

Revathy Vishwanath
Assistant Director I/c (RP)
26716690

Indian Council of Social Science Research
(Ministry of Human Resource Development)
Aruna Asaf Ali Marg, New Delhi - 110067
EPABX: 26741849-51 Fax: 91-11-26741836
rpr@icssr.org

F.No. 02/132/2016-17/RP

Dated: 10.08.2016

The Principal
Guru Gobind Singh College,
Sanghera
Barnala-148101 (Punjab)

3845
21/9/16

Subject: Sanction of Responsive Research Project entitled "Evaluation of Integrated Child Development Services (ICDS) Scheme: A Case Study of Malwa Region of Punjab to Dr. Sarabjit Singh Kular".

Dear Sir,

The Indian Council of Social Science Research (ICSSR) considered the above research project submitted by Dr. Sarabjit Singh Kular, Assistant Professor, Department of Public Administration, Guru Gobind Singh College, Sanghera, Barnala-148101 (Punjab).

2. The Study, as proposed by the researcher/(s), is to be located at and financially administered by your institution as per the guidelines of this award.

3. The ICSSR has sanctioned a grant-in-aid of Rs. 4,00,000/- (Rupees four lakh only) for the above research project and the grant will be released as follows:

First installment:	Rs. 1,60,000/-
Second installment:	Rs. 1,60,000/-
Final installment:	Rs. 80,000/-
Total	Rs. 4,00,000/-

* The break-up budget approved by the ICSSR of Rs. 4.00 Lakh is enclosed.

Revathy

Cont'd. 2/

Principal
Guru Gobind Singh College
Sanghera (Barnala)

**EVALUATION OF INTEGRATED CHILD DEVELOPMENT
SERVICES (ICDS) SCHEME: A CASE STUDY OF MALWA
REGION OF PUNJAB**

A Research Project Report Summary

Submitted to the

Indian Council of Social Science Research (ICSSR)

JNU Institutional Area,

Aruna Asaf Ali Marg,

New Delhi-110067

Submitted By

Dr. Sarbjit Singh Kular

Department of Public Administration,
Guru Gobind Singh College, Sanghera (Barnala), Punjab
148101

April 2018

**EVALUATION OF INTEGRATED CHILD DEVELOPMENT
SERVICES (ICDS) SCHEME: A CASE STUDY OF MALWA
REGION OF PUNJAB**

The child not only inherits but also transmits the human culture and civilization, human values and ethos. The child is the greatest human asset and most valuable wealth, which has to be nourished with all love and care and protected from all kinds of evils and exploitation, so the human beings


Principal
Guru Gobind Singh College
Sanghera (Barnala)

will be happy and the world will prosper.¹ Early childhood (the first six years) constitutes the most crucial period in life, when the foundations are laid for cognitive, social, emotional, physical development and cumulative life-long learning. Child's survival, growth and development have to be looked at as a holistic approach, as one cannot be achieved without the others. There have to be balanced linkages between education, health and nutrition for proper development of a child

As per population Census of India, 2011, India has around 15, 87, 89,287 million children constituting 13.12% of India's population, who are below the age of 6 years. Of these 15, 87, 89,287 million children, 7, 58, 37,152 (12.93%) million children are girls and remaining 8, 29, 52,135 (13.30%) million children are boys. The sex ratio among children (0-6 years) as per Census 2011 is 914, i.e., 914 females per 1000 males. But majority of them lives in such economic and social environment which impedes the child's physical and mental development. These conditions include poverty, poor environmental sanitation, disease infection, inadequate access to primary health care, inappropriate child caring and feeding programmes. Such grim background of the children is leading to high mortality rates among them due to low birth weights of infants, malnutrition, complication from measles, polio myelitis, diarrhoea and gastroenteritis, respiratory infection etc.²

Several Child Welfare Programmes launched at different intervals highlight the priority and importance of young child's right to survival and development, which is the responsibility of the State. National Policy on Children 1974 directed the "State to provide adequate services to children, both before and after birth and throughout the period of growth, to ensure their full physical, mental and social development". A study team constituted by the Planning Commission in 1972 suggested comprehensive plan of action to meet the needs of children. As a result of the recommendation of the study team, along with the national policy of children in 1974, **the Integrated Child Development Services (ICDS) Scheme** was launched on the auspicious occasion of the 106th birth anniversary of Mahatma Gandhi, the Father of the Nation.³ In the initial stages ICDS was implemented in 33 selected community development blocks. Young children are most vulnerable, because the foundation for the life-long learning and human development is laid in the early years, therefore the ICDS Programme has been designed to promote and facilitate total development of the child, through different component viz., health, nutrition, pre-school education.

It is perhaps the only country-wide program in the world functioning on a large scale, requiring multi sectoral operations and inter sectoral linkage for its implementation, and Up to 31st December 2014; there

Principal
Guru Gobind Singh College
Sanghera (Barnala)

are 7076 sanctioned projects, 7067 operational projects in India, under the scheme, Supplementary nutrition service is being provided to about 104110639 lakh beneficiaries, comprising of about 84293250 lakh children (6 months to 6 years) and about 19817389 lakh pregnant and lactating mothers and pre-school education service is being provided to about 34981178 lakh beneficiaries, comprising of about 18288693 lakh boy children and about 16692485 lakh girl children through a network of about 13,42,285 lakh operational *Anganwadi* Centres in India.⁴

ICDS in Punjab

In Punjab, ICDS program has expanded very rapidly. At present, there are 155 sanctioned and 154 operational projects. The program was first introduced in Punjab in 1975 with the setting up of an ICDS project at Nurpur Bedi in district Ropar. In Punjab, The Government is taking steps to effectively implement ICDS considering its importance. The number of *Anganwadis* in Punjab has almost doubled in the last few years. Presently, services under the scheme, Supplementary nutrition service is being provided to about 1180333 lakh beneficiaries, comprising of about 921950 lakh children (6 months to 6 years) and about 258383 lakh pregnant and lactating mothers and pre-school education service is being provided to about 386439 lakh beneficiaries, comprising of about 199105 lakh boy children and about 187334 lakh girl children through a network of about 26656 lakh operational *Anganwadi* Centres.⁵

ICDS is a unique program, which encompasses the main components of human resource development namely- health, nutrition and education. Under ICDS, **a package of six services**, including supplementary nutrition, immunization, health check-up, referral services, pre-school education and health and nutrition education services is provided to children below six years of age, expectant women, nursing mothers and women between 15 to 45 years of age.⁶ The focal point of the convergence of these services is *Anganwadi*, located within the village. Each *Anganwadi* runs by an *Anganwadi* Worker. For supplementary nutrition, all families in the community are to be surveyed to identify the poorest children below the age of six as well as expectant and nursing mothers. They are to be distributed food for 300 days a year. All children in the project area are to be immunized against six commonly prevalent illnesses like diphtheria, whooping cough, tetanus, poliomyelitis, tuberculosis and measles. Pregnant women are also immunized against tetanus. Regarding health check-ups, all children and expectant and nursing mothers are to be examined, at regular intervals by the Lady Health Visitor (LHV) and Auxiliary Nurse Midwife (ANM). Pre-school Education is imparting to children from three to six years of age for one to two hours in a day. The pre-school education is meant to stimulate and satisfy the curiosity of young children. Also, non- formal

training in nutrition and health education is to be organized at the Anganwadi for nursing mothers and pregnant women.⁷ It takes a holistic view of the development of the children and attempts to improve both their prenatal and postnatal environments.

Significance of the Study

The Integrated Child Development Services (ICDS) is considered the best expression of our commitment for our children. It is claimed to be the largest, unique and integrated program of the world for early child development, converging interventions for health, nutritional well-being, psycho-social and cognitive development linked to other sectoral operations for safe drinking water, environmental sanitation and women's development. The development of our children is a true indicator of our progress and of the power of a vibrant democracy to fulfill its promises to people. Therefore, the present study aims to evaluate this ICDS scheme in the context of Malwa region of Punjab, which is considered one of the most developed states in India.

The area south of the river Sutlej is called Malwa. The present study on Malwa (Punjab) assumes special significance because Malwa the largest part of the Punjab is divided into the 15 districts namely Ludhiana, Faridkot, Muktsar, Moga, Bathinda, Mansa, Sangrur, Barnala, Patiala, Ferozepur, Rup Nagar, Mohali, Fazilka, Shaheed Bhagat Singh Nagar and Fatehgarh Sahib, out of total 22 districts of Punjab. In this context, it is worthwhile to see whether the program has achieved the expected objectives especially with regard to women and children as every year the government is spending enormous amount for the promotion of ICDS. The plan allocation which stood at 44,400 crore during the XI plan period, has now increased to 103,003 crore for the XII plan (2012-2017). For the 2nd year of the Twelfth Plan i.e. for 2013-14, an amount of 16,267.49 crores has been released to States/UTs as on 31.03.2014 against Originally Budget allocation (BE) of 17,700.00 crore.⁸ Therefore, the present study aims to examine whether the huge investment made on ICDS is justified or not. As there is hardly any comprehensive study on ICDS in Punjab, the implementation of the present study becomes manifold.

Scope of the Study

The scope of the present study includes evaluation of ICDS Scheme in Malwa region of Punjab. Out of the fifteen districts covered by the Malwa region Barnala, Mansa, Bathinda, Sangrur, Moga, Muktsar, Faridkot and Ludhiana has been chosen for the study. This study focuses on pre-school education, supplementary nutrition and nutrition and health education component of ICDS scheme. It aimed to assess the impact of pre-school education on children and to assess supply and distribution of supplementary nutrition for children between 0 to 6 years of age. It also

focused on assessment of health awareness of pregnant women, nursing mothers and women between 15 to 45 years of age in the chosen districts. Specific problems faced by ICDS personnel regarding the implementation of program are also included in the scope of the study. Suggestions will be given to improve the work of ICDS.

Objectives

The objectives of the study are:

1. To trace the growth of ICDS scheme in India as well as Punjab.
2. Describe the organization of Ministry of Women and Child Development, India and department of Social Security and Women and Child Development in Punjab.
3. To assess the methods of pre-school education to children in *Anganwari* Centres.
4. To assess the job-performance of Anganwadi Workers.
5. To assess the supply and distribution of supplementary nutrition ration to children.
6. To assess the supply and distribution of supplementary nutrition ration to women.
7. To examine the impact of the health and nutrition education components of ICDS on the women (pregnant women, nursing women and general women) population in terms of enhancement of their knowledge about the immunization, nutritious food for children and prevention of nutritional deficiency diseases.
8. To assess the co-ordination between headquarters and field-level of the ICDS delivery system.
9. To assess the community participation in ICDS programme.
10. To identify the drawbacks in the implementation of the project in Barnala.
11. To suggest remedies to enhance the effectiveness of ICDS in Malwa region of Punjab.

Hypothesis

1. The functioning of pre-school education component of ICDS has been making a positive impact on the children.
 - a. The role-performance of AWWs regarding pre-school education activities is satisfactory.
 - b. Through pre-school education activities of ICDS, learning ability of children has increased
2. The supply and distribution of supplementary nutrition ration for children and women at AWC is not satisfactory.
 - a. The supply and distribution of supplementary nutrition ration for children at AWC is not satisfactory.

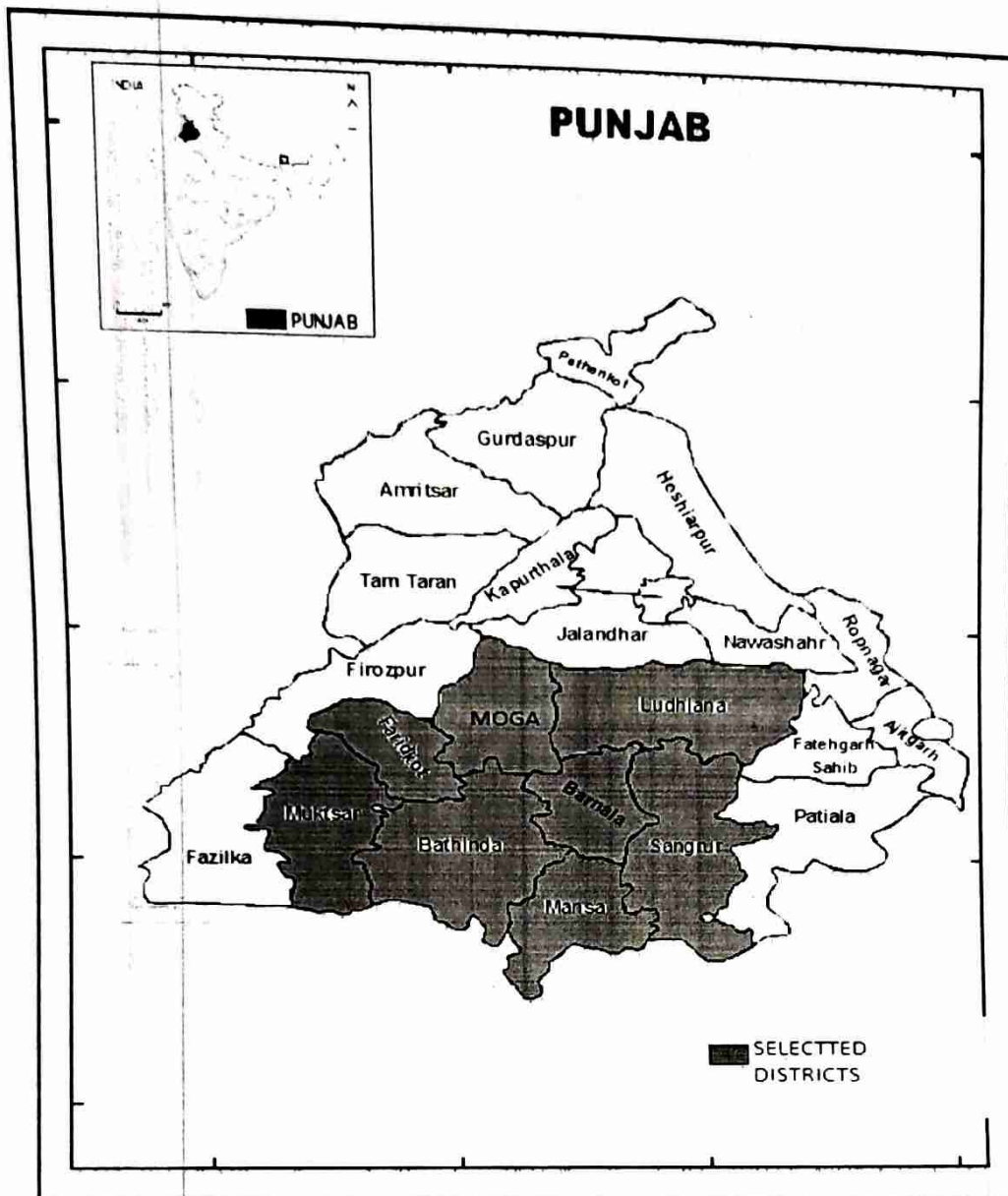
- b. The supply and distribution of supplementary nutrition ration for pregnant and nursing women at AWC is not satisfactory.
3. The nutrition and health education program of ICDS has achieved its objectives.
 - a. Through nutritional and health education program of ICDS pregnant women show proper health awareness about the immunization, nutritious food for children and prevention of nutritional deficiency diseases.
 - b. Through nutritional and health education program of ICDS nursing women show proper health awareness about the immunization, nutritious food for children and prevention of nutritional deficiency diseases.
 - c. Through nutritional and health education program of ICDS general women show proper health awareness about the immunization, nutritious food for children and prevention of nutritional deficiency diseases.
4. There are serious problems in the implementation of ICDS program at grass-roots level
 - a. There is a lack of co-ordination between headquarters and field-level of ICDS program
 - b. The infrastructure and facilities at AWCs are below the required norms.
 - c. There is a lack of community participation in the ICDS programme.

Methodology

The universe of the study includes ICDS Scheme's beneficiary children between 0 to 6 years, expectant and nursing mothers, and women between 15 to 45 years of Malwa Region of the state of Punjab. Barnala, Mansa, Bathinda, Sangrur, Moga, Muktsar, Fridkot and Ludhiana districts selected from Malwa region of Punjab for the study. The location of the present study is shown in Map 1.1

Map 1.1
Location of Study


Principal
Guru Gobind Singh College
Sanghera (Barnala)



Source: https://www.google.co.in.punjab_maps.

Further 05 Anganwadis from each district were selected on the basis of random sampling. From each Anganwadi 06 women, comprising of 02 pregnant women, 02 nursing women and 02 general women between 15 to 45 years of age were selected randomly. From each Anganwadi, 03 children each between 3 to 6 years of age were selected randomly. Total 40 Anganwadi workers (one from each Anganwadi) were also selected for study. Sixteen Supervisors two from each district were selected. Total eight Child Development Project Officers one from each district were selected. One village Sarpanch from each Anganwadi area was also selected. Total respondents selected for study are presented below in Table 1.2.



 Principal
 Guru Gobind Singh College
 Sanghera (Barnala)

Table -1.2
Sample Selected for the present study

Name Of District	Number of Selected Anganwadies from each ICDS Project	Number of Selected Respondents							
		Pregnant Women	Nursing Women	Women From 15-45 years of age	Children from 3-6 years of age	Anganwadi worker	Supervisors	C.D.P.Os	Sarpanchs
Barnala	05	10	10	10	15	05	2	1	05
Mansa	05	10	10	10	15	05	2	1	05
Sangrur	05	10	10	10	15	05	2	1	05
Bathinda	05	10	10	10	15	05	2	1	05
Moga	05	10	10	10	15	05	2	1	05
Muktsar	05	10	10	10	15	05	2	1	05
Fridkot	05	10	10	10	15	05	2	1	05
Ludhiana	05	10	10	10	15	05	2	1	05
Total	40	80	80	80	120	40	16	8	40

The present study is primarily based on primary sources of information. For primary data, responses were elicited from the chosen sample through open and close ended questions in the Schedule during interviews. Three Interviews Schedules were made for beneficiaries women as

- Pregnant women
- Nursing women
- Women from 15-45 years of age

Schedules were also formed for project level ICDS functionaries namely

- CDPOs
- Supervisors
- Anganwadi Workers

One Schedule was made for

- Village Sarpanch

Intelligence Test for measuring intelligence of children regarding their abilities to do counting, to identify vegetables, to identify colours and colour inside crayon etc. were also formed.

Observation Schedules were also made for

- Anganwadi Workers, pregnant women, nursing women and women from 15-45 years of age.

- Schedules were designed in English and for the convenience of the respondents, they were translated in Punjabi which is common language spoken in the Malwa region of Punjab.

Besides this, secondary sources of information like books, articles, and newspaper clippings, articles in research journals, websites and reports were also consulted to collect the factual data concerning the study.

MAJOR FINDINGS:

1. Pre-School Education Component of ICDS

I (a) Pre-school education and AWWs

Under the present study, a total 40 Anganwadi workers comprising 05 Anganwadi workers from each district were selected randomly for evaluating some parameters like, to know the methods of Pre-school education, time devoted for Pre-School Education at *Anganwadi* centers. From the detailed discussion of various variables related to Pre-school education and AWWs, the major **findings** are given below:

1. A majority (62.50%) of AWWs faced different problems in organizing pre-school education activities at AWCs and a lack of interest among children and parents emerged as the most important problem.
2. 52.50% of the AWWs did not receive help from the Supervisor at all for organizing pre-school education activities.
3. A high majority (80%) of the AWWs revealed that the primary and private school teachers admitted the children up to 4 years of age at their schools when they were short of the number of kids in their schools in order to justify their existence.
4. It was found that 42.50% of the AWWs devoted below an hour in a day for pre-school education which was lesser than the time they were supposed to spend for pre-school activities under the rules.
5. About 42.50% *Anganwadi* workers are using play way and 25% *Anganwadi* workers are using demonstration methods for conducting pre-school education. Near one third (32.50%) AWWs were using story telling methods for pre-school education activities which can be even more appealing to the children.

1. (b) Pre-school education and Children

The present study was conducted to examine the impact of pre-school education program of ICDS Scheme on children from 3-6 years of age in all selected eight districts under the study of Malwa region of Punjab. For this purpose, total 40 AWCs (05 AWCs from each selected district) were selected randomly and from each AWC, three children (15 children from each district) were selected for the study. From the detailed discussion on the various variables, the following select **findings** can be drawn:

1. It is very disappointing to observe that in all 40 Anganwadi Centres, no child was able to count up to 100.
2. Only 30.83% children of the selected sample were able to count and tell the number of stones.
3. A few (02.25%) children could identify 3 or 4 of the colours by name.
4. Only (05%) children could identify 5-6 pictures of vegetables.
5. A majority 72.49% of children failed to hold the crayon and colour inside shape.

2. Supplementary Nutrition Ration Component of ICDS

2 (a) Supplementary Nutrition Ration and Children

In the present study, the supplementary nutrition component of ICDS, for the children from six months to six years of years of age in all eight selected district of Malwa region of Punjab has been evaluated on the basis of the various parameters. The **findings** are as under:

1. It was found that only 35% Anganwadi worker got regular SN ration in time during 1st Jan., 2015 to 31st Dec., 2015 in Malwa region of Punjab.
2. A high majority (80%) of AWWs did not distribute SN ration 300 days in a year as per national norms.
3. It was sad to find from the data on children that due to various reasons less than half beneficiary children below six years of age were able to receive supplementary nutrition ration from AWCs .

2 (b) Supplementary nutrition ration and pregnant women and nursing women

The major **findings** of the study on Supplementary Nutrition ration for pregnant and nursing women in Anganwadi Centres are given below:

1. It was found that only 25% AWWs were getting SN ration in time during 1st Jan., 2015 to 31st Dec., 2015.
2. A high majority (80%) of AWWs did not distribute SN ration for 300 days in a year as they were supposed to under the rules.
3. The data of the study also showed that on the whole, only 10% of the AWWs answered that all given food items to the women were acceptable.
4. A majority (82.50%) of the AWWs replied that below fifty percentages of beneficiaries women received SN ration from AWCs due to various reasons.

3 Nutritional and Health Education (NHED) Component of ICDS

3 (a) Nutritional and Health Education and Pregnant Women (PW)

The major **findings** of the study on the impact of NHED of ICDS on the pregnant women in terms of enhancing their knowledge in the critical

Health Care areas and the extent to which the PW put this knowledge into practice are given below:

1. A majority (73.75%) PW had gone to a proper place for pre-natal check-up.
2. More than fifty parentages (52.50%) of the PW did not receive SN food from the AWCs due to various reasons.
3. A majority (77.50%) of the PW was able to take iron and folic acid tablets as per nutrition norms.
4. A majority (67.50%) of the PW had proper knowledge and awareness about the importance of colostrum for the new born babies.
5. Only 08.75% of PW knew about different types of child vaccinations.
6. A high majority (80%) PW did not know the real reason behind measles.
7. A high majority (86.25%) of PW were not sure about ways of managing measles.
8. A majority (73.75%) of the pregnant women were not having any skill to prepare oral re-hydration solution.

3 (b) Nutritional and Health Education and Nursing Women (NW)

The present study on the impact of nutrition and health education of ICDS on the nursing women in terms of enhancing their knowledge in the critical health care areas and the extent to which the nursing women put this knowledge into practice shows the following **findings**:

1. It was found that 78.75% women went to PHC/ Sub-centres and government health staff for the child delivery.
2. A high majority (60%) of the NW did not undergo any health check-ups after the delivery.
3. A majority (61.25%) NW did not receive supplementary nutrition ration from AWCs due to various reasons.
4. A majority (73.75%) NW gave colostrum to the new born after delivery which was a good practice.
5. A high majority (91.25%) of the NW did not know about the different types vaccinations to be given to a child.
6. It was shocking to note that 82.50% NW did not have awareness about the main cause of measles.
7. The findings also indicated that a high majority (83.75%) of NW were not sure about the right way of managing measles.
8. A majority 75% of NW did not have any knowledge to prepare oral rehydration solution.

3 (c) Nutritional and Health Education and General Women

The present study also assessed the impact of nutrition and health education on the women (15-45 years) in terms of enhancing their knowledge in the critical Health Care areas and the extent to which the

A major
which
A high
type
to

women put this knowledge into practice. After the detailed discussion the major **findings** are given below:

1. A very high majority (91.25%) of woman did not receive any NHED training from AWWs.
2. A majority (58.75%) of the women did not give colostrum to their child which is rich in antibodies.
3. It was very disappointing to note that a high majority (95%) of women did not start breastfeeding to their new born within first two hours of birth as per norms recommended.
4. A high majority (97.50%) of the women did not have proper knowledge about the six vaccinations to their children and they were not able to tell the name of even one vaccination.
5. A majority of (72.5%) women did not know how to prepare even the simple oral rehydration solution.
6. A majority (75%) woman did not get their children weighed from time to time at AWWs due to various reasons.

4 Implementation Process of ICDS

4 (a) Co-ordination between headquarters and field-level of ICDS program

The ICDS scheme is expected to be implemented with effective co-ordination among ICDS staff as CDPO, Supervisors and Anganwadi workers and health staff as Medical Officers, LHVs and ANWs at the project level. In the present study, the major **findings** on co-ordination between headquarters and field level of the ICDS delivery system are given below:

1. A majority (87.50%) of AWWs did not undertake the home visits in a month as per recommendation norms.
2. A high majority (90%) of the AWWs said that supervisor did not go with them during their home visits to identify the beneficiaries due to various reasons.
3. It was shocking to find that no CDPO went with AWWs for developing family contacts during their home visits.
4. A high majority (80%) of the AWWs reported that CDPO did not visit AWCs even once.
5. A high majority (95%) of AWWs replied that they got help from ANM.
6. A high majority (92.50%) AWWs reported that the ANM visited more than two times at the AWWs.
7. It was sad to find that a 52.50% of AWWs answered that LHV did not visit any time at AWCs from 1st January, 2015 to 31st December, 2015.
8. It was disappointing to find that no Medical Officer visited regularly at the AWCs as per recommended norms during 2015.
9. All supervisors did not pay monthly visit to the AWCs as per national guidelines.

10. All the CDPOs admitted that they were not able to achieve the target of visits at AWCs fixed by the Government India due to too much of the administrative work at the project level.
11. It was deplorable to find that being an incharge of a project, a high majority (87.50%) CDPOs did not take any step to strengthen the enrolling of children which was not good on their part.

4 (b) Infrastructure and facilities at AWCs

Infrastructure and facilities at AWC are must for proper implementation of ICDS programme at grassroots level. After the detailed discussion on various variables the major **findings** are given below:

1. A high majority (85%) of AWCs were not running in their own buildings.
2. It was disappointing to find that in all (100%) of the AWCs did not have sufficient three rooms space as per recommended norms.
3. Shockingly, a majority (75%) of AWCs did not have any storage space to store the SN ration.
4. No AWCs had availability water-purifying facility for the children.
5. It was disappointing to find that 82.50% of the AWCs have not at least one toilet in good condition.
6. A high majority 95% of the AWCs had not a separate kitchen in good condition for cooking the meals for the children and women.
7. About 55% of the AWCs did not have playground or open outdoor space for playing to the children at AWCs.
8. A majority (70%) of AWCs did not have any essential commodities/items as per the requirement.
9. It was disappointing to note that 65% of the AWWs had no weighing machine and were not able to keep the health record of beneficiary children, pregnant women and nursing mothers.

4 (c) Community participation in the ICDS program

The objective of the study was also to ascertain the community participation in ICDS programme. The **findings** are presented below:

1. It was disappointing to find that a majority (62.50%) of the AWWs did not receive any help from anyone in running the AWCs at village level.
2. It was sad to find that a majority (72.50%) of AWWs faced various problems regarding involvement of community in the Anganwadi activities..
3. It was also found that about 57.50% of the Village Sarpanches did not visit the AWCs at all.
4. A high majority (97.50%) of the Village Sarpanches admitted that they were not formed any local committee to help the AWWs to conduct different activities.

5. It was again shocking to note that a high majority (97.50%) village Sarpanches of the selected sample confessed that there was no organization like Youth Club or village school teachers or voluntary organizations at the village level to help the AWWs.

RECOMMENDATIONS

The following recommendations are given on the basis of the present study:

1. It is suggested that vigorous campaigns needed to be launched by the government using TV, drama, and other media to create awareness especially amongst the rural population about the overall services and benefits of the ICDS programme so that they were mobilized to send their children to AWCs.
2. Agencies responsible for supply of supplementary nutrition need to be given clear instructions so that no disruption of supplementary nutrition takes place at Anganwadi level under any circumstances except those caused by natural calamities or extremely bad weather conditions.
3. It is recommended that Supervisors should be given the responsibility of organizing formal NHED sessions at regular intervals in AWCs under their supervision. Continuous and effective monitoring by CDPOs and district officials, as also active participation of health functionaries, can go a long way in the effective implementation of this component. CDPOs and supervisors, in such cases, can accompany the AWWs to make more home visits and be a part of the process of motivating the women to come for NHED sessions.
4. There is a need to improve the coordination between the ICDS and the health staff. The CDPOs and the MOs of PHC should conduct joint visits to the Anganwadi areas to increase the performance of the programme. AWWs and ANMs and ASHA should work in close collaboration.
5. Some more avenues of promotion to a higher post should be created for AWWs and ANMs. Some quota could be fixed in the ANM training courses for the AWWs who were matriculates and had worked satisfactorily for at least 5 years. This would work as an incentive and help the AWWs to get a regular government job with a much better salary. Also, the ANMs who are graduates should be considered for the post of supervisors (ICDS).
6. Efforts should be made to avail the functional weighing machine at all AWCs and ICDS programme can then ensure appropriate growth of all the women and children under its coverage. Besides it, immediate attention and a concrete measure of action are taken to provide toilet facility and water facility to all the AWCs.

7. ICDS programme needs popularisation at village and block levels so that the neediest are able to derive benefits from the programme. This would also enable them to take benefits of other development programmes also. This will call for launching of special campaigns as was done in the past in certain ICDS projects by involving state, district and block level officials as also elected women representatives to raise consciousness of community on issues related to women and children. This would also generate community contribution, cooperation and support. The whole process would necessarily involve Mahila Mandals, youth clubs, religious leaders and other functionaries of civil society organisations.

REFERENCES

- 1 T.Mamata and D.Sarada, *Child Right*, Discovery Publishing House Pvt. Ltd., New Delhi, 2009, p. 1.
- 2 Usha Rani Pasupuleti and A.Laxmi Devi, *Integrated Child Development Services: A Study of Job Performance of Supervisors*, Discovery Publishing House, New Delhi, 2004, p. 1.
- 3 T.Mamata and D.Sarada, *Child Right*, Discovery Publishing House Pvt. Ltd., New Delhi, 2009, p. 6.
- 4 *Annual Report 2014-2015*, Ministry of Women and Child Development, Government of India, New Delhi, p. 180.
- 5 *Annual Report 2014-2015*, Ministry of Women and Child Development, Government of India, New Delhi, p. 180.
- 6 Vijay Rattan, *Integrated Child Development Services Program Administration*, Vol-1, S. Chand and Company Ltd., New Delhi, 1997, p. 36.
- 7 D.N. Kakar, *Environment and Integrated Child Development Services*, Uppal Publishing House, New Delhi, 1992, pp. 3-4.
- 8 *Annual Report 2014-15*, Ministry of Women and Child Development, Government of India, New Delhi p.25.

Revathy Vishwanath
Deputy Director
RP Division Incharge
Tel #011-26716690
E-mail: mmp2016rpr@gmail.com

Indian Council of Social Science Research
(Ministry of Human Resource Development)
JNU Institutional Area, Aruna Asaf Ali Marg
New Delhi - 110067
Website: www.icssr.org

SANCTION ORDER

F.No.: Gen-16/2019-20/ICSSR/Research Programme

Dated: 23-12-2019

The Principal
Guru Gobind Singh College
Sanghera (Barnala) Punjab-148101

Subject: Sanction of Research Programme entitled "Evaluation of Integrated Child Development Services (ICDS) Scheme: A Comparative Study of Punjab and Rajasthan States of India" to Dr Sarbjit Singh Kular.


Dear Sir,

1. The Indian Council of Social Science Research (ICSSR) considered the above major research Project submitted by DR SARBJIT SINGH KULAR, PRINCIPAL CUM PROFESSOR IN PUBLIC ADMINISTRATION, GURU GOBIND SINGH COLLEGE, SANGHERA (BARNALA) PUNJAB- 148101. Co Project Directors of the study are: Nil.
2. The study, as proposed by the researcher, is to be located at and financially administered by your institution as per the guidelines of this award.
3. The ICSSR has sanctioned a grant-in-aid of Rs.25,00,000/- (Rupees Twenty Five lakhs only) for the above research project and the grant will be released as follows:

First Instalment	:Rs.10,00,000/-
Second Instalment	:Rs.7,50,000/-
Third Instalment	:Rs.5,00,000/-
Fourth Instalment	:Rs.1,25,000/-
Publication cost*	:Rs.1,25,000/-
Total	:Rs.25,00,000/-
Overhead charges over and above 5% or maximum Rs.1,00,000	: Rs.1,00,000 /-**

- * ICSSR would publish it subject to recommendation by the expert and relevant Committees for the purpose, from the overall budget, so to be retained by the ICSSR.
- ** will be released on successful completion of project after evaluation.

(The break-up budget approved by the ICSSR of Rs.25,00,000/- is enclosed.)


Principal,
Guru Gobind Singh College,
Sanghera (Barnala)

Indian Council of Social Science Research
(Research Projects Division)

PROGRESS REPORT

Project Details:

Title of the Study	"Evaluation of Integrated Child Development Services (ICDS) Scheme: A Comparative Study of Punjab and Rajasthan States of India."
Affiliation	Guru Gobind Singh College, Sanghera (Barnala), Punjab University, Patiala, Punjab
Date of Commencement as per sanction order issued	9 December 2019.
Budget Approved (Rs.)	Rs. 25,00,000/

Timeline as per original plan	Two Years, From 9 December 2019 to 8 December 2021.
Where are you in terms of original plan	I am working on the first three Chapters of the study and I am also collecting the Primary and Secondary Data from the Rajasthan state of India
Is there any delay in the original plan?	No,
Reasons of the delay	Nil

What have you completed so far during the period under review, especially, (Note: There should not any duplication/repetition between two progress reports)

a) Review of Literature:
Literature consulted;
Research gap found

ICDS is a unique program, which encompasses the main components of human resource development namely- health, nutrition and education. Under ICDS, a package of six services, including supplementary nutrition, immunization, health check-up, referral, pre-school education and health and nutrition education services is provided to children below six years of age, expectant women, nursing mothers and women between 15 to 45 years of age. The focal point of the convergence of these services is Anganwadi, located within the village. Each Anganwadi runs by an Anganwadi Worker. For supplementary nutrition, all families in the community are to be surveyed to identify the poorest children below the age of six as well as expectant and nursing mothers. They are to be distributed food for 300 days a year. All children in the project area are to be immunized against six commonly prevalent illnesses like diphtheria, whooping cough, tetanus, poliomyelitis, tuberculosis and measles. Pregnant women are also immunized against tetanus. Regarding health check-ups, all children and expectant and nursing mothers are to be examined, at regular intervals by the Lady Health Visitor (LHV) and Auxiliary Nurse Midwife (ANM).

Principal
Guru Gobind Singh College
Sanghera (Barnala)

school Education is imparting to children from three to six years of age for one to two hours in a day. The pre-school education is meant to stimulate and satisfy the curiosity of young children. Also, non- formal training in nutrition and health education is to be organized at the Anganwadi for nursing mothers and pregnant women. It takes a holistic view of the development of the children and attempts to improve both their prenatal and postnatal environments.

It is **inferred from review of the vast existing literature** on the ICDS that this scheme has been studied in many states of India like Haryana, Jammu and Kashmir, Chandigarh (UT), Chhattisgarh, New Delhi, Uttar Pradesh, Gujarat, Maharashtra, Madhya Pradesh, Orissa, Andhra Pradesh and Kerala etc. But it is surprising to note that despite the crucial importance of this Scheme in women and child development, there is no significant work found on Evaluation of Integrated Child Development Services (ICDS) Scheme in the context of the comparative study on rich and backward states of India. Hence, this study undertakes as a humble step to fill this serious gap. Under the present study, Punjab is representing to the rich states and Rajasthan is representing the to backward states of India.

b) Preparation of questionnaire/interview schedule (attach a copy)

The present study primarily base on primary sources of information. For primary data, responses are eliciting from the chosen sample through open and close ended questions in the Schedule during interviews.

Three Interviews Schedules are made for beneficiaries women as

- Pregnant women
- Nursing women
- Women from 15-45 years of age

Schedules are also formed for project level ICDS functionaries namely

- CDPOs
- Supervisors
- Anganwadi Workers

One Schedule makes for

- Village Sarpanch

Intelligence Test for measuring intelligence of children regarding their abilities to do counting, to identify vegetables, to identify colours and colour inside crayon etc. is also formed.

Observation Schedules are also made for

- Anganwadi Workers, pregnant women, nursing women and women from 15-45 years of age.

Schedules are designed in English and for the

Principal
Guru Gobind Singh College
Sanghera (Barnala)

	<p>convenience of the respondents, they translated in Punjabi and Hindi which is common language spoken in the Punjab and Rajasthan states. Besides this, secondary sources of information like books, articles, and newspaper clippings, articles in research journals, websites, official documents and reports are also consulting to collect the factual data concerning the study.</p>
c) Visit to libraries/institutions	<p>I visited the Main Library of Punjabi University, Patiala and I often visit the Guru Nanak Dev Library, Guru Gobind Singh College, Sanghera (Barnala)</p>
d) Field work (details of the places visited and sample)	<p>During this time, we are visiting villages of the Amritsar, Ludhiana, Tarantaran, Jalandhar, Ferozpur, Faridkot, SBS Nagar, SAS Nagar districts of Punjab and thirty villages of the Dausa, Hanumangarh, Bikaner, Churu, Jhunjhunnu and Sikar districts of Rajasthan to collect the primary data for the study from the beneficiaries of ICDS scheme. I also collected the secondary data for the study from ICDS functionaries and various Government Offices of the selected districts of Punjab and Rajasthan state of India.</p>
e) Current status of research work/completed chapters	<p>The study is divided into seven chapters. Now, I am working on the first three chapters of the study. The first chapter consists of the introduction of the topic. It also highlights the significance, scope, objectives, hypothesis and methodology of the study. In the second chapter, an attempt makes to trace the genesis, growth and objectives of ICDS. It also elaborates services, beneficiaries, population norms, supplementary nutritional norms, financial norms, expansion of ICDS, training infrastructure, ICDS team, administration and implementation of the programme and training infrastructure of the ICDS scheme in India. The third chapter describe the organization and administration aspect of Ministry of Women and Child Development at Union level, Department of Social Security and Women and Child Development at state level, ICDS programme at district level, project level, circle level and village level.</p>
f) Research milestones achieved so far	<p>We collected the Primary data from ICDS scheme's beneficiaries Pregnant women, Nursing women and Women from 15-45 years of age those are living in the various villages which are selected for the study from Amritsar, Ludhiana, Tarantaran, Jalandhar, Ferozpur, Faridkot, SBS Nagar, SAS Nagar districts of Punjab. We also collected the primary data from the beneficiaries of ICDS scheme, those from the villages, which are selected for the study from Dausa,</p>

	<p>Hanumangarh, Bikaner, Churu, Jhunjhunu and Sikar districts of Rajasthan. We selected the respondents for the study to use Stratified random samplings method. Furthermore, we also collected the primary and secondary data from ICDS functionaries namely, CDPOs, Supervisors, Anganwadi Workers. In addition to this, we also conducted the interview for the village Sarpanches to collect the primary data..</p>
--	---

<p>Plan towards completion: Research plan for the next six months including expected outcomes (approximately 200 words month-wise)</p>	<p>During the month of December, we are collecting the primary and secondary data from the respondent of Ganganagar, Hanumangarh, Bikaner, Churu, Jhunjhunu, Sikar, Nagaur and Jaipur districts of Rajasthan. We are collecting this data from ICDS scheme's beneficiaries children, Pregnant women, Nursing women and Women from 15-45 years of age. We are selecting the respondents for the study on the stratified random sampling base from the villages which are selected for the study from Rajasthan. Moreover, we will also collect the primary and secondary data from ICDS functionaries namely, CDPOs, Supervisors, Anganwadi Workers in the month of January 2021. In addition to this, we will focus on coding and editing of the research data during the month of February 2021. Moreover, we will analysis the research data in the month of March 2021. We will complete the first three chapter of the study during the month of April in 2021. Finally, we will write the chapter fourth and fifth during the months of May and June 2021.</p>
--	---

<p>Details of academic activities: A) Research papers/articles published (attach copy as proof)</p>	<p>Three Research Papers are Published during this time: 1) "Level of Knowledge of Nursing Women about Critical Health Care Areas in Rural Punjab", Acta Scientific Women's Health, ISSN: 2582-3205, Volume 2, Issue 2, February 2020. 2) "Knowledge of Anganwadi Workers and Their Problems in Rural ICDS Blocks of Rajasthan", Shodh Sarita, ISSN-2348-2397, Volume 7, Issue 26, April-June 2020, pp-49-54. 3) "Status of Pre-School Education Program of ICDS Scheme in Rural Rajasthan", Administrative Development 'A Journal of HIPA, Shimla' ISSN-2319-2976, Volume 7, Number 1, January-June 2020, pp-353-362.</p>
---	--

<p>B) Papers presented in seminars/conferences with details (attach copy as proof)</p>	<p>Nil</p>
--	------------

Dated: 13 December, 2019

Award Letter of Major Research Project

Dear Dr. Bhupinder Singh,

Please refer to your Interaction with Expert Committee regarding Major Research Project under the Research Project Scheme of the ICSSR. Although you have made presentation for Major Projects, the final selection is made on the basis of recommendations of the Expert Committee.

Title: British India in the First World War: Role of Punjab in Mesopotamia

Budget Approved: Rs.4,90,000

First Instalment: 40% of the awarded grant, detailed Budget in break-up will be sent along with the sanction order of **Rs. 1,96,000/-**.

The above has been approved by the Competent Authority on the recommendations of the Expert Committee. You are requested to commence the study immediately.


You are required to give an undertaking on a non-judicial stamp paper of Rs. 100/- (copy enclosed), declaration on a non-judicial stamp paper and send us the grant- in-aid bill (copy enclosed) of 40% of the awarded grant. All Payments and Transfers are to be done through EAT module hence the institution has to open a dedicated account as per the notification of ICSSR.

You are once again required to go through the eligibility criteria in the guidelines and make sure you fulfil them in all respect both in case of individual and institution. In case you have awarded a project under any other programme of ICSSR and sanction letter for the same has been issued you are requested to continue with earlier sanction and inform accordingly. This award in that case will not stand operational. In case you have already been awarded a project and sanction letter has not been issued you may make an option between the two awards and inform us clearly which project you would like to start. If there is any change in terms of original proposal you need to clarify and take approval from ICSSR in the beginning itself.

Kindly send us all the desired documents (attached herewith) to the undersigned within at the earliest to enable us to issue the formal sanction order as per the checklist enclosed. Kindly send us hard copy of your proposal C.V. and affiliation letter.

With Regards
Revathy Vishwanath
Deputy Director,
Research Project Division Incharge
ICSSR, New Delhi

Dr. Bhupinder Singh
Assistant Professor
PG Department of History
Guru Gobind Singh College
Sanghera (Barnala)
Punjab


Principal,
Guru Gobind Singh College
Sanghera (Barnala)

Indian Council of Social Science Research

(Research Projects Division)

PROGRESS REPORT

Project Details:

Title of the Study	British India in the First World War: Role of Punjab in Mesopotamia
Affiliation	Guru Gobind Singh College Sanghera (Barnala) Affiliated to Punjabi University, Patiala
Date of Commencement as per sanction order issued	26.12.2019
Budget Approved (Rs.)	Rs.4,90,000

Timeline as per original plan	2 Year (From 26.12.2019 To 25.12.2021)
Where are you in terms of original plan	We had completed the 2 nd chapter of 'Review of Literature' and 3 rd chapter 'Emergence of Imperialism and Bloc Formations: Role of British Indian Army in World War I' by the end of December 2020. In the month of January, 3 rd phase of data collection has been completed from the State Archive and Central Library, Patiala. Now, we are working on 4 th Chapter of the study.
Is there any delay in the original plan?	No
Reasons of the delay	Nil

What have you completed so far during the period under review, especially, (Note: There should not any duplication/repetition between two progress reports)	
a) Review of Literature: Literature consulted; Research gap found	The ICSSR Expert Committee has sanctioned the Major Research Project entitled 'British India in the First World War: Role of Punjab in Mesopotamia'. Fundamentally, the proposed research project focused on the colonial military history of Punjab. As proposed in the proposal of the project, it is highly under research and could not get enough attention from the academicians' until now. For the meantime, it is very essential to visit the existing available literature to understand the present state of knowledge. Therefore, we have consulted the available works on the specific as well as in general of the area of research. There are some scholarly books and articles which is written on the military history of colonial India and Punjab. It is indeed largely under research area, and largely there is no

Principal
Guru Gobind Singh College
Sanghera (Barnala)

	<p>specific work on the role and experiences of Punjab in the First World War, especially on the role of Punjab in Mesopotamia. In this connection, I have reviewed a lot of literature. Some of them, I am putting here. Kaushik Roy's article "The hybrid military establishment of the East India company in South Asia: 1850-1849" points out how English East India Company (EIC) a minor power in the seventeenth century in South Asia, even defeated by very minor powers in the region, was transformed into an empire with the help of western military culture and infrastructures. Colin Watterson's more recent work (article) with the title "The Keys to British Success in South Asia" foregrounds the key factors of British success in South Asia, including the lucrative trade agreements between the British and the Indians princes, the role of the destruction of a central political power, the Mughals, to pose a challenge to the EIC and above all the military force built by the British. Another work has been done by Talbot under the title "The Punjab under colonialism: order and transformation in British India" mainly concerned with general changes and transformation of Punjab under British rule. Thus, the military history of colonial Punjab had remained under exploration until now. Punjab had played very significant role in the Mesopotamia campaigns, which still marginally touched and widely overlooked.</p>
b) Preparation of questionnaire/interview schedule (attach a copy)	Not Applicable
c) Visit to libraries/institutions	<p>However, there are some scholarly articles and books have been written, but fundamentally these works are focusing on the British Indian Army during the colonial period. Ironically, Punjab is not figured substantially yet in the colonial military history of India. Due to the lack of secondary sources, most of the work has relied on archival studies including Gazetteers, Annual Reports, Census Reports, Military Statistics of First World War, War Diaries and Letters of the soldiers and their family members. In such case of point, we are collecting research data from various libraries and archives. For this, we have completed the two phases of data collection. We have visited the Punjab University Patiala library. Now, we are collecting the research material from the Punjab State archive Patiala and Central Library Patiala. In spite of this, we have visited the Central Library of Central University of Punjab, Bathinda also.</p>
d) Field work (details of the places visited and sample)	Not Applicable
e) Current status of research work/completed chapters	<p>The proposed study has been divided into seven chapters. We had completed the 2nd and 3rd chapter of the Major Research Project. In the second chapter, we have discussed the existing literature of the proposed research area. For this, we have</p>

Principal
Guru Gobind Singh College
Sanghera (Barnala)

	<p>reviewed a chain of works. Out of existing literature, we have given some important works in the upper portion. After reviewing this, we had understood the exist state of knowledge in the available documents. Moreover, we have ended the 3rd chapter by the end of December, 2020. In the month of Jan 2021, we have done the 3rd phase of data collection. Now, we are working on the 4th chapter of the Major Research Project.</p>
f) Research milestones achieved so far	<p>It is well acknowledged that Punjab had contributed substantially in the First World War. Punjabi soldiers had fought for keeping their colonial master safe at the various distant places of the world. Upto this, we had reviewed maximum scholarly works of general as well as specific military history of colonial India/Punjab. After reviewing the literature, we had accomplished accurate state of knowledge. More important, we are collecting the relevant data from archive to justify the research. Upto this, we had collected District Gazetteer, War Histbries and some rare books from the archive. Now, we are reviewing the war letter's which never consulted nor documented. Definitely, it will fill the concerning gap of the research as well as will achieve its pioneer in this direction.</p>

<p>Plan towards completion: Research plan for the next six months including expected outcomes (approximately 200 words month-wise)</p>	<p>For the said, we had completed the 2nd chapter of 'Review of Literature' and 3rd chapter 'Emergence of Imperialism and Bloc Formations: Role of British Indian Army in World War I'. Moreover, we had completed the 3rd phase of data collection in the month of January 2021. For this, Research Assistant had visited the State Archive Patiala and Central Library Patiala. Moreover, the Punjabi University Patiala will be visited for resource consultation. In the month of February, we have started to analyse the data with the starting of 4th chapter of the study. In the month of march, the 4th chapter will be completed. In April and May, work will be continue to complete the 5th chapter. In June, we will start working on 6th chapter of the Research Project.</p>
<p>Details of academic activities: A) Research papers/articles published (attach copy as proof)</p>	<p>I have sent two research paper for publication. Out of those, one research paper has been published entitled 'British Rule in Punjab: A Study of Cantonments, Trade and Urbanisation' in UGC cared list Journal 'Shodh Sarita' with (ISSN 2348-2397). Moreover, another research paper is under review at the end of journal. I have attached the acceptance copy of published paper herewith.</p>
<p>B) Papers presented in seminars/conferences with details (attach copy as proof)</p>	<p>Nil</p>

Principal
 Guru Gobind Singh College
 Sanghera (Barnala)