



Building Social Relationships, Evaluation of Non-Formal Preschool Education and Community Participation at Anganwadi Centre: A Study in Sivasagar District of Assam.

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Abstract

This paper is an attempted to assess the social responsibilities and community participation towards AWC and evaluate non formal preschool education at AWCs in Sivasagar district of Assam. The sample of 90 respondents was selected from different AWCs located in Sivasagar district of Assam. A purposive sampling technique (non probability sampling) has adopted for sample selection and exploratory research design has adopted to access the social responsibilities, community participation and evaluation of non formal preschool education at AWCs. The main tools for collection of data were interview schedule and observation method. Though there is a good number of studies on Anganwadi system under ICDS, the proper evaluation of social relationships, community participation and the works for preschool education have not received due attention yet. The study revealed that people are not aware of what ICDS is and what programmes and benefits are there for them. There is no relation, linkage or co-ordination between the local clubs, youth organization and Mahila Mandal with the AWC, which is a vital weakness and should be overcome to strengthen the process of community participation.

Key Words: Anganwadi Worker (AWW), Anganwadi Centre (AWC), Pre-school Education (PSE), Community participation, Social relationships, Integrated Child Development Services (ICDS)

INTRODUCTION:

Today's children are the future citizens of tomorrow. 'The children of today will make the India of tomorrow. The way we bring them up will determine the future of the country' (J. Neheru). It is the responsibility of society to lay the foundation for proper psychological physical and social development of the child, to teach them the values of life, discipline and culture. Our national policy for Children recognizes that the future of our nation and prosperity of our people depend on the health and happiness of children and the care they receive from family and society to grow up as good human beings and citizens. Their upbringing in a proper environment promoting their health, education and mental development is an important commitment of the society. Many child welfare programmes are launched under the five year plans by the Government. These are related to the needs of children in the areas of education, health, nutrition, welfare and recreation. Special programmes to meet the needs of delinquent, handicapped, destitute and other groups of children are also undertaken. Some of these programmes are related to the growth and development of children, especially children belonging to the preschool age group of 0-6 years. Government of India initiated the Integrated Child Development Services (thereafter, ICDS) scheme in 1975 which operates all over the country aiming at child health, hunger, malnutrition and education. ICDS is globally acknowledged and recognized as one of the world's largest and most unique community based outreach system for women and child development.¹ The status of under-nutrition and malnutrition in women and child by providing supplementary nutrition through AWC is not likely to improve unless the dietary practices improve at the household level. ICDS lays the foundation for all-round development; social, mental, spiritual, physical and moral development, encouraged to develop positive attitude, through child to social environment and child interaction.² Research studies shows that preschool education enhance early literacy skills child's ability to learn to communicate ideas and feelings and to get along with others children are more likely to succeed in school and life, and a unique opportunity for healthy development. During these formative years both positive and negative experience help shape the children's cognitive, social, behavioural and emotional development.³ People's active participation and cooperation is the key to success of a social and developmental programme which is aimed at bringing about a social change in the life of the people.⁴ Community participation is not an automatic process; it moves at its own pace and requires systematic planned efforts on behalf of the social worker. It is imperative that they are involved in the programme right from its inception and the objectives

¹ Banerje, Sangita 1999. A Study on community Participation ICDS at north Calcutta: Research Abstract on ICDS1998-2009; 4.

² Ashwini Kumar, Veena G.Kamath, Asha Kamath, Chithra R Rao, Anajay Pattan Shetty, Afrin Sagir, 2010. Nutritional status assessment of under-five beneficiaries of integrated child development services program in rural Karnataka, Australian Medical Journal, Aml 3, and 8,495-498.

³ Vandana Panday 2011. Community Participation Towards Anganwadi Services in Kakori block of Lucknow District Indian Journal of Maternal and Child Health 12(1) p 1-5.

⁴ Rajesh Kumar Sunder lal 1985. Mothers Reaction to the services of ICDS Scheme, Journal of Health and Population 8(2) 117-122.

and services of the programme are interpreted in a manner that enables them to perceive the programme as the one based on their felt needs.⁵

REVIEW OF LITERATURE:

Ameya et al., (2005) assessed the functioning of the ICDS Anganwadis at the grass root level. She found that three agencies namely the panchayat, the AWW of the ICDS system, and the local community were working efficiently in close coordination towards the welfare of the AWC in Perumkadavila. Kerala still faces challenges in the areas of child health and nutrition. She recommended that AWCs should be more responsive to the needs and demands of parents, particularly teaching of the English language. **Bharati et al., (2003)** studied to evaluate the health services provided to children aged 3-6 years at ICDS centers and to know the extent of awareness and its utilization. The studies revealed that majority of these centres were located in hygienic surroundings. Parents found these centers best in providing health, nutrition, and immunization and referral services, free of cost. In 60% of the AWCs, play activities are performed for promoting healthy growth and development of children. **Tomohiro et al., (2007)** reported that the integration of services as proposed under the ICDS to improve the growth and development of children was inadequate in this village. This inadequacy, combined with shortcomings of village planning initiatives and the lack of a community voice, has hampered the success achieved by an otherwise laudable immunization program. **Prasanti Jena (2013)** has reported on —Knowledge of Anganwadi Worker about Integrated Child Development Services (ICDS): A Study of Urban Blocks in Sundargarh District of Odisha. The main objective of this programme is to cater to the needs of the development of children in the age group of 0-6 years. Results from the analysis suggest that most of the Anganwadi workers are trained; but it was found that performance as well as awareness among Anganwadi workers regarding the importance of growth charts and growth monitoring was not satisfactory. **Banerjee, Sangita. (1999)** has conducted a study on — A Study on Community Participation in ICDS At North Calcutta. Kolkata : Vidyasagar School Of Social Work. This study investigated how better community participation can be ensured. It showed that AWWs had no links with people who were not getting benefits from their centre. Non- beneficiary respondents mentioned that the behaviour of AWW was not good; they favoured healthy, good looking and well-dressed children. **Balsekar Ameya. (2005) has reported on** —Child Welfare and Community Participation: A Case Study of the ICDS Program in Trivandrum District. It was also recommended that AWCs should be more responsive to the needs and demands of parents, particularly teaching of the English language. **Sampath, T. (2006)** has conducted a study on —A Study on Community Participation in Integrated Child Development Scheme (ICDS) in Chennai. It had found that there was lack of co-ordination and cooperation between Government departments while implementing the ICDS program in Chennai city. In a few places the Corporation was running pre-primary schools, and this created confusion among the community members about where they could send their children. The two kinds of preschools created unnecessary internal conflict between

⁵ Rasmi Avula, Edward A, Frongillo, Mandona Afabi Sheel Sharma, Warneer Schltink 2011 enhancement of nutrition program in Indian integrated child development services increased growth and energy intake of children. The journal of nutrition community and international nutrition ASN 10, 680-684.

AWWs and Corporation teachers, and created confusion among community members. **Vinnarasan, A. (2007) has reported on** — A Study on Factors Influencing Non Enrolment of Children in the ICDS, AWC at Chennai Corporation. They were aware of the provision of supplementary nutrition, but not aware of the special care given to malnourished children under the supplementary nutrition component of ICDS. It had found that they were not aware of ECE (Early Childhood Education) contributed to the child's holistic development. **Haryana, Dept. Of Economics and Statistics, Chandigarh. (2004)** conducted a project on "Evaluation Study of ICDS in Haryana 2002-03. The performance of ICDS was found to be satisfactory in SN, PSE and immunization program.. **Sobha, I. (2003)** has worked on —Welfare Services for Women and Children. Most of the AWWs mentioned that they were not getting proper teaching aids other than charts and some toys, and only 15 to 38 children attended each centre regularly. Majority of the supervisors had passed matriculation and 26% were post-graduates. 70% supervisors expressed problems in implementation of programs and suggested improvements like every AWC should have a proper building, teaching aids and play materials. **Samridhi, Mahajan, Arti And Bharti, Shaveta. (2003)** have reported on —Evaluation of Non-Formal Pre-School Education Provided at AWCs (Urban Slums of Jammu City). It was recommended that physical set-up of AWCs should be improved. Adequate measures should be taken to make the parents aware of the progress of their children, and regular activities should be conducted for this purpose. Equal emphasis should be given to all the services of ICDS rather than focusing only on nutrition. **Ashok G. Jadhav (2012)** has worked on —A Study of Selected Anganwadis in Sangli City in Maharashtra, ICDS. It shows that ICDS is very helpful and useful for solving problems of health and nutritional among the children and women. However, the Anganwadi workers were seen less educated. If they are well trained, ICDS will be implemented very effectively to eradicate the problems of health and nutrition among the children and women, both in rural and urban area in Maharashtra.

OBJECTIVES:

The main objectives of this paper is-

1. To study the social responsibilities and community participation towards AWC in Sivasagar district of Assam.
2. To evaluate non formal preschool education at AWCs.

FIELD OF STUDY:

For the present study three ICDS project, namely Amguri, Gaurisagar and Sivasagar (Rural) of Sivasagar district of Assam was selected as a field of study. Among these projects 30 respondents from each project were selected randomly. Total 90 respondents were selected for the present study.

METHODOLOGY:

For this study exploratory research design was used. Both primary and secondary data were collected for the study. The primary data was collected through interview schedule and direct observation experience. The secondary data are collected from the sources were like books, articles, journals, websites etc. Total 90 respondents were selected from these three ICDS project. The purposive sampling methods were used for selection of respondents (non probability methods). The collected data were analyzed using both qualitative as well as quantitative method.

FINDINGS AND ANALYSIS:

The main objective of this paper is to study the social responsibilities and community participation in AWCs and to evaluate non formal preschool education at AWC in Sivasagar district of Assam. The paper is studied on Anganwadi workers (AWW) on various parameters like the function of AWC, Community participation in different functions, role and responsibilities of AWW, opinion of community etc. Finally, the paper observed and analyzed the role and functions of AWWs as well as community participation and social responsibilities towards the functions of the AWCs.

Hence, the investigator collected data on the general perception of parents towards Anganwadi activities. The study reveals the negative perception as out of 90 respondents 8(8.9%) AWWs had not attending AWC regularly, 11(12.2%) had not good cooperation with community, 6(6.7%) respondents had not taking proper care of children, 8(8.9%) were irregular in opening AWC and 9(10.0) respondents have not proper teaching guidance to children except food .

Data has also been collected on positive perception of parents towards Anganwadi system. The study reveals that among the respondents 82(91.1%) were satisfied with the AWC activities, 85(94.4%) respondents informed that the beneficiaries were learning the alphabets, 78(86.7%) parents informed that their child health had improved, 80(88.9%) respondents informed that their child could improved for mixing with other children, 76(84.4%) respondents could availed free health facilities from AWC and 86(95.6%) respondents informed that the Anganwadi system is helpful for further education.

The investigator also studied on Social skills and health habits learned by the children. The respondents informed that 81(90%) had changed the children's behaviour, 77(85.6%) health habits had improved, 81(90.0%) learned the personal cleanliness, 80(88.9) developed to participate in outdoor activities, 85(94.4%) could learn activities like paper cutting, drawing, painting etc., 84(93.3%) could learn activities like pronouncing alphabets, singing, rhymes, speaking to others etc., 86(95.6%) could identifying the concepts of size, shapes, colour, number, time and seasons, dancing etc. And 78(86.7% could improve in eating habits of the child going to Anganwadi.

Favorable attitude to the Services of ICDS was reported by the Community. Most of the respondents are satisfied with services provided by AWC and only 8.9% of the respondents are not happy with the services. The respondents quoted various reasons as there were no co operation from Anganwadi worker, Irregular food distribution at AWC, no fixed time in opening AWC, food is not cooked Properly, Irregularity of Anganawadi worker. This shows that there is some problem in services of the AWC, the parents pointed out that the reasons of drop out from AWC is mainly due to more attraction on

commercial kids centre instead of AWC. They also pointed out that some of the the AWCs are not hygienic for their children.and also informed that there is no active involvement of a primary school teacher, Youth club and Mahilamandals with the system.

Developing social relationship refers to the development of social skills and emotional maturity that are needed to forge relationships and relate to others. It also refers to physical, mental and personality development. In order to develop personality, children need to interact with their peers in a socially acceptable way. Developing good social skills is necessary for them to be able to eventually form healthy relationships and fit in to various social scenarios comfortably. Parental interactions are the building blocks for healthy social relationship in children. By giving lots of love and attention to the baby, parents form a close bond with the child, allowing him her to grow in a comfortable, secure and social healthy atmosphere. Majority 90.4% of the respondents pointed out that the child is benefited going to Anganawadi because of nutritious food given at AWC. Most of the Parents says that Children could learn alphabets and majority of them says that this system is most useful for further education.Parents noticed that health habits of children were improved and there was overall improvement in the preschool activities. like outdoor activities, learning alphabets, singing, dancing, playing rhymes ,speaking with others, identify the color , size, shape, time, number, etc.

Regarding non formal preschool education 95.3% respondents felt that good infrastructure was very much needed to stimulate a child's learning in a better way. Only 57.7% respondents said that AWCs were well equipped with physical infrastructure. Many respondents (78.3%) said that poor physical infrastructure was the reason for their child's non-enrollment in the AWC.100% respondents mentioned that providing preschool education in the mother tongue was good for the child, but an overwhelming majority (91.3%) felt that teaching in English was also mandatory for the child's future. 50.7% respondents mentioned that AWC in their habitation was not a friendly place. Non formal Pre-school education was in great demand, especially in areas where parents were relatively well educated. However, the development needs of young children are poorly understood by communities, and therefore the monitoring of non formal pre school education (NPSE) is limited. This led to some casualness about non formal pre-school education in many AWCs. Lack of space, infrastructure and basic facilities were common hurdles, and many AWWs were inadequately trained for this purpose. In almost all the Anganwadis non formal preschool activities were going on like singing songs (95.1%), story telling, counting (91%), indoor activities (78%), etc.

CONCLUSION:

To run the Anganwadi system, i.e of such large magnitude, support and participation of local people is as important as duties of department. People are not aware of what ICDS is and what programmes and benefits are there for them. It has been observed that majority (79.3%) respondent's sole concerned on the ration they use to get on THR day. They are not showing very much interests in other services like pre-school education, health services and nutritional services which are being provided by ICDS. They never bother to enquire about the food being served or hygiene conditions at AWCs. They are

not aware of nutrient quotient of food items and it has been seen that even in many well to do families' children are mal-nutrition. One more thing that was really disheartening on parents part that they didn't give much importance to uniform and cleanliness of children even after requested multiple times by AWWs.

To get a well qualified pool of AWWs is desirable but all the goodwill will not be encased with other most important half of the program, The beneficiaries are not well aware of services offered by ICDS. They must know how much they deserve and why this all system is being operational. The non-beneficiary respondent mentioned that there was no relation, linkage or co-ordination between the local clubs, youth organization and Mahila Mandal with the AWC, which is a vital weakness and should be overcome to strengthen the process of community participation. People must know the importance of immunization as how severe these diseases can go if not immunized at early stage. They should know the benefits of pre school education, how important it is to maintain proper hygiene and send their children in proper uniform provided by ICDS. In this regard as most of the local people are not good in reading or writing, hence, through starting an advertising campaign on different mass media spreading awareness regarding objectives and services offered will be of great help. In this case, more aware the beneficiaries, better reception of services and integrated development of children will be helpful for attaining the objective of ICDS.

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