

Strengthening the ICDS Scheme

Why in news?

The high prevalence of stunting, wasting, and anaemia continues to pose public health risks for children and women in India.

What is the Integrated Child Development Service (ICDS) Scheme?

- The <u>ICDS Scheme</u> providing for supplementary nutrition, immunization and pre-school education to the children is a popular flagship programme of the government.
- Launched in 1975, it is one of the world's largest programmes providing for an integrated package of services for the holistic development of the child.
- ICDS is a *centrally sponsored scheme* implemented by state governments and union territories.
- The *scheme is universal* covering all the districts of the country.
- The ICDS targets children aged 0-6 years, pregnant women, and lactating mothers.
- It also addresses non-formal pre-school education and breaks the cycle of malnutrition, morbidity, and mortality.
- The Scheme has been renamed as Anganwadi Services and the services are now offered as part of the <u>Saksham Anganwadi and Poshan 2.0</u>.

What are the findings from recent studies on ICDS scheme?

- **Positive impact** The ICDS's has positive impact on cognitive achievements, especially among girls from economically disadvantaged families.
- **Completed more grades** The children who were exposed to ICDS during the first three years of life completed 0.1-0.3 more grades of schooling than those who were not.
- **Increased school enrolment** The adolescents aged 13-18, who born in villages with proper ICDS implementation, showed a 7.8% increased likelihood of school enrolment.

What is the status of Anganwadi works in ICDS scheme?

- Even after 4 decades of relentless efforts, the ICDS still faces the herculean task of providing the nutritional and health outcomes for children aged 0-6 years.
- **Empower Anganwadi workers** A significant first step towards fortifying the programme is to empower Anganwadi workers.
- Though the cornerstone of the ICDS, they are frequently stretched beyond their limits.
- As principal operatives in the Poshan 2.0 initiative, these workers bear the onus of

advancing child nutrition, health, and education in their communities.

• **Roles** - It varies widely from employing modern technology, to practical tasks such as delivering health education, managing feeding programmes, and liaising with healthcare professionals.

Why empowering Anganwadi workers is the need of the hour?

- Adding additional Anganwadi worker could yield at few advantages.
 - 1. It would lead to better health and educational outcomes.
 - 2. Double the net preschool instructional time, which led to improvements in math and language test score for children.
 - 3. Children who remained enrolled also exhibited reduced rates of child stunting and severe malnutrition.
 - 4. The cost of a nationwide roll-out of this model is relatively insignificant in comparison to the potential advantages it offers.
 - 5. The new Anganwadi worker can be given the responsibility of concentrating only on preschool and early childhood education.
 - 6. Apart from improving the well-being of rural communities, this would create job opportunities for local residents, particularly women.
 - 7. It would lead to the creation of 1.3 million new jobs for women across India.

What are the implications?

- The operationalisation of the Saksham Anganwadi and Poshan 2.0 proposal hinges on its status as a Centrally Sponsored Scheme.
- Scheme overseen State governments oversee its execution, including administration, management, and monitoring.
- **Recruitment** Consequently, Anganwadi worker recruitment falls under their jurisdiction, guided by regulations and region-specific criteria.
- This decentralised approach promotes tailored, efficient implementation.
- The Government of India provides funds for Anganwadi workers' and helpers' honorariums on a cost-sharing basis.

What is the way forward?

- The urgent need for infrastructural improvement in India's Anganwadi centers cannot be overstated.
- The 2.5 lakh Anganwadi centres operate without functional sanitation facilities and 1.5 lakh centres lack access to potable water.
- Approximately 4.15 lakh Anganwadi centers do not possess their own pucca building.
- To unlock the ICDS' full potential and address persistent issues, it is essential to revisit and re-evaluate its strategies and implementation.
- Empowering Anganwadi workers is just a start.

References

- 1. <u>The Hindu</u> Strengthening the ICDS scheme
- 2. <u>Vikaspedia</u> ICDS scheme





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