

India - Integrated Child Development Services (ICDS)

The average Indian child has a poor start to life. Both infant and under-five mortality rates for Indian children – at 67 and 93 respectively – are higher than the developing country average. One in four newborns is underweight. Only about one in three is exclusively breastfed for the first six months. Nearly one in two children under five years of age suffer from moderate or severe malnutrition. One in three children does not get a full course of DPT (diphtheria, pertussis and tetanus immunization), and only one in three has the opportunity to be in an early learning programme. Just about one in five is protected against vitamin A deficiency.

Their parents and caregivers experience grave disadvantages too. Forty-four per cent of India's people live on less than \$1 a day. Less than 30 per cent have access to adequate sanitation facilities. Skilled attendants handle fewer than half of all deliveries, a major factor in the country's high maternal mortality ratio of 540 deaths per 100,000 live births. Less than half the country's households consume iodized salt.

Pervasive discrimination against girls and women is reflected in a range of adverse indicators, including nutritional and educational outcomes, and the declining ratio of girls to boys, particularly in the youngest age group.

Against this backdrop, the Government has supported a monumental effort to improve the life chances of children.

Integrated Child Development Services (ICDS) in India is the world's largest integrated early childhood programme, with over 40,000 centres nationwide. Since its inception in 1975, the programme has matured and expanded, despite difficulties in adapting to the vastly different local circumstances found on the Indian subcontinent. UNICEF helped launch the ICDS programme and continues to provide financial and technical assistance along with the World Bank.

The programme today covers over 4.8 million expectant and nursing mothers and over 23 million children under the age of six. Of these children, more than half participate in early learning activities.

The purpose of ICDS is to improve the health, nutrition and development of children. The programme offers health, nutrition and hygiene education to mothers, non-formal preschool education to children aged three to six, supplementary feeding for all children and pregnant and

nursing mothers, growth monitoring and promotion, and links to primary healthcare services such as immunization and vitamin A supplements.

These services are delivered in an integrated manner at the *anganwadi*, or childcare centre. Each centre is run by an anganwadi worker and one helper, who undergo three months of institutional training and four months of community-based training. The cost of the ICDS programme averages \$10-\$22 per child a year.

- Evaluation studies have found that, despite some unevenness in the quality of services, the ICDS programme has had a positive impact on the survival, growth, and development of young children. For example, a study conducted in rural areas of three southern states (Tamil Nadu, Andhra Pradesh and Karnataka) found that the programme had a significant impact on the psycho-social development of children, for both boys and girls. The study also showed that undernourished ICDS beneficiaries attained higher developmental scores than well-nourished children who were not enrolled in the programme.
- A national study conducted in 1992 by the National Institute of Public Cooperation and Child Development confirmed the positive impact of ICDS. Where the programme was operating, there were lower percentages of low-birth-weight babies, lower infant mortality rates, higher immunization coverage, higher utilization rates for health services, and better child nutrition. The percentage of severely malnourished children declined, the positive effects of preschool were evident, and a larger percentage of mothers were getting their children medically examined.
- Changes in the programme are improving its impact. Greater emphasis is being placed on children under three years of age, links with existing health services are being strengthened, efforts in sanitation are being supported, and community participation is being enhanced. These improvements are consistent with the integrated approach to early childhood that UNICEF advocates and that has been shown to yield results.
- Over the last two and a half decades, ICDS has demonstrated its effectiveness. Consequently, the Government of India has renewed its commitment to making the programme universally available in order to achieve equality of opportunity for all Indian children.