

An Evaluation of the Non formal Pre-School education in Medak Disitric

Context of Study: The first six years of a child's life is critical to a child as well as a Country. It lays the foundation for lifelong learning and development. The early periods of life are a period of tremendous growth both in terms of expanding the horizons of development and also in deepening the development. A stimulating environment is a necessary condition for development. Health, nutrition and Education together constitute care and education. The objective of early childhood care and education is to ensure that children are provided with "a natural, joyful and stimulating environment, with emphasis on necessary inputs for optimal growth and development" (National Advisory Council 2011). It is also elaborately discussed in the National Focus Group on Early Childhood Education (2006). The 1990 World Declaration on Education for all states that 'learning begins at birth' and encourages the development of early childhood care and education. This is reaffirmed in the World Education Forum at Dakar (UNESCO 2000). Investing in early childhood care and education also helps in reducing poverty. The recognition of the criticality of early childhood care and education is reflected in the Indian Constitution (Eighty-sixth Amendment) Act, 2002 under the Right to Education, which substitutes a new article for article 45 and states that the "state shall endeavour to provide Early childhood care and education for all children until they complete the age of 6 years." It is also reflected in the Right to Education Act (2009) which states, "with view to prepare children above the age of three years for Elementary education and to provide early childhood care and education for all children until they complete the age of six years, the appropriate Government may make necessary arrangement for providing free pre-school Education for such children" (Chapter III, Section 11). The RtE is of course applicable to children from 3 yrs of age and not earlier. The emphasis on Early Childhood Care and Education is reflected in several policies and programs of Action (National plan of Action for children 2005, Draft National Early Childhood Care and Education (ECCE) Policy 2012).

The criticality of early childhood care and education is recognized by many countries. However, two different perspectives have motivated the emphasis. Countries are also divided on the basis of the perspective that underlies early childhood care and education. These perspectives are the (a) Labor Force Perspective and (b) The Rights Perspective. The difference in perspective has influenced the way care and education is provided, the beneficiaries and the administrative mechanisms that are responsible for delivering care and education. (Refer to Appendix 1 for more details. This section also reviews literature on early child care and education in the international contexts). The rights perspective has changed the way we think about care and education. In the Rights perspective, the Anganwadi Workers, helpers, nurses, supervisors are all obligated to perform their duties (so it is not service delivery). The benefits are not benefits but entitlements.

India has taken a Rights approach to early childhood care and education (Convention on the Rights of the Child 1989). This approach is reflected in the Integrated Child Development Scheme (ICDS) that brings services of health, nutrition, as well as mother's health under a common umbrella and is administered through a single administrative mechanism, the Department of Women and Child Welfare. The centres responsible for delivering early childhood care and education services are the Anganwadis (Appendix 2 gives more information on ICDS).

Kaul and Sankar (2009) discuss the conceptual framework of the ICDS program and note that three principles have contributed to the evolution of the program from pre-school education to an integrated and holistic program of health, nutrition, These are: (a) early experiences influence later interventions, (b) cognitive learning is impacted by socioeconomic status through ill health, malnutrition and poor quality home environments and (c) developmental gains will be optimal if interventions address the context. Pre-school education constitutes the backbone of the program.

Although the ICDS program was launched in 1975, it became the focus of action only after 1990s and from 2000 all States of the Country was brought under the ICDS consequent to the judgment of the Supreme Court on Right-to-Food case was filed by People's Union of Civil Liberties against the Union of India. The Anganwadis have been fairly successful in terms of providing increased access to early childhood education, health and nutrition as seen through increased coverage (FOCUS on Children under Six 2006). But different States are at different levels in the functioning of the Anganwadis (ibid). As a result, one is confronted with a scenario of ICDS – that is unevenly implemented. There is very little data on how the pre-school education component is implemented. A review of literature shows a dismal picture of the pre-school education at the Anganwadi Centres. The present study has been taken up in response to the need for generating a data-based understanding pre-school education. Although the study primarily focuses on pre-school education, it also looks at nutrition and health for two reasons, (i) to get a more comprehensive picture, and (ii) to analyse the interplay of variables. The study is intended to evaluate the functioning of the Anganwadi Centres.

Review of Literature

A perusal of literature on the functioning of the ICDS shows that most of the studies have looked at the health and nutrition components of the program. Studies on preschool component of the ICDS are comparatively few in number. A Google search for studies on pre-school education component of ICDS returns very few studies. Similar is the case with databases like Jstor or the repositories of Indian thesis like Infilbnet. Review of Status of ICDS receives hardly any mention of the

Preschool education component of ICDS (Society for Economic Development and Environmental Management 2005). Social audits on ICDS also do not give us any details of pre-school education. The pre-school education section Of the audit reports discusses enrolment and attendance with the objective of matching these to food distribution. (See Box).

The sheer paucity of studies in the area of pre-school education creates a need for research. The few studies that are available on pre-school education at the Anganwadi Centre (see Appendix 3) shows the following:

***The Social Audit in Ratakhandi, Orissa
Pre-school education 2006-2007. Village : Taljuri***

Enrolment of children in Anganwadi is 60. According to Record total attendance of the children with in April-2006 to march-2007 is 13200, but according to personal verification of beneficiaries averagely 8 days/month pre-schooling have been doing - so actual attendance of the student during this period is 5400. So total difference is 130 days in a year. According to record one pre school child has taken 19.800gram RTE and 1.760 gm oil in a year. But according to the personal verification of beneficiary's one pre school child has taken 8.100gm RTE and 1.400 gm oil in a year. so the difference per children in a year is 11.700 gm.RTE and 1.40gm oil. So for 60 children it will be 702.Kg.RTE and 84kg oil in a year

- (a) total lack of pre-school activities in some Anganwadi Centres
- (b) Where there are some activities, these are dull and drab
- (c) The major reasons for ineffective implementation of the Pre-school education in Anganwadis are ineffective teacher training, low levels of community engagement, lack

of ownership and initiative taking, ineffective supervision, Anganwadi workers being overburdened and lack of convergence between various departments.

- (d) There are a few interventions in the form of providing resources kits, capacity building of teachers and Child Development Project Officers and community engagement and are supported by soft data.
- (e) The review on impact of the pre-school education component of ICDS shows that children attending Anganwadis have higher intellectual / mental development / cognitive development, higher language skills and social development, and tend to enrol in schools more and show lesser drop outs compared to children who did not attend ICDS or pre-school education
- (f) Research on early childhood care and education at the international scene shows that the early childhood education helps the disadvantaged group but the gap between the advantaged and the disadvantaged continues to remain (See Appendix 1)

Critical Learnings from Literature Review

The critical issues that emerge from the review above are

- a) There are *very few studies* focussing on the pre-school education component of ICDS
- b) The few studies that are on ICDS are in other States. There is a paucity of such studies in Andhra Pradesh
- c) Studies by and large focus on interstate variations. While this is important, it is necessary to move forward to look at intra-state / *intra - district variations*.
- d) In most studies, status of pre-school education is seen through tangibles. While this is certainly valuable, the *non-tangibles* like the importance given to pre-school education by the community and the Anganwadi workers, the nature of curriculum, the quality of curricular transactions, the extent of student's engagement etc., add another layer of complexity that needs to be understood.
- e) What is pertinent from the perspective of the present study is that these studies have examined the ICDS program as a status report – meaning the nature of service delivery, the extent of benefits that beneficiaries have got etc., The socio-economic status of the families from which children come is incidental to the status of ICDS programs. The ICDS programs have been running for over 30 years. It is necessary to move beyond status reports to see how the pre-school education is working for different socio-economic categories. It has also been suggested that children from a comparatively more advantaged backgrounds have access to Anganwadi Centres compared to students from less disadvantaged backgrounds (Venugopal 2009). A study of that focuses on socio-economic status help to look at the beneficiaries of pre-school education in a more nuanced manner. It will enable to identify specific target groups for interventions and also perhaps suggest the 'whats' of intervention. It will help to surface areas of inequities so that these can be addressed. The present study is taken up with the idea of surfacing pockets of inequities in implementation of ICDS program in general and pre-school education in particular.
- f) The review of literature also shows that Anganwadi centres are treated from an input perspective. Given the assumption that there is very little difference in the input – it follows that there are very few differences among Anganwadi Centres. But if one were to look at the Anganwadi centres from a contextual perspective, certain Anganwadis are more disadvantaged than others. The pre-school education component along with nutrition and health may be related to the context in which the Anganwadi operates. Any discussion on

'targeted intervention' has to highlight the targets in clear terms. The present study is taken up in response to this need.

The review of literature provides a direction for the evaluation. The evaluation will be against the articulated purpose of the ICDS (see appendix 2). The evaluation of the ICDS program is intended to answer the following questions

- a) To what extent do Anganwadi centres meet the obligations of providing food, nutrition and pre-school education?
- b) What are the gaps between the mandated obligations of the ICDS program and the actual meeting of these obligations with regard to pre-school education
- c) How does the preschool experience affect children's knowledge of concepts of number, shape, color and language
- d) What are the challenges faced by the Anganwadi workers and helpers in meeting their obligations on pre-school education
- e) What are the perceptions of parents on the role of Anganwadi in providing pre-school education, value of education etc.,

The Present Study : A brief note on Medak

The study pre-school education will be located in Medak. Andhra Pradesh has 23 districts – with 3 distinct geographical regions, namely coastal Andhra (9 districts), Telengana (10 districts), Rayalseema (4 districts), Total 192 projects – 19 are urban, 144 rural and 29 are tribal. Medak is a part of Telengana district. The major town of Medak is Sanga Reddy. Medak consists of 46 Taluks/ Tehasils or Mandals (See Map)



According to the Census (2011) Medak has a population of 3,031,877, with a density of 313 inhabitants per square kilometer. There are 989 females for every 1000 males.

- The report of the International Institute for Population Sciences (2010) shows the following: Male literacy is fairly high (64.3%) while female literacy is low (38.7%) and total literacy is 51.7% .

- About 87.4% of the population live below poverty levels inferred from the possession of Below Poverty Level cards.
- Most of them have access to drinking water (96.2%), many have access to electricity (89.6%) but very few of them have toilet facility (34.5%). Only 22.8% use LPG and 27% live in pucca houses.
- Access to health care facility is provided by Government Health Care (51.2%) and Primary Health Care Centres (14%).
- 74.4% Asha Workers and 28.2% doctors provide health care.
- People prefer to go to Private Health Facilities (69.7%), and only 47.5% go to Government Health Facility and 0.7% access Community-based Health Facility.
- Most births are live births (94.8%) and 82.8% children have received all vaccinations. 90.7% children have received Vitamin A. Very few children have received Polio 0. 2.5% suffer from diarrhea – of these 71% sought help. Awareness level of ORS is low (43%).
- Among 12-23 months infants about 82.8 % are fully vaccinated.
- There are 97.7% primary schools and 93% Anganwadi workers.

The picture that emerges of Medak is that the district is developed in some ways while in others it is not. For an equitable development it is necessary to identify pockets that need to be developed so that energies and resources may be appropriately focused.

The ***rationale*** for choosing Medak is five folded.

- a) There is almost no study on pre-school education in Medak. The study by MV Foundation focuses on health and nutrition components of ICDS. The study by Azim Premji Foundation (2009) focuses on school readiness at class one. In contrast to these, the present study looks at an earlier age group and more importantly does not look at school preparedness. Instead the focus is on strengthening the pre-school education.
- b) Medak occupies the 13th position in the Human Development Index (2008). This is an upper-lower position which implies that the District has scope for development (for instance, the lack of importance attached to pre-school education goes with low level of female literacy (39%)).
- c) Medak is a district marked by a diversity of caste groupings. Although the Reddys are distributed throughout the State, they are dominant in Telangana and Rayalseema regions. Among the Backward castes, Velamas dominate this region even though they are numerically in small proportion. They are a politically influential land-owning community. Among the Scheduled Castes, Madigas are dominant in Telangana region. Their traditional occupation is leather work and they comprise the bulk of agricultural labour. There is some tribal population in Telangana. Muslims, who constitute under 7% of the State's population, have a distinctive presence in the urban and semi-urban unorganised service sectors (Srinivasulu 2002). Linguistically also, this region is characterized by diversity with eight Telugu-speaking Telangana districts, three Kannada-speaking and five Marathi-speaking districts. Catering to the diversity is a challenge for any district and Medak is no exception.
- d) The Government of Andhra Pradesh is contemplating on certain innovations in the ICDS program, for eg. providing one extra person to work in Anganwadis. Social audit reports have pointed to the need for a more focused intervention. The methodology for identifying the targets is currently confined to the socio-economic status of children.

This study takes a more broader view of socio-economic variable. In doing this, the study is expected to make a methodological contribution for identifying Anganwadi Centres that need focused intervention and support. In the process, it will also help to identify Anganwadis that need focused support.

- e) The choice of Medak is a pragmatic one and is based on the fact that we have a presence in this district on the basis of our earlier work for the past five years.

Objectives:

The paucity of studies on the early childhood education makes it imperative for us to evaluate the implementation of the education component of the ICDS. For a more comprehensive understanding it becomes necessary to include the dimensions of health and nutrition. The objectives of the study are as follows:

- a) To assess the extent to which Anganwadi centres provide the entitlements on food, nutrition and pre-school education
- b) To identify gap areas in implementing the pre-school education component of the ICDS program
- c) To study the relationship between classroom processes, resource utilization and the ability to use concepts of shape, color, number and language.
- d) To identify the challenges faced by Anganwadi workers and helpers in implementing the pre-school component of the program
- e) To study the perceptions of parents on the role of Anganwadis in providing pre-school education

Conceptual Structure of the Study

There are two views on the implementation of the ICDS program in Andhra Pradesh.

- a) The ICDS program is by and large, successful. The program has generated innovative practices in areas like the activities of mother's committees, self-help groups and community participation in developmental activities. These best practices have motivated the inclusion of Andhra Pradesh in the ICDS - IV phase of the implementation so that the State can serve as a model to other States (ICDS IV Project 2007)
- b) The ICDS program has several areas with scope for improvement (Sinha 2006, Venugopal 2009). Based on social audit on implementation of ICDS in 129 villages in Anantapur covering 150 Anganwadis (Venugopal 2009), the audit report observes that the ICDS program is implemented in letter and not in spirit. The implementation seems to have missed the big picture in recognizing that the "ICDS as the bedrock of all human resource development program". Some of the issues faced are that of faulty training of Anganwadi workers, excessive reliance on technology to solve human problems and lack of inter-departmental convergence.

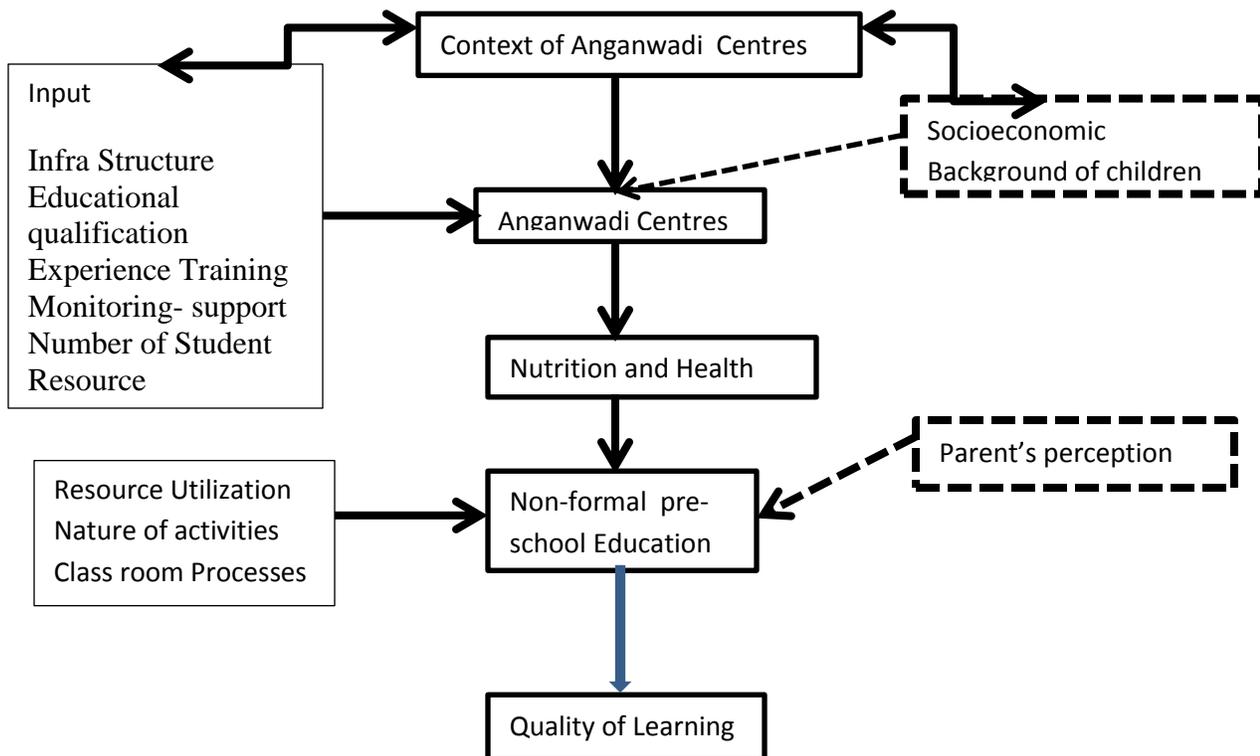
Our own thinking is that the ICDS may not be implemented uniformly. The social audit in Anantapur notes that that students who are slightly better off have access to Anganwadi Centres while for children from poorer families the access to these benefits continues to be elusive (Venugopal 2009). A critique of ICDS program identifies three areas of mismatch: (a) Over emphasis on supplementary nutrition rather than the educating parents on improving the nutrition, (b) lack of preferential targeting in service delivery (on girls, on

children from poorer backgrounds and on children between 0 to 3 yrs), and (c) resource allocations not based on need thereby contributing to inequities (Gragnotati, Bredenkamp, Shekar, Das Gupta, and Lee 2006).

- a) The study will identify the entitled groups with reference to whom the ICDS program is functioning well and groups where its functioning is ineffective against its own stated objectives.
- b) It will focus on the pre-school education component
- c) It will focus on the 3 to 6 age groups

The conceptual framework of the study is presented in the diagram below. According to this, the evaluation has to lead to identification of groups where the ICDS program is meeting its objectives and groups where the program is not meeting its objective. It is hypothesized that the context in which the Anganwadi centre is located, the inputs affect the functioning of the Anganwadi centres along with the social background of children. The relationship between these will impact the effectiveness with which the ICDS provides entitlements of nutrition, health and preschool education of 3 to 6 year old children. These in turn will influence the learning of children. The impact on education is influenced by the health and nutrition status on the one hand and the classroom processes on the other. The study is expected to evaluate the effectiveness of the ICDS. It will help to identify the contexts with gaps in implementation of the ICDS.

Conceptual Framework of the Study



**dotted lines and boxes represent mediating factors*

The contextual attributes for classifying Anganwadi Centres will be as below:

- A) Characteristics of Mandal:
 - Urban – Semi Urban – Rural
 - Mostly Industrial, Agricultural, Poultry, Labourers, Mixed
- B) Location of Anganwadi Centre:
 - Distance from main Road : Proximate, Intermediary and Interior
- C) Profile of Beneficiary whose children attend Anganwadi Centres:
 - Caste Grouping: Mixed or Homogeneous Dominant (Forward), Dominant (OBC), Dominant (SC),
 - Literacy Levels Mother: Mixed or Mostly Literate (Up to class 10), Mostly highly literate, illiterate
 - Literacy Levels Father:
 - Income Mother – Mixed, Mostly above 10,000, mostly above 25000, mostly below 10,000
 - Income Father - Mixed, Mostly above 10,000, mostly above 25000, mostly below 10,000
 - Occupation of Mother – housewife, farm hand, maid, teacher etc.,
 - Occupation of Father - landless labourer, farmer, business, accountant etc.,
 - Type of house – Mixed, Mostly kacca, mostly pucca, mostly semi pucca
 - Possessions in Household (eg. TV, Radio, tractor, type of fuel etc.,)
- Infrastructure in Anganwadi Centre:
 - Nature of building, Space availability within and outside the Anganwadi Centre, Toilet Availability, etc.,
- Profile of Anganwadi Worker :
 - Age, experience, educational qualification, local or non local etc.,
- Profile of Anganwadi Helper:
 - Age, experience, educational qualification, local or non local etc.,
- Extent of supervision:
 - Frequently (More than once a month) Sometimes (Once between one and three) months, Less (Once between six and nine months), Rare (Once in more than nine months)

Socio-economic Status of individual children will be extracted from this survey.

The study will collect quantitative and qualitative data. The quantitative data will focus on the inputs, and socioeconomic background details. It will help to evaluate ICDS at the macro level. The qualitative data will be limited to the pre-school education component. It will consist of classroom observation for classroom processes, and interview of parents on their perception of the role of education and a focus group discussion with Anganwadi workers and helpers to get a deeper understanding of the challenges faced by them in implementing the ICDS. The effectiveness of the preschool education will also be evaluated on the basis of the impact of

preschool education through performance based assessments. This will be done on a small sample.

Sample Size and Tools

Data will be collected through a survey from 3 divisions, namely, Medak, Sangareddy and Siddipet covering 284 Anganwadi Centres covering 11 ICDS project areas in 14 Mandals. Care will be taken to ensure that the Mandal will have representations from rural and semi urban groups, industrial, agricultural and business communities. Data will consist of Mandal information, information on infrastructure in Anganwadi Centres, profile of teachers and helpers and the extent of support they get from supervisors.

A sample of Anganwadis centres will be randomly selected (10% of the earlier Centres) from each group of Anganwadis for a deeper study. From a house hold survey the socioeconomic status data will be collected. The nutritional levels of students will be collected and classroom observations will be conducted to analyse the nature of learning activities. Students will also be given performance based assessment to measure their knowledge of number concept, language, color, shapes and spatial terms. The abilities that will be assessed will be in consonance with the specifications laid down in the Draft - Early Childhood Curriculum Framework (2012).

A further subset of this sample of Anganwadi Centres will be selected for interviewing Anganwadi Workers, helpers and the supervisors and parents who send their children to the Anganwadi centres.

Expected Outcomes:

- The study will help to identify gap in Medak where the ICDS is strengthened to meeting its objectives of providing effective pre-school education.
- It will help to understand the possible reasons where the ICDS not meeting its objectives with reference to the gap areas
- The findings from the study are expected to lead to a set of possible research questions that are need-based and specific to a class of Anganwadi Centres.
- It will lead to articles for publications in Peer Reviewed Journals

Ethical Issues:

- This study comes under the Expedited Status – because it will collect data from human participants who are working as Anganwadi Workers, Helpers. Parents and others.
- Necessary informed consent will be obtained from each participant before collecting data.
- Necessary confidentiality precautions will be taken to ensure that the participant's name and their affiliations are not revealed.

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