

ICDS



INTRODUCTION

- ★ **Launched on 2nd October 1975, today, ICDS Scheme represents one of the world's largest and most unique programmes for early childhood development. ICDS is the foremost symbol of India's commitment to her children – India's response to the challenge of providing pre-school education on one hand and breaking the vicious cycle of malnutrition, morbidity, reduced learning capacity and mortality, on the other.**



OBJECTIVES

The Integrated Child Development Services (ICDS) Scheme was launched in 1975 with the following objectives:

- **to improve the nutritional and health status of children in the age-group 0-6 years;**
- **to lay the foundation for proper psychological, physical and social development of the child;**



- to reduce the incidence of mortality, morbidity, malnutrition and school dropout;
- to achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and
- to enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education



SERVICES

✱ : The objectives are sought to be achieved through a package of services comprising:

- ✱ supplementary nutrition,
- ✱ immunization,
- ✱ health check-up,
- ✱ referral services,
- ✱ pre-school non-formal education and
- ✱ nutrition & health education.



NUTRITION :

- This includes supplementary feeding and growth monitoring; and prophylaxis against vitamin A deficiency and control of nutritional anaemia. All families in the community are surveyed, to identify children below the age of six and pregnant & nursing mothers. By providing supplementary feeding, the Anganwadi attempts to bridge the caloric gap between the national recommended and average intake of children and women in low income and disadvantaged communities.

- **Growth Monitoring and nutrition surveillance are two important activities that are undertaken. Children below the age of three years of age are weighed once a month and children 3-6 years of age are weighed quarterly. Weight-for-age growth cards are maintained for all children below six years. This helps to detect growth faltering and helps in assessing nutritional status. Besides, severely malnourished children are given special supplementary feeding and referred to medical services**



● **IMMUNIZATION:** Immunization of pregnant women and infants protects children from six vaccine preventable diseases-polio, diphtheria, pertussis, tetanus, tuberculosis and measles. These are major preventable causes of child mortality, disability, morbidity and related malnutrition. Immunization of pregnant women against tetanus also reduces maternal and neonatal mortality.



● HEALTH CHECK-UP:

- This includes health care of children less than six years of age, antenatal care of expectant mothers and postnatal care of nursing mothers. The various health services provided for children by anganwadi workers and Primary Health Centre (PHC) staff, include regular health check-ups, recording of weight, immunization, management of malnutrition, treatment of diarrhoea, de-worming and distribution of simple medicines etc.

Growth charts monitor children's weight and height according to age



● REFERRAL SERVICES:

- During health check-ups and growth monitoring, sick or malnourished children, in need of prompt medical attention, are referred to the Primary Health Centre or its sub-centre. The anganwadi worker has also been oriented to detect disabilities in young children. She enlists all such cases in a special register and refers them to the medical officer of the Primary Health Centre/ Sub-centre.



- **Non-formal Pre-School Education (PSE)**
- **Anganwadi Centre (AWC) – a village courtyard – is the main platform for delivering of these services. These AWCs have been set up in every village in the country. PSE focuses on total development of the child, in the age up to six years, mainly from the under privileged groups. Its programme is providing and ensuring a natural, joyful and stimulating environment, with emphasis on necessary inputs for optimal growth and development.**

Child playing at a anganwadi centre



- The early learning component of the ICDS is a significant input for providing a sound foundation for cumulative lifelong learning and development. It also contributes to the universalization of primary education, by providing to the child the necessary preparation for primary schooling and offering substitute care to younger siblings, thus freeing the older ones – especially girls – to attend school.



● **Nutrition and Health Education:**
Nutrition, Health and Education (NHED)
is a key element of the work of the
anganwadi worker. This forms part of
BCC (Behaviour Change Communication)
strategy. This has the long term goal of
capacity-building of women – especially in
the age group of 15-45 years – so that they
can look after their own health, nutrition
and development needs as well as that of
their children and families.



● THE ICDS TEAM:

The ICDS team comprises:

- the Anganwadi Workers,
- Anganwadi Helpers,
- Supervisors,
- Child Development Project Officers (CDPOs) and
- District Programme Officers (DPOs).

The medical officers :

- Auxiliary Nurse Midwife (ANM) and
- Accredited Social Health Activist (ASHA)



WOMEN&CHILD DEVELOPMENT



● Anganwadi Centre

Population Norms:

➤ For Rural/Urban Projects

400-800 - 1 AWC

800-1600 - 2 AWCs

1600-2400 - 3 AWCs

Thereafter in multiples of 800 1
AWC

➤ For Mini-AWC

150-400 -1 Mini AWC



- For Tribal /Riverine/Desert, Hilly and other difficult areas/ Projects

300-800 - 1 AWC

- For Mini- AWC

150-300 1 Mini AWC

- At present there are **54915** Anganwadi Centres and **6204** Mini Anganwadi Centres in Rajasthan. (WCD, Rajasthan, Nov. '10)



SUPPLEMENTARY NUTRITION

Beneficiary	Pre-revised		Revised w.e.f. Feb. 2009	
	Calories (KCal)	Protein (G)	Calories (KCal)	Protein (Gm)
Children (6-72 months)	300	8-10	500	12-15
Severely malnourished children (6-72 months)	600	20	800	20-25
Pregnant & Lactating	500	15-20	600	18-20

TRAINING INFRASTRUCTURE

- Anganwadi Workers Training Centers (AWTCs)
- Middle Level Training Centers (MLTCs)
- National Institute of Public Cooperation and Child Development (NIPCCD) and its Regional Centers



INTERNATIONAL PARTNERS

- United Nations International Children' Emergency Fund (UNICEF)
- Cooperative for Assistance and Relief Everywhere (CARE)
- World Food Programme (WFP)

