231		Ayderabad	I C D S Project 3 hyderabad
232		Nizamabad	Bheemagal ICDS Project
233		Medaic	Narayankhed ICDS Project
234		Ayderabad	I C D S Project 3 hyderabad
235		Tripura	Khowai
236	South Tripura		Belonia Nagar Panchayat ICDS Proje
237	North tripura		Jampui Hill ICDS Project
238	Unakoti		Kumarghat ICDS Project
239	Unakoti		Pecharthal ICDS Project
240	Uttar Pradesh	Pratap Garh	Babaganj ICDS Project
241		Allahabad	Shankargarh ICDS Project
242		Allahabad	ICDS Project, Karchana
243		Pratap Garh	ICDS Project, Shivgarh
244		Gonda	ICDS Project, Paraspur
245		Gonda	Gonda City ICDS Project
246		Agra	Fatehabad Rural ICDS Project
247		Agra	Agra city ICDS Project
248		Azamgarh	ICDS Project azamgarh
249		Azamgarh	Lalganj ICDS Project
250		Ballia	Belhari ICDS Project
251		Ballia	Reoti ICDS Project
252		Deoria	Pathar Deva ICDS Project
253		Etawah	Basrehar ICDS Project
254		Raibarali	Harchandpur ICDS project
255		kanpur	Chaubepur ICDS Project
256		Barabanki	Pojeet Fathpur ICDS Project
257		kanpur Nagar	kalyanour ICDS Project
258		Pratap Garh	Babaganj ICDS Project
259		Allahabad	Shankargarh ICDS Project
260		Allahabad	ICDS Project, Karchana
261		Pratap Garh	ICDS Project, Shivgarh
262		Gonda	ICDS Project, Paraspur
263		Gonda	Gonda City ICDS Project
264		Agra	Fatehabad Rural ICDS Project
265		Agra	Agra city ICDS Project
266		Azamgarh	ICDS Project azamgarh
267	pilibhit	Amaria ICDS Project	



S.No	Name of the state/UT	Name of the District:	Name of the ICDS Project
268		Amroha	ICDS Project ,Dhanora
269		Mau	ICDS Project Muhmmdabad
270		Faizabad	ICDS PROJECT Rudauli
271		Chandauli	ICDS PROJECT CHANDULI rural ( sadar)
272		Etawah	Bharthana ICDS Project
273		Deoria	Rampur Karkhana ICDS Project
274		Hardoi	Behdar ICDS Project
275		Hardoi	Bharwana ICDS Project
276		Jaunpur	Dharmapur ICDS Project
277		Jaunpur	Sirkoni ICDS Project
278		Banda	Badokhar Khurd ICDS Project
279		Banda	Baberu ICDS Project
280		Kaushambi	ICDS Project Mahjhanpur
281		Fatehpur	ICDS Project Bahua
282		Uttarakhand	Haridwar
283	Dehradun		City Dehradun ICDS Project
284	Dehradun		Kalsi ,Dehradun ICDS Project
285	udham singn nagar		Jaspur ICDS Project
286	udham singn nagar		ICDS Project
287	udham singn nagar		Sitcirganj(Nanakmatha) ICDS Project
288	Dehradun		chakrata ICDS Project
289	Dehradun		sahapur ICDS Project
290	Dehradun		Raipur ICDS Project
291	Pauri garhwal		Ekeshwar ICDS Project
292	Pauri garhwal		Beeron khal ICDS Project
293	Pauri garhwal		Pohou ICDS Project
294	Pauri garhwal		Bhatwari ICDS Project
295	Uttarakashi		Chinyalisaur ICDS Project
296	Uttarakashi		Dunda Uttarkashi ICDS Project
297	Haridwar		(Bahadrabad)ICDS Project
298	Tehri Garhwal		Jakhnidhar ICDS Project
299	West Bengal		Bankura
300		Bankura	Onda ICDS Project
301		Bankura	Gangajal Ghati ICDS Project
302		Birbhum	Nanoor ICDS Project
303		Birbhum	Rajnagar ICDS Project
304		south 24 Parganas	Bishnupur-1 ICDS Project
305		south 24 Parganas	Diamond horbor-1 ICDS Project

<b>S.No</b>	<b>Name of the state/UT</b>	<b>Name of the District:</b>	<b>Name of the ICDS Project</b>
<b>306</b>		<b>south 24 Parganas</b>	<b>Diamond horbor 2 ICDS Project</b>
<b>307</b>		<b>Hoogly</b>	<b>Bhadreshwar (U) ICDS Project</b>
<b>308</b>		<b>Birbhum</b>	<b>Sainthia ICDS Project</b>
<b>309</b>		<b>Birbhum</b>	<b>Md Bazar ICDS Project</b>
<b>310</b>		<b>Birbhum</b>	<b>Murarai ICDS Project</b>
<b>311</b>		<b>Birbhum</b>	<b>Nalhati -I ICDS Project</b>